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### FEC FORM 3X

FE6AN026

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	or other man	All Additionized	Committee		Office Use Only				
NAME OF     COMMITTEE (in full)	TYPE OR PRINT ▼	=/10	mple: If typir r the lines.	ng, type	12FE4M5				
FIRST COLONIES AND	ESTHESIA AS	SSOCIATES	LLC POL	ITICAL A	CTION C	OMMITTEE			
		1 1 1 1 1 1	1 1 1 1		1 1 1 1 1		, , , , <b>,</b> ,		
ADDRESS (number and street)	7490 New Techno	ology Way							
Check if different					<u> </u>				
than previously reported. (ACC)	Frederick	Frederick MD 21703							
2. FEC IDENTIFICATION NU	MBER ▼	CITY 🛦		S	STATE A	ZIP CC	DDE 🛦		
C C00416305		3. IS THIS REPORT	V .	N) OR	AN (A)	ENDED			
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:  April 15 Quarterly Report (Quarterly Report (YEX)  July 31 Mid-Year Report (Non-election Year Only) (MY)  Termination Report (TER)	(c) 12-Day PRE-Ele Report  (d) 30-Day	for the:  Election on		12C)	Sep	in the	Special (30S)		
5. Covering Period 01	01	2013	through	06	30 /	2013			
I certify that I have examined this Type or Print Name of Treasurer	·	e best of my kno	wledge and b	pelief it is true	e, correct and	complete.			
Signature of Treasurer Dr. Je	remy Roth		[Electronically		ate 07	/ 31 /	2013		
NOTE: Submission of false, errone	ous, or incomplete i	information may su	bject the pers	son signing thi	is Report to th	-			
Office Use Only						FEC FOF Rev. 12/2			

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

#### FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE

	COLUMN A	COLUMN B
	This Period	Calendar Year-to-Date
. (a) Cash on Hand January 1, 2013		110013.41
(b) Cash on Hand at Beginning of Reporting Period	110013.41	
(c) Total Receipts (from Line 19)	23375.00	23375.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	133388.41	133388.41
. Total Disbursements (from Line 31)	17190.21	17190.21
. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	116198.20	116198.20
. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
Debts and Obligations Owed BY     the Committee (Itemize all on     Schedule C and/or Schedule D)	0.00	
This committee has qualified as a mul-	ticandidate committee. (see FEC FORM 1M)	

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

#### FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE

R	eport Covering the Period: From:	01 2013	To: 06 / 30 / Y Y Y Y Y Y
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	5700.00	5700.00
	(ii) Unitemized(iii) TOTAL (add	17675.00	17675.00
	Lines 11(a)(i) and (ii)	23375.00	23375.00
	(b) Political Party Committees	0.00	0.00
	(such as PACs)(d) Total Contributions (add Lines	0.00	0.00
10	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)  Transfers From Affiliated/Other	23375.00	23375.00
12.	Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
17	to Federal Candidates and Other Political Committees Other Federal Receipts	0.00	0.00
	(Dividends, Interest, etc.)  Transfers from Non-Federal and Levin Funds  (a) Non-Federal Account	0.00	0.00
	(from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	23375.00	23375.00
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	23375.00	23375.00

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures:  (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		200000000000000000000000000000000000000
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	9940.21	9940.21
(b) Other Federal Operating	7 7 7	
Expenditures	0.00	0.00
(c) Total Operating Expenditures	9940.21	9940.21
(add 21(a)(i), (a)(ii), and (b))▶  Transfers to Affiliated/Other Party	3340.21	3340.21
Committees	0.00	0.00
Contributions to Federal Candidates/Committees and Other Political Committees	2500.00	2500.00
Independent Expenditures	0.00	0.00
(use Schedule E) Coordinated Party Expenditures	0.00	0.00
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To:  (a) Individuals/Persons Other Than Political Committees	0.00	0.00
Than I shilisar sommittees		
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))▶	0.00	0.00
Other Disbursements	4750.00	4750.00
Salei Bissaisemente	4700.00	
Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
The state of the s		200
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add	0.00	200
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	17190.21	17190.21
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)	7250.00	7250.00
	7250.00	

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	23375.00	23375.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	23375.00	23375.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
'. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE	6	OF	44
(check only one)								
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UI	tor commercial purposes, other than using the	name and address of any political committee to	SOUCH COMMUNICIES HOTH SUCH COMMUNICE.
$\rangle$	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESI	A ASSOCIATES LLC POLITICAL	. ACTION COMMITTEE
Α.	Full Name (Last, First, Middle Initial) Hasan Abed Mailing Address 15 Waterbird Court  City Cockeysville  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For: Primary General	State Zip Code MD 21030  C  Occupation Physician  Aggregate Year-to-Date ▼	Date of Receipt  M M / 25 2013  Transaction ID: SA11AI.7478  Amount of Each Receipt this Period  50.00  Payroll deduction
3.	Other (specify) ▼  Full Name (Last, First, Middle Initial)  Marc Azran  Mailing Address 800 Hillsboro Drive  City  Silver Spring  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼	State Zip Code MD 20902  C  Occupation Physician  Aggregate Year-to-Date ▼	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
<b>.</b>	Full Name (Last, First, Middle Initial)  Dr. Maksim Barkinskiy  Mailing Address 10021 Dickens Avenue  City  Bethesda  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code MD 20814  C  Occupation Physician  Aggregate Year-to-Date ▼  250.00	Date of Receipt  M M M / 25 2013  Transaction ID : SA11AI.7442  Amount of Each Receipt this Period  50.00  Payroll deduction
s	UBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	150.00
Т	OTAL This Period (last page this line number o	nly)	

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using	the name and address of any political committee t	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Marc Beck  Mailing Address 16 Norris Run Court		Date of Receipt
City Reisterstown  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify) ▼	State Zip Code MD 21136  C  Occupation Physician  Aggregate Year-to-Date ▼  250.00	Transaction ID : SA11AI.7463  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  3. Dr. Jeffrey Briggs  Mailing Address 14952 Finegan Farm Rd.		Date of Receipt  06 25 2013
City Germantown  FEC ID number of contributing federal political committee.	State Zip Code MD 20874	Transaction ID : SA11AI.7419  Amount of Each Receipt this Period  50.00
Name of Employer First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  250.00	Payroll deduction
Full Name (Last, First, Middle Initial) Dr. John Bunker  Mailing Address 15229 National Pike  City	State Zip Code	Date of Receipt  06 25 2013  Transaction ID : SA11AI.7491
Hagerstown  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  □ Primary □ General □ Other (specify) ▼	MD 21740  C Occupation Physician  Aggregate Year-to-Date ▼  250.00	Amount of Each Receipt this Period  50.00  Payroll deduction
SUBTOTAL of Receipts This Page (optional).	<b>•</b>	150.00
TOTAL This Period (last page this line numb	er only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Donald Charney  Mailing Address 3707 Meadowhill Court  City	State Zip Code	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Phoenix  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  □ Primary □ General  □ Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼	Transaction ID : SA11AI.7464  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  3. Dr. Satyam Chary  Mailing Address 9 Alterwood Lane  City  Owings Mill	State Zip Code MD 21117	Date of Receipt  06 25 2013  Transaction ID: SA11AI.7465  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For: Primary General Other (specify)	Occupation Physician  Aggregate Year-to-Date ▼  250.00	50.00 Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Thomas Chau  Mailing Address 7204 Loch Edin Court  City Potomac  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code MD 20854  C  Occupation Physician  Aggregate Year-to-Date ▼	Date of Receipt  M M / D D / Y D D / Y D D D D D D D D D D D
SUBTOTAL of Receipts This Page (optional)	•	150.00
TOTAL This Period (last page this line numbe	r only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Dwayne Chen  Mailing Address 12808 Spring Drive		Date of Receipt
City Rockville  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For:  Primary General Other (specify)	State Zip Code MD 20850  C  Occupation Physician  Aggregate Year-to-Date ▼  250.00	Transaction ID: SA11AI.7441  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Edward Chen  Mailing Address 10209 Fleming Avenue  City  Bethesda  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify)	State Zip Code MD 20814  C  Occupation Physician  Aggregate Year-to-Date ▼  250.00	Date of Receipt    M
Full Name (Last, First, Middle Initial)  Dr. William Chester  Mailing Address 13771 Lambertina Place  City Rockville  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code MD 20850  C  Occupation Physician  Aggregate Year-to-Date ▼  250.00	Date of Receipt  06 25 2013  Transaction ID: SA11AI.7422  Amount of Each Receipt this Period  50.00  Payroll deduction
SUBTOTAL of Receipts This Page (optional)	•	150.00
TOTAL This Period (last page this line numb	er only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Charles Ciolino  Mailing Address 11008 South Glen Road		Date of Receipt
City Potomac  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For: Primary General	State Zip Code MD 20854  C Occupation Physician Aggregate Year-to-Date ▼	Transaction ID : SA11AI.7443  Amount of Each Receipt this Period  50.00  Payroll deduction
Other (specify) ▼  Full Name (Last, First, Middle Initial)  Dr. Lincoln Coore	250.00	Date of Receipt
Mailing Address 11546 Fox River Road  City Ellicott City  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthsia  Receipt For:  Primary General Other (specify) ▼	State Zip Code MD 21042  C  Occupation Physician  Aggregate Year-to-Date ▼  225.00	Transaction ID : SA11AI.7283  Amount of Each Receipt this Period  75.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Lincoln Coore  Mailing Address 11546 Fox River Road  City Ellicott City  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthsia  Receipt For:  Primary General Other (specify)	State Zip Code MD 21042  C Occupation Physician Aggregate Year-to-Date ▼	Date of Receipt    M M
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	200.00
TOTAL This Period (last page this line number	only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Lincoln Coore  Mailing Address 11546 Fox River Road		Date of Receipt
City Ellicott City  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthsia Receipt For:  Primary General Other (specify)	State Zip Code MD 21042  C  Occupation Physician  Aggregate Year-to-Date ▼  375.00	Transaction ID : SA11AI.7472  Amount of Each Receipt this Period  75.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Melvin Coursey  Mailing Address 18720 Shremor Drive  City  Derwood  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify)	State Zip Code MD 20855  C  Occupation Physician  Aggregate Year-to-Date ▼	Date of Receipt  06 25 2013  Transaction ID: SA11AI.7423  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Lauren Deloach  Mailing Address 15114 Pepperridge Drive  City Bowie  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code MD 20721  C  Occupation Physician  Aggregate Year-to-Date ▼  250.00	Date of Receipt  06 25 2013  Transaction ID: SA11AI.7481  Amount of Each Receipt this Period  50.00  Payroll deduction
SUBTOTAL of Receipts This Page (optional).	<u> </u>	175.00
TOTAL This Period (last page this line number	er only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Ali Emamhosseini  Mailing Address 8370 Greensboro Drive  Apt #208  City  McLean  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify)   Full Name (Last, First, Middle Initial)	State Zip Code VA 22102  C Occupation Physician  Aggregate Year-to-Date ▼	Date of Receipt  06 25 2013  Transaction ID: SA11AI.7447  Amount of Each Receipt this Period  50.00  Payroll deduction
Mailing Address 11305 Struttman Terrace	Otata Zin Oz II	Date of Receipt  06 25 2013
City	State Zip Code MD 20852	Transaction ID : SA11AI.7450
North Bethesda  FEC ID number of contributing federal political committee.	MD 20852	Amount of Each Receipt this Period 50.00
Name of Employer First Colonies Anesthesia  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  250.00	Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Richard Evans  Mailing Address 6436 West Langley Lane  City	State Zip Code	Date of Receipt    M = M
McLean  FEC ID number of contributing federal political committee.  Name of Employer	VA 22101  C Occupation	Amount of Each Receipt this Period  50.00  Payroll deduction
First Colonies Anesthesia  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Physician  Aggregate Year-to-Date ▼  250.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number	only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using	the name and address of any political committee	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Tamara Gabrielli  Mailing Address 504 Reserve Champion D	rive	Date of Receipt
City Rockville	State Zip Code MD 20850	Transaction ID : SA11AI.7495  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer	Occupation	50.00 Payroll deduction
First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify)	Physician  Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  Thomas Gambon  Mailing Address 7700 Charleston Dr.		Date of Receipt  06 25 2013
City Bethesda	State Zip Code MD 20817	Transaction ID : SA11AI.7506  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician  Aggregate Year-to-Date ▼	Payroll deduction
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial)  Dr. Steven Grube		Date of Receipt
Mailing Address 13895 Foxtower Road  City	State Zip Code	06 25 2013
Thurmont	MD 21788	Transaction ID : SA11AI.7496  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional		150.00
TOTAL This Period (last page this line numl	per only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Keith Hairston	LOIA AGGOCIATES ELO FOLITICA	Date of Receipt
Mailing Address 12312 Highstakes Drive		06 25 2013
City	State Zip Code	Transaction ID : SA11AI.7468
Reisterstown	MD 21136	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	-
Full Name (Last, First, Middle Initial)  Shelly Hairston		Date of Receipt
Mailing Address 12312 Highstakes Drive		06 25 _2013 _
City	State Zip Code	Transaction ID : SA11AI.7490
Reisterstown	MD 21136	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Payroll deduction	
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial) Dr. John Hanna		Date of Receipt
Mailing Address 9310 Leigh Mill Ct.		06 25 2013
City Great Falls	State Zip Code VA 22066	Transaction ID : SA11AI.7451  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optiona	)	150.00

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)											
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	the name and address of any political committee	
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Glen Hessinger  Mailing Address 8101 Ruxton Crossing Roa	ad	Date of Receipt
		06 25 2013
City Towson	State Zip Code MD 21204	Transaction ID : SA11AI.7469  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer  First Colonies Anesthesia  Receipt For:	Occupation Physician  Aggregate Year-to-Date ▼	Payroll deduction
Primary General Other (specify) ▼	Aggregate real-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial)  3. Dr. Jean-Max Hogarth		Date of Receipt
Mailing Address 1614 Randallwood Court		06 25 _ 2013 _
City	State Zip Code MD 21084	Transaction ID : SA11AI.7470
Jarretsville  FEC ID number of contributing federal political committee.	C 21004	Amount of Each Receipt this Period  50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  Dr. Sung Hong		Date of Receipt
Mailing Address 8525 Huntspring Drive		06 25 2013
City Lutherville	State Zip Code MD 21093	Transaction ID : SA11AI.7471  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
SUBTOTAL of Receipts This Page (optional)		150.00
<b>TOTAL</b> This Period (last page this line numb	per only)	

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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Steven Hopper  Mailing Address 4550 N. Park Avenue #101  City Chevy Chase  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)   Full Name (Last, First, Middle Initial)	State Zip Code MD 20815  C  Occupation Physician  Aggregate Year-to-Date ▼  250.00	Date of Receipt  06 25 2013  Transaction ID: SA11AI.7452  Amount of Each Receipt this Period  50.00  Payroll deduction
Address 9110 Travener Circle  City Frederick  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For:  Primary General Other (specify) ▼	State Zip Code MD 21704  C  Occupation Physician  Aggregate Year-to-Date ▼  225.00	Date of Receipt  04 25 2013  Transaction ID: SA11AI.7235  Amount of Each Receipt this Period  75.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Stuart Hough  Mailing Address 9110 Travener Circle  City Frederick  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code MD 21704  C  Occupation Physician  Aggregate Year-to-Date ▼  300.00	Date of Receipt  05
SUBTOTAL of Receipts This Page (optional).	<u> </u>	200.00
TOTAL This Period (last page this line number	er only)	

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Stuart Hough  Mailing Address 9110 Travener Circle		Date of Receipt
		06 25 2013
City Frederick	State Zip Code MD 21704	Transaction ID : SA11AI.7424  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial)  Leo Hsiao  Mailing Address 242 Weshington Ave		Date of Receipt
Mailing Address 212 Washington Ave Apt. #1217		06 25 _2013 _
City	State Zip Code	Transaction ID : SA11AI.7479
Towson	MD 21204	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  Dr. Sean Isaac		Date of Receipt
Mailing Address 7 Starlight Farm Drive		06 25 2013
City Phoenix	State Zip Code MD 21131	Transaction ID : SA11AI.7477  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	250.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	175.00
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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. David Johnson  Mailing Address 5506 Bootjack Drive		Date of Receipt
City Frederick  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For: Primary General	State Zip Code MD 21702  C  Occupation Physician  Aggregate Year-to-Date ▼	06 25 2013  Transaction ID : SA11AI.7497  Amount of Each Receipt this Period  50.00  Payroll deduction
Other (specify) ▼  Full Name (Last, First, Middle Initial)  Dr. James Kaufman  Mailing Address 7514 Arrowwood Road	250.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  Bethesda  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For:  □ Primary □ General Other (specify) ▼	State Zip Code MD 20817  C  Occupation Physician  Aggregate Year-to-Date ▼	Transaction ID : SA11AI.7453  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Cynthia Kenol  Mailing Address 6579 Prestwick Drive  City Highland  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia	State Zip Code MD 20777  C Occupation Physician	Date of Receipt  06 25 2013  Transaction ID : SA11AI.7425  Amount of Each Receipt this Period  50.00  Payroll deduction
Receipt For:  Primary General  Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)	Aggregate Year-to-Date ▼  250.00	150.00
TOTAL This Period (last page this line numb	er only)	

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or for commercial purposes, other than using	the name and address of any political committee t	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) HaengShik Kim Mailing Address 11429 Twining Lane		Date of Receipt
City Potomac  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For:  □ Primary □ General □ Other (specify) ▼	State Zip Code MD 20854  C  Occupation Physician  Aggregate Year-to-Date ▼  250.00	Transaction ID : SA11AI.7444  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  James Kim  Mailing Address 4808 Moorland Lane	State Zip Code MD 20814  C  Occupation Physician  Aggregate Year-to-Date ▼  250.00	Date of Receipt  06
Full Name (Last, First, Middle Initial)  Dr. Richard Ko  Mailing Address 6795 Stockwell Manor Dri  City Falls Church  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code VA 22043  C Occupation Physician Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional	) <b>&gt;</b>	150.00
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	g the name and address of any political committee t	
,	IESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Harkisan Laheri		Date of Receipt
Mailing Address 11722 Split Tree Circle		06 25 2013
City	State Zip Code	Transaction ID : SA11AI.7427
Potomac	MD 20854	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	- Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)  3. Dr. Kathleen Leavitt	'	Date of Receipt
Mailing Address 3467 North Venice Street	t	M = M / D = D / Y = Y = Y
City	State Zip Code	06 25 2013
Arlington	VA 22207	Transaction ID : SA11AI.7454  Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)	I	Date of Receipt
Mailing Address 11667 Fairmont Place		04 25 2013
City Ijamsville	State Zip Code MD 21754	Transaction ID : SA11AI.7310  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General  Other (specify) ▼	225.00	
SUBTOTAL of Receipts This Page (optional	al)	175.00
TOTAL This Period (last page this line nun	pher only)	

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or for commercial purposes, other than using the	ne name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Thomas Malone  Mailing Address 11667 Fairmont Place  City	State Zip Code	Date of Receipt  05 24 2013  Transaction ID: SA11AI.7407
Ijamsville  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  □ Primary □ General □ Other (specify) ▼	MD 21754  C Occupation Physician  Aggregate Year-to-Date ▼  300.00	Amount of Each Receipt this Period 75.00 Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Thomas Malone  Mailing Address 11667 Fairmont Place  City  Ijamsville  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify)	State Zip Code MD 21754  C  Occupation Physician  Aggregate Year-to-Date ▼  375.00	Date of Receipt  M
Full Name (Last, First, Middle Initial)  Dr. Mollyann March  Mailing Address 6504 Greentree Road  City Bethesda  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code MD 20817  C  Occupation Physician  Aggregate Year-to-Date ▼  225.00	Date of Receipt  04 25 2013  Transaction ID: SA11AI.7266  Amount of Each Receipt this Period  75.00  Payroll deduction
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	225.00
TOTAL This Period (last page this line number	r only)	

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	Statements may not be sold or used by any persolenname and address of any political committee to	
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Mollyann March  Mailing Address 6504 Greentree Road  City  Bethesda  FEC ID number of contributing	State Zip Code MD 20817	Date of Receipt  05 24 2013  Transaction ID : SA11AI.7361  Amount of Each Receipt this Period
federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General  Other (specify)   Other (specify)	C Occupation Physician Aggregate Year-to-Date ▼ 300.00	Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Mollyann March  Mailing Address 6504 Greentree Road  City  Bethesda  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code MD 20817  C  Occupation Physician  Aggregate Year-to-Date ▼  375.00	Date of Receipt  M
Full Name (Last, First, Middle Initial)  Dr. Stephen Martin  Mailing Address 3336 O Street, NW  City Washington  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code DC 20007  C Occupation Physician Aggregate Year-to-Date ▼	Date of Receipt  06 25 2013  Transaction ID: SA11AI.7428  Amount of Each Receipt this Period  50.00  Payroll deduction
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	200.00
TOTAL This Period (last page this line number	only)	

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or for commercial purposes, other than using t  NAME OF COMMITTEE (In Full)	State Zip Code MD 20854  C  Occupation Physician  Aggregate Year-to-Date   250.00	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  3. Dr. Danielle Mossman		Date of Receipt
Mailing Address 3709 Falling Green Way  City Mt. Airy  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For:  Primary General Other (specify) ▼	State Zip Code MD 21771  C  Occupation Physician  Aggregate Year-to-Date ▼  250.00	Transaction ID : SA11AI.7492  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Thomas Munro  Mailing Address 15310 Forest Lake Court  City  Darnestown  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify)	State Zip Code MD 20874  C  Occupation Physician  Aggregate Year-to-Date ▼  225.00	Date of Receipt    04   25   2013     Transaction ID : SA11AI.7319     Amount of Each Receipt this Period   75.00     Payroll deduction
SUBTOTAL of Receipts This Page (optional).	•	175.00
TOTAL This Period (last page this line number	er only)	

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAL	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Thomas Munro  Mailing Address 15310 Forest Lake Court		Date of Receipt
City	State Zip Code	05 24 2013
Darnestown	MD 20874	Transaction ID : SA11AI.7416  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify)	Physician  Aggregate Year-to-Date ▼  300.00	
	555.55	
Full Name (Last, First, Middle Initial)  Dr. Thomas Munro  Mailing Address 15310 Forest Lake Court	Date of Receipt	
City	State Zip Code	06 25 2013 Transaction ID : SA11AI.7507
Darnestown	MD 20874	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  375.00	
Full Name (Last, First, Middle Initial)  C. Dr. Anna Noriega-Nalls		Date of Receipt
Mailing Address 603 Queen Street #4		04 25 2013
City Alexandria	State Zip Code VA 22314	Transaction ID : SA11AI.7240  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional)		250.00
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or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Anna Noriega-Nalls  Mailing Address 603 Queen Street  #4  City Alexandria  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General  Other (specify)   Full Name (Last, First, Middle Initial)	State Zip Code VA 22314  C  Occupation Physician  Aggregate Year-to-Date ▼  400.00	Date of Receipt    M
Full Name (Last, First, Middle Initial)  Dr. Anna Noriega-Nalls  Mailing Address 603 Queen Street  #4  City  Alexandria  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify) ▼	State Zip Code VA 22314  C  Occupation Physician  Aggregate Year-to-Date ▼  500.00	Date of Receipt  06 25 2013  Transaction ID : SA11AI.7429  Amount of Each Receipt this Period  100.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Denis O'Fallon  Mailing Address 12123 Merricks Court  City  Monrovia  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General  Other (specify)   Other (specify)	State Zip Code MD 21770  C  Occupation Physician  Aggregate Year-to-Date ▼  250.00	Date of Receipt    M
SUBTOTAL of Receipts This Page (optional)	····	250.00
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or	for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Α.	Full Name (Last, First, Middle Initial) Dr. Philip Owens		Date of Receipt
	Mailing Address 141 Adams Street, NW		06 25 2013
	City Washington	State Zip Code DC 20001	Transaction ID : SA11AI.7430  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer	Occupation	Payroll deduction
	First Colonies Anesthesia	Physician	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
В.	Full Name (Last, First, Middle Initial) Dr. Kent Ozkum  Mailing Address 10720 Dern Road		Date of Receipt
	City	State Zip Code	06 25 2013 Transaction ID 204444 7500
	Emmitsburg	MD 21727	Transaction ID : SA11AI.7508  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	50.00	
	Name of Employer	Occupation	Payroll deduction
	First Colonies Anesthesia	Physician	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
<u>с</u> .	Full Name (Last, First, Middle Initial) Dr. Paul Park		Date of Receipt
	Mailing Address 510 Golden Oak Terrace		06 25 _ 2013 _
	City Rockville	State Zip Code MD 20850	Transaction ID : SA11AI.7431  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer	Occupation	Payroll deduction
	First Colonies Anesthesia	Physician	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	
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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Kestutis Pauliukonis  Mailing Address 1813 Solitaire Lane		Date of Receipt
City	State Zip Code	06 25 2013 Transaction ID : SA11AI.7432
McLean Francisco de la contribution	VA 22101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  Dr. Michael Peck  Mailing Address 4 Farm Haven Court		Date of Receipt
City	State Zip Code	04 25 2013 Transaction ID : SA11AI.7267
Rockville  FEC ID number of contributing federal political committee.	MD 20852	Amount of Each Receipt this Period 75.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  225.00	
Full Name (Last, First, Middle Initial)  Dr. Michael Peck		Date of Receipt
Mailing Address 4 Farm Haven Court		05 24 2013
City Rockville	State Zip Code MD 20852	Transaction ID : SA11AI.7362  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼  300.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	200.00
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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Michael Peck  Mailing Address 4 Farm Haven Court		Date of Receipt
City Rockville  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For:  □ Primary □ General Other (specify) ▼	State Zip Code MD 20852  C  Occupation Physician  Aggregate Year-to-Date ▼  375.00	Transaction ID : SA11AI.7456  Amount of Each Receipt this Period  75.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Ramani Peruvemba  Mailing Address 8302 Fox Haven Drive  City  McLean  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code VA 22102  C  Occupation Physician  Aggregate Year-to-Date ▼  250.00	Date of Receipt  06 25 2013  Transaction ID: SA11AI.7433  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Eugen Pirovic  Mailing Address 3912 Calverton Drive  City Hyattsville  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code MD 20782  C  Occupation Physician  Aggregate Year-to-Date ▼	Date of Receipt  06
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	175.00
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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Jeffrey Richman  Mailing Address 6906 Granite Ridge Ct.		Date of Receipt
City Baltimore  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code MD 21209  C  Occupation Physician  Aggregate Year-to-Date ▼  250.00	Transaction ID : SA11AI.7476  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Charles Rizzuto  Mailing Address 6409 Pinehurst Road  City  Baltimore  FEC ID number of contributing federal political committee.  Name of Employer  First Colonis Anesthesia  Receipt For:  Primary  General  Other (specify)	State Zip Code MD 21212  C Occupation Physician  Aggregate Year-to-Date ▼  250.00	Date of Receipt    M
Full Name (Last, First, Middle Initial)  Dr. Alexander Rubin  Mailing Address 6611 Hunter Trail Way  City Frederick  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code MD 21702  C  Occupation Physician  Aggregate Year-to-Date ▼  250.00	Date of Receipt  06 25 2013  Transaction ID : SA11AI.7500  Amount of Each Receipt this Period  50.00  Payroll deduction
SUBTOTAL of Receipts This Page (optional	<u> </u>	150.00
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	g the name and address of any political committee	
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	IESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Leudvig Sardarian  Mailing Address 44004 Present Hall Last		Date of Receipt
Mailing Address 11601 Brandy Hall Lane		06 25 2013
City North Potomac	State Zip Code MD 20878	Transaction ID : SA11AI.7511  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician  Aggregate Year-to-Date ▼	Payroll deduction
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)  3. Dr. Suzanne Scattergood		Date of Receipt
Mailing Address 14700 Crossway Road		04 25 _ 2013 _
City Rockville	State Zip Code MD 20853	Transaction ID : SA11AI.7313  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  300.00	
Full Name (Last, First, Middle Initial)  Dr. Suzanne Scattergood		Date of Receipt
Mailing Address 14700 Crossway Road		05 24 2013
City Rockville	State Zip Code MD 20853	Transaction ID : SA11AI.7410  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	_
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (options	ıl)	250.00
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FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE  Full Name (Last, First, Middle Initial) Date of Receipt  Name (Last, First, Middle Initial) City State Zip Code Mailing Address 14700 Crossway Road  City State Zip Code MD 20853  FEC ID number of contributing federal political committee.  Name of Employer Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Date of Receipt Tor: Primary General Other (specify) ▼  State Zip Code MD 21704  Date of Receipt  Transaction ID: SA11A1.7502  Payroll deduction  Payroll deduction  Date of Receipt  Transaction ID: SA11A1.7502  Transaction ID: SA11A1.7502  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: SA11A1.7502  Transaction ID: SA11A1.7502  Amount of Each Receipt this Period  Date of Receipt  Date of Receipt  Transaction ID: SA11A1.7502  Transaction ID: SA11A1.7502  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: SA11A1.7502  Transaction ID: SA11A1.7434  Amount of Each Receipt this Period	or for commercial purposes, other than using	g the name and address of any political committee t	
Date of Receipt    City	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	IESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
City State Zip Code MD 20853  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For:    Other (specify) ▼	Dr. Suzanne Scattergood		M - M / D - D / Y - Y - Y - Y
Rockville  MD 20853  Amount of Each Receipt this Period  CC	City	State Zip Code	
FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For:  Primary Other (specify) ▼ State Zip Code MD 21704  First Colonies Anesthesia Receipt For:  Primary General Other (specify) ▼ State Zip Code MD 21704  First Colonies Anesthesia Receipt For:  Primary General Other (specify) ▼ State Zip Code MD 21704  FEC ID number of contributing federal political committee.  Receipt For:  Primary General Other (specify) ▼ State Zip Code MD 21704  FEC ID number of contributing federal political committee.  City State Zip Code MD 21704  First Colonies Anesthesia Receipt For:  Primary General Other (specify) ▼ State Zip Code MD 25 2013  Transaction ID: SA11AI.7502  Amount of Each Receipt this Period  First Colonies Anesthesia Receipt For:  Primary General Other (specify) ▼ State Zip Code MD 20876  FEC ID number of contributing federal political committee.  C Cocupation Physician  Aggregate Year-to-Date ▼ So.00  Payroll deduction  First Colonies Anesthesia Receipt For:  Primary General Other (specify) ▼ State Zip Code MD 25 2013  Transaction ID: SA11AI.7434  Amount of Each Receipt this Period  First Colonies Anesthesia Receipt For:  Primary General Other (specify) ▼ State Zip Code MD 25 2013  Transaction ID: SA11AI.7434  Amount of Each Receipt this Period  First Colonies Anesthesia Receipt For:  Primary General Other (specify) ▼ State Zip Code MD 25 2013  Transaction ID: SA11AI.7434  Amount of Each Receipt this Period  First Colonies Anesthesia Receipt For:  Primary General Other (specify) ▼ State Zip Code MD 25 2013  Transaction ID: SA11AI.7434  Amount of Each Receipt this Period  First Colonies Anesthesia Receipt For:  Primary General Other (specify) ▼ State Zip Code MD 25 2013  Transaction ID: SA11AI.7434  Amount of Each Receipt this Period  First Colonies Anesthesia Receipt For:  Primary General Other (specify) ▼ State Zip Code MD 25 2013  Transaction ID: SA11AI.744  Amount of Each Receipt This Period	•		
First Colories Anesthesia Receipt For:    Primary   General   Other (specify) ▼   Date of Receipt	· ·	C	100.00
Receipt For:    Primary	Name of Employer	Occupation	Payroll deduction
Primary General Other (specify) ▼ 500.00  Full Name (Last, First, Middle Initial) 3. Dr. Mark Seymour  Mailing Address 2932 Thurston Rd.  City State Zip Code MD 21704  Feedrick MD 21704  Feederick MD 21704  Feedrick MD 21704  Feedrick MD 21704  Feedrich Countributing feederal political committee.  Name of Employer First Colonies Anesthesia Physician  Receipt For: Primary General Other (specify) ▼ 250.00  Full Name (Last, First, Middle Initial)  City State Zip Code MD 250.00  Full Name (Last, First, Middle Initial)  City State Zip Code MD 20876  Feed ID number of contributing feedral political committee.  City State Zip Code MD 20876  First Colonies Anesthesia Physician  Feed ID number of contributing feedral political committee.  City State Zip Code MD 20876  Feed ID number of contributing feedral political committee.  City State Zip Code MD 20876  Feer ID number of contributing feedral political committee.  City State Zip Code MD 20876  Feer ID number of contributing feedral political committee.  City State Zip Code MD 20876  Feer ID number of contributing feedral political committee.  City State Zip Code MD 20876  Feer ID number of contributing feedral political committee.  City State Zip Code MD 20876  Feer ID number of contributing feedral political committee.  City State Zip Code MD 20876  Feer ID number of contributing feedral political committee.  City State Zip Code MD 20876  Feer ID number of contributing feedral political committee.  City State Zip Code MD 20876  Feer ID number of contributing feedral political committee.  City State Zip Code MD 20876  Feer ID number of contributing feedral political committee.  City State Zip Code MD 20876  Feer ID number of contributing feedral political committee.  City State Zip Code MD 20876  Feer ID number of contributing feedral political committee.  City State Zip Code MD 20876  Feer ID number of contributing feedral political committee.  City State Zip Code MD 20876  Feer ID number of contributing feedral political committee.  Feer ID number of contributing		Physician	
Aggregate Year-to-Date ▼    City	Primary General		
City State Zip Code MD 21704  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For:  Primary General Other (specify) ▼  City State Zip Code MD 21704  Coccupation Physician  Aggregate Year-to-Date ▼  Payroll deduction  Date of Receipt For:  Date of Receipt  Transaction ID: SA11AI.7502  Amount of Each Receipt this Period  Payroll deduction  Payroll deduction  Date of Receipt  Transaction ID: SA11AI.7434  Amount of Each Receipt this Period  City State Zip Code MD 20876  FCI ID number of contributing federal political committee.  Name of Employer Occupation  Prist Colonies Anesthesia Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Payroll deduction	B. Dr. Mark Seymour		Date of Receipt
Transaction ID : SA11AI.7502  Frederick  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  Dr. Nader Soliman  Mailing Address 22905 David Mill Road  City Germantown  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For:  Aggregate Year-to-Date ▼  Date of Receipt  Date of Receipt  Transaction ID : SA11AI.7502  Amount of Each Receipt this Period  Payroll deduction  Date of Receipt  Transaction ID : SA11AI.7502  Amount of Each Receipt this Period  Date of Receipt  Transaction ID : SA11AI.7502  Amount of Each Receipt this Period  Date of Receipt  Transaction ID : SA11AI.7502  Amount of Each Receipt this Period  Date of Receipt  Transaction ID : SA11AI.7502  Amount of Each Receipt this Period  Date of Receipt  Transaction ID : SA11AI.7502  Amount of Each Receipt this Period  Transaction ID : SA11AI.7502  Amount of Each Receipt this Period	Mailing Address 2932 Thurston Rd.		
Frederick  MD 21704  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼  State Zip Code MD 20876  FIC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼  State Zip Code MD 20876  Transaction ID: SA11AI.7434  Amount of Each Receipt this Period  Payroll deduction  Date of Receipt  Transaction ID: SA11AI.7434  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼  Aggregate Year-to-Date ▼  Payroll deduction	City	State Zip Code	
FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For:    Primary   General   Aggregate Year-to-Date ▼			
First Colonies Anesthesia Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Dr. Nader Soliman  Mailing Address 22905 David Mill Road  City State Zip Code MD 20876  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Date of Receipt  Transaction ID: SA11AI.7434  Amount of Each Receipt this Period  Payroll deduction  Payroll deduction	· ·	С	50.00
Receipt For:  Primary General Other (specify) ▼  Pull Name (Last, First, Middle Initial) Dr. Nader Soliman  Mailing Address 22905 David Mill Road  City State Zip Code MD 20876  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Date of Receipt  Transaction ID: SA11AI.7434  Amount of Each Receipt this Period  Payroll deduction  Payroll deduction	. ,	Occupation	Payroll deduction
Primary General Other (specify) ▼  Pull Name (Last, First, Middle Initial) Dr. Nader Soliman  Mailing Address 22905 David Mill Road  City Germantown  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼  Payroll deduction  Date of Receipt  MM M		Physician	
Date of Receipt  Mailing Address 22905 David Mill Road  City Germantown  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For: Primary Other (specify) ▼  Page 2905 David Mill Road  Date of Receipt  M M M C 25 2013  Transaction ID : SA11AI.7434  Amount of Each Receipt this Period  Payroll deduction  Payroll deduction	Primary General		
Mailing Address 22905 David Mill Road  City Germantown  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For:  Primary Other (specify) ▼  Primary  General  Other (specify) ▼  Primary  Aggregate Year-to-Date ▼  Primary  Concept For:  Aggregate Year-to-Date ▼  Primary  Aggregate Year-to-Date ▼			
City State Zip Code MD 20876  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For:  Primary General Other (specify) ▼  Occupation Aggregate Year-to-Date ▼  Occupation Physician  Aggregate Year-to-Date ▼  250.00	^		†
City Germantown  State Zip Code MD 20876  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼  State Zip Code MD 20876  Transaction ID : SA11AI.7434  Amount of Each Receipt this Period  Foo.00  Payroll deduction  Aggregate Year-to-Date ▼  250.00	waining Address 22905 David Mill Road		
FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  Other (specify) ▼  Amount of Each Receipt this Period  50.00  Payroll deduction  Payroll deduction  Payroll deduction			Transaction ID : SA11AI.7434
Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  Other (specify)   Aggregate Year-to-Date   250.00	FEC ID number of contributing		Amount of Each Receipt this Period  50.00
First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼  Aggregate Year-to-Date ▼  250.00	Name of Employer	Occupation	Payroll deduction
Primary General Other (specify) ▼  Aggregate Teal-to-Date ▼  250.00		Physician	
Other (specify) ▼ 250.00		Aggregate Year-to-Date ▼	]
SUBTOTAL of Receipts This Page (optional)		250.00	
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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAL	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Robert Study  Mailing Address 6 Beall Spring Court		Date of Receipt
City	State Zip Code	06 25 2013 Transaction ID : SA11AI.7457
Potomac  FEC ID number of contributing	MD 20854	Amount of Each Receipt this Period 50.00
federal political committee.  Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For:	Physician  Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)  Dr. Lisa Sullivan  Mailing Address 4639 Teen Barnes Road		Date of Receipt
City	State Zip Code	06 25 2013 Transaction ID : SA11AI.7503
Frederick	MD 21703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer First Colonies Anesthsia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  Dr. Robert Sullivan		Date of Receipt
Mailing Address 4639 Teen Barnes Road		06 25 2013
City Frederick	State Zip Code MD 21703	Transaction ID : SA11AI.7504  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General	Aggregate Year-to-Date ▼	
Other (specify)	250.00	
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	150.00
TOTAL This Period (last page this line number	only)	

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or for commercial purposes, other than using t	he name and address of any political committee to	o solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE					
Full Name (Last, First, Middle Initial) Dr. Louis Swann  Mailing Address PO Box 6081	Dr. Louis Swann						
City McLean  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  General	State Zip Code VA 22106  C  Occupation Physician  Aggregate Year-to-Date ▼	06 25 2013  Transaction ID : SA11AI.7458  Amount of Each Receipt this Period  50.00  Payroll deduction					
Other (specify) ▼  Full Name (Last, First, Middle Initial)  3. Dr. Rojack Tan  Mailing Address 507 Goodland Place	250.00	Date of Receipt					
City Rockville  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For: Primary General	State Zip Code MD 20850  C  Occupation Physician  Aggregate Year-to-Date ▼	7 Transaction ID : SA11AI.7459  Amount of Each Receipt this Period  50.00  Payroll deduction					
Other (specify) ▼  Full Name (Last, First, Middle Initial)  Dr. Bernard Tsai  Mailing Address 10013 New London Drive	250.00	Date of Receipt  M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y					
City Potomac  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For:  Primary General Other (specify) ▼	State Zip Code MD 20854  C  Occupation Physician  Aggregate Year-to-Date ▼  250.00	Transaction ID : SA11AI.7435  Amount of Each Receipt this Period  50.00  Payroll deduction					
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	150.00					
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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE				
Full Name (Last, First, Middle Initial)  Dr. Reed Underwood  Mailing Address 1518 T Street, NW		Date of Receipt				
	State 7in Code	06 25 2013				
City Washington	State Zip Code DC 20009	Transaction ID : SA11AI.7445  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify) ▼	Physician  Aggregate Year-to-Date ▼  250.00					
Full Name (Last, First, Middle Initial)  3. Dr. Arnaldo Valedon		Date of Receipt				
Mailing Address 22 Woodfield Court		06 25 2013				
City Reisterstown	State Zip Code MD 21136	Transaction ID : SA11AI.7483  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00					
Full Name (Last, First, Middle Initial)  Dr. Martha Van Clief		Date of Receipt				
Mailing Address 405 Apple Grove Road		06 25 2013				
City Silver Spring	State Zip Code MD 20904	Transaction ID : SA11AI.7488  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia Receipt For:	Physician  Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	250.00					
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	150.00				
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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)  Dr. Paul Van Nice  Mailing Address 7101 Meadow Lane		Date of Receipt			
		06 25 2013			
City Chevy Chase	State Zip Code MD 20815	Transaction ID : SA11AI.7436  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia	Physician				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00				
Full Name (Last, First, Middle Initial)  3. Dr. Mark Vogt  Mailing Address 1149 Colonial Road		Date of Receipt			
City	06 25 2013				
McLean	State Zip Code VA 22101	Transaction ID : SA11AI.7460  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia	Physician				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00				
Full Name (Last, First, Middle Initial)  Dr. Christopher Wahlgren		Date of Receipt			
Mailing Address 1200 Colvin Meadows Lane		06 25 2013			
City Great Falls	State Zip Code VA 22066	Transaction ID : SA11AI.7438  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia	Physician				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00				
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number	<u> </u>	150.00			

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or for commercial purposes, other than using	the name and address of any political committee				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)  Dr. Timothy Wex  Mailing Address 11429 Cedar Ridge Drive		Date of Receipt			
City	State Zip Code	06 25 2013 Transaction ID : SA11AI.7461			
Potomac	VA 20854	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction			
Receipt For:	Aggregate Year-to-Date ▼				
Primary General Other (specify) ▼	250.00				
Full Name (Last, First, Middle Initial)  Dr. David Wheeler	-	Date of Receipt			
Mailing Address 7108 Collingwood Court		06 25 2013			
City	State Zip Code MD 21075	Transaction ID : SA11AI.7474			
Elkridge	2.0.0	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	ÿ III				
Name of Employer	Payroll deduction				
First Colonies Anesthesia	Physician				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00				
Full Name (Last, First, Middle Initial) C. Dr. Thomas Wherry		Date of Receipt			
Mailing Address 611 W. 2nd Street		06 25 2013			
City Frederick	State Zip Code MD 21701	Transaction ID : SA11AI.7489  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia	,				
Receipt For: Primary General	Aggregate Year-to-Date ▼				
Other (specify) ▼	250.00				
SUBTOTAL of Receipts This Page (optional	)	150.00			
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	g the name and address of any political committee					
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	IESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE				
Full Name (Last, First, Middle Initial)  Dr. Howard Wilpon  Mailing Address 18212 Wickham Road		Date of Receipt				
City	State Zip Code	06				
Olney	MD 20832	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General  Other (specify) ▼	250.00					
Full Name (Last, First, Middle Initial)  Dr. Monfold Wolf	,	Date of Receipt				
Mailing Address 4822 Tilly Dr.	Mailing Address 4822 Tilly Dr.					
City Sykesville	State Zip Code MD 21784	Transaction ID : SA11AI.7486				
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  50.00				
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00					
Full Name (Last, First, Middle Initial)		Date of Receipt				
Mailing Address 910 Dunlavin Ct.		06 25 2013				
City Timonium	State Zip Code MD 21093	Transaction ID : SA11AI.7475  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia Receipt For:	popint For:					
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00					
	NI)	150.00				
TOTAL This Period (last page this line num	nder only)					

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:				PAGE	3	38	OF	44	
(che	(check only one)								
X	11a [		11b		11c		12		
	13		14		15		16		17

or for commercial purposes, other than using	the name and address of any political committee	to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE					
Full Name (Last, First, Middle Initial)  A. David Wyler  Mailing Address 6912 Granite Ridge Court	David Wyler						
City Baltimore  FEC ID number of contributing federal political committee.	State Zip Code MD 21209	Transaction ID : SA11AI.7487  Amount of Each Receipt this Period  50.00  Payroll deduction					
Name of Employer  First Colonies Anesthesia  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  250.00	- 1 ayroll deduction					
Full Name (Last, First, Middle Initial)  Dr. Aiqin Yu  Mailing Address 13508 Gumspring Road		Date of Receipt  06 25 2013					
City  Rockville  FEC ID number of contributing federal political committee.	State Zip Code MD 20850	Transaction ID : SA11AI.7439  Amount of Each Receipt this Period  50.00					
Name of Employer First Colonies Anesthesia  Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  250.00	Payroll deduction					
Full Name (Last, First, Middle Initial)  Dr. Jungim Yun  Mailing Address 2057 Thurston Road  City Frederick	State Zip Code MD 21704	Date of Receipt  06 25 2013  Transaction ID: SA11AI.7505					
Frederick  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General  Other (specify)	Occupation Physician  Aggregate Year-to-Date ▼  250.00	Amount of Each Receipt this Period  50.00  Payroll deduction					
SUBTOTAL of Receipts This Page (optional)	<b>_</b>	150.00					
TOTAL This Period (last page this line numb	per only)	5700.00					

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 39 OF 44					
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	-	FOR LINE NUMBER: PAGE 39 OF 44 (check only one)				
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	Detailed Summary Page	27	28a 28b 28c 29 30b				
Any information copied from such Reports and Statem	nents may not be sold or us	ed by any perso	on for the purpose of soliciting contributions				
or for commercial purposes, other than using the nam							
NAME OF COMMITTEE (In Full)							
$ \; angle$ FIRST COLONIES ANESTHESIA $ ho$	ASSOCIATES LLC	POLITICAL	ACTION COMMITTEE				
/		-					
Full Name (Last, First, Middle Initial)			Date of Disbursement				
A. Andy Harris							
Mailing Address 301 W Pennsylvania Ave			05 01 2013				
3 To the control of t							
•	State Zip Code		Transaction ID : SB23.7527				
	MD 20214		Transaction ID . 3D23.7327				
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period				
Candidate Name			Amount of Each dispursement this Period				
Andy Harris		Category/ Type	2500.00				
	nent For: 2014	. , , , ,					
	Primary Seneral						
President	Other (specify) ▼						
State: MD District:							
Full Name (Last, First, Middle Initial)			5				
В.			Date of Disbursement				
Mailing Address			M M / D D / Y Y Y Y				
Mailing Addiess							
City	State Zip Code						
Purpose of Disbursement			Amount of Each Disbursement this Period				
Candidate Name			Amount of Lacif Dispulsement this Fellou				
		Category/ Type					
Office Sought: House Disbursen	nent For:	- 7   -	,				
Senate	Primary General						
President	Other (specify) ▼						
State: District:							
Full Name (Last, First, Middle Initial)			Date of Disbursement				
C.							
Mailing Address			M M / D D / Y Y Y Y				
maining / mailess							
City	State Zip Code						
Durnage of Dishursement	ı						
Purpose of Disbursement			Amount of Food Bill				
Candidate Name		Amount of Each Disbursement this Period					
	Category/ Type						
Office Sought: House Disbursen	nent For:						
Senate	Primary General						
	Other (specify) ▼						
State: District:							
			2500.00				
SUBTOTAL of Disbursements This Page (optional)		·····•	2300.00				
TOTAL This Period (last page this line number only)			2500.00				
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SCHEDULE B (FEC Form 3X)			FOR LINE N	JI IMRED:	PA	GE 40	OF 44
ITEMIZED DISBURSEMENTS	Use separate sche		(check only	-	17		<u></u>
	for each category of Detailed Summary		21b 27		23 24 28b 28c	25 <b>×</b> 29	26 30b
Any information copied from such Reports and States or for commercial purposes, other than using the nar							
NAME OF COMMITTEE (In Full)							
FIRST COLONIES ANESTHESIA	ASSOCIATES	LLC PO	DLITICAL	. ACTION	COMMIT	TEE	
Full Name (Last, First, Middle Initial)				Data of Dial			
A. Barve Re-election Committee				Date of Disk	oursement	Y Y Y	Υ
Mailing Address 1688 E. Gude Drive Suite #202				01	03	2013	
City Rockville	State Zip Cod MD 20850	е		Transactio	on ID : SB29.7	<b>'</b> 514	
Purpose of Disbursement	WD 20030						
Contribution			010	Amount of E	Each Disburse	ment this	Period
Candidate Name			Category/ Type			50	0.00
Office Sought: House Disburser Senate President	ment For:  Primary Ge  Other (specify)	neral	,,		,		
State: District:							
Full Name (Last, First, Middle Initial)							
B. Citizens for Delores Kelley				Date of Disl	oursement		
Mailing Address PO Box 21514				06 /	10	2013	Y
City	State Zip Cod	e		T	on ID : SB29.7	7520	
Baltimore	MD 21282			Transactio	ווט : 3629.7	7330	
Purpose of Disbursement Contribution			011	Amount of E	Each Disburse	ment this	Period
Candidate Name			Category/ Type		, , ,	25	0.00
Office Sought:    House   Disburse    Senate   President     State: MD   District: 10	ment For: Primary Ge Other (specify)	neral					
Full Name (Last, First, Middle Initial)							
				Date of Disk	oursement		V
C. Friends of Robert Gargiola				M M /	D D /	V V V	
Mailing Address 11 Balden Street Room 104				M M /	07	2013	
Mailing Address 11 Balden Street Room 104	State Zip Cod	le		01	07	2013	
Mailing Address 11 Balden Street Room 104 City Annapolis	State Zip Cod MD 21401	e		01		2013	
Mailing Address 11 Balden Street Room 104 City	·	e	011	01 Transaction	07 on ID : SB29.7	2013 7518	
Mailing Address 11 Balden Street Room 104 City Annapolis Purpose of Disbursement	·		011 Category/	01 Transaction	07	2013 7518 ement this	
Mailing Address 11 Balden Street Room 104  City Annapolis Purpose of Disbursement Contribution  Candidate Name	MD 21401			01 Transaction	07 on ID : SB29.7	2013 7518 ement this	Period
Mailing Address 11 Balden Street Room 104  City Annapolis Purpose of Disbursement Contribution  Candidate Name	MD 21401 ment For:		Category/	01 Transaction	07 on ID : SB29.7	2013 7518 ement this	Period
Mailing Address 11 Balden Street Room 104  City Annapolis Purpose of Disbursement Contribution  Candidate Name  Office Sought: House Disburse	MD 21401 ment For:	C	Category/	01 Transaction	07 on ID : SB29.7	2013 7518 ement this	Period
Mailing Address 11 Balden Street Room 104  City Annapolis Purpose of Disbursement Contribution  Candidate Name  Office Sought: House Disburse Senate	MD 21401  ment For: Primary Ge	C	Category/	01 Transaction	07 on ID : SB29.7	2013 7518 ement this	Period
Mailing Address 11 Balden Street Room 104  City Annapolis Purpose of Disbursement Contribution  Candidate Name  Office Sought: House Senate President	ment For: Primary Ge Other (specify)	neral	Category/ Type	01 Transaction	07 on ID : SB29.7	2013 7518 ement this	Period 0.00

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SCHEDULE B (FEC Form 3X)			T =
	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the	(check only	
	Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c <b>x</b> 29 30b
Γ			<b>X</b>
Any information copied from such Reports and State or for commercial purposes, other than using the nar			
NAME OF COMMITTEE (In Full)			
FIRST COLONIES ANESTHESIA	ASSOCIATES LLC I	POLITICAL	ACTION COMMITTEE
Full Name (Last, First, Middle Initial)			
A. O'SAY CAN YOU SEE PAC			Date of Disbursement
Mailing Address PO BOX 468			02 25 2013
ANNAPOLIS	State Zip Code MD 21404		Transaction ID : SB29.7523
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	1000.00
Office Sought: House Disburse Senate President	ment For:  Primary General	.,,,,,	
State: District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial) <b>B.</b>			Date of Disbursement
ь.			
Mailing Address			M = M / D = D / Y = Y = Y
City	State Zip Code		
Purpose of Disbursement			
			Amount of Each Disbursement this Period
Candidate Name		Category/	
Office Sought: House Disburse	ment For:	Туре	7
Senate Dispurse	Primary General		
President	Other (specify)		
State: District:	Other (opcony)		
Full Name (Last, First, Middle Initial)			
C.			Date of Disbursement
			M M / D D / Y Y Y
Mailing Address			
City	State Zip Code		
Purpose of Disbursement			
			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	
	ment For:		, , , , , , , , , , , , , , , , , , , ,
Senate	Primary General		
President	Other (specify) ▼		
State: District:			
			4000.00
SUBTOTAL of Disbursements This Page (optional)		·····	1000.00
TOTAL This Period (last page this line number only	1		4750.00

#### SCHEDULE H4 (FEC Form 3X)

### DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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NAME OF COMMITTEE (In Full)

F	IRST COLONIES ANESTHESIA	A A3301	CIAILS LLC	POLITICA	L ACTION COMMITTEE
A.	Full Name (Last, First, Middle Initial)		on ID : H4.7516		Allocated Activity or Event:
	Barbara Marx Brocato & Asso	ciates			Administrative Fundraising Exempt
	Mailing Address 18 Pinkney Street				Voter Drive Direct Candidate Support
	City	State	Zip Code		Public Comm (ref to party only) by PAC
	Annapolis  Purpose of Disbursement:	MD	21401		Allocated Activity or Event Year-To-Date
	Lobbying expense				1250.00
	Activity or Event Identifier: Administrative			Category/	M = M / D = D / Y = Y = Y
	Administrative			Туре	Date 01 07 2013
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
	0.00		7	1250.00	1250.00
В.	Full Name (Last, First, Middle Initial)	Transactio	on ID : H4.7520		Allocated Activity or Event:
	Maryland Chamber of Commerce				Administrative Fundraising Exempt
	Mailing Address 60 West St. Suite 100				Voter Drive Direct Candidate Support
	City	State	Zip Code		Public Comm (ref to party only) by PAC
	Annapolis  Purpose of Disbursement:	MD	21401		Allocated Activity or Event Year-To-Date
	Annual membership				2215.00
	Activity or Event Identifier: Administrative			Category/	M = M / D = D / Y = Y = Y
				Type	Date 02 25 2013
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
	FEDERAL SHARE 0.00	+	NONFEDERAL	SHARE 965.00	965.00
<u></u>	0.00  Full Name (Last, First, Middle Initial)		NONFEDERAL		965.00  Allocated Activity or Event:
C.	Full Name (Last, First, Middle Initial) Barbara Marx Brocato & Associates				965.00
<u></u>	0.00  Full Name (Last, First, Middle Initial)				965.00  Allocated Activity or Event:
c.	Full Name (Last, First, Middle Initial) Barbara Marx Brocato & Associates Mailing Address 18 Pinkney Street  City	Transaction	on ID : H4.7521  Zip Code		Allocated Activity or Event:  Administrative Fundraising Exempt
<u> </u>	Full Name (Last, First, Middle Initial) Barbara Marx Brocato & Associates Mailing Address 18 Pinkney Street  City Annapolis	Transactio	on ID : H4.7521		Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support
<u>C.</u>	Full Name (Last, First, Middle Initial) Barbara Marx Brocato & Associates Mailing Address 18 Pinkney Street  City	Transaction	on ID : H4.7521  Zip Code		Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC
c.	Full Name (Last, First, Middle Initial) Barbara Marx Brocato & Associates Mailing Address 18 Pinkney Street  City Annapolis Purpose of Disbursement:	Transaction	on ID : H4.7521  Zip Code	965.00	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date
<b>C</b> .	Full Name (Last, First, Middle Initial) Barbara Marx Brocato & Associates Mailing Address 18 Pinkney Street  City Annapolis Purpose of Disbursement: Lobbying expense  Activity or Event Identifier:	Transaction	on ID : H4.7521  Zip Code		Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  3465.00
C.	Full Name (Last, First, Middle Initial) Barbara Marx Brocato & Associates Mailing Address 18 Pinkney Street  City Annapolis Purpose of Disbursement: Lobbying expense  Activity or Event Identifier:	Transaction	on ID : H4.7521  Zip Code	965.00  Category/ Type	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  3465.00
c.	Full Name (Last, First, Middle Initial) Barbara Marx Brocato & Associates Mailing Address 18 Pinkney Street  City Annapolis Purpose of Disbursement: Lobbying expense  Activity or Event Identifier: Administrative	State MD	Zip Code 21401	965.00  Category/ Type	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  3465.00  Date 02 25 2013
	Full Name (Last, First, Middle Initial) Barbara Marx Brocato & Associates Mailing Address 18 Pinkney Street  City Annapolis Purpose of Disbursement: Lobbying expense  Activity or Event Identifier: Administrative	State MD	Zip Code 21401	965.00  Category/ Type  SHARE	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  3465.00  Date 02 25 2013
	Full Name (Last, First, Middle Initial) Barbara Marx Brocato & Associates Mailing Address 18 Pinkney Street  City Annapolis Purpose of Disbursement: Lobbying expense  Activity or Event Identifier: Administrative  FEDERAL SHARE  0.00	State MD	Zip Code 21401	Category/ Type SHARE 1250.00	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  3465.00  Date 02 25 2013
	FEDERAL SHARE  D.000  Full Name (Last, First, Middle Initial) Barbara Marx Brocato & Associates  Mailing Address 18 Pinkney Street  City Annapolis  Purpose of Disbursement: Lobbying expense  Activity or Event Identifier: Administrative	State MD	Zip Code 21401 NONFEDERAL	Category/ Type SHARE 1250.00	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  3465.00  Date 02 25 2013  TOTAL AMOUNT
sı	FEDERAL SHARE  DIATOTAL of Allocated Federal and NonFeder FEDERAL SHARE  0.00  Tull Name (Last, First, Middle Initial) Barbara Marx Brocato & Associates Associates Associates Associates Associates Allocated Federal and NonFeder FEDERAL SHARE  0.00  DTAL This Period (last page for each line only	State MD	Zip Code 21401 NONFEDERAL	965.00  Category/ Type  SHARE  1250.00  SHARE  3465.00	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  3465.00  TOTAL AMOUNT  1250.00  TOTAL AMOUNT  1250.00
SI	Federal Share  Jeffortal of Allocated Federal and NonFederal Federal Share  0.00  Full Name (Last, First, Middle Initial)  Barbara Marx Brocato & Associates  Mailing Address 18 Pinkney Street  City  Annapolis  Purpose of Disbursement: Lobbying expense  Activity or Event Identifier: Administrative	State MD	Zip Code 21401 NONFEDERAL	Category/ Type SHARE 1250.00 SHARE 3465.00 NonFederal sh	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  3465.00  TOTAL AMOUNT  1250.00  TOTAL AMOUNT

#### SCHEDULE H4 (FEC Form 3X)

### DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE	43	OF	44	
FOR LI	NE 2	1a OF	FORM	зх

NAME OF COMMITTEE (In Full)

111	RST COLONIES ANESTHESIA A	350CI	AIES LLC			$\circ$	VIIVII I I L	==
Α.	Full Name (Last, First, Middle Initial) Tra Barbara Marx Brocato & Associat	ansaction l	D : H4.7525		Allocated	d Activity or ministrative		
	Mailing Address 18 Pinkney Street				Vot	er Drive	Direct	Candidate Suppo
-	,	State	Zip Code		Pul	olic Comm	(ref to party	y only) by PAC
-	Annapolis Purpose of Disbursement:	MD	21401		Alloca	ted Activity	or Event Y	'ear-To-Date
_	Lobbying expense							4715.00
	Activity or Event Identifier: Administrative			Category/ Type	Date	03	25	2013
-	FEDERAL SHARE +	+	NONFEDERAL	SHARE	=	Т	OTAL AMO	UNT
	0.00		, , ,	1250.00		,	,	1250.00
_	Barbara Marx Brocato & Associates	nsaction I	D : H4.7526			d Activity or ministrative	Event:	using Exem
	Mailing Address 18 Pinkney Street				Vot	er Drive	Direct	Candidate Suppo
-	,	State	Zip Code		Pul	olic Comm	(ref to part	y only) by PAC
-	Annapolis Purpose of Disbursement:	MD	21401		Alloca	ted Activity	or Event Y	⁄ear-To-Date
_	Lobbying expense					- ,	,	5965.00
	Activity or Event Identifier: Administrative			Category/ Type	Date	04 /	09	2013
-	EEDEDAL OLIADE L							
	FEDERAL SHARE +	-	NONFEDERAL	SHARE	=	T	OTAL AMO	UNT
	0.00		NONFEDERAL	SHARE 1250.00	] [	T	OTAL AMO	UNT 1250.00
<u>C</u> .	0.00		NONFEDERAL  D: H4.7528		Allocated	d Activity or	Event:	1250.00
_	0.00  Full Name (Last, First, Middle Initial)  Tra		7 7		Allocated		Event:	1250.00
-	Full Name (Last, First, Middle Initial)  Barbara Marx Brocato & Associates  Mailing Address 18 Pinkney Street  City	ansaction I	ID: H4.7528  Zip Code		Allocated  Adr  Vot	d Activity or ministrative er Drive	Event: Fundra Direct	1250.00
-	Full Name (Last, First, Middle Initial)  Barbara Marx Brocato & Associates  Mailing Address 18 Pinkney Street	ansaction I	D : H4.7528		Allocated  Adr  Vot	d Activity or ministrative er Drive	Event: Fundra Direct	1250.00  ising Exem Candidate Suppo
-	Full Name (Last, First, Middle Initial)  Barbara Marx Brocato & Associates  Mailing Address 18 Pinkney Street  City  Annapolis  Purpose of Disbursement:  Contribution	ansaction I	ID: H4.7528  Zip Code		Allocated  Adr  Vot	d Activity or ministrative er Drive	Event: Fundra Direct	1250.00  ising Exem  Candidate Support  y only) by PAC
-	Full Name (Last, First, Middle Initial)  Barbara Marx Brocato & Associates  Mailing Address 18 Pinkney Street  City  Annapolis  Purpose of Disbursement:	ansaction I	ID: H4.7528  Zip Code		Allocated  Adr  Vot	d Activity or ministrative er Drive	Event: Fundra Direct	1250.00  ising Exem Candidate Support y only) by PAC Year-To-Date
-	Full Name (Last, First, Middle Initial)  Barbara Marx Brocato & Associates  Mailing Address 18 Pinkney Street  City  Annapolis  Purpose of Disbursement:  Contribution  Activity or Event Identifier:	State MD	ID: H4.7528  Zip Code	Category/ Type	Allocated  Addr  Vot  Put  Alloca	d Activity or ministrative er Drive olic Comm ted Activity	Event: Fundra Direct (ref to party or Event Y	1250.00  ising Exem Candidate Support y only) by PAC Year-To-Date 7215.00
-	Full Name (Last, First, Middle Initial)  Barbara Marx Brocato & Associates  Mailing Address 18 Pinkney Street  City  Annapolis  Purpose of Disbursement:  Contribution  Activity or Event Identifier:  Administrative	State MD	Zip Code 21401	Category/ Type	Allocated  Adr  Vot  Put  Alloca  Date	d Activity or ministrative er Drive olic Comm ted Activity	Event: Fundra Direct (ref to party or Event Y	1250.00  ising Exem Candidate Support y only) by PAC Year-To-Date 7215.00
-	Full Name (Last, First, Middle Initial)  Barbara Marx Brocato & Associates  Mailing Address 18 Pinkney Street  City Annapolis  Purpose of Disbursement: Contribution  Activity or Event Identifier: Administrative  FEDERAL SHARE  + 0.00	State MD	Zip Code 21401 NONFEDERAL	Category/ Type	Allocated  Adr  Vot  Put  Alloca  Date	d Activity or ministrative er Drive olic Comm ted Activity	Event: Fundra Direct (ref to party or Event Y	1250.00  ising Exem Candidate Support y only) by PAC Year-To-Date 7215.00
-	Full Name (Last, First, Middle Initial)  Barbara Marx Brocato & Associates  Mailing Address 18 Pinkney Street  City  Annapolis  Purpose of Disbursement: Contribution  Activity or Event Identifier: Administrative  FEDERAL SHARE  +	State MD	Zip Code 21401 NONFEDERAL	Category/ Type SHARE 1250.00	Allocated  Adr  Vot  Put  Alloca  Date	d Activity or ministrative er Drive plic Comm ted Activity	Event: Fundra Direct (ref to party or Event Y	1250.00  ising Exem Candidate Support y only) by PAC Year-To-Date 7215.00  2013  UNT 1250.00
-	Full Name (Last, First, Middle Initial)  Barbara Marx Brocato & Associates  Mailing Address 18 Pinkney Street  City Annapolis  Purpose of Disbursement: Contribution  Activity or Event Identifier: Administrative  FEDERAL SHARE +  0.00  BTOTAL of Allocated Federal and NonFederal Activity of Activity of Activity of Activity of Activity of Event Identifier:	State MD	Zip Code 21401 NONFEDERAL	Category/ Type SHARE 1250.00	Allocated  Addr  Vot  Put  Alloca  Date	d Activity or ministrative er Drive plic Comm ted Activity	Event: Fundra Direct (ref to party or Event Y	1250.00  ising Exem Candidate Support y only) by PAC Year-To-Date 7215.00  2013  UNT 1250.00
SU	Full Name (Last, First, Middle Initial)  Barbara Marx Brocato & Associates  Mailing Address 18 Pinkney Street  City Annapolis  Purpose of Disbursement: Contribution  Activity or Event Identifier: Administrative  FEDERAL SHARE  +  0.00  BTOTAL of Allocated Federal and NonFederal Adfred FEDERAL SHARE  +	State MD	Zip Code 21401 NONFEDERAL	Category/ Type SHARE 1250.00 SHARE 3750.00 NonFederal sh	Allocated  Addr  Vot  Put  Alloca  Date  =	d Activity or ministrative er Drive olic Comm (ted Activity)	Event: Fundra Direct (ref to party or Event Y	1250  claising  Candida y only) by Year-To-D  7215  V  UNT  1250  UNT  375

#### SCHEDULE H4 (FEC Form 3X)

### DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE	44	OF	44	
FOR LI	NE 2	1a OF	FORM	зх

NAME OF COMMITTEE (In Full)

F	IRST COLONIES ANESTHESIA ASSOCIATES LI	LC POLITICA	
Α.	Full Name (Last, First, Middle Initial)  Transaction ID: H4.7529	)	Allocated Activity or Event:
	Barbara Marx Brocato & Associates		Administrative Fundraising Exempt
	Mailing Address 18 Pinkney Street		Voter Drive Direct Candidate Support
	City State Zip Coo	de	Public Comm (ref to party only) by PAC
	Annapolis MD 21401		Allocated Activity or Event Year-To-Date
	Purpose of Disbursement: Lobbying expense		8465.00
	Activity or Event Identifier:	Catagany	M = M / D = D / Y = Y = Y
	Administrative	Category/ Type	Date 05 15 2013
	FEDERAL SHARE + NONFEDE	RAL SHARE	= TOTAL AMOUNT
	0.00	1250.00	1250.00
В.	Full Name (Last, First, Middle Initial) Transaction ID : H4.7531		Allocated Activity or Event:
	Barbara Marx Brocato & Associates		Administrative Fundraising Exempt
	Mailing Address 18 Pinkney Street		Voter Drive Direct Candidate Support
	City State Zip Coo	de	Public Comm (ref to party only) by PAC
	Annapolis MD 21401		Allocated Activity or Event Year-To-Date
	Purpose of Disbursement: Lobbying and expense reimbursement		9940.21
	Activity or Event Identifier: Administrative	Category/ Type	Date 06 10 2013
		.,,,,	Date
	FEDERAL SHARE + NONFEDE	RAL SHARE	= TOTAL AMOUNT
	FEDERAL SHARE + NONFEDE		
 C.		RAL SHARE	= TOTAL AMOUNT  1475.21  Allocated Activity or Event:
<u>.</u> .	0.00	RAL SHARE	= TOTAL AMOUNT
c.	Full Name (Last, First, Middle Initial)	1475.21	= TOTAL AMOUNT  1475.21  Allocated Activity or Event: Administrative Fundraising Exempt
<u></u>	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Cod	1475.21	TOTAL AMOUNT  1475.21  Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support
<u> </u>	O.00  Full Name (Last, First, Middle Initial)  Mailing Address	1475.21	TOTAL AMOUNT  1475.21  Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC
c.	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Cod	RAL SHARE 1475.21  de	TOTAL AMOUNT  1475.21  Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
<u></u> с.	O.00  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Cod  Purpose of Disbursement:	1475.21	TOTAL AMOUNT  1475.21  Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC
c.	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Cod  Purpose of Disbursement:  Activity or Event Identifier:	RAL SHARE 1475.21  de  Category/	TOTAL AMOUNT  1475.21  Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
C.	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Cod  Purpose of Disbursement:  Activity or Event Identifier:	RAL SHARE  1475.21  de  Category/ Type	TOTAL AMOUNT  1475.21  Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date  Date
c.	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Cod  Purpose of Disbursement:  Activity or Event Identifier:	RAL SHARE  1475.21  de  Category/ Type	TOTAL AMOUNT  1475.21  Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date  Date
	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Cod  Purpose of Disbursement:  Activity or Event Identifier:	RAL SHARE  1475.21  de  Category/ Type	TOTAL AMOUNT  1475.21  Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date  Date
	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Cod  Purpose of Disbursement:  Activity or Event Identifier:  FEDERAL SHARE + NONFEDE	RAL SHARE  1475.21  de  Category/ Type	TOTAL AMOUNT  1475.21  Allocated Activity or Event: Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date  Date
	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Cod  Purpose of Disbursement:  Activity or Event Identifier:  FEDERAL SHARE + NONFEDE	RAL SHARE  1475.21  de  Category/ Type  RAL SHARE	TOTAL AMOUNT    1475.21
SI	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Cod  Purpose of Disbursement:  Activity or Event Identifier:  FEDERAL SHARE + NONFEDER  JBTOTAL of Allocated Federal and NonFederal Activity This Page FEDERAL SHARE + NONFEDER  0.00  DTAL This Period (last page for each line only)(Federal share to 21(a)(i)	RAL SHARE  1475.21  de  Category/ Type  RAL SHARE  2725.21  and NonFederal sl	TOTAL AMOUNT    Allocated Activity or Event:   Administrative   Fundraising   Exempt     Voter Drive   Direct Candidate Support     Public Comm (ref to party only) by PAC     Allocated Activity or Event Year-To-Date     Date   TOTAL AMOUNT     2725.21     hare to 21(a)(ii))
sı	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Cod  Purpose of Disbursement:  Activity or Event Identifier:  FEDERAL SHARE + NONFEDER  JBTOTAL of Allocated Federal and NonFederal Activity This Page FEDERAL SHARE + NONFEDER  0.00  DTAL This Period (last page for each line only)(Federal share to 21(a)(i)	RAL SHARE  1475.21  Category/ Type  RAL SHARE  2725.21	TOTAL AMOUNT    Allocated Activity or Event:   Administrative   Fundraising   Exempt     Voter Drive   Direct Candidate Support     Public Comm (ref to party only) by PAC     Allocated Activity or Event Year-To-Date     Date   TOTAL AMOUNT     TOTAL AMOUNT     2725.21