11/19/2007 16:57

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE 520 N. NORTHWEST HIGHWAY ADDRESS (number and street) Check if different than previously PARK RIDGE IL 60068 reported. (ACC) FEC IDENTIFICATION NUMBER STATE A ZIPCODE 🛋 CITY A IS THIS **AMENDED** NEW C00255752 Х REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 10 0 1 2007 10 3 1 2007 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. RICHARD BARWACZ Type or Print Name of Treasurer Electronically Filed by RICHARD BARWACZ 11 19 2007 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003) Only

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE [®] D " D 1.0 0 1 2007 1.0 3 1 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand [°]2007 631987.13 January 1 (b) Cash on Hand at 820209.86 Begining of Reporting Period 362982.67 1711662.01 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 1183192.53 2343649.14 6(a) and 6(c) for Column B) 73202.22 1233658.83 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 1109990.31 1109990.31 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D)

10. Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D)

0.00

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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. 02/2003) Page 3

Write or Type Committee Name

(subtract Line 18(c) from Line 19)

AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE

0 1 M N м м 1 0 3^D1 2007 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 232561.00 800576.00 (i) Itemized (use Schedule A) 26875.50 172611.00 (ii) Unitemized (iii) TOTAL (add 259436.50 973187.00 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 259436.50 973187.00 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 103546.17 738475.01 (Dividends, Interest, etc.) 18. 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 Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 362982.67 1711662.01 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 362982.67 1711662.01

DETAILED SUMMARY PAGE

of Disbursements

Page 4

FEC Form 3X (Rev. 02/2003)

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1.	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	0.00	9000.00
	Expenditures(c) Total Operating Expenditures	0.00	9000.00
	(add 21(a)(i), (a)(ii) and (b))	0.00	9000.00
2.	Transfers to Affiliated/Other Party		
3	Committees Contributions to	0.00	0.00
Ο.	Federal Candidates/Committeesand Other Political Committees	71000.00	590000.00
4.	Independent Expenditure	7 1000.00	
-	(use Schedule E)	0.00	0.00
Э.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d))	0.00	0.00
	(use Schedule F)		
6.	Loan Repayments Made	0.00	0.00
7.	Loans Made	0.00	0.00
3.	Refunds of Contributions To: (a) Individuals/Persons Other	0.00	0.00
	Than Political Committees	0.00	0.00
	(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
	(add Lines 20(a), (b), and (c))		
9.	Other Disbursements	2202.22	634658.83
0.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.0
	(i) Federal Share	0.00	
	(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	2.22	
	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))	73202.22	1233658.8
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) from Line 30(a)(ii)		
		73202.22	1233658.83

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
33.	Total Contributions (other than loans) from Line 11(d), page 3)	259436.50	973187.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
5.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	259436.50	973187.00
6.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	9000.00
7.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	9000.00

PAGE 6 / 191 FOR LINE NUMBER: SCHEDULE A (FEC Form 3X) Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 l 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) BASEM ABDELMALAK Date of Receipt Mailing Address 14780 MORGAN TRL 2007 10 13 Zip Code City State Transaction ID: SA11A1.55919 **NOVELTY** OH 44072 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer CLEVELAND CLINIC Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** JOHN ABENSTEIN Date of Receipt Mailing Address 10978 11TH AVE NW 3 1 2007 City Zip Code State Transaction ID: SA11A1.56917 **ORONOCO** MN 55960 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. BRUCE ADELMAN Date of Receipt Mailing Address 4896 WOODCLIFF HILL RD 10 13 2007 Citv State Zip Code Transaction ID: SA11A1.55993 W BLOOMFIELD MΙ 48323 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer PHYS ANES SERV Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

PAGE 7 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 l 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) VIRGIL AIROLA Date of Receipt Mailing Address 3841 W LOCUST 2007 10 13 City State Zip Code Transaction ID: SA11A1.55912 **FRESNO** CA 93711 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer PEDIATRIC ANES ASSOC Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** RICHARD ALBERTSON Date of Receipt Mailing Address GREEN HILL EC306 15 2007 City Zip Code Transaction ID: SA11A1.56484 State **WYNNEWOOD** PA 19096 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer RETIRED Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. PATRICK ALLAIRE Date of Receipt Mailing Address 58991 296TH ST 14 10 2007 Citv State Zip Code Transaction ID: SA11A1.56360 **CAMBRIDGE** IΑ 50046 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer MCFARLAND CLINIC Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

PAGE 8 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 l 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) HUGH ALLEN Date of Receipt Mailing Address 1924 46TH AVE SW 10 2007 13 City State Zip Code Transaction ID: SA11A1.56004 **SEATTLE** WA 98116 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer VIRGINIA MASON Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. ROBERT ALLEN Date of Receipt Mailing Address 445 W GLEN PL 13 2007 City State Zip Code Transaction ID: SA11A1.55893 **RAPID CITY** SD 57702 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer RAPID CITY REG HOSP Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. JOHN ALLYN Date of Receipt Mailing Address 43 GLENVIEW RD 10 13 2007 Zip Code Citv State Transaction ID: SA11A1.55921 **CUMBERLAND** ME 04021 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer SPECTRUM MED GRP Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

PAGE 9 / 191 FOR LINE NUMBER: SCHEDULE A (FEC Form 3X) Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 l 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) GEORGE ALVAREZ Date of Receipt Mailing Address 5323 BAYSHORE BLVD #D 2007 10 13 City State Zip Code Transaction ID: SA11A1.56053 **TAMPA** 33611 FI Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer FLORIDA PED ASSOC Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** DAVID ANDERSON Date of Receipt Mailing Address 10720 NALL AVE 12 2007 City State Zip Code Transaction ID: SA11A1.55643 **OVERLAND PARK** KS 66211 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer HSSA Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) C. STEVEN ANDEWEG Date of Receipt Mailing Address 31 CARRIAGE LN 10 13 2007 Zip Code Citv State Transaction ID: SA11A1.56091 **HANOVER** NH 03755 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer DH CLINIC Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

2500.00

	ULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: (check only one) X 11a 11b	PAGE 10 / 191
			Detailed Summary Page	13 14	15 16 17
Any information for for comm	ation copied from such Reports and Stat nercial purposes, other than using the na	ements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of solic solicit contributions from	iting contributions such committee.
\	OF COMMITTEE (In Full) ICAN SOCIETY OF ANESTHESIO	DLOGISTS	S POLITICAL ACTION COM	MITTEE	
A. JOSEPH	ne (Last, First, Middle Initial)			Date of Receipt	
	Address 60 KIRBY DR			10 14	1 - 4 - 1
City ELIZAI	BETHTOWN	State PA	Zip Code 17022	Transaction ID: Sa Amount of Each Re	
	number of contributing political committee.	C			250.00
Name of RIVERS	f Employer SIDE ANES ASSOC	Occupation ANESTH	n ESIOLOGIST		
	For: imary General ther (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00		
3. JOSEPH	ne (Last, First, Middle Initial) I ANTOGNINI			Date of Receipt	
Mailing A	Address 2375 SHOREWOOD ST	'		10 14	$\begin{array}{cccccccccccccccccccccccccccccccccccc$
CARM	ICHAEL	Zip Code	Transaction ID: SA11A1.56302		
FEC ID	ICHAEL number of contributing political committee.	CA	95608	Amount of Each Re	1000.00
Name of UC DAV	f Employer /IS	Occupation PHYSICI			
	For: imary General ther (specify)		Year-to-Date ▼ 1000.00		
	ne (Last, First, Middle Initial) Y APFELBAUM			Date of Receipt	
	Address 2560 GREENVIEW			M M / D D D 1 2	2007
City	HBROOK	State	Zip Code 60062	Transaction ID: S	
FEC ID	number of contributing political committee.	C	00002	Amount of Each Re	500.00
Name of UNIV O	f Employer F CHICAGO	Occupation PHYSICI		1	
	For: imary General ther (specify) ▼	Aggregate	Year-to-Date ▼ 500.00		
SUBTOTA	AL of Receipts This Page (optional)				1750.00
TOTAL T	nis Period (last page this line number or	lv)			

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 11 / 191
	EMIZED RECEIPTS		or each category of the	(check only one)
••	LIMIZED FIEGEN 10		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Ar	ny information copied from such Reports and State	ements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the na	ame and add	aress or any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		C DOLUTION ACTION COM	MITTEE
	AMERICAN SOCIETY OF ANESTHESIC	JLUGISTS	S POLITICAL ACTION COM	MITTEE
_	Full Name (Last, First, Middle Initial)			Data of Baselet
Α.	HERNANDO ARANDIA Mailing Address 2532 MOCCASIN PATH			Date of Receipt
				10 15 2007
	City	State	Zip Code	Transaction ID: SA11A1.56469
	LIVERPOOL	NY	13090	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer CNY ANESTH	Occupation	1	7
		l	ESIOLOGIST	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
	suisi (eposily) V	0 0	0 0 0 0 0 0 0	1
В.	Full Name (Last, First, Middle Initial) DON ARNOLD			Date of Receipt
	Mailing Address 469 CONWAY VILLAGE	10 13 7 2007		
	City	State	Zip Code	Transaction ID: SA11A1.55951
	ST LOUIS	MO	63141	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer WAAI	Occupation		7
			ESIOLOGIST • Year-to-Date ▼	_
	Receipt For: Primary General	Aggregate	rtear-to-Date V	1
	Other (specify)		500.00	
_				
C.	Full Name (Last, First, Middle Initial) WILLIAM ARNOLD			Date of Receipt
٠.	Mailing Address 106 WHETSTONE PL			M M / D D / Y Y Y Y
				10 13 2007
	City CHARLOTTESVILLE	State VA	Zip Code 22901	Transaction ID: SA11A1.56082
			22301	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer UNIV OF VIRGINIA	Occupation PHYSICI		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify) ▼	0 0	300.00	
Г				
s	UBTOTAL of Receipts This Page (optional)			1500.00
				
ΙT	OTAL This Period (last page this line number on	ııy)	.	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 12 / 191
	EMIZED RECEIPTS		or each category of the	(check only one)
•			Detailed Summary Page	X 11a 11b 11c 12 17 18 17 18 17 18 17 18 17 18 18
Ai	ny information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any person	on for the purpose of soliciting contributions
7	NAME OF COMMITTEE (In Full)	ine and add	aress or arry political committee to	Solicit contributions from Such committee.
	AMERICAN SOCIETY OF ANESTHESIC	LOGISTS	S POLITICAL ACTION COM	MITTEE
`	Full Name (Last, First, Middle Initial)			
Α.	BRETT ARRON Mailing Address 52 LAKE ST			Date of Receipt
	Maining Address 52 LAKE ST			10 15 2007
	City	State	Zip Code	Transaction ID: SA11A1.56549
	WAKEFIELD	RI	02879	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer SELF-EMPLOYED	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
— В.	Full Name (Last, First, Middle Initial) SANA ATA			Date of Receipt
	Mailing Address 41 MALL RD			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.55831
	BURLINGTON	MA	01805	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer LAHEY CLINIC	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		250.00	
<u> </u>	Full Name (Last, First, Middle Initial) DOUGLAS BACON			Date of Receipt
٠.	Mailing Address 2121 NORTHVIEW LN N	IE		M M / D D / Y Y Y Y
	0.0		7: 0 1	10 13 2007
	City ROCHESTER	State MN	Zip Code 55906	Transaction ID: SA11A1.55935 Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		750.00
	Name of Employer MAYO CLINIC	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		750.00	
s	L::UBTOTAL of Receipts This Page (optional)		\	1500.00
	. 5 ,			
T	OTAL This Period (last page this line number on	ly)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 13 / 191
	EMIZED RECEIPTS		or each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An	y information copied from such Reports and State	ments may	not be sold or used by any perso	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the nan	ne and add	iress or any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full) AMERICAN SOCIETY OF ANESTHESIO	OGISTS	S POLITICAL ACTION COM	MITTEE
_	ANESTIESIO		T GEITIGAL ACTION GOIM	WILLIE
۸.	Full Name (Last, First, Middle Initial) CAROLYN BANNISTER			Date of Receipt
••	Mailing Address 5888 ASHRIDGE CT			M M / D D / Y Y Y
				10 13 2007
	City STONE MTN	State GA	Zip Code	Transaction ID: SA11A1.56049
			30087	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	EMORY HEALTHCARE	Occupation ANESTH	ESIOLOGIST	
			Year-to-Date ▼	-
	Primary General	-	500.00	
	Other (specify) ▼	0 0	500.00	
3.	Full Name (Last, First, Middle Initial) DAVID BARINHOLTZ			Date of Receipt
	Mailing Address 1536 N WIELAND ST			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State		Zip Code	Transaction ID: SA11A1.56350
	CHICAGO	IL	60610	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer MOBILE ANESTH	Occupation	1	7
			ESIOLOGIST	
		Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
		0 0		
 :	Full Name (Last, First, Middle Initial) STEVEN BARKER			Date of Receipt
	Mailing Address 5366 N. SUNDOWN DR.			M M / D D / Y Y Y Y
		O 1 :	7' 0 /	10 30 2007
	City TUCSON	State AZ	Zip Code 85718	Transaction ID: SA11A1.56812
			00/ 10	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
		Occupation		7
		PHYSICIA		-
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼	0 0	500.00	
				1500.00
S	UBTOTAL of Receipts This Page (optional)		<u> </u>	1300.00
T	OTAL This Period (last page this line number only	d		

SCHEDULE A (FEC Form 3X)		Lisa saparata sabadula(s)	FOR LINE NUMBER: PAGE 14 / 191
ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) AMERICAN SOCIETY OF ANESTHES	IOLOGISTS	S POLITICAL ACTION COM	MITTEE
Full Name (Last, First, Middle Initial) JARED BARLOW Mailing Address 41 MORNINGSIDE DR			Date of Receipt
City	State	Zip Code	1 0 1 2 2 0 0 7 Transaction ID: SA11A1.55673
GRAND ISLAND FEC ID number of contributing federal political committee.	C	14072	Amount of Each Receipt this Period 500.00
Name of Employer UNIV AT BUFFALO		IESIOLOGIST	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) RODGER BARNETTE Mailing Address 1202 STRATFORD AVI	=		Date of Receipt
		7'- 0-4-	10 13 2007
City ELKINS PARK	State PA	Zip Code 19027	Transaction ID: SA11A1.55867 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer TEMPLE UNIV	Occupation		
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) C. CURTIS BAYSINGER			Date of Receipt
Mailing Address 215 CANTRELL AVE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City NASHVILLE	State TN	Zip Code 37205	Transaction ID: SA11A1.56681 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	0,200	250.00
Name of Employer VANDERVILT UNIV	Occupation PHYSICI		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)			1250.00
TOTAL This Period (last page this line number of	only)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 15/191
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_			Detailed Summary Page	13 14 15 16 17
Ar or	y information copied from such Reports and Stateme for commercial purposes, other than using the name	ents may and add	not be sold or used by any perso ress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)			
/	AMERICAN SOCIETY OF ANESTHESIOLO	OGISTS	POLITICAL ACTION COM	MITTEE
۹.	Full Name (Last, First, Middle Initial) JAMES BECKER			Date of Receipt
	Mailing Address 1215 PLEASANT ST #400			10 13 7 2007
	•	State	Zip Code	Transaction ID: SA11A1.56083
	FFC ID number of contribution	<u>IA</u>	50309	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C .		1000.00
	SELE-EMDI, OAED	ccupation NESTHE	ESIOLOGIST	
	Receipt For: Ag	ggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.00	
3.	Full Name (Last, First, Middle Initial) KARL BECKER			Date of Receipt
	Mailing Address 11708 HIGH DR			10 13 YYYYY 2007
		State	Zip Code	Transaction ID: SA11A1.56065
		KS	66211	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			500.00
	KANGAG I IKIIV ANEG	ccupation NESTHE	: ESIOLOGIST	
		ggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
).	Full Name (Last, First, Middle Initial) RODERICK BEER			Date of Receipt
	Mailing Address 3966 HOLDEN DR			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	•	State	Zip Code	Transaction ID: SA11A1.56205
		MI	48103	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			250.00
	ANIES ASSÁCIANNI ADROD	ccupation NESTHE	ESIOLOGIST	
		ggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
s	UBTOTAL of Receipts This Page (optional)		.	1750.00
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PAGE 16 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) BRION BEERLE Date of Receipt Mailing Address P.O. BOX 212289 2007 10 14 City State Zip Code Transaction ID: SA11A1.56289 **ANCHORAGE** 99521 AK Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer CHUGACH ANESTH Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. TIM BEGER Date of Receipt Mailing Address 6114 MONTECITO AVE 14 2007 City State Zip Code Transaction ID: SA11A1.56352 **SCOTTSDALE** ΑZ 85251 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer VALLEY ANES CONSULT Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. EILEEN BEGIN Date of Receipt Mailing Address 314 ELLSWORTH DR 10 13 2007 Citv State Zip Code Transaction ID: SA11A1.56020 SILVER SPRING MD 20910 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer WASHINGTON HOSP Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 2000.00 SUBTOTAL of Receipts This Page (optional)

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 17/191
	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
	-		Detailed Summary Page	13 14 15 16 17
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$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	AMERICAN SOCIETY OF ANESTHESIC	LOGISTS	S POLITICAL ACTION COM	MITTEE
۹.	Full Name (Last, First, Middle Initial) MORDECHAI BERMANN			Date of Receipt
	Mailing Address 7 PLYMOUTH LN			10 14 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.56455
	E BRUNSWICK	NJ	08816	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer UMDNJ	Occupation PHYSICI.		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	500.00	
3.	Full Name (Last, First, Middle Initial) ARNOLD BERRY			Date of Receipt
	Mailing Address 30 BATTLERIDGE DR			10 14 2007
	City	State	Zip Code	Transaction ID: SA11A1.56380
	ATLANTA	GA	30342	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer EMORY HEALTHCARE	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
 C.	Full Name (Last, First, Middle Initial) JOHN BIANROSE			Date of Receipt
	Mailing Address 2121 RACE ST			10 13 2007
	City	State	Zip Code	Transaction ID: SA11A1.55966
	PHILADELPHIA	PA	19103	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer UNIV OF PENN	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
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PAGE 18 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) DAN BIGGS Date of Receipt Mailing Address 7912 NW 39TH ST 3 1 2007 10 City State Zip Code Transaction ID: SA11A1.56843 **WOODLAWN PARK** OK 73008 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer UNIV OF OKLAHOMA Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. WENDY BINSTOCK Date of Receipt Mailing Address 1122 W MONTANA ST 12 2007 City State Zip Code Transaction ID: SA11A1.55645 **CHICAGO** IL 60614 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer UNIV OF CHICAGO Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. JAMES BLAIR Date of Receipt Mailing Address 8251 RIVER RD PIKE 14 10 2007 City State Zip Code Transaction ID: SA11A1.56338 **NASHVILLE** TN 37209 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer VANDERBILT Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

PAGE 19 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) MARY BOLDEN Date of Receipt Mailing Address 124 CROFTON DR 2007 10 13 City State Zip Code Transaction ID: SA11A1.55837 **PITTSBURGH** PA 15238 Amount of Each Receipt this Period FEC ID number of contributing 300.00 C federal political committee. Name of Employer PITTSBURGH ANES ASSOC Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. PAUL BONACCI Date of Receipt Mailing Address 735 S HARRISON ST 16 2007 City State Zip Code Transaction ID: SA11A1.56672 <u>DENVE</u>R CO 80209 Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Name of Employer KAISER Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date V Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) C. JON BOTTS Date of Receipt Mailing Address 4322 MARQUETTE DR 10 10 2007 Zip Code City State Transaction ID: SA11A1.55531 **MOBILE** ΑL 36608 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer ANESTH SERVICES Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 850.00 SUBTOTAL of Receipts This Page (optional)

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\setminus	NAME OF COMMITTEE (In Full)			
\rangle	AMERICAN SOCIETY OF ANESTHES	OLOGISTS	S POLITICAL ACTION COM	MITTEE
Α.	Full Name (Last, First, Middle Initial) ARTHUR BOUDREAUX			Date of Receipt
	Mailing Address 4493 PRESERVE DR			10 / D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.55666
	HOOVER	AL	35226	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer UABHSF	Occupation PHYSICI		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
— В.	Full Name (Last, First, Middle Initial) GREGORY BOUSKA			Date of Receipt
	Mailing Address 3000 BOGEY CIR			M M / D D / Y Y Y Y Y 1 Y 1 1 0 1 1 4 2 0 0 7
	City	State	Zip Code	Transaction ID: SA11A1.56276
	HAMPTON COVE	AL	35763	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer COMP ANES SERV	Occupation	n ESIOLOGIST	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	500.00	
<u> </u>	Full Name (Last, First, Middle Initial) EDWIN BOWE			Date of Receipt
	Mailing Address 2151 MACKEY PIKE			10 DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.56776
	NICHOLASVILLE	KY	40356	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer UNIVERSITY OF KENTUCKY	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	500.00	
S	UBTOTAL of Receipts This Page (optional)			1500.00

TOTAL This Period (last page this line number only)

PAGE 21 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) MICHAEL BOYER Date of Receipt Mailing Address 4 CLARK BASS BLVD#205 15 2007 10 City State Zip Code Transaction ID: SA11A1.56547 **MCALESTER** OK 74501 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer SELF-EMPLOYED Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. PHILIP BOYLE Date of Receipt Mailing Address 3069 JOYCE ST 13 2007 City Zip Code Transaction ID: SA11A1.55854 State ST CLOUD MN 56303 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer ANES ASSOC ST CLOUD Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. CHRISTOPHER BRACKEN Date of Receipt Mailing Address 9960 OAKLAND RD 10 13 2007 Citv State Zip Code Transaction ID: SA11A1.55734 SAN ANTONIO TX 78240 Amount of Each Receipt this Period FEC ID number of contributing 300.00 C federal political committee. Name of Employer UNIV OF TEXAS Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 1300.00 SUBTOTAL of Receipts This Page (optional)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 191 (check only one) X 11a 11b 11c 12
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Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) AMERICAN SOCIETY OF ANESTHESI	MITTEE		
Α.	Full Name (Last, First, Middle Initial) THOMAS BRALLIAR			Date of Receipt
	Mailing Address 22089 SHAKER BLVD			10 09 2007
	City SHAKER HTS	State OH	Zip Code 44122	Transaction ID: SA11A1.55484 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer CLEVELAND CLINIC	Occupation PHYSICI		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) JOHN BRAMHALL			Date of Receipt
	Mailing Address 1723 32ND AVE S			10 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.55906
	SEATTLE	WA	98144	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer U OF WASHINGTON	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
<u> </u>	Full Name (Last, First, Middle Initial) JEFFREY BRAND			Date of Receipt
	Mailing Address 44 PLEASANT ST			10 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.55985
	MARBLEHEAD	MA	01945	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer ANES ASSOC OF MASS	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	500.00	
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or	for commercial purposes, other than using the name	e and add	iress of any political committee to	solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)	001070	DOLUTION ACTION COM	MITTEE		
/	AMERICAN SOCIETY OF ANESTHESIOL	OGISTS	S POLITICAL ACTION COM	WILLIEE		
<u>_</u>	Full Name (Last, First, Middle Initial)					
Α.	ROBERT BRANDT			Date of Receipt		
	Mailing Address 741 MAYFAIR LN			10 15 2007		
	City	State	Zip Code	Transaction ID: SA11A1.56482		
	CARMEL	IN	46032	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		500.00		
	Name of Employer OANES CONSULT INDIANAP	ccupation	1	\dashv		
	ANES CONSULT INDIANAP	HYSICI	AN			
		Aggregate	Year-to-Date ▼			
	Primary General Other (specify)		500.00			
	Other (specify)	0 0	0 0 0 0 0 0 0			
В.	Full Name (Last, First, Middle Initial) EDWARD BRATZKE			Date of Receipt		
	Mailing Address 4761 SHARPSTONE LN			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: SA11A1.56473		
	RALEIGH	NC	27615	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		500.00		
		ccupation HYSICI		7		
	· · · · · · · · · · · · · · · · · · ·		Year-to-Date ▼	-		
	Primary General	iggi ogalo		1		
	Other (specify) ▼		500.00			
_	Full Name (Last, First, Middle Initial)					
C.	STANLEY BRAUER			Date of Receipt		
	Mailing Address 11781 WELEBIR ST			10 14 2007		
	•	State	Zip Code	Transaction ID: SA11A1.56222		
		CA	92354	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		500.00		
		ccupation	n ESIOLOGIST			
		Aggregate	Year-to-Date ▼			
	Primary General		500.00			
	Other (specify) ▼	0 0				
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_	NAME OF COMMITTEE (In Full)			
\rangle	AMERICAN SOCIETY OF ANESTHESIC	MITTEE		
٩.	Full Name (Last, First, Middle Initial) DIRK BROM			Date of Receipt
	Mailing Address 3320 FOXLEY DR			10 13 2007
	City	State	Zip Code	Transaction ID: SA11A1.55873
	AMES	IA	50010	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer VA MED CTR	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	1 1	500.00	
	Other (specify) ▼	0 0	500.00	
3.	Full Name (Last, First, Middle Initial) BRUCE BROOKENS			Date of Receipt
	Mailing Address P.O. BOX 1217			10 13 7 2007
	City	State	Zip Code	Transaction ID: SA11A1.55880
	ENGLEWOOD	CO	80150	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer SO DENVER ANESTH	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
 C.	Full Name (Last, First, Middle Initial) RONALD BROWN			Date of Receipt
Mailing Address 3454 LOYOLA LANE				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.55344
	MOBILE	AL	36608	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer ANESTHESIA SERVICES	Occupation ANESTH	n ESIOLOGIST	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼		500.00	
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Ar or	ly information copied from such Reports and State for commercial purposes, other than using the na	for the purpose of soliciting contributions plicit contributions from such committee.						
\setminus	NAME OF COMMITTEE (In Full)							
\rangle	AMERICAN SOCIETY OF ANESTHESIC	LOGISTS	S POLITICAL ACTION C	OMM	ITTEE			
Α.	Full Name (Last, First, Middle Initial) PATRICIA BROWNE	Date of Receipt						
	Mailing Address 559 ATSIM RD	10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
	City	State	Zip Code		Transaction ID: SA11A1.56629			
	SHAMONG	NJ	08088		Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C			250.00			
	Name of Employer CHILDRENS HOSP OF PA	Occupation ANESTH	ESIOLOGIST					
	Receipt For:	Aggregate	Year-to-Date ▼					
	Primary General		050.00					
	Other (specify) ▼		250.00	J				
В.	Full Name (Last, First, Middle Initial) RICHARD BROWNING	Date of Receipt						
	Mailing Address 359 RUMSTICK RD	10 15 2007						
	City	State	Zip Code		Transaction ID: SA11A1.56558			
	BARRINGTON	RI	02806		Amount of Each Receipt this Period			
	FEC ID number of contributing	C			250.00			
	federal political committee.				250.00			
	Name of Employer PAI	Occupation PHYSICI.	AN					
	Receipt For:	Aggregate	Year-to-Date ▼					
	Primary General		250.00)				
	Other (specify)		250.00					
_	Full Name (Last, First, Middle Initial)				Data of Descipt			
C.	BRIAN BUEHLER Mailing Address 4317 CAUGHI IN PKWY				Date of Receipt			
	Mailing Address 4317 CAUGHLIN PKWY		10 16 2007					
	City	State	Zip Code		Transaction ID: SA11A1.56688			
	RENO	NV	89519		Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1		250.00			
	Name of Employer AAR	Occupation ANESTH	ESIOLOGIST					
	Receipt For:		Year-to-Date ▼					
	Primary General	-						
	Other (specify) ▼		250.00	J				
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l s	UBTOTAL of Receipts This Page (optional)			•	750.00			

PAGE 26 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) CARRIE BUEHLER Date of Receipt Mailing Address 4317 CAUGHLIN PKWY 2007 10 16 City State Zip Code Transaction ID: SA11A1.56670 **RENO** NV 89519 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** AMANDA BURDEN Date of Receipt Mailing Address 312 S SMEDLEY ST 13 2007 City State Zip Code Transaction ID: SA11A1.56071 **PHILADELPHIA** PA 19103 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer COOPER UNIV HEALTH Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. FREDERICK BURGESS Date of Receipt Mailing Address 593 EDDY ST 10 15 2007 Zip Code Citv State Transaction ID: SA11A1.56553 **PROVIDENCE** RI 02903 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer PROVIDENCE ANESTH Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

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\rangle	AMERICAN SOCIETY OF ANESTHESIC	MITTEE				
^	Full Name (Last, First, Middle Initial)			Date of Receipt		
Α.	JOHN BUTTERWORTH Mailing Address 1401 GOLDEN HILL DR			M M / D D	/ Y Y Y Y	
				10 13	2007	
	City INDIANAPOLIS	State IN	Zip Code 46208	Transaction ID: SA11A1.56025 Amount of Each Receipt this Period		
	FEC ID number of contributing		10200	Amount of Lach Rec		
	federal political committee.	C			500.00	
	Name of Employer INDIANA UNIV SCHL MED	Occupation PHYSICI.				
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General Other (specify) ▼		500.00			
В.	Full Name (Last, First, Middle Initial) ASOKUMAR BUVANENDRAN			Date of Receipt		
	Mailing Address 45 E BIRCHWOOD AVE	10 D D D 12	2007			
	City	State	Zip Code	Transaction ID: SA	I1A1.55625	
	HINSDALE	IL	60521	Amount of Each Rec	eipt this Period	
	FEC ID number of contributing federal political committee.	C			250.00	
	Name of Employer RUSH UNIV	Occupation ANESTH	n ESIOLOGIST			
		Aggregate	e Year-to-Date ▼			
	Primary General Other (specify) ▼		250.00			
	Cutor (specify)	0 0				
_	Full Name (Last, First, Middle Initial) KYLE BYRNE			Date of Receipt		
U.	Mailing Address 69 RUGGLES STREET			M M / D D	/ Y Y Y Y	
			7: 0 !	10 03	2007	
	City WESTBOROUGH	State MA	Zip Code 01581	Transaction ID: SA		
	FEC ID number of contributing		1 1 1 1 1	Amount of Lacri Nec	 	
	federal political committee.	С			250.00	
	Name of Employer COMMONWEALTH ANESTHESIA ASSOC.	Occupation PHYSICI.				
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General Other (specify) ▼		250.00			
			0 0 0 0 0 0 0			
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\setminus	NAME OF COMMITTEE (In Full)			
$ \rangle$	AMERICAN SOCIETY OF ANESTHES	IOLOGISTS	S POLITICAL ACTION COM	MITTEE
\angle				
Α.	Full Name (Last, First, Middle Initial) MARK CADE			Date of Receipt
	Mailing Address 6921 N 118TH CIR			M M / D D / Y Y Y Y
				10 09 2007
	City	State	Zip Code	Transaction ID: SA11A1.55486
	OMAHA	NE	68142	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Tederal political committee.			
	Name of Employer MEDICAL ANES ASSOC	Occupation		
			ESIOLOGIST	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	-
	Other (specify)		250.00	
ь	Full Name (Last, First, Middle Initial)			Date of Descript
Ь.	STEPHEN CAMPBELL Mailing Address 545 BEVERLY DR			Date of Receipt
	Mailing Address 545 BEVERLY DR			10 09 2007
	City	State	Zip Code	Transaction ID: SA11A1.55464
	SUMMERVILLE	SC	29485	Amount of Each Receipt this Period
	FEC ID number of contributing	C		100.00
	federal political committee.			
	Name of Employer ANES ASSOC CHARLESTON	Occupation	n	
			ESIOLOGIST	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		600.00	
	Canon (openity)			-
_	Full Name (Last, First, Middle Initial)			
C.	EDGAR CANADA			Date of Receipt
	Mailing Address 5093 VIA CINTA			10 13 2007
	City	State	Zip Code	Transaction ID: SA11A1.55940
	SAN DIEGO	CA	92122	Amount of Each Receipt this Period
	FEC ID number of contributing			500.00
	federal political committee.	C		300.00
	Name of Employer ANESTHESIA SERVICE MEDICAL	Occupation	n	
	GROUP ANESTHESIA SERVICE MEDICAL	PHYSICI	AN	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
	☐ Other (specify) ▼	0 0		1
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PAGE 29 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) CHRISTEL CARLSON Date of Receipt Mailing Address 10710 S SHERMAN RD 10 2007 14 City State Zip Code Transaction ID: SA11A1.56435 **SPOKANE** WA 99224 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer PHYS ANES GRP Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. RICHARD CARR Date of Receipt Mailing Address 262 WYNDHAM CIR 13 2007 City State Zip Code Transaction ID: SA11A1.55897 **NEW BRIGHTON** MN 55112 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer
TWIN CITIES ANES ASSOC Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. JOSEPH CASSADY Date of Receipt Mailing Address 1215 PLEASANT ST #400 10 13 2007 Citv State Zip Code Transaction ID: SA11A1.55947 **DES MOINES** IΑ 50309 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer ASSOC ANESTH Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)

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\setminus	NAME OF COMMITTEE (In Full) AMERICAN SOCIETY OF ANESTHESIO	LOGISTS	S POLITICAL ACTION COM	MITTEE
Α.	Full Name (Last, First, Middle Initial) ELIZABETH CAVANAGH			Date of Receipt
	Mailing Address 9860 OAKHAVEN AVE			M M / D D / Y Y Y Y Y Y 1 Y 1 1 1 1 1 1 1 1 1 1 1
	City	State	Zip Code	Transaction ID: SA11A1.56358
	ST LOUIS FEC ID number of contributing federal political committee.	MO C	63119	Amount of Each Receipt this Period 500.00
	Name of Employer WESTERN ANES ASSOC	Occupation ANESTH	n ESIOLOGIST	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) MICHAEL CHAMPEAU			Date of Receipt
	Mailing Address 1325 HOWARD PMB 516	10 13 2007		
	City	State	Zip Code	Transaction ID: SA11A1.55695
	BURLINGAME FOOLD records of a contribution	CA	94010	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer ASSOC ANESTH	Occupation ANESTH	1 ESIOLOGIST	
			e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
<u> </u>	Full Name (Last, First, Middle Initial) MICHAEL CHAMPEAU			Date of Receipt
	Mailing Address 1325 HOWARD PMB 516	3		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.55861
	BURLINGAME FEC ID number of contributing	CA	94010	Amount of Each Receipt this Period
	federal political committee.	C		500.00
	ACCOC ANIFOTH	Occupation ANESTH	n ESIOLOGIST	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
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PAGE 31 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) MICHAEL CHAMPEAU Date of Receipt Mailing Address 1325 HOWARD PMB 516 26 2007 10 City Zip Code State Transaction ID: SA11A1.56796 **BURLINGAME** CA 94010 Amount of Each Receipt this Period FEC ID number of contributing -500.00 C federal political committee. Name of Employer ASSOC ANESTH Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. CLAIRE CHANDLER Date of Receipt Mailing Address 41 KINGSWAY AVE 12 2007 City State Zip Code Transaction ID: SA11A1.56926 **WINNIPEG** ZZ Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer PROVIDENCE HOSPITAL Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. JAMES CHAPIN Date of Receipt Mailing Address 1426 N. 133RD ST. 10 02 2007 City State Zip Code Transaction ID: SA11A1.55372 **OMAHA** NE 68154 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer UNIVERSITY OF NEBRASKA ME-Occupation ANESTHESIOLOGIST DICAL CENTER Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 250.00 SUBTOTAL of Receipts This Page (optional)

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PAGE 32 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) NIELS CHAPMAN Date of Receipt Mailing Address 1538 EAGLE RIDGE PT NE 2007 10 13 City Zip Code Transaction ID: SA11A1.55839 State **ALBUQUERQUE** NM 87122 Amount of Each Receipt this Period FEC ID number of contributing 300.00 C federal political committee. Name of Employer UNM Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** GREGORY CHARLOP Date of Receipt Mailing Address 680 MISSION STREET 8 0 2007 33 S City State Zip Code Transaction ID: SA11A1.55417 SAN FRANCISCO CA 94105 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer KAISER Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. CHARLES CHASE Date of Receipt Mailing Address 2065 VENETIAN WAY 10 13 2007 Citv State Zip Code Transaction ID: SA11A1.56084 WINTER PARK FI 32789 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer AGO Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1550.00 SUBTOTAL of Receipts This Page (optional)

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$\overline{\rangle}$	NAME OF COMMITTEE (In Full) AMERICAN SOCIETY OF ANESTHESIC	MITTEE			
<u>′</u> ۵.	Full Name (Last, First, Middle Initial) JOHN CHATELAIN			Date of Receipt	
	Mailing Address 1319 S 9TH ST	Chaha	7in Oada	10 08 2	007
	City FARGO	State ND	Zip Code 58103	Transaction ID: SA11A1.55 Amount of Each Receipt this F	
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1 1		85.00
	Name of Employer MERIT CARE	Occupation ANESTH	n ESIOLOGIST		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 510.00		
3.	Full Name (Last, First, Middle Initial) DAVID CHEEK			Date of Receipt	
	Mailing Address 14311 NW DUNBAR LN		007		
	City PORTLAND	State OR	Zip Code 97231	Transaction ID: SA11A1.56	
	FEC ID number of contributing federal political committee.	C	97251	Amount of Each Receipt this F	500.00
	Name of Employer OREGON ANES GRP	Occupation PHYSICI.			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00		
).	Full Name (Last, First, Middle Initial) JACQUES CHELLY			Date of Receipt	
Mailing Address 631 PITCAIRN PL				10 13 2	007
	City PITTSBURGH	State PA	Zip Code 15232	Transaction ID: SA11A1.55 Amount of Each Receipt this F	
	FEC ID number of contributing federal political committee.	C			600.00
	Name of Employer UPMC		ESIOLOGIST		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00		
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PAGE 34 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) LORELEE CHELLY Date of Receipt Mailing Address 631 PITCAIRN PL 2007 10 13 Zip Code City State Transaction ID: SA11A1.55930 **PITTSBURGH** PA 15232 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer SELF-EMPLOYED Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. FRED CHENEY Date of Receipt Mailing Address 14523 38TH AVE NE 13 2007 City State Zip Code Transaction ID: SA11A1.55972 **SEATTLE** WA 98155 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer UNIV WASHINGTON Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. CATHERINE CHEUNG Date of Receipt Mailing Address 925 ALLISON MEWS PLACE, NW 10 11 2007 Citv State Zip Code Transaction ID: SA11A1.55594 **CONCORD** NC 28027 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer NORTHEAST ANESTHESIA AND Occupation ANESTHESIOLOGIST PAIN SPECIALI Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

PAGE 35 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) TARA CHRONISTER Date of Receipt Mailing Address 82 BRIDLEWOOD PL 15 2007 10 City State Zip Code Transaction ID: SA11A1.56503 **CONCORD** NC 28025 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer NORTHEAST ANES & PAIN Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. RANDALL CLARK Date of Receipt Mailing Address 21 HYDE PARK CIR 16 2007 City State Zip Code Transaction ID: SA11A1.56668 <u>DENVER</u> CO 80209 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer UNIV OF COLORADO Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. JERRY COHEN Date of Receipt Mailing Address 2385 NW 14TH PL 10 12 2007 Citv State Zip Code Transaction ID: SA11A1.55629 **GAINESVILLE** FI 32605 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer UNIV FL Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)

PAGE 36 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) NORMAN COHEN Date of Receipt Mailing Address 735 SW ST CLAIR AVE #710 2007 10 13 City State Zip Code Transaction ID: SA11A1.56060 **PORTLAND** OR 97205 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer OHSU Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** DANIEL COLE Date of Receipt Mailing Address 10222 N 108TH PL 12 2007 City State Zip Code Transaction ID: SA11A1.55671 **SCOTTSDALE** ΑZ 85259 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer MAYO CLINIC Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. PAUL COLEMAN Date of Receipt Mailing Address 3404 MANCHESTER CT 10 15 2007 Citv State Zip Code Transaction ID: SA11A1.56461 **MODESTO** CA 95350 Amount of Each Receipt this Period FEC ID number of contributing 225.00 C federal political committee. Name of Employer SUTTER GOULD MED GRP Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) 1225.00 SUBTOTAL of Receipts This Page (optional)

PAGE 37 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) JOHN COLLINS Date of Receipt Mailing Address 12012 TIMBERLAKE DR 2007 10 09 City State Zip Code Transaction ID: SA11A1.55463 CINCINNATI OH 45249 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer ANES ASSOC CINCINNATI Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: General Primary 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. LYDIA CONLAY Date of Receipt Mailing Address 32 W OAK DR 13 2007 City Zip Code Transaction ID: SA11A1.56027 State **HOUSTON** TX 77056 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer BAYLOR Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. CARL CONRAD Date of Receipt Mailing Address 7117 WILLOW LN AVE NW 10 09 2007 Citv State Zip Code Transaction ID: SA11A1.55456 **MASSILLON** OH Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer COMP CARE ANESTH Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1250.00

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\setminus	NAME OF COMMITTEE (In Full) AMERICAN SOCIETY OF ANESTHESIC	OLOGISTS	S POLITICAL ACTION COM	MITTEE
<u> </u>	Full Name (Last, First, Middle Initial) TIM COOPER			Date of Receipt
	Mailing Address 4417 AUSTIN PASS DR			M M / D D / Y Y Y Y Y 1 1 5 2 0 0 7
	City	State	Zip Code	Transaction ID: SA11A1.56545
	ST CHARLES FEC ID number of contributing federal political committee.	C	63304	Amount of Each Receipt this Period 500.00
	Name of Employer WOODS MILL ANESTH	1	ESIOLOGIST	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) JAMES CORMACK Mailing Address 18 MILLSTONE TERRA	CE		Date of Receipt
				10 20 2007
	City BEDFORD	State NH	Zip Code 03110	Transaction ID: SA11A1.56747 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00110	300.00
	Name of Employer ACG	Occupation ANESTH	n ESIOLOGIST	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
<u>С</u> .	Full Name (Last, First, Middle Initial) CAREY COSTANTINI			Date of Receipt
	Mailing Address 20 MEDICAL VILLAGE I	DR		10 D / Y Y Y Y Y 12 2007
	City EDGEWOOD	State KY	Zip Code 41017	Transaction ID: SA11A1.55684 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer IAPSC	Occupation ANESTH	n ESIOLOGIST	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
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PAGE 39 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) GERARD COSTELLO Date of Receipt Mailing Address 7404 N LANDINGS TRL 2007 10 16 City State Zip Code Transaction ID: SA11A1.56659 MUNCIE IN 47303 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer DELAWARE CTY ANES Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** CHRIS CREIGHTON Date of Receipt Mailing Address 2345 DOUGHERTY FERRY RD 13 2007 City State Zip Code Transaction ID: SA11A1.56043 **DES PERES** MO 63122 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer ADVANCED PAIN SPEC Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. ROBERT CROSS Date of Receipt Mailing Address 34969 SE SKOGAN RD 14 10 2007 Citv State Zip Code Transaction ID: SA11A1.56272 SANDY OR 97067 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer OHSU Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)

PAGE 40 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) JAY CUNNINGHAM Date of Receipt Mailing Address 1912 DEEP CREEK RD 2007 10 13 City State Zip Code Transaction ID: SA11A1.55904 **OKLAHOMA CITY** OK 73131 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer AFFILIATED ANESTH Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** JOSEPH CUNNINGHAM Date of Receipt Mailing Address 6046 NEWPORT CRES 13 2007 City State Zip Code Transaction ID: SA11A1.56031 **NORFOLK** V٨ 23505 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer CHESAPEAKE ANESTH Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. ALAN CURLE Date of Receipt Mailing Address 67 PALMERSTON 10 13 2007 Citv State Zip Code Transaction ID: SA11A1.55859 **ROCHESTER** NY Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer UNIV OF ROCHESTER Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional)

PAGE 41 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) PATRICK CURLING Date of Receipt Mailing Address 8234 MAGNOLIA GLEN DR 10 2007 14 City State Zip Code Transaction ID: SA11A1.56236 **HUMBLE** TX 77346 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer N HOUSTON ANESTH Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. SUSAN DOBBS CURLING Date of Receipt Mailing Address 8234 MAGNOLIA GLEN DR 14 2007 City State Zip Code Transaction ID: SA11A1.56239 **HUMBLE** TX 77346 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer NHA N HOUSTON ANES Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. SUSAN DOBBS CURLING Date of Receipt Mailing Address 8234 MAGNOLIA GLEN DR 10 15 2007 Citv State Zip Code Transaction ID: SA11A1.56624 HUMBLE TX Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer N HOUSTON ANESTH Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)

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\rangle	AMERICAN SOCIETY OF ANESTHESIC	LOGISTS	S POLITICAL ACTION COM	MITTEE				
۸.	Full Name (Last, First, Middle Initial) SAUNDRA CURRY			Date of Receipt				
	Mailing Address 50 OVERLOOK DR			10 14 2007				
	City	State	Zip Code	Transaction ID: SA11A1.56374				
	CHAPPAQUA	NY	10514	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		500.00				
	Name of Employer COLUMBIA UNIV	Occupation ANESTH	n ESIOLOGIST					
	Receipt For:	Aggregate	e Year-to-Date ▼					
	Primary General Other (specify) ▼	0 0	500.00					
3.	Full Name (Last, First, Middle Initial) TOM CUTTER			Date of Receipt				
	Mailing Address 745 N KENILWORTH	10 14 2007						
	City	State	Zip Code	Transaction ID: SA11A1.56258				
	OAK PARK	IL	60302	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		250.00				
	Name of Employer UNIV OF CHICAGO	Occupation PHYSICI.						
	Receipt For:		Year-to-Date ▼					
	Primary General		250.00					
	Other (specify) ▼	0 0	230.00					
).).	Full Name (Last, First, Middle Initial) REBECCA DANIEL			Date of Receipt				
	Mailing Address 100 BRADFORD LAKE C	CT		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	City	State	Zip Code	Transaction ID: SA11A1.55707				
	LEWISVILLE	NC	27023	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		250.00				
	Name of Employer WAKE FOREST UNIV		ESIA RESIDENT					
	Receipt For:	Aggregate	Year-to-Date ▼					
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$ \rangle$	AMERICAN SOCIETY OF ANESTHESI	OLOGISTS	S POLITICAL ACTION COM	MITTEE	
\angle					
Α.	Full Name (Last, First, Middle Initial) PATRICIA DAVIDSON			Date of Receipt	
	Mailing Address 4444 SHULL RD			M M / D D	
				10 09	2007
	City	State	Zip Code	Transaction ID: SA	
	GAHANNA	OH	43230	Amount of Each Red	ceipt this Period
	FEC ID number of contributing federal political committee.	C			500.00
	Name of Employer PREMIER ANESTH	Occupation			
	Receipt For:	PHYSICI.	Year-to-Date ▼		
	Primary General	riggrogato	Total to Bate V		
	Other (specify) ▼	1	500.00		
ь	Full Name (Last, First, Middle Initial) FRED DAVIS			Data of Daggint	
Ь.	Mailing Address LAHEY CLINIC			Date of Receipt	/ Y Y Y Y Y
	Maining Address EATTET CETNIC			10 13	2007
	City	State	Zip Code	Transaction ID: SA	\11A1.56037
	BURLINGTON	MA	01805	Amount of Each Red	ceipt this Period
	FEC ID number of contributing	С			500.00
	federal political committee.				000.00
	Name of Employer LAHEY CLINIC	Occupation	า		
	·		ESIOLOGIST		
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	Primary General Other (specify)		500.00		
	Other (specify)				
_	Full Name (Last, First, Middle Initial)				
C.	RENEE DAVIS			Date of Receipt	
	Mailing Address 6685 MORGANS RUN			10 09	2007
	City	State	Zip Code	Transaction ID: SA	\11A1.55462
	LOVELAND	OH	45140	Amount of Each Red	ceipt this Period
	FEC ID number of contributing	C			250.00
	federal political committee.	<u> </u>			200.00
	Name of Employer	Occupation	1		
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			250.00		
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

PAGE 44 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) TOM DAVIS Date of Receipt Mailing Address 660 S EUCLID AVE 10 2007 14 City State Zip Code Transaction ID: SA11A1.56334 ST LOUIS MO 63110 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer WASHINGTON UNIV Occupation **PROFESSOR** Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** STANLEY DEE Date of Receipt Mailing Address 326 E WITCHWOOD LN 13 2007 City State Zip Code Transaction ID: SA11A1.55876 LAKE BLUFF IL 60044 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer ANESTH CONSULTANTS Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. KRAIG DE LANZAC Date of Receipt Mailing Address 12 TARA PL 10 13 2007 Zip Code Citv State Transaction ID: SA11A1.56088 **METAIRIE** 70002 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer SELF-EMPLOYED Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional)

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abla	NAME OF COMMITTEE (In Full)			
\rangle	AMERICAN SOCIETY OF ANESTHESIC	OLOGISTS	S POLITICAL ACTION COM	MITTEE
Α.	Full Name (Last, First, Middle Initial) BARBARA DERISO			Date of Receipt
	Mailing Address 244 LYTTON AVE			10 15 2007
	City	State	Zip Code	Transaction ID: SA11A1.56507
	PITTSBURGH	PA	15213	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer W PENN ANESTH	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼	0 0	250.00	
В.	Full Name (Last, First, Middle Initial) JAMES DESIMONE			Date of Receipt
	Mailing Address 1818 CAREW ST #220			10 14 2007
	City	State	Zip Code	Transaction ID: SA11A1.56330
	FT WAYNE	IN	46805	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer PREFERRED ANESTH	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Primary General		050.00	1
	Other (specify) ▼		250.00	
C.	Full Name (Last, First, Middle Initial) MARK DESTACHE			Date of Receipt
	Mailing Address 633 FAIRMOUNT AVE			10 16 2007
	City	State	Zip Code	Transaction ID: SA11A1.56684
	ST PAUL	MN	55105	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer ASSOC ANESTH	Occupation PHYSICI.		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
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PAGE 46 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) DIANE DOMBROWSKI Date of Receipt Mailing Address 25 TREASURE DR 10 2007 14 City State Zip Code Transaction ID: SA11A1.56314 **TAMPA** 33609 FI Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer SELF-EMPLOYED Occupation **SPOUSE** Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** JOHN DOMBROWSKI Date of Receipt Mailing Address 5123 WATSON ST 13 2007 City State Zip Code Transaction ID: SA11A1.56056 WASHINGTON DC 20016 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer SELF-EMPLOYED Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. JOHN DOOLEY Date of Receipt Mailing Address 7 HIGHLAND GREEN CT 10 15 2007 Citv State Zip Code Transaction ID: SA11A1.56487 **BOTTENDORF** IΑ 52722 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer ANES & PAIN CONSULT Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional)

PAGE 47 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) CHRISTINE DOYLE Date of Receipt Mailing Address 2077 WALNUT GROVE AVE 2007 10 14 City Zip Code State Transaction ID: SA11A1.56226 SAN JOSE CA 95128 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer COAST ANES MED GRP Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** CLIFTON DUBOSE Date of Receipt Mailing Address 4201 LAKE BREEZE DR 3 1 2007 City State Zip Code Transaction ID: SA11A1.56830 **FORT WORTH** TX 76132 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer CMB Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date V Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. PEGGY DUKE Date of Receipt Mailing Address 3530 PIEDMONT RD PH3 10 13 2007 Citv State Zip Code Transaction ID: SA11A1.56075 **ATLANTA** GA 30305 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer EMORY HEALTHCARE Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

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	Full Name (Last, First, Middle Initial)				
۹.	DAVID DULL			Date of Receipt	
	Mailing Address 2109 HUNTERS RUN NE			10 13	2007
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	City	State	Zip Code	Transaction ID: SA	
	ADA	MI	49301	Amount of Each Rec	eipt this Period
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	federal political committee.				
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	Other (specify) ▼		300.00		
	Full Name (Last, First, Middle Initial)				
3.	BURDETT DUNBAR			Date of Receipt	
	Mailing Address 3623 GRENNOCH LN			M M / D D	/ Y Y Y Y
				10 15	2007
	City	State	Zip Code	Transaction ID: SA	11A1.56485
	HOUSTON	TX	77025	Amount of Each Rec	eipt this Period
	FEC ID number of contributing				500.00
	federal political committee.	C			500.00
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	Name of Employer BAYLOR COLL OF MED	Occupation			
			ESIOLOGIST		
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			500.00		
	Other (specify) ▼				
	Full Name (Last, First, Middle Initial)			+	
Э.	PETER DUNBAR			Date of Receipt	
	Mailing Address 7116 82ND AVE SE			M M / D D	/ Y
				10 13	2007
	City	State	Zip Code	Transaction ID: SA	11A1.55955
	MERCER ISLAND	WA	98060	Amount of Each Rec	
	FEC ID number of contributing				
	federal political committee.	C			500.00
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PAGE 49 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) NORBERT DUTTINGER Date of Receipt Mailing Address 2202 HARLEM RD 2007 10 13 City State Zip Code Transaction ID: SA11A1.55875 LOVES PARK IL 61114 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer RAA Occupation ANESTHESIOLOGIST Aggregate Year-to-Date ▼ Receipt For: Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. ROBERT EARLY Date of Receipt Mailing Address 1418 OLD MILL RD 13 2007 City State Zip Code Transaction ID: SA11A1.56009 **WYOMISSING** PA 19610 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer READING ANES ASSOC Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. GIFFORD ECKHOUT Date of Receipt Mailing Address 1418 HOLLYTREE PL 10 13 2007 City State Zip Code Transaction ID: SA11A1.56058 **TYLER** TX Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer TRENTON CLINIC Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 2000.00 SUBTOTAL of Receipts This Page (optional)

PAGE 50 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) STEVEN EDELSTEIN Date of Receipt Mailing Address 57 E. DELAWARE PLACE 29 2007 10 APT. 1102 City State Zip Code Transaction ID: SA11A1.56806 **CHICAGO** IL 60611 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer LOYOLA U. PHYSICIAN FOUND-ATION/LUC Occupation ANESTHESIOLOGIST Aggregate Year-to-Date ▼ Receipt For: General Primary 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** GEORGE EDWARDS Date of Receipt Mailing Address 2712 W 116TH ST 12 2007 City Zip Code Transaction ID: SA11A1.55623 State **LEAWOOD** KS 66211 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer PAIN MGMT ASSOC Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. JAN EHRENWERTH Date of Receipt Mailing Address 4 RANDI DR 10 12 2007 City State Zip Code Transaction ID: SA11A1.55676 **MADISON** CT 06447 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer YALE UNIV Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

PAGE 51 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) ELIZABETH ELLINAS Date of Receipt Mailing Address N87 W15793 KENWOOD BLVD 12 2007 10 City Zip Code State Transaction ID: SA11A1.55617 MENOMONEE FALLS W 53051 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer MCW Occupation ANESTHESIOLOGIST Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. MARK ELLIS Date of Receipt Mailing Address 1972 MARYLAND AVE 13 2007 City Zip Code State Transaction ID: SA11A1.55961 **CHARLOTTE** NC 28209 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer NE ANES & PAIN SPEC Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. SHEILA ELLIS Date of Receipt Mailing Address 10247 ADAMS ST 10 13 2007 Zip Code City State Transaction ID: SA11A1.55883 **OMAHA** NE 68127 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer UNIV OF NEBRASKA MED Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

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A. KENNETHÈ	ast, First, Middle Initial) LMASSIAN ess 2399 PINE HOLLOW D	D		Date of Receipt	/ Y Y Y Y
City	2339 I INC HOLLOW D	State	Zip Code	Transaction ID: S	2007
LANSING		MI	48823	Amount of Each R	
	ber of contributing cal committee.	C			500.00
Name of Em LANSING A	ployer NESTH	Occupation ANESTH	n ESIOLOGIST		
Receipt For: Primar Other		Aggregate	Year-to-Date ▼ 500.00		
Full Name (L	ast, First, Middle Initial)			Date of Receipt	
Mailing Addr	ess 18600 WOLF CREEK D			10 / 15	2007
City EDMOND		State OK	Zip Code 73012	Transaction ID: S	
FEC ID num	ber of contributing cal committee.	C	73012	Amount of Each R	500.00
Name of Em UNIV OF O	ployer KLAHOMA	Occupation ANESTH	n ESIOLOGIST		
Receipt For: Primar Other		Aggregate	Year-to-Date ▼ 500.00		
Full Name (L C. CHRIS EMER	ast, First, Middle Initial)			Date of Receipt	
Mailing Addr	ess 2303 W 113TH CT			1 0 / D D	
City		State	Zip Code	Transaction ID: S	
<u>JENKS</u>		OK	74037	Amount of Each R	eceipt this Period
	ber of contributing cal committee.	C			500.00
Name of Em			ESIOLOGIST		
Receipt For: Primar Other		Aggregate	Year-to-Date ▼ 500.00		
SUBTOTAL of	Receipts This Page (optional)		·····		1500.00
TOTAL This F	eriod (last page this line number o	nly)	>		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 191 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) AMERICAN SOCIETY OF ANESTHESI	OLOGISTS	S POLITICAL ACTION COM	MITTEE
Α.	Full Name (Last, First, Middle Initial) MICHAEL ENTRUP Mailing Address P.O. BOX 5178 City FRAMINGHAM FEC ID number of contributing federal political committee. Name of Employer TUFTS NE MED CTR Receipt For: Primary General	State MA C Occupation PHYSICI Aggregate	AN e Year-to-Date ▼	Date of Receipt M M
3.	Other (specify) ▼ Full Name (Last, First, Middle Initial) PAT ESCANDON Mailing Address 873 MOUNTAIN RD	0 0	500.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City CHESHIRE FEC ID number of contributing federal political committee.	State CT	Zip Code 06410	Transaction ID: SA11A1.56651 Amount of Each Receipt this Period 500.00
	Name of Employer YALE UNIV Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		ESIOLOGIST e Year-to-Date 500.00	
Э.	Full Name (Last, First, Middle Initial) JOHN EVANS Mailing Address 59 AQUINAS City	State	Zip Code	Date of Receipt M M
	LAKE OSWEGO FEC ID number of contributing federal political committee.	OR	97035	Amount of Each Receipt this Period 500.00
	Name of Employer OAG Receipt For: Primary General Other (specify)	1	ESIOLOGIST Year-to-Date 500.00	
SI	JBTOTAL of Receipts This Page (optional)			1500.00
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SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 54 / 191	
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	NAME OF COMMITTEE (In Full)				_
	AMERICAN SOCIETY OF ANESTHES	IOLOGISTS	S POLITICAL ACTION COM	MITTEE	
Α.	Full Name (Last, First, Middle Initial) ROBERT EVANS			Date of Receipt	
	Mailing Address 4909 AUDUBON DR			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: SA11A1.55860	
	MOBILE	AL	36619	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		250.00	
	Name of Employer DOCUSYS	Occupation ANESTH	n ESIOLOGIST		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		250.00		
В.	Full Name (Last, First, Middle Initial) CAROLYN FARRELL			Date of Receipt	_
	Mailing Address 5511 TONYAWATHA T	RAIL		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: SA11A1.56735	
	MONONA	WI	53716	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.00	
	Name of Employer UNIVERSITY OF WISCONSIN	Occupation		7	
	MEDICAL FOUNDA Receipt For:		ESIOLOGIST e Year-to-Date ###################################	_	
	Primary General	Aggregate		1	
	Other (specify) ▼	0 0	500.00		
<u> </u>	Full Name (Last, First, Middle Initial) MICHAEL FELDMAN			Date of Receipt	
	Mailing Address 1480 WEATHERSFIEL	D DR		M M / D D / Y Y Y Y Y 1 1 1 1 1 3 2 0 0 7	
	City	State	Zip Code	Transaction ID: SA11A1.55703	
	ALLENTOWN	PA	18104	Amount of Each Receipt this Period	_
Receipt For: Aggregate				250.00	
			n ESIOLOGIST		
			e Year-to-Date ▼		
	Primary General Other (specify) ▼		250.00		
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T	OTAL This Period (last page this line number of	nly)			

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or	for commercial purposes, other than using the na	ements may ame and add	dress of any political committee to	solicit contributions from such committee.				
$\overline{}$	NAME OF COMMITTEE (In Full)							
\rangle	AMERICAN SOCIETY OF ANESTHESIC	COGISTS	S POLITICAL ACTION COM	MITTEE				
۹.	Full Name (Last, First, Middle Initial) RALPH FILLMORE			Date of Receipt				
	Mailing Address 1118 ROSS CLARK CIR			10 13 7 2007				
	City	State	Zip Code	Transaction ID: SA11A1.55995				
	DOTHAN	AL	36301	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		500.00				
	Name of Employer ACMG	Occupation PHYSICI.						
	Receipt For:		Year-to-Date ▼					
	Primary General							
	Other (specify) ▼		500.00					
3.	Full Name (Last, First, Middle Initial) JANE FITCH			Date of Receipt				
	Mailing Address 7351 BAYLINER LAUNC	10 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
	City	State	Zip Code	Transaction ID: SA11A1.56907				
	EDMOND	OK	73013	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		500.00				
	Name of Employer OU	Occupation PHYSICI.						
	Receipt For:	Aggregate	Year-to-Date ▼					
	Primary General Other (specify) ▼	0 0	500.00					
— Э.	Full Name (Last, First, Middle Initial) MARK FLANERY			Date of Receipt				
	Mailing Address 32721 111TH PLACE SE			10 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	City	State	Zip Code	Transaction ID: SA11A1.56022				
	AUBURN	WA	98092	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		500.00				
	Name of Employer AUBURN ANES ASSOC	Occupation PHYSICI.						
	Receipt For:	Aggregate	Year-to-Date ▼					
	Primary General		500.00					
	Other (specify) ▼		300.00					
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PAGE 56 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) MICHAEL FLASHBURG Date of Receipt Mailing Address 15 CAMBRIDGE WAY 10 12 2007 City State Zip Code Transaction ID: SA11A1.55662 WAYSIDE 07702 NJ Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer SELF-EMPLOYED Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** LEE FLEISHER Date of Receipt Mailing Address POB 197 13 2007 City Zip Code State Transaction ID: SA11A1.55925 **GWYNEDD VALLEY** PA 19437 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer UNIV OF PENNSYLVANIA Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. RICHARD FLOWERDEW Date of Receipt Mailing Address 38 HEDGEROW DR 10 3 1 2007 Zip Code Citv State Transaction ID: SA11A1.56848 **FALMOUTH** ME 04105 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer SPECTRUM MEDICAL Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

PAGE 57 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) Date of Receipt A. HJFONTENOT Mailing Address 305 PARK AVE 2007 10 13 City State Zip Code Transaction ID: SA11A1.56019 **MONROE** 71201 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer SELF-EMPLOYED Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. WILLIAM FRAME Date of Receipt Mailing Address 959 MALINDA CT 13 2007 City State Zip Code Transaction ID: SA11A1.55895 **FORSYTH** IL 62535 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. THOMAS FUHRMAN Date of Receipt Mailing Address 925 MITCHELL LN 10 15 2007 Zip Code City State Transaction ID: SA11A1.56557 **EVANS** GA 30805 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer MED COL OF GA Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1250.00

SUBTOTAL of Receipts This Page (optional)

PAGE 58 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) CORY FURSE Date of Receipt Mailing Address 379 EVIAN WAY 02 2007 10 City State Zip Code Transaction ID: SA11A1.55364 MOUNT PLEASANT SC 29464 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer MUSC Occupation ANESTHESIOLOGIST Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** JAMES FUTRELL Date of Receipt Mailing Address 6141 BEDFORD AVE 14 2007 City State Zip Code Transaction ID: SA11A1.56316 **LOS ANGELES** CA 90056 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer SELF-EMPLOYED Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. TONG GAN Date of Receipt Mailing Address BOX 3094 10 15 2007 City State Zip Code Transaction ID: SA11A1.56505 **DURHAM** NC Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer DUKE UNIV Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional)

PAGE 59 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) Date of Receipt A. DON GANIM Mailing Address 155 WOODLAND MEAD 2007 10 14 City State Zip Code Transaction ID: SA11A1.56381 **HAMILTON** MA 01982 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer BAA Occupation ANESTHESIOLOGIST Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. MICHAEL GARCIA Date of Receipt Mailing Address 3231 W FOUNTAIN BLVD 3 1 2007 City State Zip Code Transaction ID: SA11A1.56869 **TAMPA** FL 33609 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer FL PEDIATRIC ASSOC Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. DAVID GARFUNKEL Date of Receipt Mailing Address 3 WENDY LN 10 12 2007 Zip Code City State Transaction ID: SA11A1.55656 **CLOSTER** NJ 07624 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer NORTHERN VALLEY ANES Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 60 / 191
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\setminus	NAME OF COMMITTEE (In Full)			
	AMERICAN SOCIETY OF ANESTHESI	OLOGISTS	S POLITICAL ACTION COM	MITTEE
A.	Full Name (Last, First, Middle Initial) J KENT GARMAN			Date of Receipt
	Mailing Address 5038 COURTNEY WAY			10 14 2007
	City	State	Zip Code	Transaction ID: SA11A1.56241
	EL DORADO HILLS	CA	95762	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer STANFORD UNIV	Occupation PHYSICI		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify)	0 0	300.00	
В.	Full Name (Last, First, Middle Initial) SCOTT GARRISON			Date of Receipt
	Mailing Address P.O. BOX 18623			10 01 2007
	City	State	Zip Code	Transaction ID: SA11A1.55335
	RALEIGH	NC	27619	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer CRITICAL HEALTH SYSTEMS OF NC	Occupation PHYSICI		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		500,00	1
	Other (specify)	0 0	500.00	
<u> </u>	Full Name (Last, First, Middle Initial) BRENDA GENTZ			Date of Receipt
	Mailing Address P.O. BOX 40428			10 12 2007
	City	State	Zip Code	Transaction ID: SA11A1.55641
	TUCSON	AZ	85717	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			500.00
	Name of Employer UNIV OF ARIZONA	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	1 1	E00.00	1
	Other (specify)		500.00	
s	UBTOTAL of Receipts This Page (optional)			1500.00

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or	for commercial purposes, other than using the name	e and add	iress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)	001070	DOLUTION ACTION COM	MITTEE
	AMERICAN SOCIETY OF ANESTHESIOL	OGISTS	S POLITICAL ACTION COM	VIIIEE
`	Full Name (Last, First, Middle Initial)			
Α.	WILLIAM GEZZAR Mailing Address 1820 WHITECAP CIR			Date of Receipt
	1020 WHITEOAF CIR			10 10 2007
	City	State	Zip Code	Transaction ID: SA11A1.55537
	N FT MYERS	FL	33903	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	MED ANIES'S PAIN MOMT	ccupation		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	-	250.00	
	Other (specify) ▼		200.00	
— В.	Full Name (Last, First, Middle Initial) JAMES GIBBONS			Date of Receipt
	Mailing Address 13203 GREENBOUGH	10 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	•	State	Zip Code	Transaction ID: SA11A1.55871
	ST LOUIS	MO	63146	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	WESTERN ANES ASSOC	occupation	n ESIOLOGIST	
	- · · · · · · · · · · · · · · · · · · ·		Year-to-Date ▼	7
	Primary General	1 1	500.00	
	Other (specify) ▼		300.00	
<u> </u>	Full Name (Last, First, Middle Initial) JEFFREY GIESE			Date of Receipt
	Mailing Address 4302 MOOSE HOLLOW R	OAD		10 11 2007
	City	State	Zip Code	Transaction ID: SA11A1.55596
	PARK CITY	UT	84098	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	MILLCREEK ANESTHESIA,INC.	ccupation HYSICI		
		Aggregate	Year-to-Date ▼	
	Primary General		250.00	
	Other (specify) ▼	0 0		
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

PAGE 62 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) MARIN GIESECKE Date of Receipt Mailing Address 3738 BLUE BONNET BLVD 2007 10 3 1 City State Zip Code Transaction ID: SA11A1.56845 **HOUSTON** TX 77025 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer BAYLOR COLLEGE OF MED Occupation ANESTHESIOLOGIST Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. SUSAN GIESECKE Date of Receipt Mailing Address 3738 BLUE BONNET BLVD 3 1 2007 City State Zip Code Transaction ID: SA11A1.56847 **HOUSTON** TX 77025 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation **SPOUSE** Receipt For: Aggregate Year-to-Date V Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. RICHARD GILBERT Date of Receipt Mailing Address 1107 QUEENS RD 10 15 2007 Citv State Zip Code Transaction ID: SA11A1.56475 **CHARLOTTE** NC 28207 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer SE ANESTH CONSULT Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)

SCHEDULE A (FEC Form 3X) Use separate schedule(s)				FOR LINE NUMBER:	PAGE 63 / 191	
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	NAME OF COMMITTEE (In Full)		7,1111111111111111111111111111111111111			
$ \rangle$	AMERICAN SOCIETY OF ANESTHES	IOI OGISTS	S POLITICAL ACTION COM	MITTEE		
	7	.0200.010	or our comments and comments are a second			
_	Full Name (Last, First, Middle Initial)					
Α.	JACK GILDAR			Date of Receipt		
	Mailing Address 13720 N 85TH PL			10 13		
	City	State	Zip Code	Transaction ID: S/		
	SCOTTSDALE	AZ	85260	Amount of Each Re		
			00200	Amount of Each fie		
	FEC ID number of contributing federal political committee.	C			200.00	
	·					
	Name of Employer VALLEY ANESTH	Occupation				
			ESIOLOGIST			
	Receipt For: Primary General	Aggregate	Year-to-Date ▼			
	Other (specify)		450.00			
		0 0				
_	Full Name (Last, First, Middle Initial)					
В.	RALPH GLASSER			Date of Receipt		
	Mailing Address 2336 W LAKE SHORE	DR		M M / D D	/ Y Y Y Y Y	
	Cit.	01-1-	7:- Oada	10 14	2007	
	City	State	Zip Code	Transaction ID: S/		
	SPRINGFIELD	IL	62712	Amount of Each Re	ceipt this Period	
	FEC ID number of contributing federal political committee.	C			500.00	
	Name of Employer ASSOC ANES SPFLD	Occupation				
			ESIOLOGIST			
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	.		
	Primary General Other (specify) ▼		500.00			
	Cirici (specify)		1 1 1 1 1 1 1			
_	Full Name (Last, First, Middle Initial)					
C.	BARRY GLAZER			Date of Receipt		
	Mailing Address 1433 BREWSTER RD			10 13	2007	
	City	State	Zip Code			
	INDIANAPOLIS	IN	46260	Transaction ID: SA Amount of Each Re		
		IIN	40200	Amount of Each Ne	ceipi illis Fellou	
	FEC ID number of contributing federal political committee.	C			500.00	
	·					
	Name of Employer SELF-EMPLOYED	Occupation				
ANEST			ESIOLOGIST			
			Year-to-Date ▼			
			500.00			
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PAGE 64 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) A. DAVID GLOYNA Date of Receipt Mailing Address 2401 SOUTH 31ST 12 2007 10 City State Zip Code Transaction ID: SA11A1.55648 **TEMPLE** TX 76508 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer SCOTT & WHITE CLINIC Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: General Primary 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** STEVEN GOLDFIEN Date of Receipt Mailing Address 60 MARCELA AVE 13 2007 City State Zip Code Transaction ID: SA11A1.55863 SAN FRANCISCO CA 94116 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date V Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. PETER GOLDZWAK Date of Receipt Mailing Address 942 WOOD HOLLOW 10 15 2007 Citv State Zip Code Transaction ID: SA11A1.56569 **RIDGEWOOD** NJ 07450 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer NORTHERN VALLEY Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 65 / 191	
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or		and add	ress of any political committee to	solicit contributions from	n such committee.
\	NAME OF COMMITTEE (In Full)				
/	AMERICAN SOCIETY OF ANESTHESIOLO	JGISTS	POLITICAL ACTION COM	VIIIIEE	
	Full Name (Last, First, Middle Initial)				
١.	MICHAEL GOSNEY			Date of Receipt	
	Mailing Address 108 CHASE DR			1 0 1 3	
	City Si	State	Zip Code	Transaction ID: S	SA11A1.56007
	MUSCLE SHOALS A	4L	35661	Amount of Each R	leceipt this Period
	FEC ID number of contributing federal political committee.				500.00
		ccupation		+	
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		ggregate	Year-to-Date ▼		
	Primary General		500.00		
	Other (specify) ▼				
3.	Full Name (Last, First, Middle Initial) DAVID GRAF			Date of Receipt	
٠.	Mailing Address P.O. BOX 4544			M M / D D	/ Y Y Y Y Y
				10 14	
	•	State	Zip Code	Transaction ID: S	
		MV	26504	Amount of Each R	leceipt this Period
	FEC ID number of contributing federal political committee.				500.00
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	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	ccupation VFSTHI	: ESIOLOGIST		
			Year-to-Date ▼		
	Primary General	1 1	500.00		
	Other (specify) ▼	0 0	500.00		
_	Full Name (Last, First, Middle Initial)			1	
Ĵ.	DAVID GRANT Moiling Address 2000 LLE DADNETT DD			Date of Receipt	/ Y Y Y Y
	Mailing Address 2620-H E. BARNETT RD.			10 13	
	•	State	Zip Code	Transaction ID: S	SA11A1.55938
	MEDFORD O	OR	97504	Amount of Each R	leceipt this Period
	FEC ID number of contributing federal political committee.				500.00
	Name of Employer	cupation		-	
	ANECTHEC'IA $ACCOCIATECOE$	-Cupation			
	MLDI ORD, FC		Year-to-Date ▼	1	
	Primary General	-	500.00		
	Other (specify) ▼		300.00		
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PAGE 66 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) JAMES GRANT Date of Receipt Mailing Address 1574 SODON LAKE DR 2007 10 13 City State Zip Code Transaction ID: SA11A1.56048 **BLOOMFIELD HILLS** MI 48302 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer SOAA Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** TIMOTHY GRANT Date of Receipt Mailing Address 108 BROADLEAF DR 8 0 2007 City State Zip Code Transaction ID: SA11A1.55432 **MACON** GA 31210 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer NEXUS MED GRP Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. ARTHUR GRAY Date of Receipt Mailing Address 5886 KENTUCKY DOWNS 10 8 0 2007 City State Zip Code Transaction ID: SA11A1.55442 MACON GA 31210 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer NEXUS MED GRP Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)

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$\overline{\ \ }$	NAME OF COMMITTEE (In Full) AMERICAN SOCIETY OF ANESTHESIOL	MITTEE		
۹.	Full Name (Last, First, Middle Initial) ANDREW GREENBERG			Date of Receipt
	Mailing Address P.O. BOX 400			10 14 2007
	,	State MD	Zip Code 21047	Transaction ID: SA11A1.56304 Amount of Each Receipt this Period
	EEC ID asserbase of a section time.	С		1000.00
	CDS ' '	occupation NESTH	n ESIOLOGIST	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
3.	Full Name (Last, First, Middle Initial) CHARLES GREGORIUS			Date of Receipt
	Mailing Address 2220 THE KNOLLS			10 12 2007
	•	State NE	Zip Code	Transaction ID: SA11A1.55635
	EEC ID asserbase of a section time.	C	68512	Amount of Each Receipt this Period 500.00
	SELE EMBL'OVED	occupation PHYSICIA		
	Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
).	Full Name (Last, First, Middle Initial) FRANCISCO GRINBERG			Date of Receipt
	Mailing Address 149 EDSON HILL RD #6			10 14 2007
	•	State VT	Zip Code 05672	Transaction ID: SA11A1.56320
	FEO ID work and contribution	C	03072	Amount of Each Receipt this Period 250.00
		occupation NESTH	n ESIOLOGIST	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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PAGE 68 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) SCOTT GROUDINE Date of Receipt Mailing Address 21 CARRIAGE HILL DR 2007 10 14 Zip Code City State Transaction ID: SA11A1.56297 **LATHAM** NY 12110 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer ALBANY MED CTR Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** ORIN GUIDRY Date of Receipt Mailing Address 332 GINNED COTTON ST 15 2007 City Zip Code State Transaction ID: SA11A1.56481 **CHARLESTON** SC 29492 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. HELENA GUNNERSON Date of Receipt Mailing Address 8825 ROBERT RD 10 13 2007 Zip Code City State Transaction ID: SA11A1.55889 **DARIEN** Ш 60661 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer UNIV OF IL Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)

PAGE 69 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) MARY ANN GURKOWSKI Date of Receipt Mailing Address 9960 OAKLAND RD 2007 10 13 City State Zip Code Transaction ID: SA11A1.55926 **SAN ANTONIO** TX 78240 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer UTHSCSA Occupation ANESTHESIOLOGIST Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** FRANCISCO GURTADO Date of Receipt Mailing Address 129 BETH ELLEN DR 15 2007 City State Zip Code Transaction ID: SA11A1.56555 **LEWISBURG** PA 17837 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer SELF-EMPLOYED Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. JUAN GUTIERREZ Date of Receipt Mailing Address 3508 BIRCHWOOD LN 14 10 2007 Citv State Zip Code Transaction ID: SA11A1.56252 **BIRMINGHAM** ΑL 35243 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer PEDIATRIC ANES ASSOC Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional)

PAGE 70 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) KENNETH GUTIERREZ Date of Receipt Mailing Address 3 SIDNEY WAY 2007 10 13 City State Zip Code Transaction ID: SA11A1.55916 **SIMSBURY** CT 06070 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer WOODLAND ANES ASSOC Occupation ANESTHESIOLOGIST Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. PHILIP HALL Date of Receipt Mailing Address 4942 HARTLAND PKWY 14 2007 City Zip Code State Transaction ID: SA11A1.56250 **LEXINGTON** KY 40315 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer ANESTH ASSOC Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. ROBERT HAM Date of Receipt Mailing Address 150 FIELDSPRINGS CT 10 8 0 2007 City State Zip Code Transaction ID: SA11A1.55436 MACON GA 31210 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer NEXUS MED GRP Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)

PAGE 71 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) JAMES HANCOCK Date of Receipt Mailing Address 18905 CRAGGY MEADOWS 2007 10 13 City State Zip Code Transaction ID: SA11A1.55963 **DAVIDSON** NC 28034 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer NE ANES & PAIN SPEC Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** ALEX HANNENBERG Date of Receipt Mailing Address 81 WASHBURN AVE 12 2007 City Zip Code Transaction ID: SA11A1.55690 State WELLESLEY MA 02481 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer COMMONWEALTH ANES Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. RALPH HARDING Date of Receipt Mailing Address 19913 ROSSFORD AVE 10 12 2007 Citv State Zip Code Transaction ID: SA11A1.55683 **LAKEWOOD** CA 90715 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer Occupation **PROFESSOR** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)

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			Detailed Summary Page	13 14 15 16 1	7
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\geq	AMERICAN SOCIETY OF ANESTHES	IOLOGISTS	S POLITICAL ACTION COM	MITTEE	
Α.	Full Name (Last, First, Middle Initial) DAVID HARDMAN			Date of Receipt	
	Mailing Address 228 GALWAY DR			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	CARELLIII	State	Zip Code	Transaction ID: SA11A1.56218	
	CAPEL HILL FEC ID number of contributing	NC	27517	Amount of Each Receipt this Period	i
	federal political committee.	C		500.00	
	Name of Employer DUKE UNIV	Occupation PHYSICI			
	Receipt For:	Aggregate	e Year-to-Date ▼	7	
	Primary General Other (specify) ▼	0 0	500.00		
— В.	Full Name (Last, First, Middle Initial) RON HARTER			Date of Receipt	
	Mailing Address 7825 HOLISTON CT			10 09 YYYY 2007	
	City	State	Zip Code	Transaction ID: SA11A1.55470	
	DUBLIN	OH	43016	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.00	
	Name of Employer OHIO STATE UNIV	Occupation PHYSICI			
	Receipt For: Aggr		e Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	500.00		
<u> </u>	Full Name (Last, First, Middle Initial) CRAIG HARTRICK			Date of Receipt	
	Mailing Address 2408 PARK RIDGE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: SA11A1.56479	
	BLOOMFIELD HILLS	MI	48304	Amount of Each Receipt this Period	_
	FEC ID number of contributing federal political committee.	C		500.00	
	Name of Employer SOAA	Occupation PHYSICI			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	500.00		
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\setminus	NAME OF COMMITTEE (In Full)			
\rangle	AMERICAN SOCIETY OF ANESTHESIC	OLOGISTS	S POLITICAL ACTION COM	MITTEE
Α.				Date of Receipt
	Mailing Address 5904 SNOW HILL DR	10 08 7 2007		
	City	State	Zip Code	Transaction ID: SA11A1.55447
	SUMMERFIELD	NC	27358	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer GREENSBORO ANES PHYS	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		050.00	1
	Other (specify) ▼		250.00	
В.	Full Name (Last, First, Middle Initial) STEVE HATTAMER			Date of Receipt
	Mailing Address 27 LUTHERAN DR	10 12 2007		
	City	State	Zip Code	Transaction ID: SA11A1.55646
	NASHUA	03063	Amount of Each Receipt this Period	
	FEC ID number of contributing			500.00
	federal political committee.	C		500.00
	Name of Employer NASHUA ANES PARTN	Occupation PHYSICI		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify)	0 0	500.00	
C .	Full Name (Last, First, Middle Initial) WILLIAM HAWK	_		Date of Receipt
	Mailing Address 7417 AURELIA RD			10 08 YYYYY 2007
	City	State	Zip Code	Transaction ID: SA11A1.55423
	OKLAHOMA CITY	OK	73121	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer AFFILIATED ANESTH	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:			
	Primary General		1 1 1 1 1 1 1 1 1	1
	Other (specify)		250.00	
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	NAME OF COMMITTEE (In Full) AMERICAN SOCIETY OF ANESTHES	OLOGISTS	S POLITICAL ACTION COM	MITTEE
A .	Full Name (Last, First, Middle Initial) GEORGE HEFNER			Date of Receipt
	Mailing Address 11 BRIARWOOD LN			M M / D D / Y Y Y Y Y 1 Y 1 1 0 1 3 2 0 0 7
	City LINCOLNSHIRE	State IL	Zip Code 60049	Transaction ID: SA11A1.55942 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00040	500.00
	Name of Employer SELF-EMPLOYED	Occupation PHYSICI		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
— В.	Full Name (Last, First, Middle Initial) H A TILLMANN HEIN			Date of Receipt
	Mailing Address 4251 PARK LAND	10 14 2007		
	City	State	Zip Code	Transaction ID: SA11A1.56228
	DALLAS	TX	75220	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer SELF-EMPLOYED	Occupation PHYSICI		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
<u> </u>	Full Name (Last, First, Middle Initial) REBECCA HEIN			Date of Receipt
	Mailing Address 4251 PARK LN			10 14 2007
	City DALLAS	State TX	Zip Code 75220	Transaction ID: SA11A1.56322 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			250.00
	Name of Employer SELF-EMPLOYED	Occupation N/A	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	250.00	
s	UBTOTAL of Receipts This Page (optional)			1250.00

PAGE 75 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) A. EUGENIE HEITMILLER Date of Receipt Mailing Address 411 RED MEADOWS CT 10 2007 14 City Zip Code State Transaction ID: SA11A1.56207 REISTERSTOWN MD 21136 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer JOHNS HOPKINS Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** LAURILYN HELMERS Date of Receipt Mailing Address 19517 65TH AVE NE 14 2007 City State Zip Code Transaction ID: SA11A1.56216 **KENMORE** WA 98028 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer SEATTLE CHILDRENS HOSP Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. PETE HENDRICKS Date of Receipt Mailing Address 1590 PANORAMA DR 10 13 2007 Citv State Zip Code Transaction ID: SA11A1.55949 **BIRMINGHAM** ΑL 35216 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer SELF-EMPLOYED Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)

PAGE 76 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) JAMES HICKS Date of Receipt Mailing Address 2973 NW 132ND AVE 2007 10 13 City State Zip Code Transaction ID: SA11A1.55987 **PORTLAND** OR 97850 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer OHSU Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. HEATH HIGGINS Date of Receipt Mailing Address 12125 CARDINAL LN 10 2007 City State Zip Code Transaction ID: SA11A1.55519 **EDMOND** OK 73013 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer SELF-EMPLOYED Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. MICHAEL HIGGINS Date of Receipt Mailing Address 1945 EDENBRIDGE 10 16 2007 City State Zip Code Transaction ID: SA11A1.56661 **NASHVILLE** TN 37215 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer VANDERBILT Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

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\rangle	AMERICAN SOCIETY OF ANESTHESIC	LOGISTS	S POLITICAL ACTION COM	MITTEE	
_	Full Name (Last, First, Middle Initial)				
۹.	ALBERT HO			Date of Receipt	
	Mailing Address 2033 BRANDON CIRCLE	<u> </u>		M M / D D / Y Y Y	
	Oth.	01-1-	7in Oada	10 11 200	
	City CHARLOTTE	State NC	Zip Code 28211	Transaction ID: SA11A1.55600 Amount of Each Receipt this Period	
	FEC ID number of contributing		20211	· · · · · · · · · · ·	
	federal political committee.	C		600	.00
	Name of Employer NORTHEAST ANESTHESIA AND	Occupation	n ESIOLOGIST		
	PAIN SPECIALI Receipt For:		Year-to-Date ▼	-	
	Primary General	33 3			
	Other (specify) ▼		600.00		
	Full Name (Last, First, Middle Initial)				
3.	RICK HOWARD			Date of Receipt	
	Mailing Address 908 DENNISFORD CT			M M / D D / Y Y Y	
	City	10 16 200			
	COCKEYSVILLE	State MD	Zip Code 21030	Transaction ID: SA11A1.56683 Amount of Each Receipt this Period	
	FEC ID number of contributing		21030		1
	federal political committee.	C		250	.00
	Name of Employer	Occupation	<u> </u>	-	
	Name of Employer MERCY ANES ASSOC	•	ESIOLOGIST		
	Receipt For:	Aggregate	Year-to-Date ▼	1	
	Primary General		250.00		
	Other (specify)		250.00		
	Full Name (Last, First, Middle Initial)				
Э.	JOHN HOYT Mailing Address 4406 BIRCHWOOD I AN			Date of Receipt	
	Mailing Address 4406 BIRCHWOOD LAN	E		10 31 200	
	City	State	Zip Code	Transaction ID: SA11A1.56894	1
	ALLISON PARK	PA	15101	Amount of Each Receipt this Period	od
	FEC ID number of contributing federal political committee.	С		250	.00
	rederal political committee.				
	Name of Employer WPAHS	Occupation PHYSICI.			
	Receipt For:		Year-to-Date V	-	
	Primary General	199.79			
	Other (specify) ▼		250.00		
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PAGE 78 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) MCCALLSEM HOYT Date of Receipt Mailing Address 18 WILKES RD 2007 10 14 City State Zip Code Transaction ID: SA11A1.56243 **RAULEY** MA 01969 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer BRIGHAM & WOMENS Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. CHESTER HU Date of Receipt Mailing Address 991 BLONCO CIR 14 2007 City State Zip Code Transaction ID: SA11A1.56378 **BILLINGS** MT 59105 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer BAPC Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. WILLIAM HURFORD Date of Receipt Mailing Address 9250 GIVEN RD 10 13 2007 Citv State Zip Code Transaction ID: SA11A1.56003 **CINCINNATI** OH 45243 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer U CINNCINNATI Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)

PAGE 79 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) BARBARA HURLBERT Date of Receipt Mailing Address 9223 DAVENPORT 10 2007 13 City State Zip Code Transaction ID: SA11A1.55909 **OMAHA** NE 68114 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer UNIV OF NE Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. MICHAEL IVERSON Date of Receipt Mailing Address 330 CHAPEL LOOP 13 2007 City State Zip Code Transaction ID: SA11A1.56086 **MANDEVILLE** LA 70471 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer W ST TARMANY ANES Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) C. PHILLIP JACOB Date of Receipt Mailing Address 36 UNIVERSITY ST 10 10 2007 Citv State Zip Code Transaction ID: SA11A1.55521 PRESQUE ISLE ME 04769 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer AROOSTOOK MED CTR Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional)

PAGE 80 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) JEFF JACOBS Date of Receipt Mailing Address 11041 PINE LODGE 2007 10 13 City State Zip Code Transaction ID: SA11A1.55932 **DAVIE** 33328 FI Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer CLEVELAND CLINIC FL Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. KAREN JACOBS Date of Receipt Mailing Address 11041 PINE LODGE TRL 14 2007 City State Zip Code Transaction ID: SA11A1.56421 **DAVIE** FL 33328 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation **SPOUSE** Receipt For: Aggregate Year-to-Date V Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. JON JACOBY Date of Receipt Mailing Address 2300 N EDWARD ST 10 16 2007 Zip Code Citv State Transaction ID: SA11A1.56714 **DECATUR** Ш 62526 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)

PAGE 81 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) ALIRAZA JAFFER Date of Receipt Mailing Address 5070 BROOKDALE ROAD 23 2007 10 City Zip Code Transaction ID: SA11A1.56758 State **BLOOMFIELD HILLS** 48304 MI Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer SOUTH OAKLAND ANESTHESIA Occupation ANESTHESIOLOGIST/PAIN MANAGEMENT PHYSI ASSOCIATES Aggregate Year-to-Date ▼ Receipt For: General Primary 1000.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** MICHAEL JAKUBOWSKI Date of Receipt Mailing Address 1350 HAWTHORN RD 13 2007 City State Zip Code Transaction ID: SA11A1.55710 **SCHENECTADY** NY 12309 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer SCHENECTADY ANES Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. NORAH JANOSY Date of Receipt Mailing Address 4425 SE 45TH AVE 10 13 2007 Citv State Zip Code Transaction ID: SA11A1.55828 **PORTLAND** OR 97206 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer OHSU/SALMAN CREEK Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)

PAGE 82 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) JEFFREY JEKOT Date of Receipt Mailing Address 3804 WOODCUTTERS WY 10 2007 14 City Zip Code State Transaction ID: SA11A1.56301 **AUSTIN** TX 78746 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer AUSTIN ANESTH GRP Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** JOANNE JENE Date of Receipt Mailing Address 2221 SW 1ST AVE #1625 13 2007 City Zip Code Transaction ID: SA11A1.55991 State **PORTLAND** OR 97201 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer OREGON ANES GRP Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. WILLIAM JENKINS Date of Receipt Mailing Address 3938 BLACKSTONE CT 10 10 2007 Zip Code Citv State Transaction ID: SA11A1.55522 **HAYWARD** CA 94542 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer SELF-EMPLOYED Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

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	AMERICAN SOCIETY OF ANESTHESIC	OLOGISTS	S POLITICAL ACTION COM	MITTEE			
Α.	Full Name (Last, First, Middle Initial) ROBERT JERSTAD			Date of Receipt			
	Mailing Address 3611 148TH ST			10 16 2007			
	City	State	Zip Code	Transaction ID: SA11A1.56677			
	URBANDALE	IA	50323	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		250.00			
	Name of Employer MCA	Occupation ANESTH	n ESIOLOGIST				
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼		250.00				
— В.	Full Name (Last, First, Middle Initial) JAY JOHANSEN			Date of Receipt			
	Mailing Address 1610 QUEENSLAND CT	10 13 YYYYY 10 13 2007					
	City	State	Zip Code	Transaction ID: SA11A1.55713			
	ALPHARETTA	GA	30005	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		250.00			
	Name of Employer EMORY UNIV	Occupation ANESTH	n ESIOLOGIST				
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General Other (specify) ▼		250.00				
<u> </u>	Full Name (Last, First, Middle Initial) JOHN JOHNSON			Date of Receipt			
	Mailing Address BOX 8458			10 13 2007			
	City	State	Zip Code	Transaction ID: SA11A1.56067			
	SPARTANBURG	SC	29305	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		500.00			
EUUTHIII G VIIES CONSIII		Occupation PHYSICI					
	Receipt For:	Aggregate	e Year-to-Date ▼				
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PAGE 84 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) STEVEN JOHNSON Date of Receipt Mailing Address 1122 TOLER PL 2007 10 13 City State Zip Code Transaction ID: SA11A1.55826 **NORFOLK** VA 23503 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer ATLANTIC ANESTH Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** ROBERT JOHNSTONE Date of Receipt Mailing Address 369 LAKEVIEW DR 12 2007 City Zip Code State Transaction ID: SA11A1.55688 **MORGANTOWN** WV 26508 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer UNIV HEALTH ASSOC Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. DENISE JONES Date of Receipt Mailing Address 2 SO. 155 GLEN AVE 10 3 1 2007 Citv State Zip Code Transaction ID: SA11A1.56915 LOMBARD Ш 60148 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer Occupation MANAGER Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00

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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER	: PAGE 85 / 191		
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_	Full Name (Last, First, Middle Initial)					
Α.	STEPHANIE JONES			Date of Receipt		
	Mailing Address 100 LINCOLN RD			10 13		
	City	State	Zip Code	Transaction ID: S		
	WAYLAND	MA	01778	Amount of Each F		
			01770	Amount of Laciff		
	FEC ID number of contributing federal political committee.				250.00	
	·					
	Name of Employer HARVARD MED FAC PRAC	Occupation				
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	Receipt For: Primary General	Aggregate	e Year-to-Date ▼			
	Other (specify)	' '	250.00			
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_	Full Name (Last, First, Middle Initial)					
В.	JAMES JUSTICE			Date of Receipt		
	Mailing Address 836 NODDY CT	M M / D D	7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	C'h.	7:n Oada	10 15			
	City State		Zip Code	Transaction ID: SA11A1.56509		
	ARROYO GRANDE	CA	93420	Amount of Each F	leceipt this Period	
	FEC ID number of contributing federal political committee.	C			250.00	
	Name of Employer AMGSM	Occupation				
			ESIOLOGIST			
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General Other (specify)	' '	250.00			
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	Full Name (Last, First, Middle Initial)					
C.	ZEEV KAIN			Date of Receipt		
	Mailing Address 6 OCTOBER HILL RD			M M / D D		
	City	State	7in Codo	10 13		
	WOODBRIDGE	CT	Zip Code 06525	Transaction ID: S		
		01	00323	Amount of Each F	lecelpt this Feriod	
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	Name of Employer YALE UNIV	Occupation				
		1	ESIOLOGIST			
	Receipt For:	Aggregate	Year-to-Date ▼	.		
Primary General Other (specify)			500.00			
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$ \rangle$	AMERICAN SOCIETY OF ANESTHES	IOI OGISTS	S POLITICAL ACTION COM	MITTEE		
	7	.0200.010	71 021110/12/1011011 001111	***************************************		
_	Full Name (Last, First, Middle Initial)					
Α.	PETE KALUSZYK			Date of Receipt		
	Mailing Address 12709 ARLISS DR			10 14	2007	
	City	State	Zip Code	Transaction ID: SA		
	LAKEWOOD	OH	44107	Amount of Each Rec		
			11107	Amount of Each Fice	1 1 1 1	
	FEC ID number of contributing federal political committee.	C			500.00	
	Name of Employer METROHEALTH MED CTR	Occupation				
			ESIOLOGIST			
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼			
	Other (specify)		500.00			
		0 0	0 0 0 0 0 0 0			
_	Full Name (Last, First, Middle Initial)					
В.	PETER KANE			Date of Receipt		
	Mailing Address 4462 LINCKLAEN RD	M M / D D	2007			
	Cit.	7:n Oada	10 31	2007		
	City State		Zip Code	Transaction ID: SA11A1.56904		
	CAZENOVIA	NY	13035	Amount of Each Rec	eipt this Period	
	FEC ID number of contributing federal political committee.	C			500.00	
	Name of Employer SUNY UPSTATE MED CTR	Occupation				
		PHYSICI				
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General Other (specify)	' '	500.00			
	Other (specify)	0 0	0 0 0 0 0 0 0			
_	Full Name (Last, First, Middle Initial)					
C.	PATRICIA KAPUR			Date of Receipt		
	Mailing Address 5350 CORBIN AVE			M M / D D	/ Y Y Y Y Y	
	Cit.	Ctata	7:n Oada	10 13	2007	
	City TARZANA	State CA	Zip Code	Transaction ID: SA		
		CA	91356	Amount of Each Rec	elpt this Period	
	FEC ID number of contributing federal political committee.	C			500.00	
	Name of Employer UCLA	Occupation				
		PHYSICI				
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Primary General Other (specify)			500.00			
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PAGE 87 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) TRIPTI KATARIA Date of Receipt Mailing Address 130 S CANAL #419 10 2007 14 City State Zip Code Transaction ID: SA11A1.56376 **CHICAGO** IL 60606 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer WITT KIEFFER Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** CANDANCE KELLER Date of Receipt Mailing Address 8025 LEGEND CREEK DR 3 1 2007 City State Zip Code Transaction ID: SA11A1.56919 **MIRAMAR BEACH** FL 32550 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer SELF-EMPLOYED Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. JIM KELLY Date of Receipt Mailing Address 11720 MADISON 10 13 2007 Citv State Zip Code Transaction ID: SA11A1.56001 KANSAS CITY MO Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer CARDIOTHORACIC ANES Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)

21	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER:	PAGE 88 / 191
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$\overline{\ \ }$	NAME OF COMMITTEE (In Full)				
\rangle	AMERICAN SOCIETY OF ANESTHESIC	LOGISTS	S POLITICAL ACTION COM	MITTEE	
_					
	Full Name (Last, First, Middle Initial)				
۹.	ANGELA KENDRICK			Date of Receipt	
	Mailing Address 7900 SW 191ST AVE			10 D D D D D D D D D D D D D D D D D D D	2007
	011	01-1-	7'- 0-1-		
	City	State	Zip Code	Transaction ID: SA	
	ALOHA	OR	97007	Amount of Each Red	ceipt this Period
	FEC ID number of contributing	С			250.00
	federal political committee.				
	Name of Employer	Occupation	า	\dashv	
	Name of Employer OHSU		ESIOLOGIST		
	Receipt For:		Year-to-Date ▼		
	Primary General	7.99.094.0	Tour to Date V	1	
	Other (specify) ▼		250.00		
	Full Name (Last, First, Middle Initial)				
3.	SEAN KENNEDY			Date of Receipt	
	Mailing Address 1010 INDIAN CREEK LN	M M / D D	/ Y 		
		10 14	2007		
	City	Transaction ID: SA	11A1.56328		
	WYNNEWOOD	PA	19096	Amount of Each Red	ceipt this Period
	FEC ID number of contributing				050.00
	federal political committee.	C			250.00
		<u> </u>		_	
	Name of Employer UNIV OF PENN	Occupation			
		PHYSICI			
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	.	
	H ' -	' '	250.00		
	Other (specify)	1 1			
	Full Name (Last First Middle Initial)				
3 .	Full Name (Last, First, Middle Initial) SCOTT KERCHEVILLE			Date of Receipt	
	Mailing Address 14 ETON GREEN CIR			M M / D D	/ Y
	5 ITETON GILLLIN OIT			10 15	2007
	City	State	Zip Code	Transaction ID: SA	11A1.56635
	SAN ANTONIO	TX	78257	Amount of Each Red	
	FEC ID number of contributing				1 1 1 1 1
	federal political committee.	C			500.00
	Name of Employer UTHSCSA	Occupation			
Receipt For: Aggrega		PHYSICI		4	
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PAGE 89 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) JAMES KERR Date of Receipt Mailing Address 2165 HERSCHEL ST 2007 10 13 City State Zip Code Transaction ID: SA11A1.56055 **JACKSONVILLE** 32204 FI Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer N FL ANES CONSULTS Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. RUBIN KESNER Date of Receipt Mailing Address 35 HEARTHSTONE DRIVE 04 2007 City State Zip Code Transaction ID: SA11A1.55405 **GANSEVOORT** NY 12831 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer ANESTHESIA GROUP OF ALBANY Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. ROBERT KETTLER Date of Receipt Mailing Address 2570 N 85TH ST 10 12 2007 Citv State Zip Code Transaction ID: SA11A1.55686 WAU<u>WATOSA</u> WI 53226 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer MED COL WISCONSIN Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

PAGE 90 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) Date of Receipt JON KETZLER Mailing Address 600 HIGHLAND AVE#3CSC 2007 10 14 City State Zip Code Transaction ID: SA11A1.56234 **MADISON** W 53792 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer UW HOSP Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. PHILIP KIM Date of Receipt Mailing Address 3202 SAW MILL RD 14 2007 City State Zip Code Transaction ID: SA11A1.56247 **NEWTOWN SQ** PA 19073 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer CTR FOR PAIN MED Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. STEVE KIMATIAN Date of Receipt Mailing Address 32 ELM AVE 10 13 2007 Citv State Zip Code Transaction ID: SA11A1.56073 **HERSHEY** PA 17033 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer PENN STATE MILTON Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

PAGE 91 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) JAMES KINDSCHER Date of Receipt Mailing Address 14204 DEARBORN 2007 10 14 City State Zip Code Transaction ID: SA11A1.56371 **OVERLAND PARK** KS 66223 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer KANSAS UNIV Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. WILLIAM KING Date of Receipt Mailing Address 5102 CHERRYWOOD CT 14 2007 City State Zip Code Transaction ID: SA11A1.56232 **LEAGUE CITY** TX 77523 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer UNIV OF TEXAS MED Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. ALLAN KLOCK Date of Receipt Mailing Address 613 PARK AVE 10 13 2007 Zip Code Citv State Transaction ID: SA11A1.55882 RIVER FOREST Ш 60303 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer U CHICAGO Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 92 / 191 (check only one) X 11a 11b 11c 12	
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or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) AMERICAN SOCIETY OF ANESTHESIC	MITTEE		
Α.	Full Name (Last, First, Middle Initial) JAN KNISELY			Date of Receipt
	Mailing Address 6335 MIAMI CT			10 14 2007
	City	State	Zip Code	Transaction ID: SA11A1.56453
	LOVELAND	OH	45140	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer SELF-EMPLOYED	Occupation PHYSICI		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
В.	Full Name (Last, First, Middle Initial) ROBERT KOEBERT			Date of Receipt
	Mailing Address 141 N JEFFERSON ST	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: SA11A1.55885
	MILWAUKEE	WI	53202	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer SUMMIT ANESTH	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	1 1	500.00	
<u> </u>	Full Name (Last, First, Middle Initial) HEIDI KOENIG			Date of Receipt
	Mailing Address 507 RIDGEWOOD RD			10 31 7 2007
	City	State	Zip Code	Transaction ID: SA11A1.56889
	LOUISVILLE	KY	40207	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer UNIV OF LOUISVILLE	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
S	UBTOTAL of Receipts This Page (optional)			1000.00

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Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) AMERICAN SOCIETY OF ANESTHES	OLOGISTS	S POLITICAL ACTION COM	MITTEE					
Full Name (Last, First, Middle Initial) A. RAINER KOHRS			Date of Receipt					
Mailing Address 6819 E 116TH STREE			10 31 / Y Y Y Y Y Y					
City BIXBY	State OK	Zip Code 74008	Transaction ID: SA11A1.56832 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		500.00					
Name of Employer ASSOCIATED ANES INC	Occupatio PHYSICI							
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00						
Full Name (Last, First, Middle Initial) VENKATA KOMANDURI			Date of Receipt					
Mailing Address 395 FRANKSMITH RD	10 13 7 2007							
City LONGMEADOW	State MA	Zip Code 01106	Transaction ID: SA11A1.56034 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	01100	500.00					
Name of Employer SPRINGFIELD ANES SERV	Occupatio	n IESIOLOGIST						
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 500.00						
Full Name (Last, First, Middle Initial) C. CHRISTOPHER KREUZER			Date of Receipt					
Mailing Address 2045 SCARLET OAK (CT NE		M M / D D / Y Y Y Y Y Y 1 Y 1 1 4 2 0 0 7					
City	State MI	Zip Code	Transaction ID: SA11A1.56274					
ADA FEC ID number of contributing federal political committee.	C	49301	Amount of Each Receipt this Period 500.00					
Name of Employer ANES MED CONSULT	Occupatio ANESTH	n IESIOLOGIST						
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00						
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PAGE 94 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) ASHOK KRISHNANEY Date of Receipt Mailing Address 12078 N LAKE SHORE DR 15 2007 10 City State Zip Code Transaction ID: SA11A1.56536 **MEQUON** W 53092 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer MIDWEST ANES CONSUL Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** GREGORY KRONBERG Date of Receipt Mailing Address 2205 ISLAND WOOD 14 2007 City State Zip Code Transaction ID: SA11A1.56362 **AUSTIN** TX 78733 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer CAPITOL ANES ASSOC Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. JOSEPH KRYC Date of Receipt Mailing Address 8360 E CORRINE DR 10 13 2007 Citv State Zip Code Transaction ID: SA11A1.56021 **SCOTTSDALE** ΑZ 85260 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer RED MOUNTAIN ANES Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)

PAGE 95 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) MARK KYKER Date of Receipt Mailing Address 10810 ONYX DR 2007 10 13 City State Zip Code Transaction ID: SA11A1.55843 CARME IN 40032 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** CHRISTOPHER LACE Date of Receipt Mailing Address P.O. BOX 3444 13 2007 City Zip Code Transaction ID: SA11A1.55852 State **TUALATIN** OR 97062 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. MICHAEL LAFLIN Date of Receipt Mailing Address 133 CALABRIA ST 10 13 2007 Zip Code City State Transaction ID: SA11A1.55855 **APTOS** CA 95003 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer AMGSC Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional)

PAGE 96 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) ROBERT LAGASSE Date of Receipt Mailing Address 1825 EASTCHESTER RD 2007 10 13 City State Zip Code Transaction ID: SA11A1.55838 **BRONX** NY 10461 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer MONTEFIORE MED CTR Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. WILLIAM LANE Date of Receipt Mailing Address 151 GLENEAGLES CIR 8 0 2007 City State Zip Code Transaction ID: SA11A1.55440 **MACON** GA 31210 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer NEXUS MED GRP Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. W ROBERT LANE Date of Receipt Mailing Address 151 GLENEAGLES CRK 14 10 2007 City State Zip Code Transaction ID: SA11A1.56342 MACON GA 31210 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer NEXUS MED GRP Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

PAGE 97 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) MICHAEL LASECKI Date of Receipt Mailing Address 3398 RIVIERE DU CHIEN 2007 10 13 City State Zip Code Transaction ID: SA11A1.55950 **MOBILE** Αl 36693 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer ANESTH SERVICES Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** GIDEON LAU Date of Receipt Mailing Address 406 FLANDERS 12 2007 City State Zip Code Transaction ID: SA11A1.55658 **CHICKASHA** OK 73018 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer GRADY MEM HOSP Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. JOHN LAWRENCE Date of Receipt Mailing Address 7100 HOLLYLEAF DR 10 09 2007 Citv State Zip Code Transaction ID: SA11A1.55459 BURLINGTON KY 41005 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

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PAGE 98 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) LORRILEE Date of Receipt Mailing Address 9513 18TH AVE NW 10 2007 13 City State Zip Code Transaction ID: SA11A1.55841 **SEATTLE** WA 98117 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer U OF WASHINGTON Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. MARK LEMA Date of Receipt Mailing Address 155 ROXBURY PARK 15 2007 City State Zip Code Transaction ID: SA11A1.56467 **E AMHERST** NY 14051 Amount of Each Receipt this Period FEC ID number of contributing C 1500.00 federal political committee. Name of Employer ROSWELL PARK Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) Full Name (Last, First, Middle Initial) C. NORMAN LEVIN Date of Receipt Mailing Address 10190 BAYWOOD CT 14 10 2007 Zip Code Citv State Transaction ID: SA11A1.56345 LOS ANGELES CA 90077 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer SELF-EMPLOYED Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 2250.00 SUBTOTAL of Receipts This Page (optional)

PAGE 99 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) BRENDA LEWIS Date of Receipt Mailing Address 646 CHARLES PLACE 3 1 2007 10 Zip Code City State Transaction ID: SA11A1.56910 HIGHLAND HTS OH 44143 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer CLEVELAND CLINIC Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. MICHAEL LEWIS Date of Receipt Mailing Address 9420 SEA TURTLEMANOR 14 2007 City State Zip Code Transaction ID: SA11A1.56214 **PLANTATION** FL 33329 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer UNIV OF MIAMI Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. GREG LIND Date of Receipt Mailing Address 2825 STOCKYARD RD I-200 10 13 2007 City State Zip Code Transaction ID: SA11A1.55850 **MISSOULA** MT 59808 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer MISSOULA ANESTH Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional)

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	7.WETHOM COOLETT OF MILESTINESIC	LOGIOTO	TO LITTORIE MOTION GOM	IVII I I L
Α.	Full Name (Last, First, Middle Initial) JOHN LINDSEY			Date of Receipt
Λ.	Mailing Address 2502 S 186TH CIR			M M / D D / Y Y Y Y
				10 16 2007
	City	State	Zip Code	Transaction ID: SA11A1.56666
	ОМАНА	NE	68130	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer ORTHO ANES SPEC	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify) ▼	1 1	300.00	1
В.	Full Name (Last, First, Middle Initial) CATHERINE LINEBERGER			Date of Receipt
	Mailing Address 14 KENDALL DR	10 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: SA11A1.56094
	CHAPEL HILL	NC	27517	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		750.00
	DUIZE LINIM '	Occupation PHYSICI		7
	Receipt For:		Year-to-Date ▼	_
	Primary General	7.99.094.0		1
	Other (specify) ▼		750.00	
<u> </u>	Full Name (Last, First, Middle Initial) ALAN LISBON			Date of Receipt
٠.	Mailing Address 2 CROSS ST			M M / D D / Y Y Y Y
	Cit.	Ctata	Zin Onda	10 13 2007
	City DOVER	State MA	Zip Code 02030	Transaction ID: SA11A1.55712 Amount of Each Receipt this Period
			02030	
	FEC ID number of contributing federal political committee.	C		250.00
DIDMC ' '		Occupation PHYSICI		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	· · ·	250.00	1
	Other (specify) ▼		250.00	1
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\setminus	NAME OF COMMITTEE (In Full)			
\rangle	AMERICAN SOCIETY OF ANESTHESIC	OLOGISTS	S POLITICAL ACTION COM	MITTEE
Α.	Full Name (Last, First, Middle Initial) SUSAN LISMAN			Date of Receipt
	Mailing Address 32 BRASSIC WAY	10 13 7 2007		
	City	State	Zip Code	Transaction ID: SA11A1.56081
	N READING	MA	01864	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer CAA	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	1 1	500.00	1
	Other (specify)		500.00	
В.	Full Name (Last, First, Middle Initial) ASA LOCKHART			Date of Receipt
	Mailing Address 2106 KENNEBUNK LN	10 12 2007		
	City	State	Zip Code	Transaction ID: SA11A1.55680
	TYLER	TX	75703	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer EAST TX ANES ASSOC	Occupation PHYSICI.		
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Primary General		500.00	1
	Other (specify)		500.00	
<u>с.</u>	Full Name (Last, First, Middle Initial) JOY LOCKHART			Date of Receipt
	Mailing Address 2106 KENNEBUNK LN			10 12 2007
	City	State	Zip Code	Transaction ID: SA11A1.55668
	TYLER	TX	75703	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer GOLDEN CABUCEUS	Occupation ADMINIS	TRATOR	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
s	UBTOTAL of Receipts This Page (optional))	1500.00

PAGE 102 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) LESLIE LONG Date of Receipt Mailing Address 1384 KATHWOOD DR 2007 10 10 City State Zip Code Transaction ID: SA11A1.55529 **COLUMBIA** SC 29206 Amount of Each Receipt this Period FEC ID number of contributing 300.00 C federal political committee. Name of Employer CRITICAL HLTH SYS SC Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** TIMOTHY LUBENOW Date of Receipt Mailing Address 14 SOUTH OAK 15 2007 City State Zip Code Transaction ID: SA11A1.56511 HINSDALE IL 60521 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer UNIV ANESTH Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. LINDA LUCAS Date of Receipt Mailing Address 5013 OLD FEDERAL RD 10 3 1 2007 Citv State Zip Code Transaction ID: SA11A1.56908 LOUISVILLE KY 40207 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer UNIV OF LOUISVILLE Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 800.00 SUBTOTAL of Receipts This Page (optional)

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or	for commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from such committee.
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\angle	AMERICAN SOCIETY OF ANESTHESIC	DLOGISTS	S POLITICAL ACTION COM	MITTEE
A.	Full Name (Last, First, Middle Initial) PHILIP LUMB			Date of Receipt
	Mailing Address 1386 EDGEHILL PL	10 13 2007		
	City	State	Zip Code	Transaction ID: SA11A1.56062
	PASADENA	CA	91103	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer USC	Occupation PHYSICI		
	Receipt For:		Year-to-Date ▼	-
	Primary General	00 0		1
	Other (specify) ▼	0 0	500.00	
В.	Full Name (Last, First, Middle Initial) ANNE LYNN			Date of Receipt
	Mailing Address CHILDRENS HOSPITAL	10 14 2007		
	City	State	Zip Code	Transaction ID: SA11A1.56261
	SEATTLE	WA	98115	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Francisco	0		
	Name of Employer UNIV WASH	Occupation ANESTH	1 ESIOLOGIST	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	1 1	250.00	1
	Other (specify) ▼		250.00	
— С.	Full Name (Last, First, Middle Initial) DAVID MACKEY			Date of Receipt
	Mailing Address 4128 DARTMOUTH AVE	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: SA11A1.56500
	W UNIV PL	TX	77005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer U OF TX	Occupation ADMINIS	TRATOR	
	Receipt For:		Year-to-Date ▼	7
	Primary General	11 1	500.00	1
	Other (specify) ▼		500.00	
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

TOTAL This Period (last page this line number only)

PAGE 104 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) DURGESH MANKIKAR Date of Receipt Mailing Address 7 REID ST 2007 10 3 1 City State Zip Code Transaction ID: SA11A1.56920 **WEST ORANGE** 07052 NJ Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer MT CLAIR ANESTH ASSOC Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. ALAN MARCO Date of Receipt Mailing Address 7129 JAMES FORD DR 09 2007 City State Zip Code Transaction ID: SA11A1.55468 **TOLEDO** OH 43617 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer UNIV OF TOLEDO Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. GREGORY MARCOE Date of Receipt Mailing Address 4087 OLD PINE TRAIL 10 24 2007 Citv State Zip Code Transaction ID: SA11A1.56763 **MIDLAND** MI 48642 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer MMAG Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 105 / 191 (check only one)				
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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)								
AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE								
Α.	Full Name (Last, First, Middle Initial) JOSEPH MARINO			Date of Receipt				
	Mailing Address 1 GRACE CT	10 14 2007						
	City	State	Zip Code	Transaction ID: SA11A1.56326				
	GREENLAWN	NY	11740	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		250.00				
	SELE EMBLOYED	Occupation ANESTHI	SIOLOGIST					
			Year-to-Date ▼					
	Primary General	1 999						
	Other (specify)	250.00						
— В.	Full Name (Last, First, Middle Initial) KURT MARKGRAF			Date of Receipt				
	Mailing Address 3663 MCKINLEY AVE	10 13 2007						
	City	State	Zip Code	Transaction ID: SA11A1.55898				
	FORT MYERS	FL	33901	Amount of Each Receipt this Period				
	FEC ID number of contributing			500.00				
	federal political committee.	C		300.00				
	MEDICAL ANECTHERIA I	Occupation ANESTHI	ı ESIOLOGIST					
	Receipt For:	Aggregate	Year-to-Date ▼					
	Primary General		500.00	1				
	Other (specify) 🔻	0 0	300.00					
<u> </u>	Full Name (Last, First, Middle Initial) DAVID MARTIN			Date of Receipt				
	Mailing Address 5274 CARRINGTON CIR			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	City	State	Zip Code	Transaction ID: SA11A1.56502				
	ROCHESTER	MN	55901	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		500.00				
		Occupation PHYSICIA						
			Year-to-Date ▼	7				
	Primary General			1				
	Other (specify) ▼	500.00						
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l s	UBTOTAL of Receipts This Page (optional)			1250.00				

PAGE 106 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** <u>|</u>17 13 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) A. DONALD MARTIN Date of Receipt Mailing Address 19 GENTRY DR 2007 10 13 City State Zip Code Transaction ID: SA11A1.55718 **PALMYRA** PA 17078 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer PENN STATE UNIV Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. ROBERT MARTIN Date of Receipt Mailing Address 11721 WELEBIR ST 12 2007 City State Zip Code Transaction ID: SA11A1.55637 **LOMA LINDA** CA 92354 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer LLU ANES MED GRP Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. ERIC MASON Date of Receipt Mailing Address 4313 CEDAR OAK 10 13 2007 City State Zip Code Transaction ID: SA11A1.56063 **RALEIGH** NC 27612 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer CHSNC Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)		PAGE 107/191		
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	NAME OF COMMITTEE (In Full)						
AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE							
Α.	Full Name (Last, First, Middle Initial) LINDA MASON			Date of Receipt			
	Mailing Address 1665 HALSEX ST			10 13 / 2007			
	City	State	Zip Code		Transaction ID: SA11A1.55865		
	REDLANDS	CA	92373	Amount of Each Receip	t this Period		
	FEC ID number of contributing federal political committee.	C			500.00		
	Name of Employer LOMA LINDA ANESTH	Occupation ANESTHESIOLOGIST					
	Receipt For:	Aggregate Year-to-Date ▼					
	Primary General Other (specify) ▼	500.00					
	Other (specify)		0 0 0 0 0 0 0	.1			
В.	Full Name (Last, First, Middle Initial) TOM MATISKI			Date of Receipt			
	Mailing Address 3930 E MOUNTAIN VIEW			1 0 / D D / D 1 3	2007		
	City	State	Zip Code	Transaction ID: SA11	A1.55869		
	PHOENIX	AZ	85028	Amount of Each Receip	t this Period		
	FEC ID number of contributing federal political committee.	C			500.00		
	Name of Employer METRO ANESTH	Occupation PHYSICI					
	Receipt For: Aggre Primary General		e Year-to-Date ▼				
			500.00	1			
	Other (specify)	0 0					
C.	Full Name (Last, First, Middle Initial) JEAN-PAUL MATTER			Date of Receipt			
•	Mailing Address 8385 INDIAN HILL RD				YYYY		
				10 15	2007		
	City CINCINNATI	State OH	Zip Code	Transaction ID: SA11			
			45243	Amount of Each Receip	t this Period		
	FEC ID number of contributing federal political committee.	C			250.00		
	Name of Employer ANES GRP PRAC	Occupation ANESTH	n ESIOLOGIST				
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General Other (specify) ▼		250.00				
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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PAGE 108 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) RANDALL MAYDEW Date of Receipt Mailing Address 6910 WILDGLEN DR 10 2007 13 City State Zip Code Transaction ID: SA11A1.56039 **DALLAS** TX 75219 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer SELF-EMPLOYED Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. MICHAEL MCCORD Date of Receipt Mailing Address 104 ROCK SQUIRREL 14 2007 City State Zip Code Transaction ID: SA11A1.56370 **SAN ANTONIO** TX 78231 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer TEJAS ANESTH Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. JAMES MCDONALD Date of Receipt Mailing Address 130 HERITAGE CT 10 8 0 2007 City State Zip Code Transaction ID: SA11A1.55430 MACON GA 31210 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer NEXUS MED GRP Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)

PAGE 109 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) PATRICK MCGANNON Date of Receipt Mailing Address 248 BROOKWAVE DR S 2007 10 13 City Zip Code State Transaction ID: SA11A1.55857 **YORK** PA 17403 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer ANES ASSOC OF YORK Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** JOHN MCGEE Date of Receipt Mailing Address 3719 KEEMAN LN 13 2007 City State Zip Code Transaction ID: SA11A1.55981 **GLENVIEW** IL 60026 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer EVANSTON NW HEALTH Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. BRIAN MCGLINCH Date of Receipt Mailing Address 1832 22ND AVE NE 10 13 2007 Citv State Zip Code Transaction ID: SA11A1.55983 **ROCHESTER** MN 55906 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer MAYO CLINIC Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

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PAGE 110 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) JAMES MCGRIFF Date of Receipt Mailing Address 2006 FRANKLIN ST #301 2007 10 8 0 City State Zip Code Transaction ID: SA11A1.55443 HUNTSVILLE 35801 Αl Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer COMPREHENSIVE ANES SER Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. JAMES MCMICHAEL Date of Receipt Mailing Address 2911 GREENLEE DR 13 2007 City State Zip Code Transaction ID: SA11A1.56035 **AUSTIN** TX 78703 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer CAPITOL ANESTH ASSOC Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. DENNIS MCNICHOLL Date of Receipt Mailing Address 26 JOHN ST #1 10 8 0 2007 Citv State Zip Code Transaction ID: SA11A1.55420 **BROOKLINE** MA 02446 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer BRIGHAM & WOMENS HOSP Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)

PAGE 111/191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) MICHAEL MENDESZOON Date of Receipt Mailing Address 451 CLARKSON AVE B2175 15 2007 10 City Zip Code State Transaction ID: SA11A1.56513 **BROOKLYN** NY 11203 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer KINGS COUNTY HOSP Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. DAVID MERCIER Date of Receipt Mailing Address 7433 VILLANOVA ST 15 2007 City State Zip Code Transaction ID: SA11A1.56496 **DALLAS** TX 75225 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer UT SOUTHWESTERN Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. DOUGLAS MERRILL Date of Receipt Mailing Address 221 E COLLEGE #706 10 15 2007 Citv State Zip Code Transaction ID: SA11A1.56571 **IOWA CITY** IΑ 52240 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer UNIV OF IOWA Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)

PAGE 112/191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) LAUREN MERRITT Date of Receipt Mailing Address 6032 ERENSONG LN 10 2007 14 City State Zip Code Transaction ID: SA11A1.56283 **MEMPHIS** ΤN 38120 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer METRO ANESTH Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. DAVID MERZEL Date of Receipt Mailing Address 6235 N FRESNO ST #103 3 1 2007 City State Zip Code Transaction ID: SA11A1.56888 **FRESNO** CA 93710 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer PEDIATRIC ANES ASSOC Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. JUSTIN MESCHLER Date of Receipt Mailing Address 255 RIVERMIST RD 10 8 0 2007 Citv State Zip Code Transaction ID: SA11A1.55434 JULIETTE GA 31046 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer NEXUS MED GRP Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

PAGE 113 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) JAMES MESROBIAN Date of Receipt Mailing Address 827 E BIRCH AVE 15 2007 10 City State Zip Code Transaction ID: SA11A1.56537 WHITEFISH BAY W 53217 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer SUMMIT ANESTH Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. RAFAEL MIGUEL Date of Receipt Mailing Address 25 TREASURE DR 14 2007 City State Zip Code Transaction ID: SA11A1.56312 **TAMPA** FL 33609 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer UNIV SOUTH FLORIDA Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. CHRIS MILLSON Date of Receipt Mailing Address 2460 WIMBLEDON DR 14 10 2007 Citv State Zip Code Transaction ID: SA11A1.56230 LAS VEGAS NV 89107 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer DESERT ANESTH Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

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PAGE 114 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) W STEPHEN MINORE Date of Receipt Mailing Address 2202 HARLEM 12 2007 10 City State Zip Code Transaction ID: SA11A1.55649 LOVES PARK IL 61111 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer RAA Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. KENNETH MIRSKY Date of Receipt Mailing Address 625 LENOX AVE 13 2007 City State Zip Code Transaction ID: SA11A1.55975 **WESTFIELD** NJ 07090 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer JAMES ST ANES ASSOC Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. DONALD M MATHEWS Date of Receipt Mailing Address 9 MONTAGUE TERRACE., APT 1 10 02 2007 Citv State Zip Code Transaction ID: SA11A1.55366 **BROOKLYN** NY 11201 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer GREENWICH MEDICAL ANESTHE-Occupation PHYSICIAN SIA Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 2000.00 SUBTOTAL of Receipts This Page (optional)

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SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 115 / 191			
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\setminus	NAME OF COMMITTEE (In Full)						
\rangle	AMERICAN SOCIETY OF ANESTHESIC	DLOGISTS	S POLITICAL ACTION COM	MITTEE			
A.	Full Name (Last, First, Middle Initial) DANIEL MOCHIZUKI			Date of Receipt			
	Mailing Address 305 VINEYARD TOWN CENTE		STE 209	10 11 2007			
	City	State	Zip Code	Transaction ID: SA11A1.55598			
	MORGAN HILL	CA	95037	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		250.00			
	Name of Employer DANIEL Y. MOCHIZUKI, M.D., A MEDICAL C	Occupation ANESTH	n ESIOLOGIST				
	Receipt For: Primary General	Aggregate	Year-to-Date ▼				
	Other (specify) ▼	0 0	250.00				
В.	Full Name (Last, First, Middle Initial) GEORGE MOMANY			Date of Receipt			
	Mailing Address 5618 S WILLAMETTE			10 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City	State	Zip Code	Transaction ID: SA11A1.56633			
	SPOKANE	WA	99223	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		250.00			
	Name of Employer S.E.	Occupation PHYSICI.					
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼		250.00				
<u> </u>	Full Name (Last, First, Middle Initial) JOE MONK			Date of Receipt			
	Mailing Address 6713 LAKEWOOD BLVD)		M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y			
	City	State	Zip Code	Transaction ID: SA11A1.56280			
	DALLAS	TX	75214	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		500.00			
	Name of Employer NORTHSTAR ANESTH	Occupation ANESTH	n ESIOLOGIST				
	Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00				
s	UBTOTAL of Receipts This Page (optional)			1000.00			

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C/	CHEDINE A (FEC Form 2V)			FOR LINE NUMBER: PAGE 116 / 191
	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
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				13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	AMERICAN SOCIETY OF ANESTHESIC	OLOGISTS	S POLITICAL ACTION COM	MITTEE
A.	Full Name (Last, First, Middle Initial) WILLIAM MONTGOMERY			Date of Receipt
	Mailing Address 533 AHAKEA ST			10 15 2007
	City	State	Zip Code	Transaction ID: SA11A1.56567
	HONOLULU	HI	96816	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer STRAUB CLINIC	Occupation PHYSICI		7
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		250.00	1
	Other (specify) ▼		200.00]
— В.	Full Name (Last, First, Middle Initial) JACK MOORE			Date of Receipt
	Mailing Address 6188 WOOSTER AVE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.56318
	LOS ANGELES	CA	90056	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer KAISER PERMANENTE	Occupation PHYSICI		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		250.00	1
	Other (specify)		200.00	J
<u> </u>	Full Name (Last, First, Middle Initial) JAMES MOORE			Date of Receipt
	Mailing Address 10833 LECONTE AVE			10 14 2007
	City	State	Zip Code	Transaction ID: SA11A1.56349
	LOS ANGELES	CA	90095	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer UCLA MED CTR	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:		Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify) ▼		500.00	1
Г				
s	UBTOTAL of Receipts This Page (optional)			1000.00

TOTAL This Period (last page this line number only)

TOTAL This Period (last page this line number only)

PAGE 117/191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) ROGER MOORE Date of Receipt Mailing Address 435 CAMDEN AVE 15 2007 10 City State Zip Code Transaction ID: SA11A1.56466 **MOORESTOWN** 08057 NJ Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer DEBORAH HEART & LUNG Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** GWENDOLYN MORASKI Date of Receipt Mailing Address 20 RUTHIES LN 09 2007 City State Zip Code Transaction ID: SA11A1.55452 W SIMSBURY CT CT 06092 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer WOODLAND ANESTH Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. FRANK MORETZ Date of Receipt Mailing Address P.O. BOX 5244 10 13 2007 Citv State Zip Code Transaction ID: SA11A1.56013 **ASHEVILLE** NC 28813 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer ASHEVILLE ANES ASSOC Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional)

PAGE 118 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) KERRY MORRISON Date of Receipt Mailing Address 5911 S CEDAR ST 2007 10 14 City State Zip Code Transaction ID: SA11A1.56212 **CASPER** WY 82601 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer SELF-EMPLOYED Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** JOHN MORROW Date of Receipt Mailing Address 3466 WARDESTON WAY 13 2007 City Zip Code State Transaction ID: SA11A1.55848 <u>ATLA</u>NTA GA 30319 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer EMORY UNIV Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date V Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. JOHN MOYERS Date of Receipt Mailing Address 417 HUTCHINSON AVE 10 12 2007 Citv State Zip Code Transaction ID: SA11A1.55651 **IOWA CITY** IΑ 52246 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer U OF IOWA Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

PAGE 119 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) JEFF MUELLER Date of Receipt Mailing Address 9121 E PALM TREE DR 3 1 2007 10 City State Zip Code Transaction ID: SA11A1.56870 **SCOTTSDALE** 85255 ΑZ Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer MAYO CLINIC Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** CRAIG MUETTERTIES Date of Receipt Mailing Address 128 DEERFIELD CT 15 2007 City State Zip Code Transaction ID: SA11A1.56519 **GLEN MILLS** PA 19342 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer HAVERFORD ANES Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. JOEL MUMFORD Date of Receipt Mailing Address 221 ELM HILL RD 10 13 2007 Zip Code Citv State Transaction ID: SA11A1.55726 **SPRINGFIELD** VT 05156 Amount of Each Receipt this Period FEC ID number of contributing C 650.00 federal political committee. Name of Employer VA HOSPITAL Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) 1900.00 SUBTOTAL of Receipts This Page (optional)

PAGE 120 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) ANNMARIE MUNEZ Date of Receipt Mailing Address 8 VALE DR 3 1 2007 10 City State Zip Code Transaction ID: SA11A1.56840 S. BURLINGTON VT 05403 Amount of Each Receipt this Period FEC ID number of contributing 300.00 C federal political committee. Name of Employer FLETCHER ALLEN HEALTHCARE Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. ROBERT MURRAY Date of Receipt Mailing Address 19 ELM PARK BLVD 14 2007 City State Zip Code Transaction ID: SA11A1.56433 PLEASANT RIDGE MI 48069 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer S OAKLAND ANES ASSOC Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. TIM MURRAY Date of Receipt Mailing Address 57217 200TH ST 10 10 2007 Citv State Zip Code Transaction ID: SA11A1.55525 **MANKATO** MN 56001 Amount of Each Receipt this Period FEC ID number of contributing 300.00 C federal political committee. Name of Employer MANKATO ANES ASSOC Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 1100.00 SUBTOTAL of Receipts This Page (optional)

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 121 / 191
ITEMIZED RECEIPTS			or each category of the	(check only one)
•			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar	ny information copied from such Reports and State for commercial purposes, other than using the na	ements may	not be sold or used by any perso	on for the purpose of soliciting contributions
V		me and add	aress or any political committee to	solicit contributions from such committee.
$ \rangle$	NAME OF COMMITTEE (In Full) AMERICAN SOCIETY OF ANESTHESIC		S POLITICAL ACTION COM	MITTEE
	AMENICAN SOCIETY OF ANESTHESIC	LOGISTO	OT OLITIOAL ACTION COM	WITTEE
Α.	Full Name (Last, First, Middle Initial) GEORGE MYCHASKIW			Date of Receipt
Α.	Mailing Address 101 BRIDGEVIEW CIR			M M / D D / Y Y Y Y
				10 13 2007
	City	State	Zip Code	Transaction ID: SA11A1.55845
	RIDGELAND	MS	39157	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer U OF MS	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:		Year-to-Date ▼	
	Primary General		250.00	
	Other (specify)		230.00	
В.	Full Name (Last, First, Middle Initial) JOSEPH NAPLES			Date of Receipt
	Mailing Address 6565 FANNIN ST			10 14 2007
	City	State	Zip Code	Transaction ID: SA11A1.56267
	HOUSTON	TX	77030	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer METHODIST HOSP	Occupation	n STRATOR	
	Receipt For:		Year-to-Date ▼	-
	Primary General		500.00	1
	Other (specify) ▼		500.00	
<u> </u>	Full Name (Last, First, Middle Initial) MICHAEL NEED			Date of Receipt
•	Mailing Address 7632 TIMBER SPRINGS			M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	10 13 2007
	City FISHERS	IN	46038	Transaction ID: SA11A1.55835 Amount of Each Receipt this Period
	FEC ID number of contributing		1 1 1 1 1	
	federal political committee.	C		250.00
	Name of Employer SOUTHEAST ANESTH	Occupation PHYSICI		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	' '	250.00	
	Other (specify) ▼		200.00	
S	UBTOTAL of Receipts This Page (optional)			1000.00
\vdash	: _ :			
т	OTAL This Period (last page this line number onl	y)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 122 / 191
	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
Ar or	ly information copied from such Reports and State for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	AMERICAN SOCIETY OF ANESTHESIC	LOGISTS	S POLITICAL ACTION COM	MITTEE
۹.	Full Name (Last, First, Middle Initial) JOHN NEELD			Date of Receipt
	Mailing Address 3025 RIVER NORTH PK	WY		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.55639
	ATLANTA	GA	30528	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer NORTHSIDE ANESTH	Occupation ANESTH	ESIOLOGIST	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	500.00	
3.	Full Name (Last, First, Middle Initial) MARK NEWMAN			Date of Receipt
	Mailing Address 206 CONSTANCE SPRG	10 15 7 2007		
	City DURHAM	State NC	Zip Code	Transaction ID: SA11A1.56560
	FEC ID number of contributing		27713	Amount of Each Receipt this Period
	federal political committee.	C		250.00
	Name of Employer DUKE	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:		Year-to-Date ▼	
	Primary General		250.00	
	Other (specify) ▼	0 0	0 0 0 0 0 0 0	
о. Э.	Full Name (Last, First, Middle Initial) L. CHARLES NOVAK			Date of Receipt
	Mailing Address 6502 115TH PL SE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.56842
	BELLEVUE	WA	98006	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer UNIV OF WASHINGTON	Occupation PHYSICI.		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
s	UBTOTAL of Receipts This Page (optional)			1250.00
_	OTAL This Pariod (last page this line number and	lv)		
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 123 / 191
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An or	y information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	AMERICAN SOCIETY OF ANESTHESIC	LOGISTS	S POLITICAL ACTION COMI	MITTEE
۹.	Full Name (Last, First, Middle Initial) MARK NUNNALLY			Date of Receipt
	Mailing Address 616 W FULTON ST 503			10 16 2007
	CHICAGO	State IL	Zip Code	Transaction ID: SA11A1.56643
	FEC ID number of contributing		60661	Amount of Each Receipt this Period
	federal political committee.	C		250.00
	Name of Employer THE UNIVERSITY OF CHICAGO	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
_	Full Name (Last, First, Middle Initial)			Patrick Brooks
3.	RICHARD O'FLYNN Mailing Address 10 WHITE PINE LN			Date of Receipt
				10 15 2007
	City ROSE VALLEY	State PA	Zip Code 19063	Transaction ID: SA11A1.56516
	FEC ID number of contributing		19003	Amount of Each Receipt this Period
	federal political committee.	C		250.00
	Name of Employer SOCIETY HILL ANESTH	Occupation PHYSICI.		
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
		0 0	0 0 0 0 0 0 0	
Э.	Full Name (Last, First, Middle Initial) JERRY O'HARA			Date of Receipt
	Mailing Address 2931 HUNTERS WOODS	S LN		10 09 7 2007
	City	State	Zip Code	Transaction ID: SA11A1.55457
	WILLOUGHBY HILLS	ОН	44094	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer CLEVELAND CLINIC	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
s	UBTOTAL of Receipts This Page (optional)			750.00
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T	OTAL This Period (last page this line number onl	y))	

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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 124 / 191
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Ar	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	/ not be sold or used by any perso	on for the purpose of soliciting contributions
or		ame and add	aress or any political committee to	Solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) AMERICAN SOCIETY OF ANESTHESI	OLOGISTS	S POLITICAL ACTION COM	MITTEE
Α.	Full Name (Last, First, Middle Initial) COLLEEN O'LEARY			Date of Receipt
	Mailing Address 750 E ADAMS ST			10 15 2007
	City	State	Zip Code	Transaction ID: SA11A1.56494
	SYRACUSE	NY	13210	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer UPSTATE MED ANES GRP	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	1 1	500.00	
— В.	Full Name (Last, First, Middle Initial) KATHLEEN O'LEARY			Date of Receipt
	Mailing Address 81 LEXINGTON AVE	M M / D D / Y Y Y Y Y 1 Y 1 1 0 1 6 2 0 0 7		
	City	State	Zip Code	Transaction ID: SA11A1.56694
	BUFFALO	NY	14222	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer ROSWELL PK CANCER	Occupation PHYSICI		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
<u> </u>	Full Name (Last, First, Middle Initial) PATRICK O'NEIL			Date of Receipt
	Mailing Address 7357 US 52 SOUTH			10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.56892
	LAFAYETTE	IN	47905	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer SELF-EMPLOYED	Occupation PHYSICI		7
	Receipt For:	-	e Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼		500.00	
s	UBTOTAL of Receipts This Page (optional)			1250.00

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 125 / 191
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Δι	ny information copied from such Reports and St	atements may	y not be sold or used by any perso	
or	for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
$ \rangle$	AMERICAN SOCIETY OF ANESTHES	IOLOGISTS	S POLITICAL ACTION COM	MITTEE
_	Full Name (Last, First, Middle Initial)			
A.	HOWARD ODOM			Date of Receipt
	Mailing Address 255 IRON MOUNTAIN	RD		10 12 2007
	City	State	Zip Code	1 0 1 2 2 0 0 7 Transaction ID: SA11A1.55650
	CANTON	GA	30115	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		650.00
	Name of Employer N POINT ANES CONSUL	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:		Year-to-Date ▼	
	Primary General		650.00	1
	Other (specify) ▼	0 0	650.00	
_	Full Name (Last, First, Middle Initial)			
В.	, , , , , , , , , , , , , , , , , , , ,			Date of Receipt
	Mailing Address 241 S. 6TH ST., #1112			10 03 2007
	City	State	Zip Code	Transaction ID: SA11A1.55401
	PHILADELPHIA	PA	19106	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		250.00
	Name of Employer TENET PHYSICIAN SERVICES,	Occupation	1	-
	TENET PHYSICIAN SERVICES, LLC	PHYSICI	AN	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	' '	250.00	
	cale. (epoolity) 🗸		0 0 0 0 0 0 0	
<u> </u>	Full Name (Last, First, Middle Initial)			Date of Descint
C.	WALTER ORZEPOWSKI Mailing Address 7010 N BARTON CT			Date of Receipt
				10 14 2007
	City	State	Zip Code	Transaction ID: SA11A1.56245
	APPLETON	WI	54913	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Occup SELF-EMPLOYED ANES			_
			1 ESIOLOGIST	
			Year-to-Date ▼	
	Primary General		250.00	1
	Other (specify)		250.00	J
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PAGE 126 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) RODNEY OSBORN Date of Receipt Mailing Address 607 W THOUSAND OAKS DR 10 2007 13 City State Zip Code Transaction ID: SA11A1.55887 **PEORIA** IL 61615 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer ASSOC ANESTH Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. RONALD OSBORN Date of Receipt Mailing Address 14621 WHITE OAK DR 12 2007 City Zip Code State Transaction ID: SA11A1.55652 **BURNSVILLE** MN 55337 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer RIDGES ANESTH Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. CHARLES OTTO Date of Receipt Mailing Address 6270 N CAMINO PIMERIA ALTA 10 3 1 2007 Citv State Zip Code Transaction ID: SA11A1.56861 **TUCSON** ΑZ 85718 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer UNIV OF ARIZONA Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 127 / 191
ıт	EMIZED RECEIPTS		or each category of the	(check only one)
••	LIMIZED REGEN 10		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Ar	ny information copied from such Reports and State for commercial purposes, other than using the na	ements may	not be sold or used by any person	on for the purpose of soliciting contributions
V		ne and add	aress or any political committee to	Solicit contributions from such committee.
$ \rangle$	NAME OF COMMITTEE (In Full) AMERICAN SOCIETY OF ANESTHESIO	I OGISTS	S POLITICAL ACTION COM	MITTEE
	AMERICAN SOCIETY OF ANESTHESIO	LOGISTO	S FOLITIOAL ACTION CON	IVITTE
Α.	Full Name (Last, First, Middle Initial) BRIAN OWENS			Date of Receipt
Α.	Mailing Address 4727 47TH AVE NE			M M / D D / Y Y Y Y
				10 13 2007
	City	State	Zip Code	Transaction ID: SA11A1.56015
	SEATTLE	WA	98111	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer VIRGINIA MASON MED	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	· · ·	500.00	1
	Other (specify)			
В.	Full Name (Last, First, Middle Initial) WILLIAM OWENS			Date of Receipt
	Mailing Address 500 NORTH & SOUTH R	D #102		10 13 2007
	City	State	Zip Code	Transaction ID: SA11A1.55709
	ST LOUIS	MO	63130	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	RETIRED ' '	Occupation		
	Receipt For:		ESIOLOGIST • Year-to-Date ▼	
	Primary General	Aggregate	Flear-to-Date V	1
	Other (specify)		250.00	
_	Full Name (Last, First, Middle Initial)			Data of Bassint
U.	AHMET OZTURK Mailing Address 2115 WILTSHIRE BLVD			Date of Receipt
				10 13 2007
	City	State	Zip Code	Transaction ID: SA11A1.56047
	HUNTINGTON	WV	25701	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	SELE EMBLOAED	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	' '	500.00	1
	Other (specify) ▼			1
s	UBTOTAL of Receipts This Page (optional)			1250.00
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PAGE 128 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) SAM PAGE Date of Receipt Mailing Address 17 WINDSOR TERR LN 10 2007 13 City State Zip Code Transaction ID: SA11A1.55902 **CREVE COEUR** MO 63141 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer WESTERN ANES ASSOC Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. CRAIG PALMER Date of Receipt Mailing Address 6641 N ALTA REPOSA 13 2007 City State Zip Code Transaction ID: SA11A1.56024 **TUCSON** ΑZ 85750 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer UNIVERSITY PHYS Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. SCOTT PALMER Date of Receipt Mailing Address 3224 SOMERTON PL 10 15 2007 Citv State Zip Code Transaction ID: SA11A1.56566 BURLINGTON NC 27215 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer BURLINGTON ANESTH Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

PAGE 129 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) JOHN PAPPAS Date of Receipt Mailing Address 294 BARDEN RD 2007 10 13 City State Zip Code Transaction ID: SA11A1.56069 **BLOOMFIELD HILLS** MI 48304 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer WILLIAM BEAUMONT HOSP Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. RICHARD PARK Date of Receipt Mailing Address 11299 ROSS CT 13 2007 City State Zip Code Transaction ID: SA11A1.56018 <u>UNION</u> KY 41091 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. LEE PARMLEY Date of Receipt Mailing Address 1211 21ST AVE S #526 10 15 2007 Citv State Zip Code Transaction ID: SA11A1.56492 **NASHVILLE** TN 37212 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer VANDERBILT UNIV Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 130 / 191 (check only one)
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\setminus	NAME OF COMMITTEE (In Full)			
	AMERICAN SOCIETY OF ANESTHESIC	DLOGISTS	S POLITICAL ACTION COM	MITTEE
A.	Full Name (Last, First, Middle Initial) HARRY PARR			Date of Receipt
	Mailing Address 4725 TULLY RD			10 14 2007
	City	State	Zip Code	Transaction ID: SA11A1.56278
	BLOOMFIELD HILLS	MI	48302	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer S OAKLAND ANES ASSOC	Occupation ANESTH	n ESIOLOGIST	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		500.00	
В.	Full Name (Last, First, Middle Initial) CHETAN PATEL			Date of Receipt
	Mailing Address 7602 TIMBERLY CT			10 08 7 2007
	City	State	Zip Code	Transaction ID: SA11A1.55415
	MCLEAN	VA	22102	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer FAA	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
<u>С</u> .	Full Name (Last, First, Middle Initial) RITA PATEL			Date of Receipt
	Mailing Address 107 ROCKY DR			10 13 2007
	City	State	Zip Code	Transaction ID: SA11A1.55886
	GREENSBURG FEC ID number of contributing federal political committee.	C	15601	Amount of Each Receipt this Period 500.00
	Name of Employer UNIV OF PITTSBURGH	Occupation ANESTH	n ESIOLOGIST	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
s	UBTOTAL of Receipts This Page (optional)			1500.00
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or	for commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	AMERICAN SOCIETY OF ANESTHESIC	OLOGISTS	S POLITICAL ACTION COM	MITTEE
Α.	Full Name (Last, First, Middle Initial) KEN PAUKER			Date of Receipt
	Mailing Address 18 SIERRA VISTA			M M / D D / Y Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1
	City	State	Zip Code	Transaction ID: SA11A1.55979
	LAGUNA NIGUEL	CA	92677	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer CAA MED GRP	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify)	0 0	500.00	
В.	Full Name (Last, First, Middle Initial) DON PEARSON JR			Date of Receipt
	Mailing Address 4326 BEECHWOOD RD			10 DD / YYYYY 10 22 2007
	City	State	Zip Code	Transaction ID: SA11A1.56755
	KNOXVILLE	TN	37920	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer UNIVERSITY ANESTHESIOLOG- ISTS	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		250.00	1
	Other (specify) ▼		250.00	
<u>-</u>	Full Name (Last, First, Middle Initial) LEE PERRIN			Date of Receipt
Ο.	Mailing Address 3 POWDERMILL LN			M M / D D / Y Y Y Y Y Y 1 Y 1 1 0 1 3 2 0 0 7
	City	State	Zip Code	Transaction ID: SA11A1.55970
	SOUTHBOROUGH	MA	01772	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer CAP ANESTHESIA	Occupation PHYSICI		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		500.00	
s	UBTOTAL of Receipts This Page (optional))	1250.00

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\rangle	NAME OF COMMITTEE (In Full) AMERICAN SOCIETY OF ANESTHESI	OLOGISTS	S POLITICAL ACTION COM	MITTEE
Α.	Full Name (Last, First, Middle Initial) K R PETERS			Date of Receipt
	Mailing Address 180 TRAILS END			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.55923
	ELKHORN	NE	68022	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer UNMC PHYS	Occupation ANESTH	n IESIOLOGIST	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
 R	Full Name (Last, First, Middle Initial) MARY DALE PETERSON			Date of Receipt
Ь.	Mailing Address 210 NAPLES			1 0 1 3 2 0 0 7
	City	State	Zip Code	Transaction ID: SA11A1.56092
	CORPUS CHRISTI	TX	78404	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer DRISCOLL CHILDRENS	Occupation PHYSICI		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
<u> </u>	Full Name (Last, First, Middle Initial) PAT PETROZZA			Date of Receipt
	Mailing Address MEDICAL CTR BLVD			10 14 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City WINSTON SALEM	State NC	Zip Code 27157	Transaction ID: SA11A1.56254 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	27107	250.00
	Name of Employer WAKE REG UNIV	Occupation PHYSICI		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
s	UBTOTAL of Receipts This Page (optional)			750.00

TOTAL This Period (last page this line number only)

PAGE 133 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) JEFF PLAGENHOEF Date of Receipt Mailing Address 32 HAMPTON WAY 2007 10 13 City State Zip Code Transaction ID: SA11A1.56051 **DOTHAN** 36305 Αl Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer ANES CONSULT MED GRP Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** VITA PLISKOW Date of Receipt Mailing Address 3502 OLYMPIC BLVD 13 2007 City State Zip Code Transaction ID: SA11A1.55944 **UNIVERSITY PL** WA 98466 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer SELF-EMPLOYED Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. RICHARD POLLARD Date of Receipt Mailing Address 204 MEREWOOD RD 10 13 2007 Citv State Zip Code Transaction ID: SA11A1.55999 **BELMONT** NC 28012 Amount of Each Receipt this Period FEC ID number of contributing 5000.00 C federal political committee. Name of Employer SOUTHEAST ANESTH Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) 6000.00 SUBTOTAL of Receipts This Page (optional)

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\setminus	NAME OF COMMITTEE (In Full)						
\rangle	AMERICAN SOCIETY OF ANESTHESIC	DLOGISTS	S POLITICAL ACTION COM	MITTEE			
Α.	Full Name (Last, First, Middle Initial) DONALD PORTELL			Date of Receipt			
	Mailing Address 325 RIVERWAY DR			10 31 7 2007			
	City	State	Zip Code	Transaction ID: SA11A1.56896			
	VERO BEACH	FL	32963	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		250.00			
	Name of Employer ANES OF INDIAN RIVER	Occupation ANESTH	n ESIOLOGIST				
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼		250.00				
В.	Full Name (Last, First, Middle Initial) KUSUM PRABHAKAR			Date of Receipt			
	Mailing Address 1336 WYOMING NE #F	10 14 2007					
	City	State	Zip Code	Transaction ID: SA11A1.56308			
	ALBUQUERQUE	NM	87112	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		250.00			
	Name of Employer SELF-EMPLOYED	Occupation ANESTH	n ESIOLOGIST				
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼		250.00				
_	Full Name (Last, First, Middle Initial) JOHNATHAN PREGLER			Date of Receipt			
U.	Mailing Address 2601 ROSCOMARE RD			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City	State	Zip Code	Transaction ID: SA11A1.55964			
	LOS ANGELES	CA	90077	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		500.00			
	Name of Employer UCLA		ESIOLOGIST				
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General Other (specify) ▼		500.00				
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s)	FOR LINE NUMBER: PAGE 135 / 191 (check only one)		
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	NAME OF COMMITTEE (In Full)				
	AMERICAN SOCIETY OF ANESTHESIO	LOGISTS	POLITICAL ACTION COM	MITTEE	
Α.	Full Name (Last, First, Middle Initial) MICHAEL QUALEY	Date of Receipt			
	Mailing Address 2341 COUNTRY CLUB D	10 02 7 2007			
	City	Transaction ID: SA11A1.55374			
	MASON CITY	IA	50401	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.00	
	NORTH IOW A ANIESTHESIA ASS.	Occupation ANESTH	ESIOLOGIST		
	Receipt For:		Year-to-Date ▼		
	Primary General	33 -3		1	
	Other (specify) ▼	0 0	500.00		
В.	Full Name (Last, First, Middle Initial) TIM QUILL			Date of Receipt	
	Mailing Address 27 STEVENS RD	10 13 YYYYY 10 13 2007			
	City	y State Zip Code			
	HANOVER	NH	03755	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.00	
	DUMC , ,	Occupation ANESTH	SIOLOGIST		
	Receipt For:		Year-to-Date ▼		
	Primary General	1 1991 194111		1	
	Other (specify) ▼		500.00		
	Full Name (Last, First, Middle Initial) ALVIN RALSTON			Date of Receipt	
Ο.	Mailing Address 2411 FOUNTAINVIEW #200			M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y	
	City	State	Zip Code	Transaction ID: SA11A1.56220	
	HOUSTON	TX	77024	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		500.00	
		Occupation ANESTH	ESIOLOGIST		
	Receipt For:		Year-to-Date ▼		
	Primary General			1	
	Other (specify) ▼		500.00		
				1500.00	
	UBTOTAL of Receipts This Page (optional)			1000.00	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

TOTAL This Period (last page this line number only)

PAGE 136 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) RANDALL RALSTON Date of Receipt Mailing Address 507 TIMBERLEA TRL 2007 10 09 City State Zip Code Transaction ID: SA11A1.55482 **KETTERING** OH 45429 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer KETTERING ANES ASSOC Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. JERIRAMEY Date of Receipt Mailing Address 4011 E 62ND ST 14 2007 City State Zip Code Transaction ID: SA11A1.56256 **TULSA** OK 74136 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer ASSOC ANESTH Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. MICHELE RANEY Date of Receipt Mailing Address 223 GRAND CANAL 10 13 2007 Zip Code Citv State Transaction ID: SA11A1.56032 BALBOA ISLAND CA 92662 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer SELF-EMPLOYED Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

PAGE 137 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) SALLY RATY Date of Receipt Mailing Address 6414 RUTGERS 10 2007 14 City State Zip Code Transaction ID: SA11A1.56332 **HOUSTON** TX 77005 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer BAYLOR COL OF MED Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. DAVID RATZMAN Date of Receipt Mailing Address 1882 LIMEHOUSE ST 13 2007 City State Zip Code Transaction ID: SA11A1.55834 **CARMEL** IN 46032 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer ANES PAIN CONSULT IN Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. DAVID REICH Date of Receipt Mailing Address 218 W 15TH ST 10 15 2007 Citv State Zip Code Transaction ID: SA11A1.56565 **NEW YORK** NY 10011 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer MT SINAI MED CTR Occupation **PROFESSOR** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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PAGE 138 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) PAUL REIN Date of Receipt Mailing Address 115 RIVERSIDE DR 15 2007 10 City State Zip Code Transaction ID: SA11A1.56562 **NEWPORT NEWS** VA 23686 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer VAPCS Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. MICHAEL RICHARDSON Date of Receipt Mailing Address 62 KINGLET DR S 16 2007 City State Zip Code Transaction ID: SA11A1.56662 **CRANBURY** NJ 08512 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. GARY RING Date of Receipt Mailing Address 7106 ALPHA RD 10 14 2007 Zip Code City State Transaction ID: SA11A1.56327 **DALL**AS TX 75240 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer SELF-EMPLOYED Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)

PAGE 139 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** <u>|</u>17 13 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) H DOUGLAS ROBERTS Date of Receipt Mailing Address 4130 MARIPOSA DR 2007 10 13 City State Zip Code Transaction ID: SA11A1.55722 **SANTA BARBARA** CA 93110 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer ANES ASSOC MED GRP Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** KEVIN ROBERTS Date of Receipt Mailing Address 240 WALNUT LN 14 2007 City State Zip Code Transaction ID: SA11A1.56268 **SLINGERLANDS** NY 12159 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer ALBANY MED CTR Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. WES ROBINSON Date of Receipt Mailing Address 8226 FAIRVIEW RD 10 15 2007 Zip Code Citv State Transaction ID: SA11A1.56631 **CHARLOTTE** NC 28226 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer SE ANESTH Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify)

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TOTAL This Period (last page this line number only)

1500.00

PAGE 140 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) G.L. RODRIQUEZ-FAZZI Date of Receipt Mailing Address 901 40TH AVE, N 2007 10 3 1 City State Zip Code Transaction ID: SA11A1.56865 ST PETERSBURG 33703 FI Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer FL PEDIATRIC ASSOC Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. ALEC ROOKE Date of Receipt Mailing Address 180 BROOKLINE AVE#340 16 2007 City Zip Code State Transaction ID: SA11A1.56686 **BOSTON** MA 02215 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer BETH ISRAEL DEACONESS Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. CAROL ROSE Date of Receipt Mailing Address 428 GLAIDO DR 10 3 1 2007 Citv State Zip Code Transaction ID: SA11A1.56824 **PITTSBURGH** PA 15243 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer UPMC Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 141 / 191	
ıт	EMIZED RECEIPTS		or each category of the	(check only one)
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\ \	NAME OF COMMITTEE (In Full)	arrie ariu auc	iless of any political committee to	Solicit Contributions from Such Committee.
	AMERICAN SOCIETY OF ANESTHESIC	AL AGISTS		MITTEE
	AMERICAN SOCIETY OF AMESTIESIC	JLOGISTO	S FOLITIOAL ACTION COM	IVIIII
_	Full Name (Last, First, Middle Initial)			Data of Daggint
Α.	MEG ROSENBLATT Mailing Address 25 E 86TH #69			Date of Receipt
		10 12 2007		
	City	Transaction ID: SA11A1.55633		
	NEW YORK	NY	10028	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer MT SINAI	Occupation	ı	
			ESIOLOGIST	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify)	' '	500.00	
	Cultif (openly) V	0 0		1
В.	Full Name (Last, First, Middle Initial) RICHARD ROSENQUIST			Date of Receipt
	Mailing Address 2860 MEADOW LARK F	10 12 2007		
	City	State	Zip Code	Transaction ID: SA11A1.55669
	IOWA CITY	IA	52240	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	FEC ID number of contributing federal political committee.	Occupation		
	FEC ID number of contributing federal political committee. Name of Employer UNIV OF IOW A	Occupation PHYSICI	AN	
	FEC ID number of contributing federal political committee. Name of Employer UNIV OF IOWA Receipt For:	Occupation PHYSICI		
	FEC ID number of contributing federal political committee. Name of Employer UNIV OF IOW A	Occupation PHYSICI	AN	
	FEC ID number of contributing federal political committee. Name of Employer UNIV OF IOWA Receipt For: Primary General	Occupation PHYSICI	AN Year-to-Date ▼	
_	FEC ID number of contributing federal political committee. Name of Employer UNIV OF IOWA Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial)	Occupation PHYSICI	AN Year-to-Date ▼	500.00
	FEC ID number of contributing federal political committee. Name of Employer UNIV OF IOWA Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) DAVID ROTHENBERG	Occupation PHYSICI	AN Year-to-Date ▼	Date of Receipt
	FEC ID number of contributing federal political committee. Name of Employer UNIV OF IOWA Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) DAVID ROTHENBERG Mailing Address 861 KIMBALL	Occupation PHYSICI Aggregate	AN Year-to-Date ▼ 500.00	Date of Receipt 10 13 2007
 c.	FEC ID number of contributing federal political committee. Name of Employer UNIV OF IOWA Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) DAVID ROTHENBERG Mailing Address 861 KIMBALL City	Occupation PHYSICI Aggregate	AN Year-to-Date ▼ 500.00 Zip Code	Date of Receipt M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
 C.	FEC ID number of contributing federal political committee. Name of Employer UNIV OF IOWA Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) DAVID ROTHENBERG Mailing Address 861 KIMBALL City HIGHLAND PARK	Occupation PHYSICI Aggregate	AN Year-to-Date ▼ 500.00	Date of Receipt 10 13 2007
c.	FEC ID number of contributing federal political committee. Name of Employer UNIV OF IOWA Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) DAVID ROTHENBERG Mailing Address 861 KIMBALL City	Occupation PHYSICI Aggregate	AN Year-to-Date ▼ 500.00 Zip Code	Date of Receipt M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C.	FEC ID number of contributing federal political committee. Name of Employer UNIV OF IOWA Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) DAVID ROTHENBERG Mailing Address 861 KIMBALL City HIGHLAND PARK FEC ID number of contributing federal political committee. Name of Employer UNIVERSITY ANESTH	Occupation PHYSICI Aggregate State IL C	AN Year-to-Date ▼ 500.00 Zip Code 60035	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
c.	FEC ID number of contributing federal political committee. Name of Employer UNIV OF IOWA Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) DAVID ROTHENBERG Mailing Address 861 KIMBALL City HIGHLAND PARK FEC ID number of contributing federal political committee. Name of Employer UNIVERSITY ANESTH Receipt For:	Occupation PHYSICI Aggregate State IL C Occupation ANESTH	AN Year-to-Date ▼ 500.00 Zip Code 60035	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
 c.	FEC ID number of contributing federal political committee. Name of Employer UNIV OF IOWA Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) DAVID ROTHENBERG Mailing Address 861 KIMBALL City HIGHLAND PARK FEC ID number of contributing federal political committee. Name of Employer UNIVERSITY ANESTH Receipt For: Primary General	Occupation PHYSICI Aggregate State IL C Occupation ANESTH	AN Year-to-Date ▼ 500.00 Zip Code 60035 ESIOLOGIST 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
c.	FEC ID number of contributing federal political committee. Name of Employer UNIV OF IOWA Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) DAVID ROTHENBERG Mailing Address 861 KIMBALL City HIGHLAND PARK FEC ID number of contributing federal political committee. Name of Employer UNIVERSITY ANESTH Receipt For:	Occupation PHYSICI Aggregate State IL C Occupation ANESTH	AN Year-to-Date ▼ 500.00 Zip Code 60035	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	FEC ID number of contributing federal political committee. Name of Employer UNIV OF IOWA Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) DAVID ROTHENBERG Mailing Address 861 KIMBALL City HIGHLAND PARK FEC ID number of contributing federal political committee. Name of Employer UNIVERSITY ANESTH Receipt For: Primary General Other (specify) Other (specify)	State IL Occupation ANESTH Aggregate	Zip Code 60035 ESIOLOGIST Year-to-Date ▼ 500.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	FEC ID number of contributing federal political committee. Name of Employer UNIV OF IOWA Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) DAVID ROTHENBERG Mailing Address 861 KIMBALL City HIGHLAND PARK FEC ID number of contributing federal political committee. Name of Employer UNIVERSITY ANESTH Receipt For: Primary General	State IL Occupation ANESTH Aggregate	Zip Code 60035 ESIOLOGIST Year-to-Date ▼ 500.00	Date of Receipt M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 142 / 191		
ITEMIZED RECEIPTS		or each category of the	(check only one)			
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				13 14 15 16 17		
Ar or	ly information copied from such Reports and Sta for commercial purposes, other than using the n	atements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
\setminus	NAME OF COMMITTEE (In Full)					
\rangle	AMERICAN SOCIETY OF ANESTHESI	OLOGISTS	S POLITICAL ACTION COM	MITTEE		
Α.	Full Name (Last, First, Middle Initial) JOHN ROWLINGSON	Date of Receipt				
	Mailing Address 5006 LAKE TREE LN	10 13 2007				
	City	State	Zip Code	Transaction ID: SA11A1.55934		
	CROZET	VA	22932	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		750.00		
	Name of Employer UNIV OF VA MED CTR	Occupation PHYSICI				
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General		75000	1		
	Other (specify) ▼		750.00			
В.	Full Name (Last, First, Middle Initial) LAWRENCE ROY	Date of Receipt				
	Mailing Address 2420 FREEMAN MANO	10 14 2007				
	City	State	Zip Code	Transaction ID: SA11A1.56347		
	JONES	OK	73049	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		500.00		
	Name of Employer OKLA ANESTH SOC	Occupation ANESTH	n ESIOLOGIST			
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General			1		
	Other (specify)	0 0	500.00			
<u>с</u> .	Full Name (Last, First, Middle Initial) KEITH RUSKIN			Date of Receipt		
	Mailing Address 6 TOMAHAWK LN	10 15 2007				
	City	State	Zip Code	Transaction ID: SA11A1.56488		
	WESTPORT	CT	06880	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.					
	Name of Employer YALE UNIV	Occupation PHYSICI				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	1		
s	UBTOTAL of Receipts This Page (optional)			1750.00		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

PAGE 143 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) PATRICK RYAN Date of Receipt Mailing Address 2909 CAMILLE 2007 10 10 City State Zip Code Transaction ID: SA11A1.55539 **COLLEGE STATION** TX 77845 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer BRAZOS ANES ASSOC Occupation **ANESTHESIOLOGIST** Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. THOMAS SAAK Date of Receipt Mailing Address 462 CHUKKER VALLEY 14 2007 City Zip Code State Transaction ID: SA11A1.56356 **ELLISVILLE** MO 63021 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer WAAI Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. THOMAS SANNEMAN Date of Receipt Mailing Address 3578 CHERRY LN 10 13 2007 Zip Code Citv State Transaction ID: SA11A1.55705 WOODBURY MN 55129 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 144 / 191
ITEMIZED RECEIPTS	,	or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) AMERICAN SOCIETY OF ANESTH	ESIOLOGISTS	S POLITICAL ACTION COM	MITTEE
Full Name (Last, First, Middle Initial) FRANK SCAMMAN			Date of Receipt
Mailing Address 4336 OAKRIDGE TI	10 14 7 2007		
City IOWA CITY	State IA	Zip Code 52240	Transaction ID: SA11A1.56270 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer U OF IOWA	Occupation PHYSICI		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) 3. PAUL SCHANER			Date of Receipt
Mailing Address 133 N HEIDE LN	Mailing Address 133 N HEIDE LN		
City	State	Zip Code	Transaction ID: SA11A1.55672
MCMURRAY	PA	15317	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer SELF-EMPLOYED	Occupation PHYSICI		
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial) C. HOWARD SCHAPIRO			Date of Receipt
Mailing Address 320 SOUTH STREE	Т		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: SA11A1.56766
SOUTH HERO	VT	05486	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer FLETCHER ALLEN HEALTH CARE		AN-ANESTHESIOLOGIST	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional			1500.00
TOTAL This Period (last page this line numb	er only)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 145 / 191 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) AMERICAN SOCIETY OF ANESTHESIC	DLOGISTS	S POLITICAL ACTION COM	MITTEE
Α.	Full Name (Last, First, Middle Initial) SCOTT SCHARTEL Mailing Address 54 BERRYWOOD LN City DRESHER FEC ID number of contributing federal political committee. Name of Employer TEMPLE UNIV Receipt For: Primary General		ESIOLOGIST 9 Year-to-Date ▼	Date of Receipt M M M / 16 2007 Transaction ID: SA11A1.56713 Amount of Each Receipt this Period 500.00
3.	Other (specify) ▼ Full Name (Last, First, Middle Initial) DONALD SCHMIT Mailing Address 1868 MARYLAND AVE	0 0	500.00	Date of Receipt
	City CHARLOTTE FEC ID number of contributing federal political committee. Name of Employer NE ANES PAIN SPEC Receipt For: Primary General Other (specify)		Zip Code 28209 n ESIOLOGIST e Year-to-Date ▼ 500.00	Transaction ID: SA11A1.55959 Amount of Each Receipt this Period 500.00
C.	Full Name (Last, First, Middle Initial) CATHERINE SCHOLL Mailing Address 2007 ROBINHOOD TRL City AUSTIN FEC ID number of contributing federal political committee. Name of Employer AUSTIN ANES GRP Receipt For: Primary General Other (specify)		Zip Code 78703 n ESIOLOGIST e Year-to-Date ▼ 1000.00	Date of Receipt M M J 15 2007 Transaction ID: SA11A1.56465 Amount of Each Receipt this Period 1000.00
SI	JBTOTAL of Receipts This Page (optional)			2000.00
T	OTAL This Period (last page this line number on	lv)	>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

PAGE 146 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** <u>|</u>17 13 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) MARK SCHROEDER Date of Receipt Mailing Address 306 CHEYENNE TR 2007 10 13 City State Zip Code Transaction ID: SA11A1.55928 **MADISON** W 53705 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer UNIV OF WISC Occupation ANESTHESIOLOGIST Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. FRANK SCHWALBE Date of Receipt Mailing Address 17927 MOLLYPOP LN 12 2007 City State Zip Code Transaction ID: SA11A1.55621 **CORNELIUS** NC 28031 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer NE ANES & PAIN SPEC Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. ALAN JAY SCHWARTZ Date of Receipt Mailing Address 1000 SHARPLESS RD 10 13 2007 Citv State Zip Code Transaction ID: SA11A1.55832 MELROSE PARK PA 19027 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer CHOP Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional)

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 147 / 191
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) AMERICAN SOCIETY OF ANESTHES	SIOLOGISTS	S POLITICAL ACTION COM	MITTEE
Full Name (Last, First, Middle Initial) A. MIKE SCHWEITZER			Date of Receipt
Mailing Address 1927 HOLSTEIN LN	<u> </u>		10 13 2007
City <u>LAUREL</u>	State MT	Zip Code 59044	Transaction ID: SA11A1.56046 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer ANES PARTNERS	Occupatio PHYSICI		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) 3. JOSEPH SELTZER			Date of Receipt
Mailing Address 12 CHOWNING DR			10 12 7 2007
City	State	Zip Code	Transaction ID: SA11A1.55670
MALVERN FEC ID number of contributing	PA	19355	Amount of Each Receipt this Period
federal political committee.	C		500.00
Name of Employer JEFFERSON MED COLL	Occupatio PHYSICI		
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial) 2. ALVIN SEWELL			Date of Receipt
Mailing Address 105 COLACHEE DR			10 08 2007
City	State	Zip Code	Transaction ID: SA11A1.55428
MACON	GA	31210	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer NEXUS MED GRP	Occupatio ANESTH	n IESIOLOGIST	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)			1500.00
TOTAL This Period (last page this line number	only)		

TOTAL This Period (last page this line number only)

PAGE 148 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) Date of Receipt MICHAEL SIMON Mailing Address 2400 DUNDEE RD 2007 10 14 City State Zip Code Transaction ID: SA11A1.56310 WINTER HAVEN 33884 FI Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer NAPA Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** JEAN SIMONSON Date of Receipt Mailing Address 924 20TH AVE CIR 13 2007 City Zip Code State Transaction ID: SA11A1.55973 **BLAIR** NE 68008 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer UNMC Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. EUGENE SINCLAIR Date of Receipt Mailing Address 13185 LEE COURT 10 02 2007 Zip Code Citv State Transaction ID: SA11A1.55362 **ELM GROVE** WI 53122 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer SELF Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional)

PAGE 149 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) MARK SINGLETON Date of Receipt Mailing Address 1805 GREENCREEK DR 10 2007 14 City State Zip Code Transaction ID: SA11A1.56343 SAN JOSE CA 95124 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer SELF-EMPLOYED Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** JOHN SLAVIK Date of Receipt Mailing Address 806 SHADOWSTONE PLACE 14 2007 City State Zip Code Transaction ID: SA11A1.56163 **NASHVILLE** TN 37220 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer ANESTHESIA MEDICAL GROUP, Occupation ANESTHESIOLOGIST <u>PC</u> Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. ALEX SLUCKY Date of Receipt Mailing Address 3830 E WHITE BAY DR 10 13 2007 Zip Code Citv State Transaction ID: SA11A1.56041 HIGHLANDS RANCH CO 80126 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer SOUTH DENVER ANES Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER	R: PAGE 150 / 191	
ITEMIZED RECEIPTS			or each category of the	(check only one)	
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	NAME OF COMMITTEE (In Full)		7,		
$ \rangle$	AMERICAN SOCIETY OF ANESTHES	SIOLOGISTS	S POLITICAL ACTION COM	MITTEE	
	7.10/11/07/11/00/01/21 1/01/71/2011/20	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	or derived the rest design	WIII 1 LL	
_	Full Name (Last, First, Middle Initial)				
A.	ROBERT SMALL			Date of Receipt	
	Mailing Address 4259 LYON DR				D / Y Y Y Y Y Z 2 0 0 7
	City	State	Zip Code		
	COLUMBUS	OH	43220		SA11A1.55644
		OH	43220	Amount of Each	Receipt this Period
	FEC ID number of contributing federal political committee.	C			500.00
	Name of Employer OHIO STATE UNIV	Occupation			
		PROFES			
	Receipt For:	Aggregate	e Year-to-Date ▼	.	
	Primary General Other (specify) ▼		500.00		
	Ctrici (Specify)	0 0	0 0 0 0 0 0 0		
	Full Name (Last, First, Middle Initial)				
В.	GREGORY SMITH			Date of Receipt	
	Mailing Address 2138 LOCKLIN LN				D / Y Y Y Y
					5 2007
	City	State	Zip Code		SA11A1.56477
	W BLOOMFIELD	MI	48324	Amount of Each	Receipt this Period
	FEC ID number of contributing	С			500.00
	federal political committee.				
	Name of Employer S OAKLAND ANES ASSOC	Occupation	n	7	
	S OAKLAND ANES ASSOC	PHYSICI	AN		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General	' '	500.00		
	Other (specify)				
_	Full Name (Last, First, Middle Initial)				
C.	MICHAEL SMITH			Date of Receipt	
	Mailing Address 234 MISTY LN			M M / D	D / Y Y Y Y
				1 0 1	6 2007
	City	State	Zip Code	Transaction ID:	SA11A1.56653
	COPLEY	OH	44321	Amount of Each	Receipt this Period
	FEC ID number of contributing	С			250.00
	federal political committee.	0			
	Name of Employer	Occupation	n	7	
	PAS INC	ANESTH	ESIOLOGIST		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		250.00	1	
	Other (specify)	0 0	230.00		
_					
_	UDTOTAL (D. 11 TU 5 TU 5				1250.00
Ls	UBTOTAL of Receipts This Page (optional)		<u> </u>		
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SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 151 / 191 (check only one)
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			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Ar	y information copied from such Reports and Stat	ements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the na	solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)			
	AMERICAN SOCIETY OF ANESTHESIC	DLOGISTS	S POLITICAL ACTION COM	MIIIEE
Α.	Full Name (Last, First, Middle Initial) ROBERT SNYDER			Date of Receipt
	Mailing Address 2367 DEER VALLEY			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.56630
	MIDLAND	MI	48642	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer MMAG	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify)	0 0		1
В.	Full Name (Last, First, Middle Initial) KAREN SOUTER			Date of Receipt
	Mailing Address 6244 50TH AVE NE			10 13 YYYYY 10 13 2007
	City	State	Zip Code	Transaction ID: SA11A1.55913
	SEATTLE	WA	98115	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer UNIV OF WASHINGTON	Occupation	n ESIOLOGIST	7
	Receipt For:		Year-to-Date V	
	Primary General	7 iggi ogalio		1
	Other (specify) ▼	0 0	500.00	
_	Full Name (Last, First, Middle Initial)			Data of Descript
C.	MICHAEL SOUTER Mailing Address 6244 50TH AVE NE			Date of Receipt
	Walling Address 0244 50 TH AVE NE			10 14 2007
	City	State	Zip Code	Transaction ID: SA11A1.56369
	SEATTLE	WA	98115	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer UNIV OF WASHINGTON	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify) ▼	0 0		
Г	L			
s	UBTOTAL of Receipts This Page (optional)			1500.00

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 152 / 191 (check only one)
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		_		13 14 15 16 17
Ar or	ly information copied from such Reports and State for commercial purposes, other than using the nar	ments may me and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Λ	NAME OF COMMITTEE (In Full)			
\rangle	AMERICAN SOCIETY OF ANESTHESIO	LOGISTS	S POLITICAL ACTION COM	MITTEE
Α.	Full Name (Last, First, Middle Initial) JAMES SPARROW			Date of Receipt
	Mailing Address 944 CASTLEMAINE DR			10 16 2007
	City	State	Zip Code	Transaction ID: SA11A1.56664
	BIRMINGHAM	AL	35226	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	IIAD ' '	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	00 0		1
	Other (specify)		500.00	
— В.	Full Name (Last, First, Middle Initial) JOHN SPIEKER			Date of Receipt
	Mailing Address 1414 SAN RAFAEL DR			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.56679
	DALLAS	TX	25218	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		250.00
	METRO ANES CONSTITUTE	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	' '	050.00	
	Other (specify) ▼	0 0	250.00	
<u> </u>	Full Name (Last, First, Middle Initial) NANCY STAATS			Date of Receipt
	Mailing Address 47 ORCHARD LN			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.56906
	COLTS NECK	NJ	07722	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	SELE-EMDI,OAED I	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	Year-to-Date ▼	7
	Primary General	-		1
	Other (specify)		500.00	
				1250.00
S	UBTOTAL of Receipts This Page (optional)		······	1230.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 153 / 191 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	ny information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) AMERICAN SOCIETY OF ANESTHESIC	LOGISTS	S POLITICAL ACTION COM	MITTEE
Α.	Full Name (Last, First, Middle Initial) TIMOTHY STARCK Mailing Address 11583 PRESTWICK RD City BELVIDERE FEC ID number of contributing federal political committee. Name of Employer ROCKFORD ANESTHESIOLOGISTS ASSOCIATED	State IL C C C C C C C C C C C C C C C C C C		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
3.	Full Name (Last, First, Middle Initial) STAN STEAD Mailing Address 4819 ANDASOL AVE City	State	Zip Code	Date of Receipt M M
	ENCINO FEC ID number of contributing federal political committee.	CA	91316	Amount of Each Receipt this Period 500.00
	Name of Employer STEAD HEALTH GRP Receipt For: Primary General Other (specify) ▼	Occupation PHYSICI Aggregate		
) .	Full Name (Last, First, Middle Initial) MARK STEFFEN Mailing Address 5148 COTTONWOOD LI	N		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City HOLLADAY FEC ID number of contributing federal political committee. Name of Employer	State UT C Occupation	Zip Code 84117	Transaction ID: SA11A1.56367 Amount of Each Receipt this Period 500.00
	Name of Employer SELF-EMPLOYED Receipt For: Primary Other (specify) ▼	ANESTH	ESIOLOGIST • Year-to-Date ▼ 500.00	
S	UBTOTAL of Receipts This Page (optional)			1500.00
т	OTAL This Period (last nage this line number on	v)		

PAGE 154 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) LARRY STEVENER Date of Receipt Mailing Address 1601 BRIDLE PATH 15 2007 10 City State Zip Code Transaction ID: SA11A1.56551 **CORSICANA** TX 75110 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer PINNACLE ANESTH Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** RUSSELL STEWART Date of Receipt Mailing Address 1300 DEER RUN 13 2007 City Zip Code State Transaction ID: SA11A1.55977 **MORGANTOWN** WV 26508 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer WEST VIRGINIA UNIV Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. ANN STILL Date of Receipt Mailing Address 2220 IVY TRACE 10 03 2007 Citv State Zip Code Transaction ID: SA11A1.55382 **BIRMINGHAM** ΑL 35243 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer ANESTHESIA RESOURCE MANAG-Occupation PHYSICIAN **EMENT** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 155 / 191
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Ar or	ny information copied from such Reports and Stat for commercial purposes, other than using the na	on for the purpose of soliciting contributions solicit contributions from such committee.		
\setminus	NAME OF COMMITTEE (In Full)			
\rangle	AMERICAN SOCIETY OF ANESTHESIC	OLOGISTS	S POLITICAL ACTION COM	MITTEE
Α.	Full Name (Last, First, Middle Initial) RICHARD STILZ			Date of Receipt
	Mailing Address 1253 HERSCHEL AVE			10 13 7 2007
	City	State	Zip Code	Transaction ID: SA11A1.55914
	CINCINNATI	OH	45208	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer AAC	Occupation PHYSICI		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		050.00	1
	Other (specify) ▼		250.00	
В.	Full Name (Last, First, Middle Initial) STEPHEN STRELEC			Date of Receipt
	Mailing Address 114 HICKORY HILL RD	10 14 2007		
	City	State	Zip Code	Transaction ID: SA11A1.56223
	PITTSBURGH	PA	15238	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer AAWPH	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify) ▼		500.00	
<u>с</u> .	Full Name (Last, First, Middle Initial) ERIN SULLIVAN			Date of Receipt
	Mailing Address 650 CANTERBURY LN			10 13 7 2007
	City	State	Zip Code	Transaction ID: SA11A1.55910
	SEWICKLEY	PA	15143	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer UPP DEPT OF ANESTH	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	' '	500.00	
	Other (specify)		300.00	
s	UBTOTAL of Receipts This Page (optional)			1250.00
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SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 156 / 191 (check only one)
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Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and addi		not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.	
abla	NAME OF COMMITTEE (In Full)			
\rangle	AMERICAN SOCIETY OF ANESTHESIC	DLOGISTS	S POLITICAL ACTION COM	MITTEE
Α.	Full Name (Last, First, Middle Initial) RAYMOND SULLIVAN			Date of Receipt
	Mailing Address 2426 STONEWELL TR			10 12 2007
	City	State	Zip Code	Transaction ID: SA11A1.55664
	FT MITCHELL	KY	44017	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer INDEPENDENT ANESTH	Occupation PHYSICI		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		500.00	
В.	Full Name (Last, First, Middle Initial) R LAWRENCE SULLIVAN			Date of Receipt
	Mailing Address 1345 WEBSTER			10 15 2007
	City	Zip Code	Transaction ID: SA11A1.56517	
	PALO ALTO	CA	94301	Amount of Each Receipt this Period
		071	34001	Amount of Each receipt this renou
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer SELF-EMPLOYED	Occupation PHYSICI		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼		250.00	
<u> </u>	Full Name (Last, First, Middle Initial) STEVEN SWEEN			Date of Receipt
	Mailing Address 240 MARCHAND CT NW	I		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.55681
	ATLANTA	GA	30328	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer PSA	Occupation ANESTH	n ESIOLOGIST	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼		500.00	
<u>ج</u>	UBTOTAL of Receipts This Page (optional)			1250.00
ட	ago (optional)			

PAGE 157 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) CHRISTOPHER SWIDE Date of Receipt Mailing Address 3181 SW SAM JACKSON PK 12 2007 10 City Zip Code Transaction ID: SA11A1.55654 State **PORTLAND** OR 97219 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer OHSU Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. NEIL SWISSMAN Date of Receipt Mailing Address 11249 GOLDEN CHESTNUT 14 2007 City Zip Code State Transaction ID: SA11A1.56237 LAS VEGAS NV 89131 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer SUMMIT ANESTH Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date V Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. THOMAS SWYGERT Date of Receipt Mailing Address 7014 PRESTONESHIRE 10 13 2007 Zip Code Citv State Transaction ID: SA11A1.55997 **DALLAS** TX Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer NORTH STAR ANESTH Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

PAGE 158 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) Date of Receipt PETER SYBERT Mailing Address 837 5TH ST 2ND FL 2007 10 14 City State Zip Code Transaction ID: SA11A1.56306 **SANTA ROSA** CA 95404 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer AAMGI Occupation ANESTHESIOLOGIST Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. CARL SYLVESTER Date of Receipt Mailing Address 5038 VAN NESS ST NW 13 2007 City State Zip Code Transaction ID: SA11A1.56010 WASHINGTON DC 20016 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer SELF-EMPLOYED Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. RONALD SZABAT Date of Receipt Mailing Address 8307 LARKMEADE TER 10 13 2007 Citv State Zip Code Transaction ID: SA11A1.56006 **POTOMAC** MD 20854 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer ASA Occupation ASSOCIATE EXECUTIVE Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

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Ar	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	not be sold or used by any person	n for the purpose of soliciting contributions
\		arric aria aac	arcas of any political committee to	Solicit Contributions from Such Committee.
	NAME OF COMMITTEE (In Full) AMERICAN SOCIETY OF ANESTHESI	OL OCIETO		MITTEE
	AMERICAN SOCIETY OF ANESTRESI	JLUGISTS	S POLITICAL ACTION COM	VIIIIEE
<u>/</u>	Full Name (Last, First, Middle Initial)			
A.	JOHN SZEWCZYK			Date of Receipt
	Mailing Address 2202 HARLEM RD			M M / D D / Y Y Y Y
	<u> </u>	Ctata	7:- Oada	10 15 2007
	City	State	Zip Code	Transaction ID: SA11A1.56539
	LOVES PARK	IL	61111	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	rederal political committee.			
	Name of Employer ROCKFORD ANES ASSOC	Occupation	1	
		1	ESIOLOGIST	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
	Other (specify)	0 0	1 1 1 1 1 1 1	
_	Full Name (Last, First, Middle Initial)			+
В.	JOSEPH SZOKOL			Date of Receipt
	Mailing Address 976 SUNSET RD			M M / D D / Y Y Y Y
	011		7. 0.	10 13 2007
	City	State	Zip Code	Transaction ID: SA11A1.56090
	WINNETKA	IL	60093	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	rederal political committee.			
	Name of Employer EVANSTON NW HEALTH	Occupation		
			ESIOLOGIST	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		1000.00	
	Other (specify)	0 0	1 1 1 1 1 1 1	
_	Full Name (Last, First, Middle Initial)			
C.	SANJIWAN TARABADKAR			Date of Receipt
	Mailing Address 148 HOWARD OAKS D	R		M M / D D / Y Y Y Y
	01.	01-1-	7'- 0-4-	10 08 2007
	City MACON	State	Zip Code	Transaction ID: SA11A1.55438
		GA	31210	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer NEXUS MED GRP	Occupation		
		1	ESIOLOGIST	_
	Receipt For:	Aggregate	Year-to-Date ▼	. [
	Primary General Other (specify)		500.00	
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 160 / 191 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and State for commercial purposes, other than using the nar	ments may	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) AMERICAN SOCIETY OF ANESTHESIO	LOGISTS	S POLITICAL ACTION COM	MITTEE
Α.	KII MED CENTED		Zip Code 66221 n ESIOLOGIST e Year-to-Date ▼	Date of Receipt M M J J J J J J J J J J J J J J J J J
3.	Full Name (Last, First, Middle Initial) THOMAS TEMPLETON Mailing Address 5504 BROOKBERRY FAR	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
	WAKE FOREST LINIV		27106 n ESIOLOGIST e Year-to-Date	Amount of Each Receipt this Period 500.00
	Primary General Other (specify) ▼	Aggregate	500.00	
).	Full Name (Last, First, Middle Initial) JEROME TERRES Mailing Address 27 INDIAN PIPE RD BOX	(815		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City FRANCONIA FEC ID number of contributing federal political committee.	State NH	Zip Code 03580	Transaction ID: SA11A1.55631 Amount of Each Receipt this Period 500.00
	SELE EMBLOAED		ESIOLOGIST Year-to-Date 500.00	
SI	UBTOTAL of Receipts This Page (optional)			1500.00
T	OTAL This Period (last page this line number only	<i>γ</i>)		

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SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 161 / 191 (check only one)
ITEMIZED RECEIPTS			or each category of the	
			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
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or	for commercial purposes, other than using the n	ame and add	lress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)	01 0 010 -		
\angle	AMERICAN SOCIETY OF ANESTHESIC	OLOGISTS	S POLITICAL ACTION COM	MITTEE
A.	Full Name (Last, First, Middle Initial) GARY THAL			Date of Receipt
	Mailing Address 250 S 17TH ST #201			10 15 2007
	City	State	Zip Code	Transaction ID: SA11A1.56563
	PHILADELPHIA	PA	19103	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer BMS	Occupation PHYSICI		
	Receipt For:		Year-to-Date ▼	_
	Primary General			1
	Other (specify) ▼		250.00	
<u> </u>	Full Name (Last, First, Middle Initial) MACK THOMAS			Date of Receipt
	Mailing Address 244 BEVERLY DR			10 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.55989
	METAIRIE	LA	70001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer OSCHNER	Occupation	ESIOLOGIST	
	Receipt For:	ļ	Year-to-Date ▼	-
	Primary General	1 199. 191.11		1
	i iiiiai y			
	Other (specify) ▼	0 0	500.00	
	Other (specify) ▼ Full Name (Last, First, Middle Initial)	0 0	500.00	Date of Receipt
 C.	Other (specify) ▼ Full Name (Last, First, Middle Initial)	0 0	500.00	Date of Receipt
 C.	Other (specify) ▼ Full Name (Last, First, Middle Initial) SCOTT THOMPSON Mailing Address 1215 PLEASANT #400	State		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C .	Other (specify) ▼ Full Name (Last, First, Middle Initial) SCOTT THOMPSON	State IA	Zip Code 50309	M M / D D / Y Y Y Y
C .	Other (specify) ▼ Full Name (Last, First, Middle Initial) SCOTT THOMPSON Mailing Address 1215 PLEASANT #400 City		Zip Code	1 0 1 4 2 0 0 7 Transaction ID: SA11A1.56281
c.	Other (specify) ▼ Full Name (Last, First, Middle Initial) SCOTT THOMPSON Mailing Address 1215 PLEASANT #400 City DES MOINES FEC ID number of contributing	C Occupation	Zip Code 50309	Transaction ID: SA11A1.56281 Amount of Each Receipt this Period
c.	Full Name (Last, First, Middle Initial) SCOTT THOMPSON Mailing Address 1215 PLEASANT #400 City DES MOINES FEC ID number of contributing federal political committee.	C Occupation ANESTH	Zip Code 50309	Transaction ID: SA11A1.56281 Amount of Each Receipt this Period
c .	Other (specify) ▼ Full Name (Last, First, Middle Initial) SCOTT THOMPSON Mailing Address 1215 PLEASANT #400 City DES MOINES FEC ID number of contributing federal political committee. Name of Employer ASSOC ANESTH Receipt For: Primary General	C Occupation ANESTH	Zip Code 50309 ESIOLOGIST Year-to-Date ▼	Transaction ID: SA11A1.56281 Amount of Each Receipt this Period
C.	Other (specify) ▼ Full Name (Last, First, Middle Initial) SCOTT THOMPSON Mailing Address 1215 PLEASANT #400 City DES MOINES FEC ID number of contributing federal political committee. Name of Employer ASSOC ANESTH Receipt For:	C Occupation ANESTH	Zip Code 50309	Transaction ID: SA11A1.56281 Amount of Each Receipt this Period
c.	Other (specify) ▼ Full Name (Last, First, Middle Initial) SCOTT THOMPSON Mailing Address 1215 PLEASANT #400 City DES MOINES FEC ID number of contributing federal political committee. Name of Employer ASSOC ANESTH Receipt For: Primary General	C Occupation ANESTH	Zip Code 50309 ESIOLOGIST Year-to-Date ▼	Transaction ID: SA11A1.56281 Amount of Each Receipt this Period

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 162 / 191 (check only one) X 11a 11b 11c 12
Ar	ry information copied from such Reports and Statemer for commercial purposes, other than using the name a	ents may and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) AMERICAN SOCIETY OF ANESTHESIOLO			
Α.	SAN JOSE FEC ID number of contributing federal political committee. Name of Employer COAST ANESTH Occ AN	cupation IESTH	Zip Code 95135 n ESIOLOGIST e 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
3.	Full Name (Last, First, Middle Initial) ROSALIE TOCCO-BRADLEY Mailing Address 3664 DEER RIDGE CT	state //I	Zip Code 48105	Date of Receipt 10 14 2007 Transaction ID: SA11A1.56259 Amount of Each Receipt this Period
	ANES ASSOC ANN ARBOR AN	cupation IESTH	ESIOLOGIST Year-to-Date 250.00	250.00
C .	CHICAGO IL FEC ID number of contributing federal political committee. Name of Employer NORTHWESTERN UNIV Occ AN	cupation	Zip Code 60602 n ESIOLOGIST e Year-to-Date ▼	Date of Receipt M M J J J J Z D D 7 Transaction ID: SA11A1.55866 Amount of Each Receipt this Period 500.00
s	UBTOTAL of Receipts This Page (optional)			1250.00
T	OTAL This Period (last page this line number only)		>	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 163 / 191 (check only one)
IT	EMIZED RECEIPTS		or each category of the	
• •	LIVIIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
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Ar or	ny information copied from such Reports and State for commercial purposes, other than using the na	ements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
abla	NAME OF COMMITTEE (In Full)			
\rangle	AMERICAN SOCIETY OF ANESTHESIC	LOGISTS	S POLITICAL ACTION COM	MITTEE
Α.	Full Name (Last, First, Middle Initial) ROBERT TREADWAY			Date of Receipt
	Mailing Address 3100 BRIAR STREAM R	UN		10 01 2007
	City	State	Zip Code	Transaction ID: SA11A1.55337
	RALEIGH	NC	27612	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer CRITICAL HEALTH SYSTEMS, INC.	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General			1
	Other (specify) ▼	0 0	250.00	
В.	Full Name (Last, First, Middle Initial) KEVIN TREMPER			Date of Receipt
	Mailing Address 7227 PLEASANT LAKE			10 14 2007
	City	State	Zip Code	Transaction ID: SA11A1.56290
	ANN ARBOR	MI	48103	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		1000.00
	Name of Employer U OF MICHIGAN	Occupation PHYSICI		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	-	1000.00	1
	Other (specify) ▼		1000.00	
<u>с.</u>	Full Name (Last, First, Middle Initial) GARY TZENG			Date of Receipt
	Mailing Address 7753 VAN BUREN STRE UNIT 514	ET		10 03 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.55394
	FOREST PARK	IL	60130	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer DVA	Occupation PHYSICI		
	Receipt For:	Aggregate	e Year-to-Date ▼	7
	Primary General			1
	Other (specify) ▼		250.00	
Г				1500.00
S	UBTOTAL of Receipts This Page (optional)		······	1500.00

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	CHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 164 / 191 (check only one)
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Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) AMERICAN SOCIETY OF ANESTHESIC	DLOGISTS	S POLITICAL ACTION COM	MITTEE
Α.	Full Name (Last, First, Middle Initial) GARY TZENG			Date of Receipt
	Mailing Address 830 S CLINTON AVE			10 16 2007
	City	State	Zip Code	Transaction ID: SA11A1.56712
	OAK PARK	<u>IL</u>	60304	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer RVA	Occupation PHYSICI		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
<u> </u>	Full Name (Last, First, Middle Initial) BENJAMIN UNGER			Date of Receipt
	Mailing Address 315 E. 90TH ST. APT. 3E			10 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.56751
	NEW YORK	NY	10128	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer CUMC DEPT. OF ANESTHESIOL- OGY	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		250.00	
	Other (specify) ▼		250.00	
C.	Full Name (Last, First, Middle Initial) UNIDENTIFIED UNIDENTIFIED			Date of Receipt
	Mailing Address 520 N NORTHWEST HV	10 14 2007		
	City	State	Zip Code	Transaction ID: SA11A1.56458
	PARK RIDGE	IL	60068	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1.00
	Name of Employer	Occupation N/A	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	7
	Primary General Other (specify) ▼	0 0	501.00	
s	UBTOTAL of Receipts This Page (optional)			751.00

PAGE 165 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) GREGORY UNRUH Date of Receipt Mailing Address 21215 W 106TH 12 2007 10 City State Zip Code Transaction ID: SA11A1.55678 **OLATHE** KS 66061 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer KS UNIV PHYS INC Occupation ANESTHESIOLOGIST Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** BARBARA VARLOTTA Date of Receipt Mailing Address 1303 BAYSHORE BLVD 16 2007 City State Zip Code Transaction ID: SA11A1.56675 **TAMPA** FL 33606 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer SELF-EMPLOYED Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. DAVID VARLOTTA Date of Receipt Mailing Address 1303 BAYSHORE BLVD 10 16 2007 City State Zip Code Transaction ID: SA11A1.56673 **TAMPA** FI 33606 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer UNICOM ANESTH Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)

PAGE 166 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) A. DOUG VAUGHN Date of Receipt Mailing Address 20 YORK ST EP 3-608 10 2007 13 City State Zip Code Transaction ID: SA11A1.55891 **NEW HAVEN** CT 06504 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer YALE NEW HAVEN HOSP Occupation ANESTHESIOLOGIST Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. HECTOR VILA Date of Receipt Mailing Address 4304 AZEDE ST 13 2007 City State Zip Code Transaction ID: SA11A1.56079 **TAMPA** FL 33609 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer FLORIDA PED ASSOC Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. CHRISTOPHER VISCOMI Date of Receipt Mailing Address 50 HILLCREST RD. 10 10 2007 Citv State Zip Code Transaction ID: SA11A1.55581 BURLINGTON VT 05401 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer FLETCHER ALLEN HEALTH CARE Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 167 / 191
	EMIZED RECEIPTS		or each category of the	(check only one)
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Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	AMERICAN SOCIETY OF ANESTHESIC	MITTEE		
Α.	Full Name (Last, First, Middle Initial) SALVATORE VITALE			Date of Receipt
	Mailing Address 26 RAMBLEWOOD CT			10 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.56518
	NISKAYUNA	NY	12309	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer ANES GRP ALBANY	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		250.00	
	Other (specify)	0 0	250.00	
— В.	Full Name (Last, First, Middle Initial) PATRICK VLAHOS			Date of Receipt
	Mailing Address 135 DEVONWOOD DR	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	City	State	Zip Code	Transaction ID: SA11A1.56365
	PITTSBURGH	PA	15241	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer RETIRED	Occupation		
			ESIOLOGIST	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	' '	500.00	
	Other (specify)		0 0 0 0 0 0	
<u> </u>	Full Name (Last, First, Middle Initial) J MICHAEL VOLLERS			Date of Receipt
	Mailing Address 8 EQUENNES DR			10 13 YYYYY 10 13 2007
	City	State	Zip Code	Transaction ID: SA11A1.56011
	LITTLE ROCK	AR	72223	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer UAMS	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	Year-to-Date ▼	7
	Primary General		500.00	1
	Other (specify) ▼		500.00	
	LIPTOTAL of Descripts This Descriptor IV		_	1250.00
اع	UBTOTAL of Receipts This Page (optional)			

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 168 / 191
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••			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Δr	w information copied from such Reports and St	atemente may	y not be sold or used by any perso	
or	ly information copied from such Reports and St for commercial purposes, other than using the	name and add	dress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	AMERICAN SOCIETY OF ANESTHES	IOLOGISTS	S POLITICAL ACTION COM	MITTEE
_	Full Name (Last, First, Middle Initial)			
Α.	DIMITRI VOULGAROPOULOS			Date of Receipt
	Mailing Address 1996 E CAMINO MIRA	VAL		10 16 2007
	City	State	Zip Code	Transaction ID: SA11A1.56690
	TUCSON	AZ	85718	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer SO AZ ANESTH	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		250.00	
	Other (specify) ▼	0 0	230.00	
В.	Full Name (Last, First, Middle Initial) J MARK WAGNER			Date of Receipt
	Mailing Address 6634 KLEIN ST NW			M M / D D / Y Y Y Y
			7: 0 1	10 08 2007
	City	State	Zip Code	Transaction ID: SA11A1.55445
	<u>OLYMPIA</u>	WA	98502	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer	Occupation	<u> </u>	-
	Name of Employer OLYMPIA ANES ASSOC		ESIOLOGIST	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		250.00	
	Other (specify)		0 0 0 0 0 0 0	
С.	Full Name (Last, First, Middle Initial) MICHAEL WALSH			Date of Receipt
٥.	Mailing Address 200 FIRST ST SW			M M / D D / Y Y Y Y
				10 14 2007
	City	State	Zip Code	Transaction ID: SA11A1.56353
	ROCHESTER	MN	55905	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer MAYO CLINIC	Occupation PHYSICIA		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		500.00	
_	Other (specify) ▼			
s	UBTOTAL of Receipts This Page (optional)			1000.00
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5	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)
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			Detailed Summary Page	13 14 15 16 17
Δr	y information copied from such Reports and Sta	atomonte may	unot be sold or used by any perso	
or	for commercial purposes, other than using the i	name and add	dress of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	AMERICAN SOCIETY OF ANESTHES	OLOGISTS	S POLITICAL ACTION COM	MITTEE
	Full Name (Last, First, Middle Initial)			
A.	MARK WARNER			Date of Receipt
	Mailing Address 3535 BAMBER VALLEY	RD SW		10 14 2007
	City	State	Zip Code	
	City ROCHESTER	MN	•	Transaction ID: SA11A1.56287
		IVIIN	55902	Amount of Each Receipt this Period
	FEC ID number of contributing	C		500.00
	federal political committee.			
	Name of Employer MAYO CLINIC	Occupation	n	7
	MAYO CLINIC	ANESTH	ESIOLOGIST	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify)		500.00	
ь	Full Name (Last, First, Middle Initial) MARY ELLEN WARNER			Date of Receipt
Ь.		─ │		
	Mailing Address 1ST ST SW MAYO CLI	10 14 2007		
	City	State	Zip Code	Transaction ID: SA11A1.56285
	ROCHESTER	MN	55905	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		500.00
	·			_
	Name of Employer MAYO CLINIC	Occupation		
			ESIOLOGIST	_
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	-
	Other (specify)		500.00	
	Cirici (specify)	0 0		.1
_	Full Name (Last, First, Middle Initial)			+
C.	DAVID WATLING			Date of Receipt
	Mailing Address 1718 E. SOUTH RIDGE	DR.		M M / D D / Y Y Y Y
				10 03 2007
	City	State	Zip Code	Transaction ID: SA11A1.55397
	SPOKANE	<u>WA</u>	99223	Amount of Each Receipt this Period
	FEC ID number of contributing	С		250.00
	federal political committee.	0		
	Name of Employer ANESTHESIA ASSOCIATES, P	Occupation	n	┪
	AÑESTHESÏA ÁSSOCIATES, P S.		ESIOLOGIST	
	Receipt For:	-	e Year-to-Date ▼	7
	Primary General	-		1
	Other (specify)		250.00]
				4050.00
s	UBTOTAL of Receipts This Page (optional)			1250.00
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 170 / 191
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Δr	ny information conied from such Reports and St	atements may	y not he sold or used by any nerso	
or	ny information copied from such Reports and Sta for commercial purposes, other than using the i	name and add	dress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
$ \rangle$	AMERICAN SOCIETY OF ANESTHES	OLOGISTS	S POLITICAL ACTION COM	MITTEE
<u>/</u>	Full Name (Last, First, Middle Initial)			
A.				Date of Receipt
	Mailing Address 27 STURBRIDGE RD.			10 02 Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.55370
	EASTON	CT	06612	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		500.00
	Name of Employer BRIDGEPORT ANESTHESIA ASS-	Occupation		7
	OCIATES Receipt For:	PHYSICI		_
	Primary General	Ayyreyale	Year-to-Date ▼	1
	Other (specify) ▼	1	500.00	
R	Full Name (Last, First, Middle Initial) EDWARD WEGRZYNOWICZ			Date of Receipt
ъ.	Mailing Address 3570 ROLLING MEADO	OWS DR		M M / D D / Y Y Y Y
		JVVO DIT.		10 01 2007
	City	State	Zip Code	Transaction ID: SA11A1.55352
	ABERDEEN	SD	57401	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Tederal political committee.			
	Name of Employer SELF-EMPLOYED	Occupation		
	Receipt For:	PHYSICI	AIN Year-to-Date ▼	\dashv
	Primary General	riggrogato		1
	Other (specify) ▼		500.00	
_				
C.	Full Name (Last, First, Middle Initial) STEVEN WEISSMAN			Date of Receipt
-	Mailing Address 155 BALTIC CIRCLE			M M / D D / Y Y Y Y
				10 30 2007
	City	State	Zip Code	Transaction ID: SA11A1.56816
	TAMPA	FL	33606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer	Locumetics		
	Name of Employer UNICOM ANESTHESIA ASSOC.	Occupation PHYSICI.		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify)	0 0	300.00	
s	UBTOTAL of Receipts This Page (optional)			1500.00
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 171 / 191 (check only one)
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Ar	ry information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	 y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\mid	NAME OF COMMITTEE (In Full)			
\rangle	AMERICAN SOCIETY OF ANESTHESIC	LOGISTS	S POLITICAL ACTION COM	MITTEE
A.	Full Name (Last, First, Middle Initial) REBECCA WELCH			Date of Receipt
	Mailing Address 2101 FOREST CLUB			10 31 2007
	City	State	Zip Code	Transaction ID: SA11A1.56863
	ORLANDO	FL	32804	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer ORMC	Occupation PHYSICI		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
В.	Full Name (Last, First, Middle Initial) ERIC WERNER			Date of Receipt
	Mailing Address 3804 ROYAL FOX DR			10 15 7 2007
	City	State	Zip Code	Transaction ID: SA11A1.56543
	ST CHARLES	IL .	60174	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer WCAG	Occupation ANESTH	n ESIOLOGIST	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
<u> </u>	Full Name (Last, First, Middle Initial) JAMES WEST			Date of Receipt
	Mailing Address 5229 CONSGROVE CO	VΕ		10 31 2007
	City	State	Zip Code	Transaction ID: SA11A1.56822
	MEMPHIS	TN	38117	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer MEDICAL ANES GRP	Occupation ANESTH	n ESIOLOGIST	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
	UBTOTAL of Receipts This Page (optional)			1500.00
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Any information copied from such Reports and Sta or for commercial purposes, other than using the r	atements may	not be sold or used by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , ,	
AMERICAN SOCIETY OF ANESTHESI	OLOGISTS	S POLITICAL ACTION COM	MITTEE
Full Name (Last, First, Middle Initial) A. DAVID WHALLEY			Date of Receipt
Mailing Address 4223 SNOWBERRY			10 13 7 2007
City	State	Zip Code	Transaction ID: SA11A1.55968
NAPLES	<u>FL</u>	34119	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer ANES ASSOC NAPLES	Occupation PHYSICI.		
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	500.00	
Full Name (Last, First, Middle Initial) 3. ROBERT WHITCOMB			Date of Receipt
Mailing Address 221 CHURCH ROAD			10 25 7 2007
City	State	Zip Code	Transaction ID: SA11A1.56785
WINNETKA	IL	60093	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer ELMHURST ANESTHESIOLOGISTS	Occupation PHYSICI.		
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	500.00	
Full Name (Last, First, Middle Initial) STEVEN WHITEHURST			Date of Receipt
Mailing Address 103 REGISTRY LN			10 14 2007
City	State	Zip Code	Transaction ID: SA11A1.56344
BADEN	PA	15005	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer UPMC	Occupation ANESTH	n ESIOLOGIST	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	500.00	
SUBTOTAL of Receipts This Page (optional)			1250.00
TOTAL This Period (last page this line number o	nlv)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 173 / 191
ıт	EMIZED RECEIPTS		or each category of the	(check only one)
••	LIMIZED RESENTS		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Ar	y information copied from such Reports and State	ments may	not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the nar	ne and add	iress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		DOLUTION ACTION COM	MITTEE
//	AMERICAN SOCIETY OF ANESTHESIO	LOGISTS	S POLITICAL ACTION COM	MILLIEE
<u>_</u>	Full Name (Last, First, Middle Initial)			
Α.	DALE WICKSTRUM Mailing Address P. C. BOY 0400			Date of Receipt
	Mailing Address P.O. BOX 9499			10 13 2007
	City	State	Zip Code	Transaction ID: SA11A1.56029
	WINTER HAVEN	FL	33883	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer SELF-EMPLOYED	Occupation	1	7
			ESIOLOGIST	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)	' '	500.00	
		0 0		1
В.	Full Name (Last, First, Middle Initial) ANN WILHITE			Date of Receipt
	Mailing Address 10136 CHEROKEE RD	10 14 2007		
	City	State	Zip Code	Transaction ID: SA11A1.56225
	RICHMOND	VA	23235	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
		Occupation	n ESIOLOGIST	
	Receipt For:		Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify) ▼	0 0	500.00	
C	Full Name (Last, First, Middle Initial) JOHN WILLIAMS			Date of Receipt
•	Mailing Address 5004 W GROVE LN			M M / D D / Y Y Y Y
				10 15 2007
	CIRCONIA	State	Zip Code	Transaction ID: SA11A1.56542
	GIBSONIA	PA	15044	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	LIDMC ' '	Occupation PHYSICI.		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	' '	500.00	1
	Other (specify) ▼		300.00	
	UPTOTAL (Charita Till B. 17 ff B.			1500.00
S	UBTOTAL of Receipts This Page (optional)		<u> </u>	
Т	OTAL This Period (last page this line number only			

PAGE 174 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) A. DAVID WILLIAMSON Date of Receipt Mailing Address 318 WILSHIRE PL 2007 10 09 City State Zip Code Transaction ID: SA11A1.55450 **CORPUS CHRISTI** TX 78411 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer GULF SHORE ANESTH Occupation ANESTHESIOLOGIST Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. PAUL WILLOUGHBY Date of Receipt Mailing Address 4 BREWSTER CT 13 2007 City State Zip Code Transaction ID: SA11A1.55907 **SETAUKET** NY 11733 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer SUNY @ STONY BROOK Occupation **ANESTHESIOLOGIST** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. MARGARET WILSON Date of Receipt Mailing Address 5670 VERBENA 10 12 2007 Citv State Zip Code Transaction ID: SA11A1.55674 SAN ANTONIO TX 78240 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer TEJAS ANESTH Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
11	EIVIIZED RECEIP 15		Detailed Summary Page	X 11a 11b 11c 12 17 18 17 18 19 19 19 19 19 19 19
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\setminus	NAME OF COMMITTEE (In Full) AMERICAN SOCIETY OF ANESTHESI	OLOGISTS	S POLITICAL ACTION COM	MITTEE
Α.	Full Name (Last, First, Middle Initial) DOUG WISEMAN			Date of Receipt
	Mailing Address 615 CAMBRIDGE BLVE)		10 D D / Y Y Y Y Y 1 Y 1 1 4 2 0 0 7
	City GRAND RAPIDS	State MI	Zip Code 49506	Transaction ID: SA11A1.56363 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer ANES MED CONSULT	Occupation ANESTH	n ESIOLOGIST	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) RICHARD WOLMAN Mailing Address 913 PEBBLE BEACH DR			Date of Receipt
	City	10 12 2007		
	MADISON	State WI	Zip Code 53717	Transaction ID: SA11A1.55632 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer UNIV OF WISC	Occupation ANESTH	n ESIOLOGIST	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
<u>с</u> .	Full Name (Last, First, Middle Initial) BYRON WORK			Date of Receipt
	Mailing Address 3749 LYNNFIELD DR			10 14 2007
	City VA BEACH	State VA	Zip Code 23452	Transaction ID: SA11A1.56263 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer ATLANTIC ANESTH	Occupation PHYSICI		
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00	
s	UBTOTAL of Receipts This Page (optional)			1500.00
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PAGE 176 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) EDWARD YAGHMOUR Date of Receipt Mailing Address 401 E ONTARIO #4401 10 2007 14 City State Zip Code Transaction ID: SA11A1.56299 **CHICAGO** IL 60611 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer NORTHWESTERN MED Occupation ANESTHESIOLOGIST Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** CHAHINE YAMINE Date of Receipt Mailing Address 1227 EARNESTINE ST 15 2007 City State Zip Code Transaction ID: SA11A1.56498 **MCLEAN** V٨ 22101 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer DOMINION ANES Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. CHRISTOPHER YEAKEL Date of Receipt Mailing Address 206 BEAVER LAKE DR 10 13 2007 City State Zip Code Transaction ID: SA11A1.55957 **ELGIN** SC 29045 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer ANES CONSUL COLUMBIA Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)

PAGE 177 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) CHRIS YOUNG Date of Receipt Mailing Address 7 CARRIAGE HILL 15 2007 10 City State Zip Code Transaction ID: SA11A1.56490 SIGNAL MTN ΤN 37377 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer ACE ANESTH Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. MARK ZAKOWSKI Date of Receipt Mailing Address 8700 BEVERLY BLVD 14 2007 City State Zip Code Transaction ID: SA11A1.56336 **LOS ANGELES** CA 90048 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer SELF-EMPLOYED Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. SAMI ZAMZAM Date of Receipt Mailing Address 2979 EAGLE ROCK CT. 10 03 2007 Citv State Zip Code Transaction ID: SA11A1.55384 **RENO** NV 89511 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer SIERRA ANESTHESIA, INC. Occupation ANESTHESIOLOGIST Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)

PAGE 178 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) JOHN ZERWAS Date of Receipt Mailing Address 6702 RIVA RIDGE DR 10 2007 16 City State Zip Code Transaction ID: SA11A1.56657 **RICHMOND** TX 77469 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer MEMORIAL HERMANN Occupation **PHYSICIAN** Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** JOEL ZIVOT Date of Receipt Mailing Address 41 KINGSWAY 12 2007 City State Zip Code Transaction ID: SA11A1.56924 **WINNIPEG** ZZ Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer U OF MANITOBA Occupation **PHYSICIAN** Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. JONATHAN ZUCKER Date of Receipt Mailing Address 1612 ST GREGORY DR 10 13 2007 Citv State Zip Code Transaction ID: SA11A1.56017 LAS VEGAS NV 89117 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer SELF-EMPLOYED Occupation PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify)

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PAGE 179 / 191 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 **X** 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions 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) AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) NORTHERN TRUST CO Date of Receipt Mailing Address 50 S LASALLE 10 31 2007 City State Zip Code Transaction ID: SA17.56988 **CHICAGO** IL 60675 Amount of Each Receipt this Period FEC ID number of contributing 2298.50 C federal political committee. INTEREST INCOME Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General 637227.34 Other (specify) Full Name (Last, First, Middle Initial) B. NORTHERN TRUST CO Date of Receipt Mailing Address 50 S LASALLE 3 1 2007 City Zip Code State Transaction ID: SA17.56991 **CHICAGO** IL 60675 Amount of Each Receipt this Period FEC ID number of contributing C 101247.67 federal political committee. **CD MATURED** Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General 738475.01

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TOTAL This Period (last page this line number only)	•	103546.17

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۹.	Full Name (Last, First, Middle Initial) BOUSTANY FOR CONGRESS Mailing Address 2501 WISCONSIN AVE N	NW #304		Transaction ID: SB23.56951 Date of Disbursement M 0 M	
	•	State Zip Code DC 20007		Amount of Each Disbursement this Period	_ 1
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3.	Full Name (Last, First, Middle Initial) BRADY FOR CONGRESS			Transaction ID: SB23.55327 Date of Disbursement	_
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	THE WOODLANDS	State Zip Code TX 77387		Amount of Each Disbursement this Period 1000.00	1
	Purpose of Disbursement Candidate Name		Category/	1000.00	ı
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	Office Sought: X House Senate President State: TX District: 8 Disburse X	ment For: 2008 Primary General Other (specify)			
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	WASHINGTON	State Zip Code DC 20007		Amount of Each Disbursement this Period	1
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	Candidate Name		Category/ Type		
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	Mailing Address P.O. BOX 2749							1 0			25	Ľ	2	o ŏ 7	7
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	Mailing Address 236 MASSACHUSETTS	AVE NE	#508					1 ^M 0	М	/ D	25		ž	0 ŏ 7	7
	City WASHINGTON	State DC	Zip Code 20002					Amou	ınt o	f Eacl	n Dis	burse	emen	t this I	Period
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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 24 28a 28b 28c	25 26 29 30b
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NAME OF COMMITTEE (In Full) AMERICAN SOCIETY OF ANESTHESIC				
Full Name (Last, First, Middle Initial) 4. COMM TO RE-ELECT TRENT FRANKS			Transaction ID: SB23.56 Date of Disbursement	
Mailing Address P.O. BOX 1082			10 25 Y	ŽOĎ7Ť
City SPRINGFIELD	State Zip Code VA 22151		Amount of Each Disburser	
Purpose of Disbursement	I			1000.00
Candidate Name		Category/ Type		
	sement For: 2008 X Primary General Other (specify)			
Full Name (Last, First, Middle Initial) 3. DEMOCRATIC SENATE CAMPAIGN CC	MM		Transaction ID: SB23.56 Date of Disbursement	6934
Mailing Address P.O. BOX 96047			10 M / 25 / Y	2007
City WASHINGTON	State Zip Code DC 20077		Amount of Each Disburser	ment this Period
Purpose of Disbursement 2007 CONTRIBUTION	Γ			10000.00
Candidate Name		Category/ Type		
Senate	sement For: 2007 Primary General X Other (specify)			
Full Name (Last, First, Middle Initial) FRIENDS OF JOE BACA			Transaction ID: SB23.56 Date of Disbursement	6960
Mailing Address P.O. BOX 71276			10 M / 25 / Y	ž 0 0 7 °
City WASHINGTON	State Zip Code DC 20024		Amount of Each Disburser	ment this Period
Purpose of Disbursement	Г	•		1000.00
Candidate Name		Category/ Type		
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AMERICAN SOCIETY OF ANESTHESIOL	OGISTS POLITICAL ACTI	ON COMMI	ΓΤΕΕ ———						
Full Name (Last, First, Middle Initial)				_	SB23.569	974			
HOUSE CONSERVATIVE FUND			Date of D			YY	Υ		
Mailing Address P.O. BOX 2752			1 0 M / D 2 5 / Y 2 0 0 7 Y						
City WASHINGTON	State Zip Code DC 20013		Amount o	of Each D	isbursem	ent this P	eriod		
Purpose of Disbursement 2007 CONTRIBUTION	Г	•				1500.0	00		
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	ment For: 2007								
Senate President X	Primary General Other (specify) ▼								
State: District:	Carior (opeciny)								
Full Name (Last, First, Middle Initial)			Transact Date of D	_		928			
JUDGE JOHN CARTER FOR CONGRESS							Y		
Mailing Address P.O. BOX 6930			10	0 4) / Y	ž 0 ŏ 7			
City ROUND ROCK	State Zip Code TX 78683		Amount o	of Each D	isbursem	ent this P	eriod		
Purpose of Disbursement		• •				2500.0	00		
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State: TX District: 31 Full Name (Last, First, Middle Initial)				: ID C	ND00 F00	70			
KLEIN FOR CONGRESS			Date of D	isbursen	_	976			
Mailing Address 21301 POWERLINE RD	#204		10	25) / Y	ž 0 ŏ 7	Y		
City BOCA RATON	State Zip Code FL 33433		Amount o	of Each D	isbursem	ent this P	eriod		
Purpose of Disbursement	Г	-				2500.0	00		
Candidate Name		Category/ Type							
	ment For: 2008 Primary General Other (specify)								
				•		6500.0	0		
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	CHEDULE B (FEC Form 3X)	Use sepe	erate schedule(s)	rate schedule(s) FOR LINE NUMBER: PAG (check only one)			R:	PAGE	185 /	191	
IT	EMIZED DISBURSEMENTS	for each	category of the Summary Page		21b 27	22 28a	X 23			25 29	26 30b
	y Information copied from such Reports and State for commercial purposes, other than using the nan										S
\rangle	NAME OF COMMITTEE (In Full) AMERICAN SOCIETY OF ANESTHESION										
١.	Full Name (Last, First, Middle Initial) LACY CLAY FOR CONGRESS							ID: SB23.	.5694	0	
	Mailing Address P.O. BOX 4544 #300					1 ^M 0	M /	25	Ý Ž	0 ŏ 7	, ^Y
	City ST LOUIS	State MO	Zip Code 63108			Amou	nt of Ea	ch Disbur	semen	t this F	Period
	Purpose of Disbursement					Ī L.			3	3500.0	00
	Candidate Name				egory/ ype						
		ement For: C Primary Other (spe	2008 General ecify) ▼								
3.	Full Name (Last, First, Middle Initial) LEWIS FOR CONGRESS					Date of	of Disbu	ID: SB23			
	Mailing Address P.O. BOX 636					1 0	M /	04	ž	0 ŏ 7	, ^Y
	City ANNANDALE	State VA	Zip Code 22003			Amou	nt of Ea	ach Disbur			
	Purpose of Disbursement				- 1] L.			1	000.0	00
	Candidate Name				egory/ ype						
	Senate President	ement For: C Primary Other (spe	2008 General								
	State: GA District: 5 Full Name (Last, First, Middle Initial)					Trans	action	ID: SB23.	5695	4	
).	LYNN JENKINS FOR CONGRESS					Date o	of Disbu	ırsement			V
	Mailing Address P.O. BOX 1441					1 0		^D 25	2	0 ŏ 7	
	City TOPEKA	State KS	Zip Code 66601			Amou	nt of Ea	ach Disbur	semen	t this F	Period
	Purpose of Disbursement				-	Ī L.			3	3500.0	00
	Candidate Name				egory/ ype						
		ement For: C Primary Other (spe	2008 General								
_	'						•	•	8	000.0	00
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т	OTAL This Period (last page this line number only	/)									

	CHEDULE B (FEC Form 3X)	Use sepe	erate schedule(s)		E NUMBER:	PAGE 186 / 191
IT	EMIZED DISBURSEMENTS	for each	category of the Summary Page	(check o 21b 27	22 X 23 28a 28b	24 25 26 28c 29 30b
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam					
\rangle	NAME OF COMMITTEE (In Full) AMERICAN SOCIETY OF ANESTHESIOL					
۹.	Full Name (Last, First, Middle Initial) MCCONNELL SENATE COMMITTEE '08				Transaction ID: Date of Disburs	ement
	Mailing Address P.O. BOX 1496				10 / 0	04 7 2007
	City LOUISVILLE	State KY	Zip Code 40201		Amount of Each	Disbursement this Period
	Purpose of Disbursement					2500.00
	Candidate Name			Category/ Type		
	X Senate X President	ement For: Primary Other (spe	2008 General			
3.	State: KY District: Full Name (Last, First, Middle Initial) MCCONNELL SENATE COMMITTEE '08				Transaction ID	
	Mailing Address P.O. BOX 1496				M M / D	2 0 0 7 Y
	City	State	Zip Code		Amount of Each	Disbursement this Period
	LOUISVILLE Purpose of Disbursement	KY	40201	0 0		2500.00
	Candidate Name			Category/ Type		
	Office Sought: House Disburse X Senate President State: KY District:	ement For: Primary Other (spe	2008 X General ecify) ▼			
Э.	Full Name (Last, First, Middle Initial) NEAL FOR CONGRESS				Transaction ID: Date of Disburs	
	Mailing Address 76 MAGNOLIA TERR				10 M / D 2	25 7 2007
	City SPRINGFIELD	State MA	Zip Code 01108		Amount of Each	Disbursement this Period
	Purpose of Disbursement					2000.00
	Candidate Name			Category/ Type		
	Senate X President	ement For: Primary Other (spe	2008 General			
_	State: MA District: 2					7000.00
	UBTOTAL of Disbursements This Page (optional)			<u> •</u>	• • •	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Т	OTAL This Period (last page this line number only)	١				

	CHEDULE B (FEC Form 3X)		erate schedule(s)				NUMBE	R:			PAGE	187	191
IT	EMIZED DISBURSEMENTS	for each o	category of the Summary Page		$\stackrel{\cdot}{\Box}$ 2	ck only 21b 27	22 28a		23 28b	24 28		25 29	26 30k
	y Information copied from such Reports and Statem for commercial purposes, other than using the name												s
abla	NAME OF COMMITTEE (In Full)												
/	AMERICAN SOCIETY OF ANESTHESIOL	OGISTS F	POLITICAL AC	TIC	ON CO	OMMI [*]	TTEE						
Α.	Full Name (Last, First, Middle Initial) PERLMUTTER FOR CONGRESS						Date of	of Dis	burse				
	Mailing Address 3440 YOUNGFIELD ST #	‡ 264					1 ^M 0	M /	^D 2	5	Y	2 o ŏ 7	7 ^Y
		State CO	Zip Code 80033				Amou	nt of	Each	Disbur			
	Purpose of Disbursement								-	-	2	2500.	00
	Candidate Name			С	ategor Type	ry/							
		ment For: Primary Other (spe	2008 General										
	State: CO District: 7 Full Name (Last, First, Middle Initial)												
В.	ROBERTS FOR SENATE						Date of		burse				V
	Mailing Address 228 S WASHINGTON ST	Г#В20					1 0	IVI /	^D 2	5 ′	2	2 o ŏ 7	7 '
	,	State VA	Zip Code 22314				Amou	nt of	Each	Disbur	semer	nt this f	Period
	Purpose of Disbursement			Г	•		L.				2	2000.	00
	Candidate Name			С	ategor Type	ry/							
	X Senate X President	ment For: Primary Other (spe	2008 General cify) ▼										
	State: KS District: Full Name (Last, First, Middle Initial)									0000			
C.	ROSKAM FOR CONGRESS						Date of		burse				V
	Mailing Address P.O. BOX 713						1 0		^D 2	5 ′	2	2 o ŏ 7	'
		State IL	Zip Code 60189				Amou	nt of	Each	Disbur			
	Purpose of Disbursement						L.		•	-	2	2000.	00
	Candidate Name			С	ategor Type	ry/							
	Senate X President	ment For: Primary Other (spe	2008 General										
	State: IL District: 6												
s	UBTOTAL of Disbursements This Page (optional) .					<u> </u>					6	500.0	00
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S	CHEDULE B (FEC Form 3X)	Use seperate schedu	FOR LINE NUMBER: PAGE 188 / 19				
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Pa	he	(check only	one) 22 X 23 28a 28b	24 25 26 28c 29 30b	
	y Information copied from such Reports and Statem for commercial purposes, other than using the name						
\rangle	NAME OF COMMITTEE (In Full) AMERICAN SOCIETY OF ANESTHESIOL						
۹.	Full Name (Last, First, Middle Initial) STARK RE-ELECTION COMMITTEE				Date of Disburs		
	Mailing Address P.O. BOX 75214				10 / D	25 7 2007	
	,	State Zip Code DC 20013			Amount of Eac	h Disbursement this Period	
	Purpose of Disbursement			-		2000.00	
	Candidate Name		7	Category/ Type			
		ment For: 2008 Primary Gene Other (specify)	eral				
3.	Full Name (Last, First, Middle Initial) SUE MYRICK FOR CONGRESS				Transaction IE	D: SB23.56930	
	Mailing Address P.O. BOX 37091				M M / D		
	,	State Zip Code NC 28237			Amount of Eac	h Disbursement this Period	
	Purpose of Disbursement			• •		1500.00	
	Candidate Name		7	Category/ Type			
		ment For: 2008 Primary Gene Other (specify)	eral				
Э.	Full Name (Last, First, Middle Initial) SULLY FUND				Transaction IE Date of Disburs	D: SB23.56938 sement	
	Mailing Address P.O. BOX 650552				10 / D	25 Y 2007	
		State Zip Code VA 20165			Amount of Eac	h Disbursement this Period	
	Purpose of Disbursement 2007 CONTRIBUTION			•		2500.00	
	Candidate Name			Category/ Type			
	Senate	ment For: 2007 Primary Gene Other (specify)	eral				
s	UBTOTAL of Disbursements This Page (optional) .			<u>}</u>		6000.00	
T	OTAL This Period (last page this line number only)						

SCILEBOLL B (I LOI OIIII 3A)	Use seperate schedule(s)	(check only			PAGE	189 / 1	191
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 28a	23 28b	24 28c	25 29	26 30b
Any Information copied from such Reports and Statemer for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full) AMERICAN SOCIETY OF ANESTHESIOLO	· ·					· · · · · · · · · · · · · · · · · · ·	
Full Name (Last, First, Middle Initial) TEXANS FOR HENRY CUELLAR Mailing Address P.O. BOX 6147				on ID: SB isbursemen	nt	2 0 0 7	Y
	tate Zip Code TX 78042		Amount o	f Each Disl	bursemen	t this Pe	eriod
Purpose of Disbursement					1	000.00	0
Candidate Name		Category/ Type					
Office Sought: X House Senate President State: TX District: 28	nent For: 2008 Primary General Other (specify)						
Full Name (Last, First, Middle Initial) TEXANS FOR HENRY CUELLAR				isburseme		4	
Mailing Address P.O. BOX 6147			10		Ž Ž	0 0 7	Y
LÁREDO	tate Zip Code TX 78042		Amount o	f Each Disl		t this Pe	-
Purpose of Disbursement						1500.00	J .
Candidate Name		Category/ Type					
Office Sought: X House Senate President State: TX District: 28	nent For: 2008 Primary X General Other (specify) ▼						
Full Name (Last, First, Middle Initial) TEXANS FOR SENATOR JOHN CORNYN	INC			on ID: SB		2	
Mailing Address 6850 AUSTIN CENTRE B	LVD #180		10	^D 25	y ž	0 0̈ 7 `	Y
•	tate Zip Code TX 78731		Amount o	f Each Disl			-
Purpose of Disbursement						3000.00	0
Candidate Name		Category/ Type					
Office Sought: House Disburser X	nent For: 2008 Primary General Other (specify)						
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S	CHEDULE B (FEC Form 3X)	Use sep	erate schedule(s)		NUMBER: PAGE 190 / 191
IT	EMIZED DISBURSEMENTS	for each	category of the Summary Page	(check onl	y one) 22 X 23 24 25 26 28a 28b 28c 29 30b
	y Information copied from such Reports and St for commercial purposes, other than using the	•			
\	NAME OF COMMITTEE (In Full)				
/	AMERICAN SOCIETY OF ANESTHES	SIOLOGISTS	POLITICAL ACT	ION COMM	TTEE
	Full Name (Last, First, Middle Initial)				Transaction ID: SB23.56984
۹.	VAN HOLLEN FOR CONGRESS				Date of Disbursement
	Mailing Address 10605 CONCORD S	T #202			10 10 25 7 2007
	City KENSINGTON	State MD	Zip Code 20895		Amount of Each Disbursement this Period
	Purpose of Disbursement				2000.00
	Candidate Name			Category/ Type	
	Office Sought: X House Senate President Disk	Oursement For: X Primary Other (spe	2008 General		
	State: MD District: 8		·		

		2000.00
SUBTOTAL of Disbursements This Page (optional)	>	2000.00
TOTAL This Period (last page this line number only)	•	71000.00

S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)	FOR LINE							
IT	EMIZED DISBURSEMENTS	for each category of the	(check only							
		Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c X 29 30b						
	y Information copied from such Reports and State for commercial purposes, other than using the nar									
\rangle	NAME OF COMMITTEE (In Full) AMERICAN SOCIETY OF ANESTHESIO	LOGISTS POLITICAL ACT	ION COMMI	TTEE						
۹.	Full Name (Last, First, Middle Initial) NORTHERN TRUST CO			Transaction ID: SB29.56989 Date of Disbursement						
	Mailing Address 50 S LASALLE	$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & 3 & 1 \\ 3 & 1 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$								
	City CHICAGO	State Zip Code IL 60675		Amount of Each Disbursement this Period						
	Purpose of Disbursement VISA BANK CHARGE			2197.72						
	Candidate Name		Category/ Type							
	Senate President	sement For: Primary General Other (specify)								
	State: District:									
3.	Full Name (Last, First, Middle Initial) NORTHERN TRUST CO			Transaction ID: SB29.56990 Date of Disbursement						
	Mailing Address 50 S LASALLE			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & 3 & 1 \\ 3 & 1 \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$						
	City CHICAGO	State Zip Code IL 60675		Amount of Each Disbursement this Period						
	Purpose of Disbursement STOP PAYMENT CHARGE			4.50						
	Candidate Name		Category/ Type							
	Office Sought: House Disburs	sement For: Primary General Other (specify) ▼								
			1							

SUBTOTAL of Disbursements This Page (optional)	•	2202.22
TOTAL This Period (last page this line number only)	—	2202.22