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Image# 14978059076

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

	or Other Than An	Authorized	Committee			Office Use Only	
NAME OF T COMMITTEE (in full)	YPE OR PRINT ▼		mple: If typir r the lines.	ig, type	12FE4M5		
FIRST COLONIES ANE	STHESIA ASS	OCIATES	LLC POL	ITICAL A	CTION CO	OMMITTEE	Ш
ADDRESS (number and street)	7490 New Technology	/ Way					
Check if different							
than previously reported. (ACC)	Frederick				MD L	21703	
2. FEC IDENTIFICATION NUM	MBER ▼	CITY 🛦		S	STATE 🛦	ZIP CODE ▲	
C C00416305		3. IS THIS REPORT	\sim	IEW N) OR	AM (A)	ENDED	
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2) Mar 20 (M3)		May 20 (M5)	-	20 (M8) Nov 20 (Non-Election Year Only) 20 (M9) Dec 20 (Non-Election Year Only)	ⁿ ′ M12)
(a) Quarterly Reports:			H.			(Non-Election Year Only)	
April 15 Quarterly Report (Q1) (c) 12-Day	Apr 20 (M4)	Primary (12P	lul 20 (M7)	General (20 (M10) Jan 31 (Y	
July 15 Quarterly Report (Q2	PRF-Election		Convention (_	Special (,
Cotober 15 Quarterly Report (Q3 January 31)		M M /	D D /	Y Y Y Y	in the	_
Year-End Report (YE		Election on				State of	_
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Elect		General (30G	i)	Runoff (3	0R) Special (3	(SOS)
Termination Report (TER)	Report for	Election on	M M /	D D /	Y - Y - Y - Y	in the State of	
5. Covering Period 07		2014	through	09	/ 30 /	2014	_
I certify that I have examined this	Report and to the be	est of my kno	wledge and b	elief it is true	e, correct and	I complete.	—
Type or Print Name of Treasurer	Dr. Jeremy Roth					·	
Signature of Treasurer Dr. Jer.	remy Roth		[Electronically	<i>Filed]</i> Da	ate 10	/ DDD / YDY Y 03 2014	Y
NOTE: Submission of false, erroned	ous, or incomplete infor	mation may su	bject the pers	son signing th	is Report to th	e penalties of 2 U.S.C. §43	7g.
Office Use Only						FEC FORM 3X Rev. 12/2004	_

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE

	COLUMN A	COLUMN B
	This Period	Calendar Year-to-Date
. (a) Cash on Hand January 1, 2014		111353.40
(b) Cash on Hand at Beginning of Reporting Period	110526.09	
(c) Total Receipts (from Line 19)	13900.00	37225.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	124426.09	148578.40
. Total Disbursements (from Line 31)	6870.62	31022.93
. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	117555.47	117555.47
. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
This committee has qualified as a	nulticandidate committee. (see FEC FORM 1M)	

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 07	01 2014 To:	09 30 2014
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees		
Than Political Committees (i) Itemized (use Schedule A)	13275.00	19125.00
(ii) Unitemized(iii) TOTAL (add	625.00	18100.00
Lines 11(a)(i) and (ii)	13900.00	37225.00
(b) Political Party Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	13900.00	37225.00
Transfers From Affiliated/Other Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
to Federal Candidates and Other Political Committees	0.00	0.00
7. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	13900.00	37225.00
). Total Federal Receipts (subtract Line 18(c) from Line 19)▶	13900.00	37225.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	Total Tillo I ollow	Calcinal Teal-to-Date
	(i) Federal Share	0.00	0.00
	()		
	(ii) Non-Federal Share	4620.62	12827.93
	(b) Other Federal Operating	0.00	0.00
	Expenditures(c) Total Operating Expenditures	0.00	0.00
	(add 21(a)(i), (a)(ii), and (b))▶	4620.62	12827.93
	Transfers to Affiliated/Other Party	7	
	Committees	0.00	0.00
	Contributions to Federal Candidates/Committees		
	and Other Political Committees	0.00	500.00
	Independent Expenditures	0.00	0.00
	(use Schedule E) Coordinated Party Expenditures	0.00	0.00
	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
	(use Scriedule F)	7 7 7	0.00
	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
	Refunds of Contributions To: (a) Individuals/Persons Other		
	Than Political Committees	0.00	0.00
			0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees	0.00	0.00
	(such as PACs)	0.00	
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶	0.00	0.00
	Other Disbursements	2250.00	17695.00
	E		
	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity (from Schedule H6)		
	(i) Federal Share	0.00	0.00
	(1)		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely		
	With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
	Total Disburgamente (add Lines 21/a) 22		
	Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	6970 62	24000.00
	20, 27, 20, 20, 21, 20(u), 28 dia 30(c))	6870.62	31022.93
	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	2250.00	18195.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures				
3. Total Contributions (other than loans) (from Line 11(d), page 3)	13900.00	37225.00		
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00		
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	13900.00	37225.00		
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00		
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	0.00		

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

FOR LINE NUMBER:					PAGE	6	OF	91
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UI	tor commercial purposes, other than using the	name and address of any political committee to	Solicit Communions from Such Committee.
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESI	A ASSOCIATES LLC POLITICAL	ACTION COMMITTEE
۸.	Full Name (Last, First, Middle Initial) Hasan Abed Mailing Address 15 Waterbird Court City Cockeysville FEC ID number of contributing	State Zip Code MD 21030	Date of Receipt M M / 25
	federal political committee. Name of Employer First Colonies Anesthesia Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Physician Aggregate Year-to-Date 300.00	Payroll deduction
3.	Full Name (Last, First, Middle Initial) Hasan Abed Mailing Address 15 Waterbird Court City Cockeysville FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code MD 21030 C Occupation Physician Aggregate Year-to-Date ▼ 350.00	Date of Receipt M M / 25 2014 Transaction ID : SA11Al.8947 Amount of Each Receipt this Period 50.00 Payroll deduction
C.	Full Name (Last, First, Middle Initial) Hasan Abed Mailing Address 15 Waterbird Court City Cockeysville FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code MD 21030 C Occupation Physician Aggregate Year-to-Date ▼	Date of Receipt M M M / 25 2014 Transaction ID: SA11AI.9045 Amount of Each Receipt this Period 50.00 Payroll deduction
S	UBTOTAL of Receipts This Page (optional)	<u> </u>	150.00
T	OTAL This Period (last page this line number o	nly)	

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

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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Marc Azran Mailing Address 800 Hillsboro Drive		Date of Receipt
City Silver Spring FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	State Zip Code MD 20902 C Occupation Physician Aggregate Year-to-Date ▼ 300.00	7 25 2014 Transaction ID : SA11AI.8824 Amount of Each Receipt this Period 50.00 Payroll deduction
Full Name (Last, First, Middle Initial) Marc Azran Mailing Address 800 Hillsboro Drive City	State Zip Code	Date of Receipt 08 25 2014 Transaction ID : SA11AI.8915
Silver Spring FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General	MD 20902 C Occupation Physician Aggregate Year-to-Date ▼	Amount of Each Receipt this Period 50.00 Payroll deduction
Other (specify) ▼ Full Name (Last, First, Middle Initial) Marc Azran Mailing Address 800 Hillsboro Drive City City	State Zip Code	Date of Receipt 09 25 2014 Transaction ID: SA11AI.9010
Silver Spring FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: □ Primary □ General Other (specify) ▼	MD 20902 C Occupation Physician Aggregate Year-to-Date ▼ 400.00	Amount of Each Receipt this Period 50.00 Payroll deduction
SUBTOTAL of Receipts This Page (optional)		150.00
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Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using t	he name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Maksim Barkinskiy Mailing Address 10021 Dickens Avenue		Date of Receipt 07 25 2014
City Bethesda FEC ID number of contributing	State Zip Code MD 20814	Transaction ID : SA11AI.8818 Amount of Each Receipt this Period
federal political committee. Name of Employer First Colonies Anesthesia	Occupation Physician	50.00 Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) 3. Dr. Maksim Barkinskiy Mailing Address 10021 Dickens Avenue		Date of Receipt 08 25 2014
City Bethesda	State Zip Code MD 20814	Transaction ID : SA11AI.8909 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician Aggregate Year-to-Date ▼	- Payroll deduction
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Dr. Maksim Barkinskiy Mailing Address 10021 Dickens Avenue		Date of Receipt 09 25 2014
City Bethesda	State Zip Code MD 20814	Transaction ID : SA11AI.9004 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional)		150.00
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Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using t	he name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) A. Dr. Marc Beck Mailing Address 16 Norris Run Court		Date of Receipt
City Reisterstown FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: □ Primary □ General Other (specify) ▼	State Zip Code MD 21136 C Occupation Physician Aggregate Year-to-Date ▼ 300.00	7 25 2014 Transaction ID : SA11AI.8841 Amount of Each Receipt this Period 50.00 Payroll deduction
Full Name (Last, First, Middle Initial) 3. Dr. Marc Beck Mailing Address 16 Norris Run Court City	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Reisterstown FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia	State Zip Code MD 21136 C Occupation Physician	Transaction ID : SA11AI.8932 Amount of Each Receipt this Period 50.00 Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr. Marc Beck Mailing Address 16 Norris Run Court City Reisterstown FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code MD 21136 C Occupation Physician Aggregate Year-to-Date ▼ 400.00	Date of Receipt M
SUBTOTAL of Receipts This Page (optional).	•	150.00
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Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Jeffrey Briggs Mailing Address 14952 Finegan Farm Rd.		Date of Receipt
City Germantown FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code MD 20874 C Occupation Physician Aggregate Year-to-Date ▼	07 25 2014 Transaction ID : SA11AI.8797 Amount of Each Receipt this Period 50.00 Payroll deduction
Full Name (Last, First, Middle Initial) 3. Dr. Jeffrey Briggs Mailing Address 14952 Finegan Farm Rd. City	State Zip Code	Date of Receipt 08 25 2014
Germantown FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia	MD 20874 C Occupation Physician	Transaction ID : SA11AI.8886 Amount of Each Receipt this Period 50.00 Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr. Jeffrey Briggs Mailing Address 14952 Finegan Farm Rd. City Germantown	State Zip Code MD 20874	Date of Receipt 09 25 2014 Transaction ID: SA11AI.8982
FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	Occupation Physician Aggregate Year-to-Date 400.00	Amount of Each Receipt this Period 50.00 Payroll deduction
SUBTOTAL of Receipts This Page (optional).	•	150.00
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Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHI	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. John Bunker Mailing Address 15229 National Pike		Date of Receipt
City Hagerstown FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code MD 21740 C Occupation Physician Aggregate Year-to-Date ▼ 300.00	Transaction ID : SA11AI.8868 Amount of Each Receipt this Period 50.00 Payroll deduction
Full Name (Last, First, Middle Initial) Dr. John Bunker Mailing Address 15229 National Pike City Hagerstown FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code MD 21740 C Occupation Physician Aggregate Year-to-Date ▼	Date of Receipt M
Full Name (Last, First, Middle Initial) Dr. John Bunker Mailing Address 15229 National Pike City Hagerstown FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code MD 21740 C Occupation Physician Aggregate Year-to-Date ▼ 400.00	Date of Receipt 09 25 2014 Transaction ID: SA11AI.9059 Amount of Each Receipt this Period 50.00 Payroll deduction
SUBTOTAL of Receipts This Page (optional)	<u> </u>	150.00
TOTAL This Period (last page this line numb	per only)	

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

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or for commercial purposes, other than using	the name and address of any political committee t	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Donald Charney Mailing Address 3707 Meadowhill Court		Date of Receipt
City Phoenix FEC ID number of contributing federal political committee.	State Zip Code MD 21131	7 25 2014 Transaction ID: SA11Al.8842 Amount of Each Receipt this Period 50.00 Payroll deduction
Name of Employer First Colonies Anesthesia Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 300.00	- Taylon deddellori
Full Name (Last, First, Middle Initial) Dr. Donald Charney Mailing Address 3707 Meadowhill Court	Date of Receipt 08 25 2014	
City Phoenix FEC ID number of contributing federal political committee.	State Zip Code MD 21131	Transaction ID : SA11AI.8933 Amount of Each Receipt this Period 50.00
Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 350.00	Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Donald Charney Mailing Address 3707 Meadowhill Court City Phoenix	State Zip Code MD 21131	Date of Receipt 09 25 2014 Transaction ID : SA11AI.9031
FROERIX FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	Occupation Physician Aggregate Year-to-Date 400.00	Amount of Each Receipt this Period 50.00 Payroll deduction
SUBTOTAL of Receipts This Page (optional)	150.00
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Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Satyam Chary Mailing Address 9 Alterwood Lane		Date of Receipt
City	State Zip Code	07 25 2014 Transaction ID : SA11AI.8843
Owings Mill	MD 21117	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	- Payroll deduction
First Colonies Anesthesia Receipt For: Primary General Other (specify)	Physician Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) 3. Dr. Satyam Chary Mailing Address 9 Alterwood Lane	Date of Receipt 08 25 2014	
City	State Zip Code	Transaction ID : SA11AI.8934
Owings Mill FEC ID number of contributing federal political committee.	MD 21117	Amount of Each Receipt this Period 50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr. Satyam Chary		Date of Receipt
Mailing Address 9 Alterwood Lane		09 25 2014
City Owings Mill	State Zip Code MD 21117	Transaction ID : SA11AI.9032 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For:	Physician	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number	· only)	

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

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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHI	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Thomas Chau Mailing Address 7204 Loch Edin Court		Date of Receipt
City Potomac FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia	State Zip Code MD 20854 C Occupation Physician	07 25 2014 Transaction ID : SA11AI.8798 Amount of Each Receipt this Period 50.00 Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Thomas Chau Mailing Address 7204 Loch Edin Court	Date of Receipt 08 25 2014	
City Potomac FEC ID number of contributing federal political committee.	State Zip Code MD 20854	Transaction ID : SA11AI.8887 Amount of Each Receipt this Period 50.00
Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician Aggregate Year-to-Date ▼	Payroll deduction
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Dr. Thomas Chau Mailing Address 7204 Loch Edin Court		Date of Receipt 09 25 2014
City Potomac	State Zip Code MD 20854	Transaction ID : SA11AI.8983 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00 Payroll deduction
Name of Employer First Colonies Anesthesia Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 400.00	- Tayron academon
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line numb	per only)	

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Dwayne Chen Mailing Address 12808 Spring Drive		Date of Receipt
City	State Zip Code	07 25 2014 Transaction ID : SA11Al.8817
Rockville	MD 20850	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For: Primary Other (specify)	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Dwayne Chen Mailing Address 12808 Spring Drive	Date of Receipt 08 25 2014	
City Rockville	State Zip Code MD 20850	Transaction ID : SA11AI.8908
FEC ID number of contributing federal political committee.	C 20850	Amount of Each Receipt this Period 50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) C. Dr. Dwayne Chen		Date of Receipt
Mailing Address 12808 Spring Drive		09 25 _ 2014 _
City Rockville	State Zip Code MD 20850	Transaction ID : SA11AI.9003 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For: Primary Other (specify)	Physician Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional)		150.00
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or for commercial purposes, other than using	the name and address of any political committee t	to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE				
Full Name (Last, First, Middle Initial) Dr. Edward Chen Mailing Address 10209 Fleming Avenue	Dr. Edward Chen					
City Bethesda FEC ID number of contributing federal political committee.	State Zip Code MD 20814	7 25 2014 Transaction ID : SA11AI.8799 Amount of Each Receipt this Period 50.00 Payroll deduction				
Name of Employer First Colonies Anesthesia Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 300.00	- Paylon deduction				
Full Name (Last, First, Middle Initial) Dr. Edward Chen Mailing Address 10209 Fleming Avenue City	State Zip Code	Date of Receipt 08 25 2014				
Bethesda FEC ID number of contributing federal political committee.	MD 20814	Transaction ID : SA11AI.8888 Amount of Each Receipt this Period 50.00				
Name of Employer First Colonies Anesthesia Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 350.00	Payroll deduction				
Full Name (Last, First, Middle Initial) Dr. Edward Chen Mailing Address 10209 Fleming Avenue City	State Zip Code	Date of Receipt 09 25 2014 Transaction ID : SA11AI.8984				
Bethesda FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: □ Primary □ General □ Other (specify) ▼	MD 20814 C Occupation Physician Aggregate Year-to-Date ▼ 400.00	Amount of Each Receipt this Period 50.00 Payroll deduction				
SUBTOTAL of Receipts This Page (optional)	•	150.00				
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NAME OF COMMITTEE (In Full)					
,	SIA ASSOCIATES LLC POLITICAL	_ ACTION COMMITTEE			
Full Name (Last, First, Middle Initial) Dr. William Chester Mailing Address 13771 Lambertina Place		Date of Receipt			
		07 25 2014			
City Rockville	State Zip Code MD 20850	Transaction ID : SA11AI.8800 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia Receipt For:	Physician				
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00				
Full Name (Last, First, Middle Initial) Dr. William Chester Mailing Address 13771 Lambertina Place	Date of Receipt				
City	State Zip Code	08 25 2014 Transaction ID : SA11AI.8889			
Rockville	MD 20850	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer First Colonies Anesthesia	Occupation	Payroll deduction			
Receipt For:	Physician				
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00				
Full Name (Last, First, Middle Initial) Dr. William Chester		Date of Receipt			
Mailing Address 13771 Lambertina Place		09 25 2014 _			
City Rockville	State Zip Code MD 20850	Transaction ID : SA11AI.8985 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia	Physician				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00				
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number	·	150.00			

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAL	_ ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Charles Ciolino Mailing Address 11009 South Clap Road		Date of Receipt
Mailing Address 11008 South Glen Road		07 25 2014
City Potomac	State Zip Code MD 20854	Transaction ID : SA11AI.8819 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For: Primary General Other (specify)	Physician Aggregate Year-to-Date ▼ 300.00	
	555.50	
Full Name (Last, First, Middle Initial) Charles Ciolino		Date of Receipt
Mailing Address 11008 South Glen Road	08 25 2014	
City Potomac	State Zip Code MD 20854	Transaction ID : SA11AI.8910 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Charles Ciolino		Date of Receipt
Mailing Address 11008 South Glen Road		09 25 2014
City Potomac	State Zip Code MD 20854	Transaction ID : SA11AI.9005 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For:	Physician Aggregate Veer to Date	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional)		150.00
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or for commercial purposes, other than using the	e name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Lincoln Coore Mailing Address 11546 Fox River Road		Date of Receipt 07 25 2014
City Ellicott City FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthsia Receipt For: □ Primary □ General □ Other (specify) ▼	State Zip Code MD 21042 C Occupation Physician Aggregate Year-to-Date ▼ 450.00	Transaction ID : SA11AI.8850 Amount of Each Receipt this Period 75.00 Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Lincoln Coore Mailing Address 11546 Fox River Road City	State Zip Code	Date of Receipt 08 25 2014 Transaction ID: SA11AI.8941
Ellicott City FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthsia Receipt For: Primary General Other (specify)	MD 21042 C Occupation Physician Aggregate Year-to-Date ▼ 525.00	Amount of Each Receipt this Period 75.00 Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Lincoln Coore Mailing Address 11546 Fox River Road City Ellicott City FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthsia Receipt For: Primary General Other (specify)	State Zip Code MD 21042 C Occupation Physician Aggregate Year-to-Date ▼ 600.00	Date of Receipt M M / D 25 / 2014 Transaction ID : SA11AI.9039 Amount of Each Receipt this Period 75.00 Payroll deduction
SUBTOTAL of Receipts This Page (optional)	>	225.00
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or for commercial purposes, other than using	ng the name and address of any political committee t	
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTI	HESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Melvin Coursey		Date of Receipt
Mailing Address 18720 Shremor Drive		07 25 2014
City	State Zip Code	Transaction ID : SA11AI.8801
Derwood	MD 20855	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	- Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary ☐ General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) 3. Dr. Melvin Coursey		Date of Receipt
Mailing Address 18720 Shremor Drive	M = M / D = D / Y = Y = Y	
City	State Zip Code	08 25 2014 Transaction ID : \$41141 8800
Derwood	MD 20855	Transaction ID : SA11AI.8890 Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.		50.00
Name of Employer	Payroll deduction	
First Colonies Anesthesia	Occupation Physician	
Receipt For:	Aggregate Year-to-Date ▼	-
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Dr. Melvin Coursey		Date of Receipt
Mailing Address 18720 Shremor Drive		09 25 2014
City Derwood	State Zip Code MD 20855	Transaction ID : SA11AI.8986 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	400.00	
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or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSOCIATES LLC POLITICAL	ACTION COMMITTEE
Α.	Full Name (Last, First, Middle Initial) Dr. Lauren Deloach Mailing Address 15114 Pepperridge Drive		Date of Receipt
	City	State Zip Code	07 25 2014 Transaction ID : SA11AI.8860
	Bowie FEC ID number of contributing federal political committee.	MD 20721	Amount of Each Receipt this Period 50.00
	Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician Aggregate Year-to-Date ▼	Payroll deduction
	Primary General Other (specify) ▼	300.00	
В.	Full Name (Last, First, Middle Initial) Dr. Lauren Deloach Mailing Address 15114 Pepperridge Drive		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Bowie	State Zip Code MD 20721	Transaction ID : SA11AI.8954 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer	Occupation	50.00 Payroll deduction
	First Colonies Anesthesia Receipt For: Primary General Other (specify)	Physician Aggregate Year-to-Date ▼ 350.00	
C.	Full Name (Last, First, Middle Initial) Dr. Lauren Deloach Mailing Address 15114 Pepperridge Drive		Date of Receipt 09 25 2014
	City Bowie	State Zip Code MD 20721	Transaction ID : SA11AI.9050 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer First Colonies Anesthesia Receipt For: Primary Other (specify)	Occupation Physician Aggregate Year-to-Date ▼ 400.00	Payroll deduction
	SUBTOTAL of Receipts This Page (optional)		150.00
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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Ali Emamhosseini Mailing Address 8370 Greensboro Drive Apt #208 City McLean FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial)	State Zip Code VA 22102 C Occupation Physician Aggregate Year-to-Date ▼ 300.00	Date of Receipt 07
Mailing Address 8370 Greensboro Drive Apt #208 City	State Zip Code	Date of Receipt 08 25 2014 Transaction ID : SA11AI.8914
McLean FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: □ Primary □ General Other (specify) ▼	VA 22102 C Occupation Physician Aggregate Year-to-Date ▼ 350.00	Amount of Each Receipt this Period 50.00 Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Ali Emamhosseini Mailing Address 8370 Greensboro Drive Apt #208 City McLean FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code VA 22102 C Occupation Physician Aggregate Year-to-Date ▼ 400.00	Date of Receipt 09 25 2014 Transaction ID : SA11AI.9009 Amount of Each Receipt this Period 50.00 Payroll deduction
SUBTOTAL of Receipts This Page (optional)	>	150.00
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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Todd Epstein Mailing Address 11305 Struttman Terrace		Date of Receipt
		07 25 2014
City North Bethesda	State Zip Code MD 20852	Transaction ID : SA11AI.8829 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) 3. Dr. Todd Epstein Mailing Address 11305 Struttman Terrace		Date of Receipt
City	State Zip Code	08 25 2014
North Bethesda	MD 20852	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For:	Physician	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr. Todd Epstein		Date of Receipt
Mailing Address 11305 Struttman Terrace		09 25 2014 _
City North Bethesda	State Zip Code MD 20852	Transaction ID : SA11AI.9015 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	400.00	
SUBTOTAL of Receipts This Page (optional)		150.00
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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Richard Evans Mailing Address 6436 West Langley Lane		Date of Receipt
City McLean FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: □ Primary □ General Other (specify) ▼	State Zip Code VA 22101 C Occupation Physician Aggregate Year-to-Date ▼ 300.00	7 25 2014 Transaction ID : SA11AI.8822 Amount of Each Receipt this Period 50.00 Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Richard Evans Mailing Address 6436 West Langley Lane City	Date of Receipt 08 25 2014 Transaction ID: SA11AI.8913	
McLean FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: □ Primary □ General □ Other (specify) ▼	VA 22101 C Occupation Physician Aggregate Year-to-Date ▼ 350.00	Amount of Each Receipt this Period 50.00 Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Richard Evans Mailing Address 6436 West Langley Lane City McLean FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code VA 22101 C Occupation Physician Aggregate Year-to-Date ▼ 400.00	Date of Receipt 09 25 2014 Transaction ID : SA11AI.9008 Amount of Each Receipt this Period 50.00 Payroll deduction
SUBTOTAL of Receipts This Page (optional)	>	150.00
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or for commercial purposes, other than using	the name and address of any political committee	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Tamara Gabrielli Mailing Address 504 Reserve Champion D	rive	Date of Receipt
City Rockville FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: □ Primary □ General Other (specify) ▼	State Zip Code MD 20850 C Occupation Physician Aggregate Year-to-Date ▼ 300.00	Transaction ID : SA11Al.8870 Amount of Each Receipt this Period 50.00 Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Tamara Gabrielli Mailing Address 504 Reserve Champion D City Rockville FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code MD 20850 C Occupation Physician Aggregate Year-to-Date ▼ 350.00	Date of Receipt 08 25 2014 Transaction ID: SA11AI.8965 Amount of Each Receipt this Period 50.00 Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Tamara Gabrielli Mailing Address 504 Reserve Champion D City Rockville FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code MD 20850 C Occupation Physician Aggregate Year-to-Date ▼	Date of Receipt 09 25 2014 Transaction ID : SA11AI.9061 Amount of Each Receipt this Period 50.00 Payroll deduction
SUBTOTAL of Receipts This Page (optional)	150.00
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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Thomas Gambon		Date of Receipt
Mailing Address 7700 Charleston Dr.		07 25 2014
City Bethesda	State Zip Code MD 20817	Transaction ID : SA11AI.8880 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Thomas Gambon Mailing Address 7700 Charleston Dr.	Date of Receipt 08 25 2014	
City Bethesda	State Zip Code MD 20817	Transaction ID : SA11Al.8975 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Thomas Gambon		Date of Receipt
Mailing Address 7700 Charleston Dr.		09 25 2014
City Bethesda	State Zip Code MD 20817	Transaction ID : SA11AI.9071 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	150.00
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or for commercial purposes, other than using the	ne name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Steven Grube Mailing Address 13895 Foxtower Road		Date of Receipt
City Thurmont FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	State Zip Code MD 21788 C Occupation Physician Aggregate Year-to-Date ▼ 300.00	7 25 2014 Transaction ID : SA11AI.8871 Amount of Each Receipt this Period 50.00 Payroll deduction
Full Name (Last, First, Middle Initial) 3. Dr. Steven Grube Mailing Address 13895 Foxtower Road City	State Zip Code	Date of Receipt 08 25 2014 Transaction ID : SA11Al.8966
Thurmont FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For:	MD 21788 C Occupation Physician Aggregate Year-to-Date ▼	Transaction ID : SA11AI.8966 Amount of Each Receipt this Period 50.00 Payroll deduction
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Steven Grube Mailing Address 13895 Foxtower Read	350.00	Date of Receipt
Mailing Address 13895 Foxtower Road City Thurmont FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	State Zip Code MD 21788 C Occupation Physician Aggregate Year-to-Date ▼ 400.00	7 25 2014 Transaction ID: SA11AI.9062 Amount of Each Receipt this Period 50.00 Payroll deduction
SUBTOTAL of Receipts This Page (optional)	•	150.00
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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Keith Hairston Mailing Address 12312 Highstakes Drive		Date of Receipt
City Reisterstown	State Zip Code MD 21136	07 25 2014 Transaction ID : SA11Al.8846 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician	Payroll deduction
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Keith Hairston Mailing Address 12312 Highstakes Drive		Date of Receipt Mark
City Reisterstown	State Zip Code MD 21136	Transaction ID : SA11AI.8937 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician	Payroll deduction
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr. Keith Hairston		Date of Receipt
Mailing Address 12312 Highstakes Drive	State Zip Code	09 25 2014
City Reisterstown	MD 21136	Transaction ID : SA11AI.9035 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional)	•	150.00
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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHI	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Shelly Hairston Mailing Address 12312 Highstakes Drive		Date of Receipt
City Reisterstown FEC ID number of contributing	State Zip Code MD 21136	07 25 2014 Transaction ID : SA11AI.8867 Amount of Each Receipt this Period
federal political committee. Name of Employer First Colonies Anesthesia	Occupation Physician	50.00 Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Shelly Hairston Mailing Address 12312 Highstakes Drive		Date of Receipt 08 25 2014
City Reisterstown	State Zip Code MD 21136	Transaction ID : SA11AI.8962 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00 Payroll deduction
Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician	- Tayron deduction
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Shelly Hairston		Date of Receipt
Mailing Address 12312 Highstakes Drive City	State Zip Code	09 25 2014 Transaction ID : SA11AI.9058
Reisterstown	MD 21136	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00 Payroll deduction
Name of Employer First Colonies Anesthesia	Occupation Physician	- Taylon deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line numb	per only)	

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or for commercial purposes, other than using	g the name and address of any political committee	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE
Full Name (Last, First, Middle Initial) A. Dr. John Hanna Mailing Address 9310 Leigh Mill Ct.		Date of Receipt
City Great Falls	State Zip Code VA 22066	07 25 2014 Transaction ID : SA11AI.8830 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician	Payroll deduction
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) 3. Dr. John Hanna Mailing Address 9310 Leigh Mill Ct.		Date of Receipt 08 25 _ 2014 _
City Great Falls	State Zip Code VA 22066	Transaction ID : SA11AI.8921 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr. John Hanna		Date of Receipt
Mailing Address 9310 Leigh Mill Ct.	State 7in Code	09 25 2014
City Great Falls	State Zip Code VA 22066	Transaction ID : SA11AI.9016 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional	ı) >	150.00
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or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSOCIATES LLC POLITICAL	ACTION COMMITTEE
Α.	Full Name (Last, First, Middle Initial) Dr. Glen Hessinger Mailing Address 8101 Ruxton Crossing Road		Date of Receipt
	City Towson	State Zip Code MD 21204	07 25 2014 Transaction ID : SA11AI.8847
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 50.00
	Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	Occupation Physician Aggregate Year-to-Date ▼ 300.00	Payroll deduction
В.	Full Name (Last, First, Middle Initial) Dr. Glen Hessinger Mailing Address 8101 Ruxton Crossing Road		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Towson FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General	State Zip Code MD 21204 C Occupation Physician Aggregate Year-to-Date ▼	Transaction ID: SA11AI.8938 Amount of Each Receipt this Period 50.00 Payroll deduction
C .	Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Glen Hessinger Mailing Address 8101 Ruxton Crossing Road City	State Zip Code	Date of Receipt 09 25 2014 Transaction ID: SA11AI.9036
	Towson FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: □ Primary □ General □ Other (specify) ▼	MD 21204 C Occupation Physician Aggregate Year-to-Date ▼ 400.00	Amount of Each Receipt this Period 50.00 Payroll deduction
S	UBTOTAL of Receipts This Page (optional)	•	150.00
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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Jean-Max Hogarth Mailing Address 4544 Pandelly and Court		Date of Receipt
Mailing Address 1614 Randallwood Court		07 25 2014
City Jarretsville	State Zip Code MD 21084	Transaction ID : SA11AI.8848 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) 3. Dr. Jean-Max Hogarth Mailing Address 1614 Randallwood Court	Date of Receipt 08 25 2014	
City Jarretsville	State Zip Code MD 21084	Transaction ID : SA11AI.8939 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr. Jean-Max Hogarth		Date of Receipt
Mailing Address 1614 Randallwood Court		09 25 2014 _
City Jarretsville	State Zip Code MD 21084	Transaction ID : SA11AI.9037 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional)		150.00
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or for commercial purposes, other than using	the name and address of any political committee t	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Nashwa Holt Mailing Address 5508 Oak Place		Date of Receipt
City Bethesda FEC ID number of contributing	State Zip Code MD 20817	7 25 2014 Transaction ID : SA11AI.8827 Amount of Each Receipt this Period 50.00
First Colonies Anesthesia Receipt For: Primary Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 300.00	Payroll deduction
Full Name (Last, First, Middle Initial) Nashwa Holt Mailing Address 5508 Oak Place		Date of Receipt 08 25 2014
City Bethesda FEC ID number of contributing federal political committee.	State Zip Code MD 20817	Transaction ID : SA11AI.8918 Amount of Each Receipt this Period 50.00
Name of Employer First Colonies Anesthesia Receipt For: □ Primary □ General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 350.00	Payroll deduction
Full Name (Last, First, Middle Initial) Nashwa Holt Mailing Address 5508 Oak Place City	State Zip Code	Date of Receipt 09 25 2014 Transaction ID: SA11Al.9013
Bethesda FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: □ Primary □ General Other (specify) ▼	MD 20817 C Occupation Physician Aggregate Year-to-Date ▼ 400.00	Amount of Each Receipt this Period 50.00 Payroll deduction
SUBTOTAL of Receipts This Page (optional	l)	150.00
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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Sung Hong Mailing Address 8525 Huntspring Drive		Date of Receipt
City Lutherville FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: □ Primary □ General □ Other (specify) ▼	State Zip Code MD 21093 C Occupation Physician Aggregate Year-to-Date ▼ 300.00	7 25 2014 Transaction ID : SA11AI.8849 Amount of Each Receipt this Period 50.00 Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Sung Hong Mailing Address 8525 Huntspring Drive City Lutherville FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code MD 21093 C Occupation Physician Aggregate Year-to-Date ▼	Date of Receipt 08 25 2014 Transaction ID: SA11AI.8940 Amount of Each Receipt this Period 50.00 Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Sung Hong Mailing Address 8525 Huntspring Drive City Lutherville FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code MD 21093 C Occupation Physician Aggregate Year-to-Date ▼ 400.00	Date of Receipt 09 25 2014 Transaction ID: SA11AI.9038 Amount of Each Receipt this Period 50.00 Payroll deduction
SUBTOTAL of Receipts This Page (optional)	>	150.00
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or for commercial purposes, other than using t	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Steven Hopper Mailing Address 4550 N. Park Avenue #101 City Chevy Chase FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial)	State Zip Code MD 20815 C Occupation Physician Aggregate Year-to-Date ▼ 300.00	Date of Receipt 7 25 2014 Transaction ID: SA11Al.8831 Amount of Each Receipt this Period 50.00 Payroll deduction
Address 4550 N. Park Avenue #101 City Chevy Chase FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	State Zip Code MD 20815 C Occupation Physician Aggregate Year-to-Date ▼ 350.00	Date of Receipt 08 25 2014 Transaction ID : SA11AI.8922 Amount of Each Receipt this Period 50.00 Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Steven Hopper Mailing Address 4550 N. Park Avenue #101 City Chevy Chase FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code MD 20815 C Occupation Physician Aggregate Year-to-Date ▼ 400.00	Date of Receipt 9 25 2014 Transaction ID : SA11AI.9017 Amount of Each Receipt this Period 50.00 Payroll deduction
SUBTOTAL of Receipts This Page (optional).	<u> </u>	150.00
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or for commercial purposes, other than using	g the name and address of any political committee	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Stuart Hough Mailing Address 9110 Travener Circle		Date of Receipt
City Frederick FEC ID number of contributing	State Zip Code MD 21704	Transaction ID : SA11AI.8802 Amount of Each Receipt this Period
federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 450.00	Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Stuart Hough Mailing Address 9110 Travener Circle		Date of Receipt 08 25 2014
City Frederick FEC ID number of contributing federal political committee.	State Zip Code MD 21704	Transaction ID : SA11AI.8891 Amount of Each Receipt this Period 75.00
Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 525.00	Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Stuart Hough Mailing Address 9110 Travener Circle City	State Zip Code	Date of Receipt M
Frederick FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General	MD 21704 C Occupation Physician Aggregate Year-to-Date ▼	Amount of Each Receipt this Period 75.00 Payroll deduction
	600.00	225.00
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or for commercial purposes, other than using th	ne name and address of any political committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)		Date of Receipt			
Mailing Address 212 Washington Ave Apt. #1217		07 25 2014			
City Towson	State Zip Code MD 21204	Transaction ID : SA11AI.8857 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00				
Full Name (Last, First, Middle Initial) Leo Hsiao Mailing Address 212 Washington Ave Apt. #1217		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City Towson	State Zip Code MD 21204	Transaction ID : SA11AI.8948 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00				
Full Name (Last, First, Middle Initial) Leo Hsiao		Date of Receipt			
Mailing Address 212 Washington Ave Apt. #1217		09 25 2014			
City Towson	State Zip Code MD 21204	Transaction ID : SA11AI.9046 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00				
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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE				
Full Name (Last, First, Middle Initial) A. Dr. Sean Isaac Mailing Address 7 Starlight Farm Drive	Dr. Sean Isaac					
City Phoenix FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: □ Primary □ General □ Other (specify) ▼	State Zip Code MD 21131 C Occupation Physician Aggregate Year-to-Date ▼ 300.00	Transaction ID : SA11AI.8855 Amount of Each Receipt this Period 50.00 Payroll deduction				
Full Name (Last, First, Middle Initial) 3. Dr. Sean Isaac Mailing Address 7 Starlight Farm Drive	State 7in Code	Date of Receipt 08 25 2014				
City Phoenix FEC ID number of contributing federal political committee. Name of Employer	State Zip Code MD 21131 C Occupation	Transaction ID : SA11Al.8946 Amount of Each Receipt this Period 50.00 Payroll deduction				
First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	Physician Aggregate Year-to-Date ▼ 350.00	-				
Full Name (Last, First, Middle Initial) Dr. Sean Isaac Mailing Address 7 Starlight Farm Drive City	ean Isaac					
Phoenix FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	MD 21131 C Occupation Physician Aggregate Year-to-Date ▼ 400.00	Amount of Each Receipt this Period 50.00 Payroll deduction				
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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE				
Full Name (Last, First, Middle Initial) Dr. David Johnson Mailing Address 5506 Bootjack Drive		Date of Receipt				
City Frederick FEC ID number of contributing	State Zip Code MD 21702	07 25 2014 Transaction ID : SA11AI.8872 Amount of Each Receipt this Period 50.00				
First Colonies Anesthesia Receipt For: Primary Other (specify) ▼ Name of Employer First Colonies Anesthesia Receipt For: General	Occupation Physician Aggregate Year-to-Date ▼ 300.00	Payroll deduction				
Full Name (Last, First, Middle Initial) Dr. David Johnson Mailing Address 5506 Bootjack Drive		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City Frederick FEC ID number of contributing federal political committee.	State Zip Code MD 21702	Transaction ID : SA11AI.8967 Amount of Each Receipt this Period 50.00				
Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 350.00	Payroll deduction				
Full Name (Last, First, Middle Initial) Dr. David Johnson Mailing Address 5506 Bootjack Drive City	State Zip Code	Date of Receipt 09 25 2014 Transaction ID: SA11AI.9063				
Frederick FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	MD 21702 C Occupation Physician Aggregate Year-to-Date ▼ 400.00	Amount of Each Receipt this Period 50.00 Payroll deduction				
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or for commercial purposes, other than using	the name and address of any political committee t	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. James Kaufman Mailing Address 7514 Arrowwood Road		Date of Receipt
City Bethesda FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For:	State Zip Code MD 20817 C Occupation Physician Aggregate Year-to-Date ▼	07 25 2014 Transaction ID : SA11AI.8832 Amount of Each Receipt this Period 50.00 Payroll deduction
Primary General Other (specify) ▼	Aggregate rear-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) 3. Dr. James Kaufman Mailing Address 7514 Arrowwood Road		Date of Receipt 08 25 2014
City Bethesda FEC ID number of contributing	State Zip Code MD 20817	Transaction ID : SA11AI.8923 Amount of Each Receipt this Period
federal political committee. Name of Employer First Colonies Anesthesia Receipt For: □ Primary □ General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 350.00	Payroll deduction
Full Name (Last, First, Middle Initial) Dr. James Kaufman Mailing Address 7514 Arrowwood Road		Date of Receipt
City Bethesda FEC ID number of contributing	State Zip Code MD 20817	7 Transaction ID : SA11AI.9018 Amount of Each Receipt this Period
federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General	C Occupation Physician Aggregate Year-to-Date ▼	50.00 Payroll deduction
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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE				
Full Name (Last, First, Middle Initial) Dr. Cynthia Kenol Mailing Address 6579 Prestwick Drive	Dr. Cynthia Kenol					
City Highland FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: □ Primary □ General □ Other (specify) ▼	State Zip Code MD 20777 C Occupation Physician Aggregate Year-to-Date ▼ 300.00	Transaction ID : SA11AI.8803 Amount of Each Receipt this Period 50.00 Payroll deduction				
Full Name (Last, First, Middle Initial) Dr. Cynthia Kenol Mailing Address 6579 Prestwick Drive City Highland FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia	State Zip Code MD 20777 C Occupation Physician	Date of Receipt 08 25 2014 Transaction ID: SA11AI.8892 Amount of Each Receipt this Period 50.00 Payroll deduction				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00					
Full Name (Last, First, Middle Initial) Dr. Cynthia Kenol Mailing Address 6579 Prestwick Drive City Highland FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code MD 20777 C Occupation Physician Aggregate Year-to-Date ▼ 400.00	Date of Receipt 09 25 2014 Transaction ID: SA11AI.8988 Amount of Each Receipt this Period 50.00 Payroll deduction				
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or for commercial purposes, other than using	the name and address of any political committee t	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) HaengShik Kim Mailing Address 11429 Twining Lane		Date of Receipt
City Potomac FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code MD 20854 C Occupation Physician Aggregate Year-to-Date ▼ 300.00	Transaction ID : SA11AI.8820 Amount of Each Receipt this Period 50.00 Payroll deduction
Full Name (Last, First, Middle Initial) HaengShik Kim Mailing Address 11429 Twining Lane City Potomac FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia	State Zip Code MD 20854 C Occupation Physician	Date of Receipt M
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) HaengShik Kim Mailing Address 11429 Twining Lane City Potomac FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code MD 20854 C Occupation Physician Aggregate Year-to-Date ▼ 400.00	Date of Receipt M
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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHI	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE			
Full Name (Last, First, Middle Initial) James Kim		Date of Receipt			
Mailing Address 4808 Moorland Lane Apt. #803 City Bethesda	State Zip Code MD 20814	07 25 2014 Transaction ID : SA11Al.8826			
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 50.00			
Name of Employer First Colonies Anesthesia Receipt For: Primary General	Occupation Physician Aggregate Year-to-Date ▼	Payroll deduction			
Other (specify) ▼ Full Name (Last, First, Middle Initial)	300.00				
Mailing Address 4808 Moorland Lane Apt. #803 City	Date of Receipt M M				
Bethesda FEC ID number of contributing federal political committee.	MD 20814	Amount of Each Receipt this Period 50.00			
Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 350.00	- Payroll deduction			
Full Name (Last, First, Middle Initial) James Kim Mailing Address 4808 Moorland Lane Apt. #803 City	State Zip Code	Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y			
Bethesda FEC ID number of contributing federal political committee.	MD 20814	Amount of Each Receipt this Period 50.00			
Name of Employer First Colonies Anesthesia Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 400.00	Payroll deduction			
SUBTOTAL of Receipts This Page (optional)		150.00			
TOTAL This Period (last page this line numb	per only)				

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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Richard Ko Mailing Address 6795 Stockwell Manor Driv	е	Date of Receipt
City Falls Church FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code VA 22043 C Occupation Physician Aggregate Year-to-Date ▼ 300.00	7 25 2014 Transaction ID : SA11AI.8804 Amount of Each Receipt this Period 50.00 Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Richard Ko Mailing Address 6795 Stockwell Manor Drive City Falls Church	e State Zip Code VA 22043	Date of Receipt 08 25 2014 Transaction ID: SA11Al.8893
Falls Church FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	Occupation Physician Aggregate Year-to-Date ▼ 350.00	Amount of Each Receipt this Period 50.00 Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Richard Ko Mailing Address 6795 Stockwell Manor Driv City Falls Church FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	e State Zip Code VA 22043 C Occupation Physician Aggregate Year-to-Date ▼ 400.00	Date of Receipt M M M / D D / 2014 Transaction ID: SA11Al.8989 Amount of Each Receipt this Period 50.00 Payroll deduction
SUBTOTAL of Receipts This Page (optional)	<u></u>	150.00
TOTAL This Period (last page this line numb	er only)	

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE					
Full Name (Last, First, Middle Initial) Dr. Harkisan Laheri Mailing Address 11722 Split Tree Circle		Date of Receipt					
<u> </u>	Chata 7'- 0 '	07 25 2014					
City Potomac	State Zip Code MD 20854	Transaction ID : SA11AI.8805 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	50.00					
Name of Employer	Occupation	Payroll deduction					
First Colonies Anesthesia Receipt For:	Physician						
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00						
Full Name (Last, First, Middle Initial) 3. Dr. Harkisan Laheri Mailing Address 11722 Split Tree Circle	Date of Receipt						
City							
Potomac	MD 20854	Transaction ID : SA11AI.8894 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	50.00					
Name of Employer First Colonies Anesthesia	Occupation	Payroll deduction					
Receipt For:	Physician Aggregate Veer to Date						
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00						
Full Name (Last, First, Middle Initial) Dr. Harkisan Laheri		Date of Receipt					
Mailing Address 11722 Split Tree Circle		09 25 2014 _					
City Potomac	State Zip Code MD 20854	Transaction ID : SA11AI.8990 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	50.00					
Name of Employer	Occupation	Payroll deduction					
First Colonies Anesthesia	Physician						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00						
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numbe	<u>-</u>	150.00					

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or for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSOCIATES LLC POLITICAL	_ ACTION COMMITTEE		
Full Name (Last, First, Middle Initial) Dr. Kathleen Leavitt Mailing Address 3467 North Venice Street		Date of Receipt		
City	State Zip Code	07 25 2014		
Arlington	VA 22207	Transaction ID : SA11AI.8833 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer	Occupation	Payroll deduction		
First Colonies Anesthesia Receipt For: Primary Other (specify)	Physician Aggregate Year-to-Date ▼ 300.00			
Full Name (Last, First, Middle Initial) 3. Dr. Kathleen Leavitt Mailing Address 3467 North Venice Street	Date of Receipt 08 25 2014			
City Arlington	State Zip Code VA 22207	Transaction ID : SA11AI.8924 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician	Payroll deduction		
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00			
Full Name (Last, First, Middle Initial) Dr. Kathleen Leavitt		Date of Receipt		
Mailing Address 3467 North Venice Street		09 25 _ 2014 _		
City Arlington	State Zip Code VA 22207	Transaction ID : SA11AI.9019 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer	Occupation	Payroll deduction		
First Colonies Anesthesia Receipt For:	Physician			
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00			
SUBTOTAL of Receipts This Page (optional)		150.00		
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or for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSOCIATES LLC POLITICAL	_ ACTION COMMITTEE				
Full Name (Last, First, Middle Initial) Zakiya Lockhart Mailing Address 8750 Polished Pebble Way		Date of Receipt				
	Stato 7:0 Cod-	07 25 2014				
City Laurel	State Zip Code MD 20723	Transaction ID : SA11AI.8828 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	75.00				
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction				
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 375.00					
Full Name (Last, First, Middle Initial) Zakiya Lockhart Mailing Address 8750 Polished Pebble Way	Date of Receipt 08 25 2014					
City	State Zip Code MD 20723	Transaction ID : SA11AI.8919				
Laurel FEC ID number of contributing federal political committee.	MD 20723	Amount of Each Receipt this Period 75.00				
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00					
Full Name (Last, First, Middle Initial) Zakiya Lockhart		Date of Receipt				
Mailing Address 8750 Polished Pebble Way		09 25 2014 _				
City Laurel	State Zip Code MD 20723	Transaction ID : SA11AI.9014 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	75.00				
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00					
SUBTOTAL of Receipts This Page (optional)		225.00				
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or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESI	A ASSOCIATES LLC POLITICAL	ACTION COMMITTEE
Α.	Full Name (Last, First, Middle Initial) Dr. Thomas Malone Mailing Address 11667 Fairmont Place		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Ijamsville	State Zip Code MD 21754	Transaction ID : SA11AI.8873 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	75.00
	Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician Aggregate Year-to-Date ▼	Payroll deduction
	Primary General Other (specify) ▼	450.00	
В.	Full Name (Last, First, Middle Initial) Dr. Thomas Malone Mailing Address 11667 Fairmont Place		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Ijamsville	State Zip Code MD 21754	Transaction ID : SA11AI.8968 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	Cocupation	75.00 Payroll deduction
	Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician Aggregate Year-to-Date ▼	•
	Primary General Other (specify) ▼	525.00	
C.			Date of Receipt
	Mailing Address 11667 Fairmont Place	20 de	09 25 2014
	City Ijamsville	State Zip Code MD 21754	Transaction ID : SA11AI.9064 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	75.00 Payroll deduction
	Name of Employer First Colonies Anesthesia	Occupation Physician	Payroli deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
S	SUBTOTAL of Receipts This Page (optional)		225.00
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or for commercial purposes, other than using	the name and address of any political committee t	to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE				
Full Name (Last, First, Middle Initial) Dr. Mollyann March Mailing Address 6504 Greentree Road		Date of Receipt				
City Bethesda FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code MD 20817 C Occupation Physician Aggregate Year-to-Date ▼ 450.00	Transaction ID : SA11Al.8834 Amount of Each Receipt this Period 75.00 Payroll deduction				
Full Name (Last, First, Middle Initial) 3. Dr. Mollyann March Mailing Address 6504 Greentree Road City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y 08 25 2014 Transaction ID : SA11AI 8925				
Bethesda FEC ID number of contributing federal political committee.	MD 20817	Transaction ID : SA11AI.8925 Amount of Each Receipt this Period 75.00				
Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 525.00	Payroll deduction				
Full Name (Last, First, Middle Initial) Dr. Mollyann March Mailing Address 6504 Greentree Road City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Bethesda FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	Occupation Physician Aggregate Year-to-Date ▼ 600.00	Amount of Each Receipt this Period 75.00 Payroll deduction				
SUBTOTAL of Receipts This Page (optional)	<u> </u>	225.00				
TOTAL This Period (last page this line numb	er only)					

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE					
Full Name (Last, First, Middle Initial) Omid Moayed Mailing Address 8913 Cherbourg Drive		Date of Receipt					
City	State Zip Code	07 25 2014 Transaction ID : SA11AI.8816					
Potomac FEC ID number of contributing	MD 20854	Amount of Each Receipt this Period					
federal political committee.	C	50.00					
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00						
Full Name (Last, First, Middle Initial) Omid Moayed Mailing Address 8913 Cherbourg Drive		Date of Receipt 08 25 2014					
City Potomac	State Zip Code MD 20854	Transaction ID : SA11AI.8907					
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 50.00					
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00						
Full Name (Last, First, Middle Initial) C. Omid Moayed		Date of Receipt					
Mailing Address 8913 Cherbourg Drive		09 25 2014					
City Potomac	State Zip Code MD 20854	Transaction ID : SA11AI.9002 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	50.00					
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00						
SUBTOTAL of Receipts This Page (optional)		150.00					
TOTAL This Period (last page this line numbe	r only)						

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or for commercial purposes, other than using t	he name and address of any political committee to	o solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE				
Full Name (Last, First, Middle Initial) Dr. Danielle Mossman Mailing Address 3709 Falling Green Way		Date of Receipt				
City Mt. Airy FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary Other (specify)	State Zip Code MD 21771 C Occupation Physician Aggregate Year-to-Date ▼	07 25 2014 Transaction ID : SA11AI.8869 Amount of Each Receipt this Period 50.00 Payroll deduction				
Full Name (Last, First, Middle Initial) 3. Dr. Danielle Mossman Mailing Address 3709 Falling Green Way		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City Mt. Airy FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General	State Zip Code MD 21771 C Occupation Physician Aggregate Year-to-Date ▼	Transaction ID : SA11AI.8964 Amount of Each Receipt this Period 50.00 Payroll deduction				
Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Danielle Mossman Mailing Address 3709 Falling Green Way City	State Zip Code	Date of Receipt 09 25 2014 Transaction ID : SA11AI.9060				
Mt. Airy FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: □ Primary □ General Other (specify) ▼	MD 21771 C Occupation Physician Aggregate Year-to-Date ▼ 400.00	Amount of Each Receipt this Period 50.00 Payroll deduction				
SUBTOTAL of Receipts This Page (optional).	>	150.00				
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or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSOCIATES LLC POLITICAL	ACTION COMMITTEE
Α.	Full Name (Last, First, Middle Initial) Dr. Thomas Munro Mailing Address 15310 Forest Lake Court		Date of Receipt
	City	State Zip Code	07 25 2014 Transaction ID : SA11Al.8881
	Darnestown	MD 20874	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	75.00
	Name of Employer	Occupation	Payroll deduction
	First Colonies Anesthesia	Physician	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
В.	Full Name (Last, First, Middle Initial) Dr. Thomas Munro Mailing Address 15310 Forest Lake Court		Date of Receipt
	City	State Zip Code	08 25 2014 Transaction ID : SA11AI.8976
	Darnestown	MD 20874	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	75.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	
c.	Full Name (Last, First, Middle Initial) Dr. Thomas Munro		Date of Receipt
	Mailing Address 15310 Forest Lake Court		09 25 2014
	City Darnestown	State Zip Code MD 20874	Transaction ID : SA11AI.9072 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	75.00
	Name of Employer	Occupation	Payroll deduction
	First Colonies Anesthesia	Physician	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	600.00	
S	SUBTOTAL of Receipts This Page (optional)		225.00
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or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Anna Noriega-Nalls Mailing Address 603 Queen Street #4 City Alexandria FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial)	State Zip Code VA 22314 C Occupation Physician Aggregate Year-to-Date ▼ 500.00	Date of Receipt O7 25 2014 Transaction ID: SA11AI.8806 Amount of Each Receipt this Period 100.00 Payroll deduction
Pull Name (Last, First, Middle Initial) Dr. Anna Noriega-Nalls Mailing Address 603 Queen Street #4 City Alexandria FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary Other (specify) Other (specify)	State Zip Code VA 22314 C Occupation Physician Aggregate Year-to-Date ▼ 600.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Dr. Anna Noriega-Nalls Mailing Address 603 Queen Street #4 City Alexandria FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify) Other (specify)	State Zip Code VA 22314 C Occupation Physician Aggregate Year-to-Date ▼ 700.00	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)	>	300.00
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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Denis O'Fallon Mailing Address 12123 Merricks Court		Date of Receipt
City Monrovia FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code MD 21770 C Occupation Physician Aggregate Year-to-Date ▼ 300.00	Transaction ID: SA11AI.8874 Amount of Each Receipt this Period 50.00 Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Denis O'Fallon Mailing Address 12123 Merricks Court City	State Zip Code	Date of Receipt M = M
Monrovia FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia	MD 21770 C Occupation	Amount of Each Receipt this Period 50.00 Payroll deduction
Receipt For: Primary General Other (specify) ▼	Physician Aggregate Year-to-Date ▼ 350.00	_
Full Name (Last, First, Middle Initial) Dr. Denis O'Fallon Mailing Address 12123 Merricks Court City Monrovia	State Zip Code MD 21770	Date of Receipt Mark
FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	Occupation Physician Aggregate Year-to-Date 400.00	Amount of Each Receipt this Period 50.00 Payroll deduction
SUBTOTAL of Receipts This Page (optional)		150.00
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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE			
Full Name (Last, First, Middle Initial) Dr. Philip Owens Mailing Address 141 Adams Street, NW		Date of Receipt			
	7.0	07 25 2014			
City Washington	State Zip Code DC 20001	Transaction ID : SA11AI.8807 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia Receipt For:	Physician Aggregate Year-to-Date ▼				
Primary General Other (specify) ▼	300.00				
Full Name (Last, First, Middle Initial) Dr. Philip Owens Mailing Address 144 Adams Street NW		Date of Receipt			
Mailing Address 141 Adams Street, NW City	08 25 2014 Transaction ID : SA11AI.8897				
Washington	State Zip Code DC 20001	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00				
Full Name (Last, First, Middle Initial) Dr. Philip Owens		Date of Receipt			
Mailing Address 141 Adams Street, NW		09 25 2014			
City Washington	State Zip Code DC 20001	Transaction ID : SA11AI.8993 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia Receipt For:	Physician				
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00				
SUBTOTAL of Receipts This Page (optional)		150.00			
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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Kent Ozkum Mailing Address 10720 Dern Road		Date of Receipt
City Emmitsburg FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: □ Primary □ General □ Other (specify) ▼	State Zip Code MD 21727 C Occupation Physician Aggregate Year-to-Date ▼ 300.00	7 25 2014 Transaction ID: SA11AI.8882 Amount of Each Receipt this Period 50.00 Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Kent Ozkum Mailing Address 10720 Dern Road City Emmitsburg FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For:	State Zip Code MD 21727 C Occupation Physician Aggregate Year-to-Date ▼	Date of Receipt 08 25 2014 Transaction ID: SA11AI.8977 Amount of Each Receipt this Period 50.00 Payroll deduction
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) C. Dr. Kent Ozkum Mailing Address 10720 Dern Road City Emmitsburg FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	State Zip Code MD 21727 C Occupation Physician Aggregate Year-to-Date ▼	Date of Receipt 09 25 2014 Transaction ID: SA11Al.9073 Amount of Each Receipt this Period 50.00 Payroll deduction
		150.00
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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAL	_ ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Paul Park Mailing Address 510 Golden Oak Terrace		Date of Receipt
		07 25 / 2014
City Rockville	State Zip Code MD 20850	Transaction ID : SA11AI.8808 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For:	Physician Aggregate Vear-to-Date	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) 3. Dr. Paul Park		Date of Receipt
Mailing Address 510 Golden Oak Terrace	08 25 2014	
City Rockville	State Zip Code MD 20850	Transaction ID : SA11AI.8898 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr. Paul Park		Date of Receipt
Mailing Address 510 Golden Oak Terrace		09 25 2014 _
City Rockville	State Zip Code MD 20850	Transaction ID : SA11AI.8994 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For:	Physician	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number	only)	

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or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESI	A ASSOCIATES LLC POLITICAL	ACTION COMMITTEE
Α.	Full Name (Last, First, Middle Initial) Dr. Kestutis Pauliukonis Mailing Address 1813 Solitaire Lane City	State Zip Code	Date of Receipt 07 25 2014 Transaction ID: SA11Al.8809
	McLean FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	VA 22101 C Occupation Physician Aggregate Year-to-Date ▼ 300.00	Amount of Each Receipt this Period 50.00 Payroll deduction
В.	Full Name (Last, First, Middle Initial) Dr. Kestutis Pauliukonis Mailing Address 1813 Solitaire Lane City McLean FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code VA 22101 C Occupation Physician Aggregate Year-to-Date ▼ 350.00	Date of Receipt 08 25 2014 Transaction ID : SA11Al.8900 Amount of Each Receipt this Period 50.00 Payroll deduction
C.	Full Name (Last, First, Middle Initial) Dr. Kestutis Pauliukonis Mailing Address 1813 Solitaire Lane City McLean FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code VA 22101 C Occupation Physician Aggregate Year-to-Date ▼ 400.00	Date of Receipt M M M / 25 2014 Transaction ID: SA11AI.8995 Amount of Each Receipt this Period 50.00 Payroll deduction
S	SUBTOTAL of Receipts This Page (optional)	•	150.00
Т	OTAL This Period (last page this line number of	only)	

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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Michael Peck Mailing Address 4 Farm Haven Court		Date of Receipt
City Rockville FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia	State Zip Code MD 20852 C Occupation Physician	7 25 2014 Transaction ID : SA11Al.8835 Amount of Each Receipt this Period 75.00 Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial) 3. Dr. Michael Peck Mailing Address 4 Farm Haven Court	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City Rockville FEC ID number of contributing federal political committee.	State Zip Code MD 20852	Transaction ID : SA11AI.8926 Amount of Each Receipt this Period 75.00
Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 525.00	Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Michael Peck Mailing Address 4 Farm Haven Court City	Date of Receipt M	
Rockville FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: □ Primary □ General Other (specify) ▼	State Zip Code MD 20852 C Occupation Physician Aggregate Year-to-Date ▼ 600.00	Amount of Each Receipt this Period 75.00 Payroll deduction
SUBTOTAL of Receipts This Page (optional).		225.00
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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE				
Full Name (Last, First, Middle Initial) Dr. Ramani Peruvemba Mailing Address 8302 Fox Haven Drive	Dr. Ramani Peruvemba					
City McLean FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code VA 22102 C Occupation Physician Aggregate Year-to-Date ▼ 300.00	Transaction ID : SA11AI.8810 Amount of Each Receipt this Period 50.00 Payroll deduction				
Full Name (Last, First, Middle Initial) Dr. Ramani Peruvemba Mailing Address 8302 Fox Haven Drive City	State Zip Code	Date of Receipt 08 25 2014 Transaction ID: SA11AI.8901				
McLean FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General	VA 22102 C Occupation Physician Aggregate Year-to-Date ▼	Amount of Each Receipt this Period 50.00 Payroll deduction				
Other (specify) Full Name (Last, First, Middle Initial) Dr. Ramani Peruvemba Mailing Address 8302 Fox Haven Drive City McLean	State Zip Code VA 22102	Date of Receipt 09 25 2014 Transaction ID : SA11AI.8996 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	Occupation Physician Aggregate Year-to-Date ▼ 400.00	50.00 Payroll deduction				
SUBTOTAL of Receipts This Page (optional)		150.00				
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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Eugen Pirovic Mailing Address 3912 Calverton Drive		Date of Receipt
		07 25 2014
City Hyattsville	State Zip Code MD 20782	Transaction ID : SA11AI.8840 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	Physician Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Eugen Pirovic Mailing Address 3912 Calverton Drive	Date of Receipt 08 25 2014	
City Hyattsville	State Zip Code MD 20782	Transaction ID : SA11AI.8931
FEC ID number of contributing federal political committee.	C 20762	Amount of Each Receipt this Period 50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr. Eugen Pirovic		Date of Receipt
Mailing Address 3912 Calverton Drive		09 25 2014
City Hyattsville	State Zip Code MD 20782	Transaction ID : SA11AI.9026 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For:	Physician Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	400.00	
SUBTOTAL of Receipts This Page (optional)		150.00
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or for commercial purposes, other than using the	he name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Naeem Poursharif Mailing Address 9506 Edgeley Rd		Date of Receipt
		07 25 2014
City Bethesda	State Zip Code MD 20814	Transaction ID : SA11AI.8825 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Naeem Poursharif Mailing Address 9506 Edgeley Rd	Date of Receipt 08 25 2014	
City Bethesda	State Zip Code MD 20814	Transaction ID : SA11AI.8916
FEC ID number of contributing federal political committee.	C 20014	Amount of Each Receipt this Period 50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) C. Naeem Poursharif		Date of Receipt
Mailing Address 9506 Edgeley Rd		09 25 2014 _
City Bethesda	State Zip Code MD 20814	Transaction ID : SA11AI.9011 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number	er only)	

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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Jeffrey Richman Mailing Address 6906 Granite Ridge Ct.		Date of Receipt
City Baltimore FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: □ Primary □ General □ Other (specify) ▼	State Zip Code MD 21209 C Occupation Physician Aggregate Year-to-Date ▼ 300.00	7 25 2014 Transaction ID: SA11AI.8854 Amount of Each Receipt this Period 50.00 Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Jeffrey Richman Mailing Address 6906 Granite Ridge Ct. City Baltimore FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code MD 21209 C Occupation Physician Aggregate Year-to-Date ▼ 350.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Dr. Jeffrey Richman Mailing Address 6906 Granite Ridge Ct. City Baltimore FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code MD 21209 C Occupation Physician Aggregate Year-to-Date ▼ 400.00	Date of Receipt 09 25 2014 Transaction ID : SA11AI.9043 Amount of Each Receipt this Period 50.00 Payroll deduction
SUBTOTAL of Receipts This Page (optional)	•	150.00
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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Charles Rizzuto Mailing Address 6409 Pinehurst Road		Date of Receipt
City Baltimore FEC ID number of contributing federal political committee. Name of Employer First Colonis Anesthesia Receipt For: □ Primary □ General □ Other (specify) ▼	State Zip Code MD 21212 C Occupation Physician Aggregate Year-to-Date ▼ 300.00	7 25 2014 Transaction ID : SA11AI.8851 Amount of Each Receipt this Period 50.00 Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Charles Rizzuto Mailing Address 6409 Pinehurst Road City Baltimore FEC ID number of contributing federal political committee. Name of Employer	State Zip Code MD 21212 C Occupation	Date of Receipt 08 25 2014 Transaction ID : SA11AI.8942 Amount of Each Receipt this Period 50.00 Payroll deduction
First Colonis Anesthesia Receipt For: □ Primary □ General □ Other (specify) ▼	Physician Aggregate Year-to-Date ▼ 350.00	_
Full Name (Last, First, Middle Initial) Dr. Charles Rizzuto Mailing Address 6409 Pinehurst Road City Baltimore FEC ID number of contributing federal political committee. Name of Employer First Colonis Anesthesia Receipt For: Primary General Other (specify)	State Zip Code MD 21212 C Occupation Physician Aggregate Year-to-Date ▼ 400.00	Date of Receipt 09 25 2014 Transaction ID: SA11AI.9040 Amount of Each Receipt this Period 50.00 Payroll deduction
SUBTOTAL of Receipts This Page (optional)	>	150.00
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or for commercial purposes, other than using	the name and address of any political committee t	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHI	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) James A Rothschild Mailing Address 205 Woodlawn Road		Date of Receipt
City Baltimore FEC ID number of contributing federal political committee.	State Zip Code MD 21210	7 25 2014 Transaction ID : SA11AI.8858 Amount of Each Receipt this Period
Name of Employer First Colonies Anesthesia Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 600.00	Payroll deduction
Full Name (Last, First, Middle Initial) James A Rothschild Mailing Address 205 Woodlawn Road	Date of Receipt 08 25 2014	
City Baltimore FEC ID number of contributing federal political committee.	State Zip Code MD 21210	Amount of Each Receipt this Period 100.00
Name of Employer First Colonies Anesthesia Receipt For: □ Primary □ General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 700.00	Payroll deduction
Full Name (Last, First, Middle Initial) James A Rothschild Mailing Address 205 Woodlawn Road City	State Zip Code	Date of Receipt 09 25 2014 Transaction ID: SA11AI.9047
Baltimore FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia	MD 21210 C Occupation Physician	Amount of Each Receipt this Period 100.00 Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	
SUBTOTAL of Receipts This Page (optional)) >	300.00
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or for commercial purposes, other than using t	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Leudvig Sardarian Mailing Address 11601 Brandy Hall Lane		Date of Receipt
City North Potomac FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code MD 20878 C Occupation Physician Aggregate Year-to-Date ▼ 300.00	7 25 2014 Transaction ID : SA11AI.8885 Amount of Each Receipt this Period 50.00 Payroll deduction
Full Name (Last, First, Middle Initial) Leudvig Sardarian Mailing Address 11601 Brandy Hall Lane City North Potomac FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code MD 20878 C Occupation Physician Aggregate Year-to-Date ▼ 350.00	Date of Receipt 08 25 2014 Transaction ID: SA11AI.8980 Amount of Each Receipt this Period 50.00 Payroll deduction
Full Name (Last, First, Middle Initial) Leudvig Sardarian Mailing Address 11601 Brandy Hall Lane City North Potomac FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code MD 20878 C Occupation Physician Aggregate Year-to-Date ▼ 400.00	Date of Receipt 09 25 2014 Transaction ID: SA11AI.9076 Amount of Each Receipt this Period 50.00 Payroll deduction
SUBTOTAL of Receipts This Page (optional).	•	150.00
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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Suzanne Scattergood Mailing Address 14700 Crossway Road		Date of Receipt
City	State Zip Code	07 25 2014 Transaction ID : SA11AI.8875
Rockville FEC ID number of contributing federal political committee.	MD 20853	Amount of Each Receipt this Period
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Dr. Suzanne Scattergood Mailing Address 14700 Crossway Road		Date of Receipt 08 25 2014
City Rockville	State Zip Code MD 20853	Transaction ID : SA11AI.8970 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	
Full Name (Last, First, Middle Initial) Dr. Suzanne Scattergood		Date of Receipt
Mailing Address 14700 Crossway Road		09 25 2014
City Rockville	State Zip Code MD 20853	Transaction ID : SA11AI.9066 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	
SUBTOTAL of Receipts This Page (optional)		300.00
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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Mark Seymour Mailing Address 2932 Thurston Rd.		Date of Receipt
City	State Zip Code	07 25 2014
Frederick	MD 21704	Transaction ID : SA11AI.8876 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	Physician Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) 3. Dr. Mark Seymour Mailing Address 2932 Thurston Rd.		Date of Receipt 08 25 2014
City	State Zip Code MD 21704	Transaction ID : SA11AI.8971
Frederick FEC ID number of contributing federal political committee.	MD 21704	Amount of Each Receipt this Period 50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr. Mark Seymour		Date of Receipt
Mailing Address 2932 Thurston Rd.		09 25 2014
City Frederick	State Zip Code MD 21704	Transaction ID : SA11AI.9067 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation Physician	Payroll deduction
First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	Physician Aggregate Year-to-Date ▼ 400.00	
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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Nader Soliman		Date of Receipt
Mailing Address 22905 David Mill Road		07 25 2014
City Germantown	State Zip Code MD 20876	Transaction ID : SA11AI.8811 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For: Primary Other (specify)	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) 3. Dr. Nader Soliman Mailing Address 22905 David Mill Road		Date of Receipt 08 25 2014
City Germantown	State Zip Code MD 20876	Transaction ID : SA11AI.8902 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician	Payroll deduction
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) C. Dr. Nader Soliman		Date of Receipt
Mailing Address 22905 David Mill Road		09 25 _ 2014 _
City Germantown	State Zip Code MD 20876	Transaction ID : SA11AI.8997 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For: Primary Other (specify)	Physician Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional)		150.00
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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Robert Study Mailing Address 6 Beall Spring Court		Date of Receipt
City	State Zip Code	07 25 2014 Transaction ID : SA11AI.8836
Potomac	MD 20854	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For:	Physician Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Dr. Robert Study Mailing Address & Real Spring Court		Date of Receipt
Mailing Address 6 Beall Spring Court City	State Zip Code	08 25 2014
Potomac	MD 20854	Transaction ID : SA11AI.8927 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr. Robert Study		Date of Receipt
Mailing Address 6 Beall Spring Court		09 25 2014
City Potomac	State Zip Code MD 20854	Transaction ID : SA11AI.9022 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For:	Physician	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
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or for commercial purposes, other than using t	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Lisa Sullivan Mailing Address 4639 Teen Barnes Road		Date of Receipt
City Frederick FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthsia Receipt For: Primary General Other (specify) ▼	State Zip Code MD 21703 C Occupation Physician Aggregate Year-to-Date ▼ 300.00	7 25 2014 Transaction ID : SA11AI.8877 Amount of Each Receipt this Period 50.00 Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Lisa Sullivan Mailing Address 4639 Teen Barnes Road City Frederick FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthsia Receipt For: Primary General Other (specify)	State Zip Code MD 21703 C Occupation Physician Aggregate Year-to-Date ▼ 350.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Dr. Lisa Sullivan Mailing Address 4639 Teen Barnes Road City Frederick FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthsia Receipt For: Primary General Other (specify)	State Zip Code MD 21703 C Occupation Physician Aggregate Year-to-Date ▼ 400.00	Date of Receipt 09 25 2014 Transaction ID: SA11AI.9068 Amount of Each Receipt this Period 50.00 Payroll deduction
SUBTOTAL of Receipts This Page (optional).	>	150.00
TOTAL This Period (last page this line number	er only)	

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NAME OF COMMITTEE (In Full)	ng the name and address of any political committee t	
,	HESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Robert Sullivan		Date of Receipt
Mailing Address 4639 Teen Barnes Road	d	07 25 2014
City	State Zip Code	Transaction ID : SA11AI.8878
Frederick	MD 21703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Dr. Robert Sullivan		Date of Receipt
Mailing Address 4639 Teen Barnes Road	1	M M / D D / Y Y Y Y Y
City	State Zip Code	08 25 2014
Frederick	MD 21703	Transaction ID : SA11AI.8973 Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:		1
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 4639 Teen Barnes Road	d	09 25 2014
City	State Zip Code	Transaction ID : SA11AI.9069
Frederick	MD 21703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	400.00	
Other (specify) ▼	400.00	
SUBTOTAL of Receipts This Page (option	nal)	150.00
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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	e name and address of any political committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE				
Full Name (Last, First, Middle Initial) Dr. Louis Swann Mailing Address PO Box 6081		Date of Receipt				
City	State Zip Code	07 25 2014 Transaction ID : SA11AI.8837				
McLean	VA 22106	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia Receipt For:	Physician					
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00					
Full Name (Last, First, Middle Initial) 3. Dr. Louis Swann	Date of Receipt					
Mailing Address PO Box 6081 City	08 25 2014					
McLean McLean	State Zip Code VA 22106	Transaction ID : SA11AI.8928 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia	Physician					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00					
Full Name (Last, First, Middle Initial) Dr. Louis Swann		Date of Receipt				
Mailing Address PO Box 6081		09 25 2014				
City McLean	State Zip Code VA 22106	Transaction ID : SA11AI.9023 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia	Physician					
Receipt For: Primary General	Aggregate Year-to-Date ▼					
Other (specify)	400.00					
SUBTOTAL of Receipts This Page (optional)		150.00				
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or for commercial purposes, other than using	the name and address of any political committee t	to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE				
Full Name (Last, First, Middle Initial) Dr. Rojack Tan Mailing Address 507 Goodland Place		Date of Receipt				
City Rockville FEC ID number of contributing	State Zip Code MD 20850	7 25 2014 Transaction ID : SA11Al.8838 Amount of Each Receipt this Period				
First Colonies Anesthesia Receipt For: Primary Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 300.00	Payroll deduction				
Full Name (Last, First, Middle Initial) Dr. Rojack Tan Mailing Address 507 Goodland Place	Date of Receipt 08 25 2014					
City Rockville FEC ID number of contributing federal political committee.	State Zip Code MD 20850	Transaction ID : SA11AI.8929 Amount of Each Receipt this Period 50.00				
Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 350.00	Payroll deduction				
Full Name (Last, First, Middle Initial) Dr. Rojack Tan Mailing Address 507 Goodland Place City	Dr. Rojack Tan Mailing Address 507 Goodland Place					
Rockville FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	MD 20850 C Occupation Physician Aggregate Year-to-Date ▼ 400.00	Amount of Each Receipt this Period 50.00 Payroll deduction				
SUBTOTAL of Receipts This Page (optional)	150.00				
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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE				
Full Name (Last, First, Middle Initial) Dr. Bernard Tsai Mailing Address 10013 New London Drive		Date of Receipt				
City	State Zip Code	07 25 2014				
Potomac	MD 20854	Transaction ID : SA11AI.8812 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia Receipt For:	Physician Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	300.00					
Full Name (Last, First, Middle Initial) 3. Dr. Bernard Tsai Mailing Address 10013 New London Drive	Date of Receipt					
	City State Zip Code					
Potomac	MD 20854	Transaction ID : SA11AI.8903 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer First Colonies Anesthesia	Occupation	Payroll deduction				
Receipt For: Primary General Other (specify)	Physician Aggregate Year-to-Date ▼ 350.00					
Full Name (Last, First, Middle Initial) C. Dr. Bernard Tsai		Date of Receipt				
Mailing Address 10013 New London Drive		09 25 2014 _				
City Potomac	State Zip Code MD 20854	Transaction ID : SA11AI.8998 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia Receipt For:	Physician					
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00					
SUBTOTAL of Receipts This Page (optional)	•	150.00				
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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Reed Underwood Mailing Address 1518 T Street, NW		Date of Receipt
City	State Zip Code	07 25 2014 Transaction ID : SA11AI.8821
Washington	DC 20009	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For:	Physician	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) 3. Dr. Reed Underwood Mailing Address 1518 T Street NW	Date of Receipt	
Mailing Address 1518 T Street, NW City	08 25 2014	
Washington	State Zip Code DC 20009	Transaction ID : SA11AI.8912 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer First Colonies Anesthesia	Occupation	Payroll deduction
Receipt For:	Physician	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr. Reed Underwood		Date of Receipt
Mailing Address 1518 T Street, NW		09 25 2014
City Washington	State Zip Code DC 20009	Transaction ID : SA11AI.9007 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	400.00	
SUBTOTAL of Receipts This Page (optional)	>	150.00
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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	HESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE				
Full Name (Last, First, Middle Initial) Dr. Arnaldo Valedon		Date of Receipt 07 25 2014				
Mailing Address 22 Woodfield Court						
City	State Zip Code MD 21136	Transaction ID : SA11AI.8861				
Reisterstown	MD 21136	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia	Physician					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	300.00					
Full Name (Last, First, Middle Initial) 3. Dr. Arnaldo Valedon	Date of Receipt					
Mailing Address 22 Woodfield Court	08 25 _2014 _					
City	State Zip Code	Transaction ID : SA11AI.8955				
Reisterstown	MD 21136	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer	Payroll deduction					
First Colonies Anesthesia	Physician					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00					
Full Name (Last, First, Middle Initial) Dr. Arnaldo Valedon		Date of Receipt				
Mailing Address 22 Woodfield Court		09 25 _ 2014 _				
City	State Zip Code	Transaction ID : SA11AI.9051				
Reisterstown	MD 21136	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia						
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	400.00					
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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE			
Full Name (Last, First, Middle Initial) Dr. Martha Van Clief Mailing Address 405 Apple Grove Road		Date of Receipt			
City Silver Spring FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	State Zip Code MD 20904 C Occupation Physician Aggregate Year-to-Date ▼ 300.00	7 25 2014 Transaction ID : SA11AI.8865 Amount of Each Receipt this Period 50.00 Payroll deduction			
Full Name (Last, First, Middle Initial) Dr. Martha Van Clief Mailing Address 405 Apple Grove Road City	Date of Receipt 08 25 2014				
Silver Spring FEC ID number of contributing federal political committee.	State Zip Code MD 20904	Transaction ID : SA11AI.8959 Amount of Each Receipt this Period 50.00 Payroll deduction			
Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 350.00				
Full Name (Last, First, Middle Initial) Dr. Martha Van Clief Mailing Address 405 Apple Grove Road City Silver Spring	Dr. Martha Van Clief Mailing Address 405 Apple Grove Road				
FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	MD 20904 C Occupation Physician Aggregate Year-to-Date ▼ 400.00	Amount of Each Receipt this Period 50.00 Payroll deduction			
SUBTOTAL of Receipts This Page (optional)	>	150.00			
TOTAL This Period (last page this line number	only)				

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or for commercial purposes, other than using	the name and address of any political committee	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Or. Mark Vogt Mailing Address 1149 Colonial Road		Date of Receipt
City McLean FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: □ Primary □ General □ Other (specify) ▼	State Zip Code VA 22101 C Occupation Physician Aggregate Year-to-Date ▼ 300.00	Transaction ID : SA11AI.8839 Amount of Each Receipt this Period 50.00 Payroll deduction
Full Name (Last, First, Middle Initial) 3. Dr. Mark Vogt Mailing Address 1149 Colonial Road City	State Zip Code	Date of Receipt 08 25 2014 Transaction ID: SA11Al.8930
McLean FEC ID number of contributing federal political committee.	VA 22101	Amount of Each Receipt this Period 50.00
Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 350.00	Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Mark Vogt Mailing Address 1149 Colonial Road City McLean	State Zip Code VA 22101	Date of Receipt M
FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	Occupation Physician Aggregate Year-to-Date 400.00	Amount of Each Receipt this Period 50.00 Payroll deduction
SUBTOTAL of Receipts This Page (optional)	150.00
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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Christopher Wahlgren Mailing Address 1200 Colvin Meadows Lane City Great Falls FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia	State Zip Code VA 22066 C Occupation Physician	Date of Receipt 07
Receipt For: Primary General Other (specify) Other	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Christopher Wahlgren Mailing Address 1200 Colvin Meadows Lane City Great Falls FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General	State Zip Code VA 22066 C Occupation Physician Aggregate Year-to-Date ▼	Date of Receipt M
Other (specify) Full Name (Last, First, Middle Initial) Dr. Christopher Wahlgren Mailing Address 1200 Colvin Meadows Lane City Great Falls FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary Other (specify) General	State Zip Code VA 22066 C Occupation Physician Aggregate Year-to-Date ▼ 400.00	Date of Receipt 109 25 2014 Transaction ID: SA11AI.9000 Amount of Each Receipt this Period 50.00 Payroll deduction
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or for commercial purposes, other than using	the name and address of any political committee t	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. David Wheeler Mailing Address 7108 Collingwood Court		Date of Receipt
City Elkridge FEC ID number of contributing federal political committee. Name of Employer	State Zip Code MD 21075 C Occupation	07 25 2014 Transaction ID : SA11AI.8852 Amount of Each Receipt this Period 50.00 Payroll deduction
First Colonies Anesthesia Receipt For: Primary General Other (specify)	Physician Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. David Wheeler Mailing Address 7108 Collingwood Court	Otata Tip Oct	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Elkridge FEC ID number of contributing federal political committee.	State Zip Code MD 21075	Transaction ID : SA11AI.8943 Amount of Each Receipt this Period 50.00
Name of Employer First Colonies Anesthesia Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 350.00	Payroll deduction
Full Name (Last, First, Middle Initial) Dr. David Wheeler Mailing Address 7108 Collingwood Court City	State Zip Code	Date of Receipt 09 25 2014 Transaction ID: SA11AI.9041
Elkridge FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For:	MD 21075 C Occupation Physician	Amount of Each Receipt this Period 50.00 Payroll deduction
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	150.00
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or for commercial purposes, other than using	the name and address of any political committee t	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Thomas Wherry Mailing Address 611 W. 2nd Street		Date of Receipt
City Frederick FEC ID number of contributing federal political committee.	State Zip Code MD 21701	07 25 2014 Transaction ID : SA11Al.8866 Amount of Each Receipt this Period 50.00
Name of Employer First Colonies Anesthesia Receipt For: □ Primary □ General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 300.00	Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Thomas Wherry Mailing Address 611 W. 2nd Street	Chate 7 or de	Date of Receipt 08 25 2014
City Frederick FEC ID number of contributing federal political committee.	State Zip Code MD 21701	Transaction ID : SA11AI.8960 Amount of Each Receipt this Period 50.00
Name of Employer First Colonies Anesthesia Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 350.00	Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Thomas Wherry Mailing Address 611 W. 2nd Street City Frederick	State Zip Code MD 21701	Date of Receipt 09 25 2014 Transaction ID : SA11AI.9057
Frederick FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	Occupation Physician Aggregate Year-to-Date 400.00	Amount of Each Receipt this Period 50.00 Payroll deduction
SUBTOTAL of Receipts This Page (optional)	150.00
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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE			
Full Name (Last, First, Middle Initial) A. Dr. Howard Wilpon Mailing Address 18212 Wickham Road		Date of Receipt			
City Olney FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia	State Zip Code MD 20832 C Occupation Physician	7 25 2014 Transaction ID : SA11AI.8859 Amount of Each Receipt this Period 50.00 Payroll deduction			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00				
Full Name (Last, First, Middle Initial) 3. Dr. Howard Wilpon Mailing Address 18212 Wickham Road		Date of Receipt 08 25 2014			
City Olney FEC ID number of contributing federal political committee.	State Zip Code MD 20832	Transaction ID : SA11AI.8950 Amount of Each Receipt this Period 50.00			
Name of Employer First Colonies Anesthesia Receipt For: Primary General	Occupation Physician Aggregate Year-to-Date ▼	Payroll deduction			
Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Howard Wilpon	350.00	Date of Receipt			
Mailing Address 18212 Wickham Road City Olney FEC ID number of contributing federal political committee.	State Zip Code MD 20832	09 25 2014 Transaction ID : SA11AI.9048 Amount of Each Receipt this Period 50.00			
Name of Employer First Colonies Anesthesia Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 400.00	Payroll deduction			
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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Monfold Wolf Mailing Address 4822 Tilly Dr.		Date of Receipt
City	State Zip Code	07 25 2014
Sykesville FEC ID number of contributing federal political committee	MD 21784	Amount of Each Receipt this Period 50.00
federal political committee. Name of Employer	Occupation	- Payroll deduction
First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	Physician Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) 3. Dr. Monfold Wolf	300.00	Date of Receipt
Mailing Address 4822 Tilly Dr.	Chote 7th On the	08 25 2014
City Sykesville	State Zip Code MD 21784	Transaction ID : SA11AI.8958 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr. Monfold Wolf		Date of Receipt
Mailing Address 4822 Tilly Dr.		09 25 2014
City Sykesville	State Zip Code MD 21784	Transaction ID : SA11AI.9055 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
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or for commercial purposes, other than using the	he name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) You Wu Mailing Address 910 Dunlavin Ct.		Date of Receipt
City Timonium FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia	State Zip Code MD 21093 C Occupation Physician	7 25 2014 Transaction ID : SA11AI.8853 Amount of Each Receipt this Period 50.00 Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) You Wu Mailing Address 910 Dunlavin Ct.		Date of Receipt 08 25 2014
City Timonium FEC ID number of contributing federal political committee.	State Zip Code MD 21093	Transaction ID : SA11AI.8944 Amount of Each Receipt this Period 50.00
Name of Employer First Colonies Anesthesia Receipt For: Primary General	Occupation Physician Aggregate Year-to-Date ▼	- Payroll deduction
Other (specify) ▼ Full Name (Last, First, Middle Initial) You Wu Mailing Address 910 Dunlavin Ct.	State Zin Code	Date of Receipt 09 25 2014
City Timonium FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	State Zip Code MD 21093 C Occupation Physician Aggregate Year-to-Date ▼ 400.00	Transaction ID : SA11AI.9001 Amount of Each Receipt this Period 50.00 Payroll deduction
SUBTOTAL of Receipts This Page (optional)	>	150.00
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Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) You Wu Mailing Address 910 Dunlavin Ct.		Date of Receipt
City Timonium FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia	State Zip Code MD 21093 C Occupation Physician	09 25 2014 Transaction ID : SA11AI.9042 Amount of Each Receipt this Period 50.00 Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial) 3. Dr. Aiqin Yu Mailing Address 13508 Gumspring Road		Date of Receipt 07 25 2014
City Rockville FEC ID number of contributing federal political committee.	State Zip Code MD 20850	Transaction ID : SA11AI.8815 Amount of Each Receipt this Period 50.00
Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 300.00	Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Aiqin Yu Mailing Address 13508 Gumspring Road		Date of Receipt 08 25 2014
City Rockville FEC ID number of contributing federal political committee.	State Zip Code MD 20850	Transaction ID : SA11AI.8906 Amount of Each Receipt this Period 50.00
Name of Employer First Colonies Anesthesia Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 350.00	Payroll deduction
SUBTOTAL of Receipts This Page (optional)	•	150.00
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Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAL	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Jungim Yun Mailing Address 2057 Thurston Road		Date of Receipt
City	State Zip Code	07 25 2014 Transaction ID : SA11AI.8879
Frederick	MD 21704	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For:	Physician	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Jungim Yun Mailing Address 2057 Thurston Road		Date of Receipt
	State 7in Code	08 25 2014
City Frederick	State Zip Code MD 21704	Transaction ID : SA11AI.8974 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr. Jungim Yun		Date of Receipt
Mailing Address 2057 Thurston Road		09 25 2014
City Frederick	State Zip Code MD 21704	Transaction ID : SA11AI.9070 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
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or	for commercial purposes, other than using the name	e and addr	ess of any politi	cal com	mittee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)		ATEC : : 5	D.C	T IC	
/	FIRST COLONIES ANESTHESIA	ASSOCI	ATES LLC	POL	HICAL	L ACTION COMMITTEE
$oldsymbol{ol}oldsymbol{oldsymbol{oldsymbol{ol{ol}}}}}}}}}}}}}}}}}$	Full Name (Last, First, Middle Initial)					
Α.	Citizens for Brian Frosh					Date of Disbursement
						M M / D D / Y Y Y
	Mailing Address 4810 Grantham Ave.					08 04 2014
	City	Stata	Zin Codo			
	,	State MD	Zip Code 20815			Transaction ID : SB29.8796
	Purpose of Disbursement				-	
	Contribution			01	11	Amount of Each Disbursement this Period
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	0"			Ту		1000.00
	Office Sought: House Disbursen					
		Primary Other (spec	General			
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	Full Name (Last, First, Middle Initial)					
В.	Committee to Elect Bobby Zirkin					Date of Disbursement
						M = M / D = D / Y = Y = Y
	Mailing Address 10995 Owings Mill Blvd., Suite 220)				08 04 2014
	City.	`toto	Zin Codo			
	•	State MD	Zip Code 21117			Transaction ID : SB29.8793
	Purpose of Disbursement			_		
	Contribution			0	11	Amount of Each Disbursement this Period
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	Full Name (Last, First, Middle Initial)					
C.	Friends of JB Jennings					Date of Disbursement
						M M / D D / Y Y Y Y
	Mailing Address 6 Bladen St.					08 04 2014
	Room 326 City	State	Zip Code			
	•	MD	21401			Transaction ID : SB29.8795
	Purpose of Disbursement					
	Contribution			01	11	Amount of Each Disbursement this Period
	Candidate Name			Cate		500.00
	Office Sought: House Disbursen	nent For		Ту	pe	555.55
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	State: District:	(-1	<i>3,</i> ₹			
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s	UBTOTAL of Disbursements This Page (optional)				▶	2000.00
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	NAME OF COMMITTEE (In Full)	, , ,									
$ \rangle$	FIRST COLONIES ANESTHESIA	ASSOCIATES LLC F	POLIT	TIC	AL	ACTI	ON	CO	MMI	TTEE	
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Δ.	Full Name (Last, First, Middle Initial) Friends of John Astle					Date o	of Dis	burse	ment		
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	Mailing Address 51 Fleet St.					08		0-		2014	
	City	State Zip Code			+						
		MD 21401				Trans	sacti	on ID	: SB29.	.8794	
	Purpose of Disbursement		-		\forall						
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		Primary General									
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	Mailing Address							<u>L</u> .			
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SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

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NAME OF COMMITTEE (In Full)

H	IRST COLONIES ANESTHESIA	4 ASSUC	II TI LO LLO	1 OLITIOA		
Α.	Full Name (Last, First, Middle Initial)		ID : H4.8791		Allocated Activity or Event:	
	Barbara Marx Brocato & Assoc	ciates			Administrative Fundraising Exe	empt
	Mailing Address 18 Pinkney Street				Voter Drive Direct Candidate Sup	port
	City	State	Zip Code		Public Comm (ref to party only) by PAC	
	Annapolis	MD	21401		Allocated Activity or Event Year-To-Date	
	Purpose of Disbursement: Lobbying expense				9527.93	
	Activity or Event Identifier:			Oata waw./	M M / D D / Y Y Y	V
	Administrative			Category/ Type	Date 07 02 2014	
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT	
	0.00		7	1320.62	1320.62	
В.	Full Name (Last, First, Middle Initial)	Transaction	ID : H4.8792		Allocated Activity or Event:	
	Barbara Marx Brocato & Associates				Administrative Fundraising Exe	empt
	Mailing Address 18 Pinkney Street				Voter Drive Direct Candidate Sup	oport
	City	State	Zip Code		Public Comm (ref to party only) by PAC)
	Annapolis	MD	21401		Allocated Activity or Event Year-To-Date	
	Purpose of Disbursement: Lobbying expense			· · · ·	10777.93	
	Activity or Event Identifier: Administrative			Category/ Type	Date 08 04 2014	Y
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT	_
	FEDERAL SHARE	+	NONFEDERAL	SHARE 1250.00	= TOTAL AMOUNT 1250.00	_
 C.			NONFEDERAL		1250.00 Allocated Activity or Event:	empt
<u></u>	0.00 Full Name (Last, First, Middle Initial)		7 7		1250.00 Allocated Activity or Event:	empt
<u></u>	Full Name (Last, First, Middle Initial) Barbara Marx Brocato & Associates Mailing Address 18 Pinkney Street City	Transaction	7 7		Allocated Activity or Event: Administrative Fundraising Exe	oport
C .	Full Name (Last, First, Middle Initial) Barbara Marx Brocato & Associates Mailing Address 18 Pinkney Street City Annapolis	Transaction	n ID : H4.9077		Allocated Activity or Event: Administrative Fundraising Execution Voter Drive Direct Candidate Sup	oport
c.	Full Name (Last, First, Middle Initial) Barbara Marx Brocato & Associates Mailing Address 18 Pinkney Street City Annapolis Purpose of Disbursement: Lobbying expense	Transaction	ID: H4.9077		Allocated Activity or Event: Administrative Fundraising Exe Voter Drive Direct Candidate Sup Public Comm (ref to party only) by PAC	oport
c.	Full Name (Last, First, Middle Initial) Barbara Marx Brocato & Associates Mailing Address 18 Pinkney Street City Annapolis Purpose of Disbursement:	Transaction	ID: H4.9077		Allocated Activity or Event: Administrative Fundraising Execution Voter Drive Direct Candidate Sup Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date	oport
C.	Full Name (Last, First, Middle Initial) Barbara Marx Brocato & Associates Mailing Address 18 Pinkney Street City Annapolis Purpose of Disbursement: Lobbying expense Activity or Event Identifier: Administrative	State MD	Zip Code 21401	1250.00 Category/ Type	Allocated Activity or Event: Administrative Fundraising Exe Voter Drive Direct Candidate Sup Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 12027.93	oport
c.	Full Name (Last, First, Middle Initial) Barbara Marx Brocato & Associates Mailing Address 18 Pinkney Street City Annapolis Purpose of Disbursement: Lobbying expense Activity or Event Identifier: Administrative	Transaction	ID: H4.9077	Category/ Type	Allocated Activity or Event: Administrative Fundraising Exectly Support Candidate S	oport
c.	Full Name (Last, First, Middle Initial) Barbara Marx Brocato & Associates Mailing Address 18 Pinkney Street City Annapolis Purpose of Disbursement: Lobbying expense Activity or Event Identifier: Administrative	State MD	Zip Code 21401	1250.00 Category/ Type	Allocated Activity or Event: Administrative Fundraising Exe Voter Drive Direct Candidate Sup Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 12027.93	oport
	Full Name (Last, First, Middle Initial) Barbara Marx Brocato & Associates Mailing Address 18 Pinkney Street City Annapolis Purpose of Disbursement: Lobbying expense Activity or Event Identifier: Administrative	State MD	Zip Code 21401	Category/ Type	Allocated Activity or Event: Administrative Fundraising Exectly Support Candidate S	oport
	Full Name (Last, First, Middle Initial) Barbara Marx Brocato & Associates Mailing Address 18 Pinkney Street City Annapolis Purpose of Disbursement: Lobbying expense Activity or Event Identifier: Administrative FEDERAL SHARE 0.00	State MD	Zip Code 21401	Category/ Type SHARE 1250.00	Allocated Activity or Event: Administrative Fundraising Exectly Support Candidate S	oport
	Full Name (Last, First, Middle Initial) Barbara Marx Brocato & Associates Mailing Address 18 Pinkney Street City Annapolis Purpose of Disbursement: Lobbying expense Activity or Event Identifier: Administrative FEDERAL SHARE 0.00 JBTOTAL of Allocated Federal and NonFederal	State MD	Zip Code 21401 NONFEDERAL	Category/ Type SHARE 1250.00	Allocated Activity or Event: Administrative Fundraising Exectly Voter Drive Direct Candidate Superproperty of Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 12027.93 Date May 23 2014 TOTAL AMOUNT	oport
	Full Name (Last, First, Middle Initial) Barbara Marx Brocato & Associates Mailing Address 18 Pinkney Street City Annapolis Purpose of Disbursement: Lobbying expense Activity or Event Identifier: Administrative FEDERAL SHARE 0.00 JBTOTAL of Allocated Federal and NonFederal FEDERAL SHARE	Transaction State MD + al Activity This +	Zip Code 21401 NONFEDERAL	Category/ Type SHARE 1250.00 SHARE 3820.62 NonFederal sh	Allocated Activity or Event: Administrative Fundraising Exectly Voter Drive Direct Candidate Superpublic Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date 12027.93 Date 09 23 2014 TOTAL AMOUNT 1250.00	ррог

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE	91	OF	91	
FOR	LINE	21a OF	FORM	зх

NAME OF COMMITTEE (In Full)

A .	Full Name (Last, First, Middle Initial)	Transaction	ID : H4.9078		Allocated Activity or Event:
	Federal Election Committee				X Administrative Fundraising Exempt
	Mailing Address PO Box 979058				Voter Drive Direct Candidate Support
	City	State	Zip Code		Public Comm (ref to party only) by PAC
	St Louis	МО	63197		Allocated Activity or Event Year-To-Date
	Purpose of Disbursement: Late filing				12827.93
	Activity or Event Identifier:			Catagory	M = M / D = D / Y = Y = Y
	Administrative			Category/ Type	Date 09 23 2014
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
	0.00		7 1 7	800.00	800.00
<u> —</u> В.	Full Name (Last, First, Middle Initial)				Allocated Activity or Event:
					Administrative Fundraising Exempt
	Mailing Address				Voter Drive Direct Candidate Support
	City	State	Zip Code		Public Comm (ref to party only) by PAC
	Division of Dislamanant.				Allocated Activity or Event Year-To-Date
	Purpose of Disbursement:				
	Activity or Event Identifier:			Category/ Type	M = M / D = D / Y = Y = Y
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	FEDERAL SHARE	+	NONFEDERAL	SHARE	TOTAL AMOUNT
_			, , ,		Allocated Activity or Front
C.	Full Name (Last, First, Middle Initial)				Allocated Activity or Event: Administrative Fundraising Exempt
	Mailing Address				Voter Drive Direct Candidate Support
	Mailing Address City	State	Zip Code		Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC
	City	State	Zip Code		
	City Purpose of Disbursement:	State	Zip Code		Public Comm (ref to party only) by PAC
	City	State	Zip Code	Category/ Type	Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
	City Purpose of Disbursement: Activity or Event Identifier:		·	Type	Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date
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SI	City Purpose of Disbursement: Activity or Event Identifier: FEDERAL SHARE	+	NONFEDERAL	Type	Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date
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