

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 6 / 10
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Kidney Care Partners Political Action Committee

A. Full Name (Last, First, Middle Initial)
LaVarne Burton

Mailing Address 4296 Buckskin Lake Drive

City State Zip Code
Ellicott City MD 20142

FEC ID number of contributing federal political committee. **C**

Name of Employer American Kidney Fund Occupation President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 19 / 2009

Transaction ID: SA11AI.4106

Amount of Each Receipt this Period
250.00

Political Contribution

B. Full Name (Last, First, Middle Initial)
R. John Davis

Mailing Address 15 Benson Hill Road

City State Zip Code
Dover Plains NY 12522

FEC ID number of contributing federal political committee. **C**

Name of Employer National Kidney Foundation Occupation Chief Executive Officer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2009

Transaction ID: SA11AI.4116

Amount of Each Receipt this Period
1000.00

Political Contribution

C. Full Name (Last, First, Middle Initial)
Mr. Ben J. Lips

Mailing Address 3333 W Coast Highway Suite 300

City State Zip Code
Newport Beach CA 92663

FEC ID number of contributing federal political committee. **C**

Name of Employer Fresenius Medical Care Occupation Chief Executive Officer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 5000.00

Date of Receipt
MM / DD / YYYY
01 / 29 / 2009

Transaction ID: SA11AI.4104

Amount of Each Receipt this Period
5000.00

political contribution

SUBTOTAL of Receipts This Page (optional) ► **6250.00**

TOTAL This Period (last page this line number only) ►