FEC FORM 3X	AN	PORT O	JRSEM	ENTS	ee		Office Use Only	
1. NAME OF COMMITTEE (in fu		FEC MAILING LA		ample:If typing er the lines	, type			
	Services, Inc Pc	blitical Action Comr						
ADDRESS (number and	street)	234 Colonial Blvd.						
Check if differ than previousl reported. (ACC	ent L	ttn: Margarita Suar The second secon	ez				33907	-
2. FEC IDENTIFICAT	ION NUMBER	▼	CITY 🛋		S	STATE	ZIPCO	DE 萬
C00385120]	3. IS THIS REPORT		NEW N) OR	AN (A)	IENDED	
July 15QuarterlyOctoberQuarterlyJanuary 3QuarterlyJuly 31 MReport(NYear Only	orts: Report(Q1) 5 Report(Q2) 5 Report(Q3) 1 Report(YE) iid-Year on-election	b) Monthly Report Due On: (c) 12-Day PRE -Elect Report for (d) 30-Day Post -Elec Report for	the:		12C)	Sep	2G) in the State o	Special (30S)
5. Covering Period I certify that I have exam Type or Print Name of T Signature of Treasurer NOTE : Submission of f	reasurer <u>E</u>	Daniel E. Dosoretz, Filed by Daniel	my knowledge MD E. Dosoretz, M	D	D;	ate 07	2 0 0 9 3 0 penalties of 2 U.	2 0 0 9 S.C 437g.
Office Use Only							FEC FOR (Rev. 12/20	

Image# 29992545116

FEC Form 3X (Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

2/14

	Write or Type Committee Name Radiation Therapy Services, Inc Political Ac	ction Committee	
	Report Covering the Period: From:	0 1 0 1 0 1	To:
	-	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 2009 Y Y Y		22614.00
	(b) Cash on Hand at Begining of Reporting Period	22614.00	
	(c) Total Receipts (from Line 19)	19975.00	19975.00
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	42589.00	42589.00
7.	Total Disbursements (from Line 31)	14000.00	14000.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	28589.00	28589.00
9.	Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

Image# 29992545117

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Radiation Therapy Services, Inc Political Action Committee

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 (i) Itemized (use Schedule A)	19105.00	19105.00
(ii) Unitemized	870.00	870.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ▶	19975.00	19975.00
(b) Political Party Committees	0.00	0.00
 (c) Other Political Committees (such as PACs)	0.00	0.00
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) 🕨	19975.00	19975.00
. Transfers From Affiliated/Other Party Committees	0.00	0.00
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
Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	19975.00	19975.00
Total Federal Receipts (subtract Line 18(c) from Line 19)	19975.00	19975.00

Image# 29992545118

DETAILED SUMMARY PAGE

	II. DISBURSEMENTS	COLUMN A	COLUMN B
21	Operating Expenditures:	Total This Period	Calendar Year-to-Date
	(a) Shared Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating Expenditures	0.00	0.00
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) >	0.00	0.00
22.	Transfers to Affiliated/Other Party Committees	0.00	0.00
23.	Contributions to Federal Candidates/Committees and Other Political Committees	14000.00	14000.00
24.	Independent Expenditure (use Schedule E)	0.00	0.00
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26.	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
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	 (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) 	0.00	0.00
29.	Other Disbursements	0.00	0.00
30.	Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6)		
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31.	Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	14000.00	14000.00
20			
32.	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	14000.00	14000.00

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003) of Disbursements

5 / 14

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	19975.00	19975.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	19975.00	19975.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

or for commercial purposes, other than using the name and address of any political committee to solicit contributions fr NAME OF COMMITTEE (In Full) Radiation Therapy Services, Inc Political Action Committee Full Name (Last, First, Middle Initial) Mr. DAVID E. LEE Mailing Address 9741 Mar Largo Circle City State FEC ID number of contributing federal political committee. Primary General Other (specify) Occupation Primary General Other (specify) Occupation Primary General Other (specify) State Zip Code Transaction ID: Mailing Address 9 Ivy League Circle <	11c 12 15 16 17									
NAME OF COMMITTEE (In Full) Radiation Therapy Services, Inc Political Action Committee Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address 9741 Mar Largo Circle	ny information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions r for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.									
A. Mr. DAVID È. LEE Date of Receipt Mailing Address 9741 Mar Largo Circle Image: Circle City State Zip Code Fort Myers FL 33919-7325 FEC ID number of contributing federal political committee. City Amount of Each Name of Employer Occupation Physician Assistant Amount of Each Name of Employer Occupation Physician Assistant P/R Deduction Other (specify) ▼ General Off P/R Deduction Other (specify) ▼ General Other (specify) ▼ Date of Receipt Gity State Zip Code Transaction ID: General Other (specify) ▼ Occupation P/R Deduction Weekly) THEODORE MASEK Date of Receipt Image: Circle Mailing Address 9 Ivy League Circle Image: Circle Image: Circle Image: Circle City State Zip Code Transaction ID: Amount of Each Rancho Mirage C Image: Circle Image: Circle Image: Circle Image: Circle Name of Employer C Image: Circle Image: Circle<										
City State Zip Code Transaction ID: Fort Myers FL 33919-7325 Amount of Each FEC ID number of contributing federal political committee. C Amount of Each Name of Employer 21st Century Oncology, Inc Occupation Physician Assistant P/R Deduction Primary General Other (specify) ▼ 650.00 P/R Deduction B. Full Name (Last, First, Middle Initial) Dr THEODORE MASEK Date of Receipt Date of Receipt City State Zip Code Transaction ID: Rancho Mirage CA 92270-3909 Amount of Each FEC ID number of contributing federal political committee. C 0 6 © C Name of Employer California Radiation Therapy Managemen Occupation Medical Doctor Amount of Each 0 6 C										
Fort Myers FL 33919-7325 Amount of Each FEC ID number of contributing federal political committee. C Amount of Each Name of Employer 21st Century Oncology, Inc Occupation Physician Assistant P/R Deduction Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date ▼ P/R Deduction B. Full Name (Last, First, Middle Initial) Dr THEODORE MASEK Date of Receipt Mailing Address 9 Ivy League Circle M M / 0 G City State Zip Code Rancho Mirage C Amount of Each FEC ID number of contributing 	^D / Y Y Y Y 30 2009									
FEC ID number of contributing federal political committee. C Name of Employer 21st Century Oncology, Inc Occupation Physician Assistant Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 650.00 Full Name (Last, First, Middle Initial) P/R Deduction Dr THEODORE MASEK Date of Receipt Mailing Address 9 Ivy League Circle City State Zip Code Rancho Mirage CA 92270-3909 FEC ID number of contributing federal political committee. C Name of Employer California Radiation Therapy Managemen Occupation Medical Doctor	PR1567085122192									
federal political committee. ↓ Name of Employer 21st Century Oncology, Inc Occupation Physician Assistant Receipt For: Other (specify) ♥ Aggregate Year-to-Date ♥ Primary General Other (specify) ♥ Aggregate Year-to-Date ♥ Full Name (Last, First, Middle Initial) Dr THEODORE MASEK Date of Receipt Mailing Address 9 Ivy League Circle M M / D G City State Zip Code Rancho Mirage CA 92270-3909 FEC ID number of contributing federal political committee. Occupation Medical Doctor Amount of Each	Receipt this Period									
21st Century Oncology, Inc Physician Assistant Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 650.00 Full Name (Last, First, Middle Initial) Date of Receipt Dr THEODORE MASEK Date of Receipt Mailing Address 9 Ivy League Circle City State Zip Code Rancho Mirage CA 92270-3909 FEC ID number of contributing federal political committee. Occupation Name of Employer Occupation California Radiation Therapy Managemen Occupation	650.00									
Receipt For: Aggregate Year-to-Date P/R Deduction Other (specify) ▼ 650.00 P/R Deduction B. Full Name (Last, First, Middle Initial) Date of Receipt Dr THEODORE MASEK Date of Receipt Mailing Address 9 Ivy League Circle City State Zip Code Rancho Mirage CA 92270-3909 FEC ID number of contributing federal political committee. Occupation Name of Employer Occupation California Radiation Therapy Managemen Occupation										
Primary General Other (specify) Full Name (Last, First, Middle Initial) Dr THEODORE MASEK Dr THEODORE MASEK Date of Receipt Mailing Address 9 Ivy League Circle City State Zip Code Rancho Mirage CA 92270-3909 FEC ID number of contributing federal political committee. Occupation Name of Employer Occupation California Radiation Therapy Managemen Occupation										
B. Dr THEODORE MASEK Date of Receipt Mailing Address 9 Ivy League Circle 0 6 City State Zip Code Rancho Mirage CA 92270-3909 FEC ID number of contributing federal political committee. C Name of Employer California Radiation Therapy Managemen Occupation Medical Doctor	(\$50.00 Bi-									
City State Zip Code Transaction ID: Rancho Mirage CA 92270-3909 Amount of Each FEC ID number of contributing federal political committee. C Amount of Each Name of Employer California Radiation Ther- apy Managemen Occupation Medical Doctor Image: Contributing										
Rancho Mirage CA 92270-3909 Amount of Each FEC ID number of contributing federal political committee. C Amount of Each Name of Employer California Radiation Ther- apy Managemen Occupation Medical Doctor Image: Contributing federal political committee	^D / ^Y									
FEC ID number of contributing federal political committee. C Name of Employer California Radiation Therapy Managemen Occupation Medical Doctor	PR1567097122192									
federal political committee. Occupation Name of Employer California Radiation Ther- apy Managemen Occupation Medical Doctor	Receipt this Period									
California Radiation Ther- apy Managemen Medical Doctor	2400.00									
Receipt For: Aggregate Year-to-Date ▼										
Primary General Other (specify) ▼ 2400.00	(\$200.00 Bi-									
Full Name (Last, First, Middle Initial) Date of Receipt Mrs. GAIL CUMMINGS Date of Receipt										
	^D / Y Y Y Y 30 2009									
	PR1580094822192									
FORT MYERS FL 33912 Amount of Each	Receipt this Period									
FEC ID number of contributing federal political committee.	325.00									
Name of Employer Occupation 21st Century Oncology, Inc Technical Director										
Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 325.00	(\$25.00 Bi-									
	3375.00									
SUBTOTAL of Receipts This Page (optional)										

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and		Use separate schedule(s) for each category of the Detailed Summary Page not be sold or used by any perso	FOR LINE NUMBER: PAGE 7 / 14 (check only one) 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions 11 11 12
	or for commercial purposes, other than using th NAME OF COMMITTEE (In Full) Radiation Therapy Services, Inc Polit	ne name and add	ress of any political committee to	solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Mrs. VICTORIA DANTON Mailing Address 1409 Davis Drive			Date of Receipt
				06 30 2009
		State	Zip Code	Transaction ID: PR1580095122192
	Fort Myers	FL	33919-1069	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		975.00
	Name of Employer 21st Century Oncology Man- agement, Inc	Occupation Director o	f Revenue Integrity	
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Other (specify)	0 0	975.00	P/R Deduction (\$75.00 Bi- Weekly)
- B.	Full Name (Last, First, Middle Initial) QUINTEN Curtis BLACK, MD			Date of Receipt
	Mailing Address 1404 Kenton Lane			M M / D D / Y Y Y Y 06 30 2009
	City	State	Zip Code	Transaction ID: PR1580879422192
	Asheville	NC	28803-2468	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		520.00
	Name of Employer RTA of Western NC, PA	Occupation Medical D		
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	520.00	P/R Deduction (\$40.00 Bi- Weekly)
- C.	Full Name (Last, First, Middle Initial) Mark Robert Jones, MD			Date of Receipt
	Mailing Address 1400 LONG RUN RC	DAD		0 6 3 0 2 0 0 9
	City	State	Zip Code	Transaction ID: PR1580886822192
	LOUISVILLE	KY	40245-4334	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		650.00
	Name of Employer 21st Century Oncology of Kentucky (KEN	Occupation Medical D		
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Other (specify)	0 0	650.00	P/R Deduction (\$50.00 Bi- Weekly)
[SUBTOTAL of Receipts This Page (optional)	_1		2145.00
ŀ	CODICIAL OF NECEPIS THIS Fage (optional)		P	
	TOTAL This Period (last page this line number	er only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 14 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using th NAME OF COMMITTEE (In Full) Radiation Therapy Services, Inc Polit	Statements may not be sold or used by any person the name and address of any political committee to state	n for the purpose of soliciting contributions solicit contributions from such committee.
Z	Full Name (Last, First, Middle Initial)		
Α.	TAM NGUYEN, MD Mailing Address 2798 Bellini Road	Date of Receipt	
	City	State Zip Code	0 6 3 0 2 0 0 9 Transaction ID: PR1580891922192
	Henderson	NV 89052-3118	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1300.00
	Name of Employer Michael J. Katin, MD, PC	Occupation Medical Doctor	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1300.00	P/R Deduction (\$100.00 Bi- Weekly)
– В.	Full Name (Last, First, Middle Initial) PAUL TREADWELL, MD		Date of Receipt
	Mailing Address 9916 COZY GLEN C	IRCLE	M M / D D / Y
	City	State Zip Code	Transaction ID: PR1580898522192
	LAS VEGAS	NV 89117	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	260.00
	Name of Employer Michael J. Katin, MD, PC	Occupation Medical Doctor	
	Receipt For:	Aggregate Year-to-Date ▼	_
	Primary General Other (specify) Image: Content of the specify of the specific of the specifi	260.00	P/R Deduction (\$20.00 Bi- Weekly)
– C.	Full Name (Last, First, Middle Initial) MRS. NANCY A. WISE		Date of Receipt
	Mailing Address 11540 BAYSHORE R	ROAD	M M / D D / Y Y Y Y 06 30 2009
	City	State Zip Code	Transaction ID: PR1580900222192
	NORTH FORT MYERS	FL 33917-4201	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	325.00
	Name of Employer Financial Services of SW Florida	Occupation Director Financial Services	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 325.00	P/R Deduction (\$25.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional).	·	1885.00
F	TOTAL This Period (last page this line number		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 14 (check only one)
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	a name and address of any political committee to	solicit contributions from such committee.
	Radiation Therapy Services, Inc Politi	cal Action Committee	
A.	Full Name (Last, First, Middle Initial) Dr Patrick Michael Francke	Date of Receipt	
	Mailing Address 7 Winnebago Road	06 30 Y Y Y Y 02009	
	City	State Zip Code	Transaction ID: PR1633307922192
	Sea Ranch Lakes	FL 33308-2305	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	520.00
	Name of Employer 21st Century Oncology, Inc	Occupation Medical Doctor	
	Receipt For:	Aggregate Year-to-Date V	
	 Primary General Other (specify) ▼ 	520.00	P/R Deduction (\$40.00 Bi- Weekly)
в.	Full Name (Last, First, Middle Initial) Dr Keith Lawrence Miller		Date of Receipt
	Mailing Address 12731 Terabella Way		M M / D D / Y Y Y Y Y 06 30 2009
	City	State Zip Code	Transaction ID: PR1692755722192
	Fort Myers FEC ID number of contributing federal political committee.	FL 33912-0910	Amount of Each Receipt this Period
	Name of Employer 21st Century Oncology, Inc	Occupation Medical Doctor	_
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1950.00	P/R Deduction (\$150.00 Bi- Weekly)
С.	Full Name (Last, First, Middle Initial) Dr. Dwight Fitch	1	Date of Receipt
	Mailing Address 9122 16th Ave Circle,	NW	M M / D D / Y Y Y Y 06 30 2009
	City	State Zip Code	Transaction ID: PR2127270522192
	Bradenton	FL 34209-8133	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	650.00
	Name of Employer 21st Century Oncology, Inc	Occupation Medical Doctor	
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 650.00	P/R Deduction (\$50.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)	·	3120.00
	TOTAL This Period (last page this line number	-	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 14 (check only one) 11a 11b 11c 12 X 11a 11b 11c 12 I3 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the	l Statements may he name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Radiation Therapy Services, Inc Poli	itical Action C	ommittee	
۷ A.	Full Name (Last, First, Middle Initial) Brian P Quaranta, MD	Date of Receipt		
	Mailing Address 100 Vista Lake Drive Apt 108	9		0 6 / D D / Y Y Y Y 0 6 3 0 2 0 0 9
	City	State	Zip Code	Transaction ID: PR2127272422192
	Candler	NC	28715	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		520.00
	Name of Employer North Carolina RT Managem- ent Services.	Occupatio Medical		
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Primary General Other (specify) ▼	0 0	520.00	P/R Deduction (\$40.00 Bi- Weekly)
- 3.	Full Name (Last, First, Middle Initial) Michael Shevach, MD			Date of Receipt
	Mailing Address 7365 Regina Royale			M M / D D / Y Y Y Y 06 30 2009
	City	State	Zip Code	Transaction ID: PR2127272522192
	Sarasota	<u>FL</u>	34238-4545	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1300.00
	Name of Employer 21st Century Oncology, Inc	Occupatio Medical		
			e Year-to-Date 🔻	
	Other (specify) ▼	0.0	1300.00	P/R Deduction (\$100.00 Bi- Weekly)
- C.	Full Name (Last, First, Middle Initial) Madlyn Dornaus			Date of Receipt
	Mailing Address 18930 Knoll Landing	Drive		0 6 3 0 Y Y Y Y 0 6 3 0 2 0 0 9
	City	State	Zip Code	Transaction ID: PR2232241722192
	Fort Myers	FL	33908-4760	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1950.00
	Name of Employer 21st Century Oncology Man- agement, Inc	Occupatio VP Oper		
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼	0 0	1950.00	P/R Deduction (\$150.00 Bi- Weekly)
ſ	SUBTOTAL of Receipts This Page (optional)			3770.00
┝				
	TOTAL This Period (last page this line number	er only)		

	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 11/14
			Use separate schedule(s) for each category of the	(check only one)
I	TEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma	ay not be sold or used by any perso Idress of any political committee to	13 14 15 16 17 In for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	Radiation Therapy Services, Inc Polition	cal Action C	committee	
A.	Full Name (Last, First, Middle Initial) Chaundre Cross			Date of Receipt
	Mailing Address 6845 Wellington Drive)		0 6 3 0 Y Y Y Y 0 6 3 0 2 0 0 9
	City	State	Zip Code	Transaction ID: PR2232246222192
	Naples	FL	34109-7207	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		325.00
	Name of Employer 21st Century Oncology, Inc	Occupatio		
	Receipt For:	Medical		
	Primary General Other (specify) v	Aggregat	e Year-to-Date 325.00	P/R Deduction (\$25.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial)			
В.	Shirnett Matthews Mailing Address 35 Bryce's Ct			Date of Receipt
				06 30 2009
	City Sieldem ille	State	Zip Code	Transaction ID: PR2232246422192
	<u>Sicklerville</u>	NJ	08081-1675	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		650.00
	Name of Employer 21st Century Oncology of	Occupation Medical		
	<u>New Jersey, I</u> Receipt For:		e Year-to-Date V	_
	Primary General Other (specify) v		650.00	P/R Deduction (\$50.00 Bi- Weekly)
– c.	Full Name (Last, First, Middle Initial) Alexis Harvey			Date of Receipt
0.	Mailing Address 2127 Race St			M M / D D / Y Y Y Y 0 6 30 2009
	City	State	Zip Code	Transaction ID: PR2232248522192
	Philadelphia	NJ	19103-1009	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		260.00
	Name of Employer 21st Century Oncology of New Jersey, I	Occupation Medical		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		260.00	P/R Deduction (\$20.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional)	1		1235.00
┝	CODICINE OF NECEPLE THIS Faye (optional)			
	TOTAL This Period (last page this line number	only)		

				FOR LINE NUMBER: PAGE 12/14		
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s) for each category of the	(check only one)		
	ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17		
	Any information copied from such Reports and S or for commercial purposes, other than using the	ny information copied from such Reports and Statements may not be sold or used by any persor r for commercial purposes, other than using the name and address of any political committee to				
	NAME OF COMMITTEE (In Full)					
	Radiation Therapy Services, Inc Politic	cal Action C	ommittee			
, A.	Full Name (Last, First, Middle Initial) Joseph Baisden, MD	Date of Receipt				
	Mailing Address 14306 Willlow Grove C	M M / D D / Y Y Y Y 06 30 2009				
	City	State	Zip Code	Transaction ID: PR2364173722192		
	Louisville	KY	40245-5159	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		325.00		
	Name of Employer	Occupatio	n	7		
	21st Century Oncology of Kentucky	Medical	Doctor			
		Aggregate	e Year-to-Date 🔻			
	Primary General Other (specify)	0 0	325.00	P/R Deduction (\$25.00 Bi- Weekly)		
в.	Full Name (Last, First, Middle Initial) Dr. Peter Greenberg			Date of Receipt		
	Mailing Address 77-840 Flora Rd					
	City	State	Zip Code	Transaction ID: PR2366842322192		
	Palm Desert	CA	92211-4109	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		2600.00		
	Name of Employer 21st Century Oncology of	Occupatio Medical				
	California, P Receipt For:	1	e Year-to-Date V	-		
	Primary General Other (specify) ▼		2600.00	P/R Deduction (\$200.00 Bi- Weekly)		
C.	Full Name (Last, First, Middle Initial) Dr David Horvick			Date of Receipt		
0.	Mailing Address 953 Creek Rock Rd			0 6 3 0 2 0 0 9		
	City	State	Zip Code	Transaction ID: PR2366842522192		
	Bel Air	MD	21014	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		650.00		
	Name of Employer 21st Century Onc of Harfo- rd County. Ma	Occupatio Medical		-		
	Receipt For:	1 1	e Year-to-Date 🔻			
	Primary General Other (specify) ▼		650.00	P/R Deduction (\$50.00 Bi- Weekly)		
	SUBTOTAL of Receipts This Page (optional)	1		3575.00		
	TOTAL This Period (last page this line number	only)		19105.00		

SCHEDULE B (FEC Form 3X)			Use separate schedule(s)			FOR LINE NUMBER: PAGE 13 / 14										
ITEMIZED DISBURSEMENTS		for each	for each category of the Detailed Summary Page			eck only 21b 27	/ one) 22 28a		23 28b	24 28		25 29	П			
Any Information copied	from such Reports and	I Statements may n	ot be sold or used	d by												
	oses, other than using t	he name and addre	ess of any political	con	nmitte	e to so	licit contr	ibutic	ons fro	om suc	h com	mittee				
NAME OF COMM Radiation Thera	ITTEE (In Full) apy Services, Inc Pol	itical Action Con	nmittee													
Full Name (Last, F	irst, Middle Initial)						Trans	actio	n ID:	203	1020					
Friends Of Chris	Friends Of Chris Dodd								Transaction ID:29340290Date of Disbursement $0^{M} 2^{M}$ $2^{M} 2^{M}$ $0^{P} 9^{P}$ $2^{V} 2^{V} 0^{V} 9^{V}$							
Mailing Address	Mailing Address PO Box 270701															
City		State	Zip Code				Amou	nt of	Each	Disbur	seme	nt this P	Perio			
West Hartford		CT	06127					Ŷ			1/	500.00	-			
Purpose of Disburs Contribution	sement				011							00.00				
Candidate Name Sen. Christophe	er Dodd				atego Type	,										
Office Sought: State: CT	House C X Senate President District:	Disbursement For: X Primary Other (spe	2010 General ecify) ▼				Contri	buti	on							
Full Name (Last, F							_									
Republican Maj	,						Date o		burse				Y			
Mailing Address	P.O. Box 144						0 6	<i>,</i>	3	0	. 2	2009				
City Alexandria		State VA	Zip Code 22313				Amou	nt of	Each	Disbur		nt this P				
Purpose of Disburs Contribution	Purpose of Disbursement Contribution						L.				2:	500.00				
Candidate Name Republican Maj	ority Fund			С	atego Type											
Office Sought:	Senate President	Disbursement For: Primary Other (spe	General				Contri	buti	on							
State: Full Name (Last, F	District:						_									
Ameripac							Date of		burse				Y			
Mailing Address	607 14th Street, N Suite 800	W					0 4		□2	8	2	2009				
City Washington		State DC	Zip Code 20005				Amou	nt of	Each	Disbur		nt this P				
Purpose of Disbursement Contribution 011							L.				50	00.00				
Candidate Name Ameripac	Candidate Name Cat															
Office Sought:	House D Senate President District:	Disbursement For: Primary Other (spe	General ecify) ▼				Contri	buti	on							
	ursements This Page (or	ntional)									90	00.00				
						<u>▶</u>		•	•							
TOTAL This Derived	last page this line numb	er only)														

C Schedule B (Form 3X) (Revised 02/2003)

		CHEDULE B (FEC Form 3	,	Use sepa				NUMBER: ly one)				PAGE 14 / 14				
11		EMIZED DISBURSEMEN	15	S for each category of the Detailed Summary Page			21b 27	Ē	22 28a	X	23 28b	\square	24 28c	\square	25 29	26 30b
	Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee															
	Ν	NAME OF COMMITTEE (In Full)														
	\backslash	Radiation Therapy Services, Inc F	Political Ad	ction Corr	nmittee											
		Full Name (Last, First, Middle Initial)							Trans	acti	on ID:	: 3	0218	347		
Α.		Stabenow For US Senate									sburs	-		511		
		Mailing Address PO Box 4945							0 ^M 2	M	D 2	2 ^D 7	/ Y	ž	0 ð 9	Y
		City East Lansing	-	State VI	Zip Code 48826				Amou	int of	Each	ı Dis	burser			
		Purpose of Disbursement Contribution				0	11		L.					500	00.00	
		Candidate Name Sen. Debbie Stabenow					egory/ /pe									
		Office Sought: House X Senate President		Primary	2012 X General				Contr	ibut	ion					
		State: MI District:		Other (spe	echy) 🔻											

SUBTOTAL of Disbursements This Page (optional)	•	5000.00
TOTAL This Period (last page this line number only)	►	14000.00
FE6AN026		FEC Schedule B (Form 3X) (Revised 02/2003)