

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Radiation Therapy Services, Inc Political Action Committee

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="8331.00"/>	<input type="text" value="8331.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="9070.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="15212.00"/>	<input type="text" value="26951.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="24282.00"/>	<input type="text" value="35282.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="17000.00"/>	<input type="text" value="28000.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="7282.00"/>	<input type="text" value="7282.00"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Radiation Therapy Services, Inc Political Action Committee

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	14852.00	25411.00
(ii) Unitemized	360.00	1540.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	15212.00	26951.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (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)	15212.00	26951.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. 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 Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	15212.00	26951.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	15212.00	26951.00

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
21. Operating Expenditures:		
(a) Allocated 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.....	17000.00	28000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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) Allocated 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)) ..	17000.00	28000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17000.00	28000.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	15212.00	26951.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15212.00	26951.00
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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Radiation Therapy Services, Inc Political Action Committee

A. DR. MICHAEL J. KATIN MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 COCONUT DRIVE
 City State Zip Code
 FORT MYERS FL 33901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 21st Century Oncology, Inc Medical Doctor
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2012
Transaction ID : 34787871
 Amount of Each Receipt this Period
 5000.00
 Contribution

B. Dr Christopher Chen
 Full Name (Last, First, Middle Initial)
 Mailing Address 1010 SEMINOLE DRIVE
 APT 1107
 City State Zip Code
 FORT LAUDERDALE FL 33304-3220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 21st Century Oncology, Inc Medical Doctor
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2496.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2012
Transaction ID : PR1567028827950
 Amount of Each Receipt this Period
 1152.00
 P/R Deduction (\$192.00 Bi-Weekly)

C. Mr. DAVID E. LEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 9741 Mar Largo Circle
 City State Zip Code
 Fort Myers FL 33919-7325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 21st Century Oncology, Inc Physician Assistant
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2012
Transaction ID : PR1567085127950
 Amount of Each Receipt this Period
 300.00
 P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	6452.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Radiation Therapy Services, Inc Political Action Committee

A. Mrs. VICTORIA DANTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1409 Davis Drive
 City Fort Myers State FL Zip Code 33919-1069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer 21st Century Oncology Management, Inc Occupation Director of Revenue Integrity
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR1580095127950
 Amount of Each Receipt this Period 450.00
 P/R Deduction (\$75.00 Bi-Weekly)

B. QUINTEN Curtis BLACK MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1404 Kenton Lane
 City Asheville State NC Zip Code 28803-2468
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RTA of Western NC, PA Occupation Medical Doctor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1040.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR1580879427950
 Amount of Each Receipt this Period 480.00
 P/R Deduction (\$80.00 Bi-Weekly)

C. Mark Robert Jones MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1400 LONG RUN ROAD
 City LOUISVILLE State KY Zip Code 40245-4334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer 21st Century Oncology of Kentucky (KEN) Occupation Medical Doctor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR1580886827950
 Amount of Each Receipt this Period 300.00
 P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 1230.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 15
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Radiation Therapy Services, Inc Political Action Committee

Full Name (Last, First, Middle Initial) A. TAM NGUYEN MD			Date of Receipt MM / DD / YYYY 06 / 30 / 2012
Mailing Address 2798 Bellini Road			Transaction ID : PR1580891927950
City Henderson	State NV	Zip Code 89052-3118	Amount of Each Receipt this Period 600.00
FEC ID number of contributing federal political committee. C		P/R Deduction (\$100.00 Bi-Weekly)	
Name of Employer Michael J. Katin, MD, PC	Occupation Medical Doctor	Aggregate Year-to-Date 1300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. PAUL TREADWELL MD			Date of Receipt MM / DD / YYYY 06 / 30 / 2012
Mailing Address 9916 COZY GLEN CIRCLE			Transaction ID : PR1580898527950
City LAS VEGAS	State NV	Zip Code 89117	Amount of Each Receipt this Period 120.00
FEC ID number of contributing federal political committee. C		P/R Deduction (\$20.00 Bi-Weekly)	
Name of Employer Michael J. Katin, MD, PC	Occupation Medical Doctor	Aggregate Year-to-Date 260.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Dr Keith Lawrence Miller			Date of Receipt MM / DD / YYYY 06 / 30 / 2012
Mailing Address 12731 Terabella Way			Transaction ID : PR1692755727950
City Fort Myers	State FL	Zip Code 33912-0910	Amount of Each Receipt this Period 900.00
FEC ID number of contributing federal political committee. C		P/R Deduction (\$150.00 Bi-Weekly)	
Name of Employer 21st Century Oncology, Inc	Occupation Medical Doctor	Aggregate Year-to-Date 1950.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	1620.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 15
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Radiation Therapy Services, Inc Political Action Committee

A. Dr. Dwight Fitch
Full Name (Last, First, Middle Initial)
Mailing Address 9122 16th Ave Circle, NW
City Bradenton State FL Zip Code 34209-8133
FEC ID number of contributing federal political committee. **C**
Name of Employer 21st Century Oncology, Inc Occupation Medical Doctor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR2127270527950
Amount of Each Receipt this Period 600.00
P/R Deduction (\$100.00 Bi-Weekly)

B. Brian P Quaranta MD
Full Name (Last, First, Middle Initial)
Mailing Address 100 Vista Lake Drive Apt 108
City Candler State NC Zip Code 28715
FEC ID number of contributing federal political committee. **C**
Name of Employer North Carolina RT Management Services, Occupation Medical Doctor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 520.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR2127272427950
Amount of Each Receipt this Period 240.00
P/R Deduction (\$40.00 Bi-Weekly)

C. Madlyn Dornaus
Full Name (Last, First, Middle Initial)
Mailing Address 18930 Knoll Landing Drive
City Fort Myers State FL Zip Code 33908-4760
FEC ID number of contributing federal political committee. **C**
Name of Employer 21st Century Oncology Management, Inc Occupation VP Operations
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1950.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR2232241727950
Amount of Each Receipt this Period 900.00
P/R Deduction (\$150.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	1740.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Radiation Therapy Services, Inc Political Action Committee

A. Chaundre Cross
Full Name (Last, First, Middle Initial)
Mailing Address 6845 Wellington Drive
City Naples State FL Zip Code 34109-7207
FEC ID number of contributing federal political committee. **C**
Name of Employer 21st Century Oncology, Inc Occupation Medical Doctor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR2232246227950
Amount of Each Receipt this Period 150.00
P/R Deduction (\$25.00 Bi-Weekly)

B. Alexis Harvey
Full Name (Last, First, Middle Initial)
Mailing Address 2127 Race St
City Philadelphia State NJ Zip Code 19103-1009
FEC ID number of contributing federal political committee. **C**
Name of Employer 21st Century Oncology of New Jersey, I Occupation Medical Doctor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR2232248527950
Amount of Each Receipt this Period 120.00
P/R Deduction (\$20.00 Bi-Weekly)

C. Dr. Peter Greenberg
Full Name (Last, First, Middle Initial)
Mailing Address 77-840 Flora Rd
City Palm Desert State CA Zip Code 92211-4109
FEC ID number of contributing federal political committee. **C**
Name of Employer 21st Century Oncology of California, P Occupation Medical Doctor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2400.00

Date of Receipt 06 / 30 / 2012
Transaction ID : PR2366842327950
Amount of Each Receipt this Period 1200.00
P/R Deduction (\$200.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	1470.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 15
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Radiation Therapy Services, Inc Political Action Committee

A. Dr David Horvick
Full Name (Last, First, Middle Initial)
Mailing Address 953 Creek Rock Rd
City Bel Air State MD Zip Code 21014
FEC ID number of contributing federal political committee. **C**
Name of Employer 21st Century Onc of Harford County, Ma Occupation Medical Doctor
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **650.00**

Date of Receipt **06 / 30 / 2012**
Transaction ID : PR2366842527950
Amount of Each Receipt this Period **300.00**
P/R Deduction (\$50.00 Bi-Weekly)

B. Marc A. Melser MD
Full Name (Last, First, Middle Initial)
Mailing Address 27090 Harbor Oaks Boulevard
City Punta Gorda State FL Zip Code 33983-6507
FEC ID number of contributing federal political committee. **C**
Name of Employer Marc A. Melser, MD (MMU) Occupation Medical Doctor - Urologist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1300.00**

Date of Receipt **06 / 30 / 2012**
Transaction ID : PR2412064427950
Amount of Each Receipt this Period **600.00**
P/R Deduction (\$100.00 Bi-Weekly)

C. Robert L. Long
Full Name (Last, First, Middle Initial)
Mailing Address 909 Mar Walt Drive
City Fort Walton Beach State FL Zip Code 32547-6635
FEC ID number of contributing federal political committee. **C**
Name of Employer 21st Century Oncology, Inc Occupation Medical Doctor
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1300.00**

Date of Receipt **06 / 30 / 2012**
Transaction ID : PR2492181527950
Amount of Each Receipt this Period **600.00**
P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **1500.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 15
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Radiation Therapy Services, Inc Political Action Committee

Full Name (Last, First, Middle Initial) A. Jake J. Strikowski		Date of Receipt MM / DD / YYYY 06 / 30 / 2012 Transaction ID : PR2492181827950
Mailing Address 1360 S. Ocean Blvd #2001		Amount of Each Receipt this Period 120.00
City Pompano Beach	State FL	Zip Code 33062-7164
FEC ID number of contributing federal political committee.	C	
Name of Employer 21st Century Oncology Management, Inc	Occupation Regional Director	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) B. Michael J. Tompkins		Date of Receipt MM / DD / YYYY 06 / 30 / 2012 Transaction ID : PR2492181927950
Mailing Address 9070 Pittsburgh Blvd		Amount of Each Receipt this Period 300.00
City Fort Myers	State FL	Zip Code 33967-7205
FEC ID number of contributing federal political committee.	C	
Name of Employer 21st Century Oncology Management, Inc	Occupation Director of Ancillary Services	P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) C. Jonathan D. Weinbach		Date of Receipt MM / DD / YYYY 06 / 30 / 2012 Transaction ID : PR2492182027950
Mailing Address 210 W 19th St Apt 2 J		Amount of Each Receipt this Period 120.00
City New York	State NY	Zip Code 10011-4067
FEC ID number of contributing federal political committee.	C	
Name of Employer New York Management	Occupation Dir Referrals, Marketing & Network Dev	P/R Deduction (\$20.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional).....▶	540.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

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NAME OF COMMITTEE (In Full)
Radiation Therapy Services, Inc Political Action Committee

A. Rie Alhara
 Full Name (Last, First, Middle Initial)
 Mailing Address 14270 Royal Harbor
 City State Zip Code
 Fort Myers FL 33908-6503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 21st Century Oncology, Inc Medical Doctor
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2012
Transaction ID : PR2497582227950
 Amount of Each Receipt this Period
 300.00
 P/R Deduction (\$50.00 Bi-Weekly)

B.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	14852.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Radiation Therapy Services, Inc Political Action Committee

Full Name (Last, First, Middle Initial)

A. Senate Conservatives Fund

Mailing Address 228 S. Washington Street
Unit 115

City Washington State DC Zip Code 22314

Purpose of Disbursement
Contribution

011

Candidate Name

Senate Conservatives Fund

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 19 / 2012

Transaction ID : 34706418

Amount of Each Disbursement this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

B. George Allen For Us Senate

Mailing Address 2819 North Parham Road
Suite 210

City Richmond State VA Zip Code 23294

Purpose of Disbursement
Contribution

011

Candidate Name

Mr. George Allen

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: VA District:

Date of Disbursement

MM / DD / YYYY
04 / 19 / 2012

Transaction ID : 34706425

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Pete King For Congress Committee

Mailing Address PO Box 1428

City Seaford State NY Zip Code 11783

Purpose of Disbursement

011

Candidate Name

Rep. Peter King

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NY District: 03

Date of Disbursement

MM / DD / YYYY
04 / 27 / 2012

Transaction ID : 34706426

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

6000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Radiation Therapy Services, Inc Political Action Committee

Full Name (Last, First, Middle Initial)

A. Carper For Senate

Mailing Address PO Box 2882

City Wilmington State DE Zip Code 19805

Purpose of Disbursement Contribution

011

Candidate Name

Sen. Thomas Carper

Category/Type

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify) ▼

State: DE District:

Date of Disbursement

MM / DD / YYYY
05 / 14 / 2012

Transaction ID : 34788167

Amount of Each Disbursement this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Majority Committee PAC

Mailing Address P.O. Box 10134

City Bakersfield State CA Zip Code 93389

Purpose of Disbursement Contribution

011

Candidate Name

Majority Committee PAC

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 14 / 2012

Transaction ID : 34788507

Amount of Each Disbursement this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Becerra For Congress

Mailing Address P.O. Box 261060

City Los Angeles State CA Zip Code 90026

Purpose of Disbursement Contribution

011

Candidate Name

Rep. Xavier Becerra

Category/Type

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify) ▼

State: CA District: 31

Date of Disbursement

MM / DD / YYYY
06 / 25 / 2012

Transaction ID : 34971064

Amount of Each Disbursement this Period

1000.00

Contribution

SUBTOTAL of Disbursements This Page (optional)..... ▶

11000.00

TOTAL This Period (last page this line number only)..... ▶

17000.00