

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
MedAssets, Inc. Political Action Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		27844.52
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	4080.30									
(c) Total Receipts (from Line 19)	23700.00	23700.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	27780.30	51544.52								
7. Total Disbursements (from Line 31)	5579.54	29343.76								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	22200.76	22200.76								
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									

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
MedAssets, Inc. Political Action Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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)	23550.00	23550.00
(ii) Unitemized	150.00	150.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	23700.00	23700.00
(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)	23700.00	23700.00
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 Transfer (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))	23700.00	23700.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	23700.00	23700.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(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.....	79.54	193.76
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	79.54	193.76
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5500.00	29150.00
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
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) 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))..	5579.54	29343.76
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5579.54	29343.76

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	23700.00	23700.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	23700.00	23700.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	79.54	193.76
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	79.54	193.76

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 17
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
MedAssets, Inc. Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Jonathan H Glenn</p> <p>Mailing Address 100 North Point Center East Suite 200</p> <p>City State Zip Code Alpharetta GA 30022-1506</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation MedAssets, Inc. Chief Legal and Administrative Officer</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 2000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 07 / 20 / 2010</p> <p>Transaction ID: 946043</p> <p>Amount of Each Receipt this Period 2000.00</p> <p>Contribution</p>
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<p>B. Full Name (Last, First, Middle Initial) Charles O Garner, III</p> <p>Mailing Address 100 North Point Center East Suite 200</p> <p>City State Zip Code Alpharetta GA 30022-1506</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation MedAssets, Inc. Senior Vice President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 07 / 21 / 2010</p> <p>Transaction ID: 946044</p> <p>Amount of Each Receipt this Period 500.00</p> <p>Contribution</p>
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<p>C. Full Name (Last, First, Middle Initial) Kathleen C Banks</p> <p>Mailing Address 100 North Point Center East Suite 200</p> <p>City State Zip Code Alpharetta GA 30022-1506</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation MedAssets, Inc. President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 07 / 21 / 2010</p> <p>Transaction ID: 946045</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Contribution</p>
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SUBTOTAL of Receipts This Page (optional)	3500.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 7 / 17
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
MedAssets, Inc. Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Ned R Lehman</p> <p>Mailing Address 100 North Point Center East Suite 200</p> <p>City State Zip Code Alpharetta GA 30022-8261</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation MedAssets, Inc. Vice President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 07 / 26 / 2010</p> <p>Transaction ID: 946046</p> <p>Amount of Each Receipt this Period 250.00</p> <p>Contribution</p>
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<p>B. Full Name (Last, First, Middle Initial) Tom V Pham</p> <p>Mailing Address 100 North Point Center East Suite 200</p> <p>City State Zip Code Alpharetta GA 30022-8261</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation MedAssets, Inc. Senior Vice President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 07 / 26 / 2010</p> <p>Transaction ID: 946047</p> <p>Amount of Each Receipt this Period 500.00</p> <p>Contribution</p>
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<p>C. Full Name (Last, First, Middle Initial) Cosmo A Piccolo</p> <p>Mailing Address 100 North Point Center East Suite 200</p> <p>City State Zip Code Alpharetta GA 30022-1506</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation MedAssets, Inc. Director</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 2000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 07 / 26 / 2010</p> <p>Transaction ID: 946048</p> <p>Amount of Each Receipt this Period 2000.00</p> <p>Contribution</p>
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SUBTOTAL of Receipts This Page (optional)	2750.00
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 / 17
	<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)
MedAssets, Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Rand A Ballard	Date of Receipt MM / DD / YYYY 07 / 27 / 2010
	Mailing Address 100 North Point Center East Suite 200	Transaction ID: 946049
	City State Zip Code Alpharetta GA 30022-1506	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation MedAssets, Inc. Chief Operating Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		

B.	Full Name (Last, First, Middle Initial) Mark B Miriani	Date of Receipt MM / DD / YYYY 07 / 27 / 2010
	Mailing Address 100 North Point Center East Suite 200	Transaction ID: 946050
	City State Zip Code Alpharetta GA 30022-1506	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation MedAssets, Inc. President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		

C.	Full Name (Last, First, Middle Initial) Laura A McMillan	Date of Receipt MM / DD / YYYY 07 / 27 / 2010
	Mailing Address 100 North Point Center East Suite 200	Transaction ID: 946051
	City State Zip Code Alpharetta GA 30022-8261	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Occupation MedAssets, Inc. Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional)	3250.00
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 / 17
	<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)
MedAssets, Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Terrence J Mulligan	Date of Receipt MM / DD / YYYY 07 / 28 / 2010
	Mailing Address 100 North Point Center East Suite 200	Transaction ID: 946052
	City State Zip Code Alpharetta GA 30022-1506	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer MedAssets, Inc. Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

B.	Full Name (Last, First, Middle Initial) Ronald A Hartmann	Date of Receipt MM / DD / YYYY 08 / 02 / 2010
	Mailing Address 100 North Point Center East Suite 200	Transaction ID: 946053
	City State Zip Code Alpharetta GA 30022-1506	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer MedAssets, Inc. Occupation Senior Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Thomas J Lafferty	Date of Receipt MM / DD / YYYY 08 / 04 / 2010
	Mailing Address 100 North Point Center East Suite 200	Transaction ID: 946054
	City State Zip Code Alpharetta GA 30022-1506	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer MedAssets, Inc. Occupation Senior Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)
MedAssets, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Sandra W Green

Mailing Address 100 North Point Center East
Suite 200

City State Zip Code
Alpharetta GA 30022-8261

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

Name of Employer Occupation
MedAssets, Inc. President

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 05 / 2010

Transaction ID: 946055

Amount of Each Receipt this Period
500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Kenneth J Thomson

Mailing Address 100 North Point Center East
Suite 200

City State Zip Code
Alpharetta GA 30022-8261

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

Name of Employer Occupation
MedAssets, Inc. Senior Vice President

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 09 / 2010

Transaction ID: 946056

Amount of Each Receipt this Period
500.00

Contribution

C. Full Name (Last, First, Middle Initial)
Gilbert G D'Andria

Mailing Address 100 North Point Center East
Suite 200

City State Zip Code
Alpharetta GA 30022-8261

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

Name of Employer Occupation
MedAssets, Inc. Vice President

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 12 / 2010

Transaction ID: 946057

Amount of Each Receipt this Period
500.00

Contribution

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: PAGE 11 / 17
(check only one)

<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)
MedAssets, Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial) James L Hersma		Date of Receipt MM / DD / YYYY 08 / 16 / 2010
Mailing Address 100 North Point Center East Suite 200		Transaction ID: 946058
City Alpharetta	State GA	Zip Code 30022-1506
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer MedAssets, Inc.	Occupation Senior Vice President	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.

Full Name (Last, First, Middle Initial) Nicholas J Sears		Date of Receipt MM / DD / YYYY 08 / 16 / 2010
Mailing Address 100 North Point Center East Suite 200		Transaction ID: 946060
City Alpharetta	State GA	Zip Code 30022-8261
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer MedAssets, Inc.	Occupation Chief Medical Officer	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.

Full Name (Last, First, Middle Initial) Vernon R Loucks, Jr		Date of Receipt MM / DD / YYYY 08 / 18 / 2010
Mailing Address 100 North Point Center East Suite 200		Transaction ID: 946061
City Alpharetta	State GA	Zip Code 30022-1506
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer MedAssets, Inc.	Occupation Director	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	3500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 17
(check only one)

<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)
MedAssets, Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial) Ann S Pentz		Date of Receipt MM / DD / YYYY 08 / 20 / 2010
Mailing Address 100 North Point Center East Suite 200		Transaction ID: 946062
City Alpharetta	State GA	Zip Code 30022-8261
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer MedAssets, Inc.	Occupation Vice President	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.

Full Name (Last, First, Middle Initial) Andrea J Fish		Date of Receipt MM / DD / YYYY 08 / 31 / 2010
Mailing Address 100 North Point Center East Suite 200		Transaction ID: 946063
City Alpharetta	State GA	Zip Code 30022-8261
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer MedAssets, Inc.	Occupation Vice President	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.

Full Name (Last, First, Middle Initial) Amy M Sebero		Date of Receipt MM / DD / YYYY 09 / 24 / 2010
Mailing Address 100 North Point Center East Suite 200		Transaction ID: 946064
City Alpharetta	State GA	Zip Code 30022-1506
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer MedAssets, Inc.	Occupation Senior Vice President	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1300.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)
MedAssets, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Maureen A Gender

Mailing Address 100 North Point Center East
Suite 200

City State Zip Code
Alpharetta GA 30022-1506

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

Name of Employer MedAssets, Inc. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: 946065
Amount of Each Receipt this Period: 500.00
Contribution

B. Full Name (Last, First, Middle Initial)
Scott L Shamblin

Mailing Address 100 North Point Center East
Suite 200

City State Zip Code
Alpharetta GA 30022-8261

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

Name of Employer MedAssets, Inc. Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 07 / 29 / 2010
Transaction ID: 946066
Amount of Each Receipt this Period: 500.00
Contribution

C. Full Name (Last, First, Middle Initial)
Christine J Koh

Mailing Address 100 North Point Center East
Suite 200

City State Zip Code
Alpharetta GA 30022-8261

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

Name of Employer MedAssets, Inc. Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 08 / 04 / 2010
Transaction ID: 946068
Amount of Each Receipt this Period: 500.00
Contribution

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: PAGE 14 / 17
(check only one)

<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)
MedAssets, Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Jeremy D Thompson

Mailing Address 100 North Point Center East
Suite 200

City State Zip Code
Alpharetta GA 30022-8261

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

Name of Employer Occupation
MedAssets, Inc. Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
08 / 16 / 2010

Transaction ID: 946069

Amount of Each Receipt this Period
250.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Costa J Alvanos

Mailing Address 100 North Point Center East
Suite 200

City State Zip Code
Alpharetta GA 30022-8261

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

Name of Employer Occupation
MedAssets, Inc. Senior Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2010

Transaction ID: 946070

Amount of Each Receipt this Period
500.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Harris Hyman

Mailing Address 100 North Point Center East
Suite 200

City State Zip Code
Alpharetta GA 30022-8261

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

Name of Employer Occupation
MedAssets, Inc. Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2010

Transaction ID: 946071

Amount of Each Receipt this Period
2000.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 2750.00

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 15 / 17
(check only one)

<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)
MedAssets, Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Paul S Stinson

Mailing Address 100 North Point Center East
Suite 200

City State Zip Code
Alpharetta GA 30022-8261

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

Name of Employer Occupation
MedAssets, Inc. Senior Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 25 / 2010

Transaction ID: 946072

Amount of Each Receipt this Period
500.00

Contribution

SUBTOTAL of Receipts This Page (optional)	▶	500.00
TOTAL This Period (last page this line number only)	▶	23550.00

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)
MedAssets, Inc. Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Montanans For Tester</p> <p>Mailing Address PO Box 1135</p> <p>City Helena State MT Zip Code 59624</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Sen. Jon Tester</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District:</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 946073 Date of Disbursement 07 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contribution</p>
<p>B. Full Name (Last, First, Middle Initial) Udall For Colorado</p> <p>Mailing Address PO Box 40158</p> <p>City Denver State CO Zip Code 80204</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Sen. Mark Udall</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District:</p> <p>Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 946075 Date of Disbursement 07 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contribution</p>
<p>C. Full Name (Last, First, Middle Initial) Price For Congress</p> <p>Mailing Address P.O. Box 425</p> <p>City Roswell State GA Zip Code 30077</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Thomas Price, M.D.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 06</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 946077 Date of Disbursement 08 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contribution</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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)
MedAssets, Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Citizens For Harkin Mailing Address P O Box 811 City Des Moines State IA Zip Code 50304 Purpose of Disbursement Contribution Candidate Name Sen. Tom Harkin Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 946078 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 6 / 2 0 1 0	Amount of Each Disbursement this Period 1000.00 Contribution
B.	Full Name (Last, First, Middle Initial) Crowley For Congress Mailing Address 84-56 Grand Avenue City Elmhurst State NY Zip Code 11373 Purpose of Disbursement Contribution Candidate Name Rep. Joseph Crowley Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 07 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 946079 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 6 / 2 0 1 0	Amount of Each Disbursement this Period 1000.00 Contribution
C.	Full Name (Last, First, Middle Initial) Team Emerson For Jo Ann Emerson Mailing Address P.O. Box 822 400 Broadway, Suite 501 City Cape Girardeau State MO Zip Code 63702 Purpose of Disbursement Contribution Candidate Name Rep. Jo Ann Emerson Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 08 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 946132 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 1 0	Amount of Each Disbursement this Period 500.00 Contribution

SUBTOTAL of Disbursements This Page (optional)		2500.00	
TOTAL This Period (last page this line number only)		5500.00	