Image# 12971414161			_	PAGE 1 / 43
	EPORT OF R ND DISBURS Other Than An Author	EMENTS		
1. NAME OF TYP	E OR PRINT ▼	Example: If typing, type		se Only
COMMITTEE (in full)		over the lines.	12FE4M5	_
FIRST COLONIES ANES				TTEE
ADDRESS (number and street)	490 New Technology Way			
Check if different				
then providually	Frederick		MD 21703	3
2. FEC IDENTIFICATION NUMB			STATE 🔺	ZIP CODE
C C00416305	3. IS T REP		AMENDED (A)	
(Choose One)	(b) Monthly Report Due On: Mar 20			Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election
(a) Quarterly Reports:	Apr 20	(M4) Jul 20 (M7	) Oct 20 (M10)	Year Only)
April 15 Quarterly Report (Q1)	(c) 12-Day	Primary (12P)	General (12G)	Runoff (12R)
July 15 Quarterly Report (Q2)	PRE-Election Report for the:			
October 15 Quarterly Report (Q3) January 31		M M / D D	/ Y Y Y Y Y Y	in the
Year-End Report (YE)	Election o	n <b></b>		State of
Report (Non-election Year Only) (MY)	(d) 30-Day <b>POST</b> -Election Report for the:	General (30G)	Runoff (30R)	Special (30S)
Termination Report (TER)	Election o	n / D D		in the State of
5. Covering Period	01 / Y Y Y Y Y 01 2011	through 12	M / D D / Y Y 31 20	11 Y
I certify that I have examined this R	eport and to the best of my	knowledge and belief it is	true, correct and comple	te.
Type or Print Name of Treasurer	Dr. Jeremy Roth			
Signature of Treasurer	y Roth	[Electronically Filed]	Date 07 / 13	2012
NOTE: Submission of false, erroneous	, or incomplete information m	ay subject the person signing	g this Report to the penalt	ies of 2 U.S.C. §437g.
Office Use Only				<b>FORM 3X</b> Rev. 12/2004

07/13/2012 13 : 55

#### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

### FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE

R	eport Covering the Period: From:	M / D D / Y Y Y Y D 01 / 2011 To	: 12 / D D / Y Y Y Y 12 31 2011
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2011		73226.83
	(b) Cash on Hand at Beginning of Reporting Period	81798.81	
	(c) Total Receipts (from Line 19)	18220.00	53710.00
	<ul> <li>(d) Subtotal (add Lines 6(b) and</li> <li>6(c) for Column A and Lines</li> <li>6(a) and 6(c) for Column B)</li> </ul>	100018.81	126936.83
7.	Total Disbursements (from Line 31)	9873.06	36791.08
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	90145.75	90145.75
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed <b>BY</b> 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

DETAILED	SUMMARY	PAGE

of Receipts

Page 3

Write or Type Committee Name

Image# 12971414163

### FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
I. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	18020.00	42800.00
(i) Itemized (use Schedule A)	7	7 7
(ii) Unitermined	200.00	10910.00
(ii) Unitemized	200.00	10910.00
(iii) TOTAL (add	18220.00	53710.00
Lines 11(a)(i) and (ii)	10220.00	
(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)	18220.00	53710.00
2. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
,	7 7	
3. All Loans Received	0.00	0.00
4. Loan Repayments Received	0.00	0.00
5. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
6. Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	0.00	0.00
7. Other Federal Receipts	7 7	
(Dividends, Interest, etc.)	0.00	0.00
3. 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
9. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c)) ►	18220.00	53710.00
	7	7 7 7
D. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	18220.00	53710.00

### DETAILED SUMMARY PAGE

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.0
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.0
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))►	0.00	0.0
Transfers to Affiliated/Other Party Committees	0.00	0.0
Contributions to Federal Candidates/Committees and Other Political Committees		
and Other Political Committees	5775.00	17025.00
(use Schedule E) Coordinated Party Expenditures	0.00	0.0
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.0
(c) Other Political Committees (such as PACs)	0.00	0.0
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))►	0.00	0.00
Other Disbursements	4098.06	19766.08
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	0.0
<ul> <li>(c) Total Federal Election Activity (add</li> <li>Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶</li> </ul>	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	9873.06	36791.0
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	9873.06	36791.08

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### DETAILED SUMMARY PAGE

of Disbursements

II. Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Total Contributions (other than loans) (from Line 11(d), page 3)	18220.00	53710.00
. Total Contribution Refunds (from Line 28(d))	0.00	0.00
. Net Contributions (other than loans) (subtract Line 34 from Line 33)	18220.00	53710.00
Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))►	0.00	0.00
Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
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)

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•••			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements mana and a	ay not be sold or used by any pe ddress of any political committee	rson for the purpose of soliciting contributions				
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESI	A ASSO	CIATES LLC POLITIC	AL ACTION COMMITTEE				
Α.	Full Name (Last, First, Middle Initial) Dr. Maksim Barkinskiy			Date of Receipt				
	Mailing Address 4170 Bethesda Ave. #719	Ctoto	Zin Codo	12 31 2011				
	City Bethesda	State MD	Zip Code 20814	Transaction ID : SA11AI.5981 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		200.00				
	Name of Employer First Colonies Anesthesia Asso	Occupation physician	1	<ul> <li>Payroll deduction</li> </ul>				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00					
в.	Full Name (Last, First, Middle Initial) Dr. Marc Beck			Date of Receipt				
	Mailing Address 16 Norris Run Court	12 31 2011						
	City Reisterstown	State MD	Zip Code 21136	Transaction ID : SA11AI.5952 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		200.00				
	Name of Employer First Colonies Anesthesia	Occupation Physician	1	Payroll deduction				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00					
<u>с</u> .	Full Name (Last, First, Middle Initial) Dr. Jeffrey Briggs			Date of Receipt				
	Mailing Address 14952 Finegan Farm Rd.	12 31 / Y Y Y Y 12 12 11						
	City Germantown	State MD	Zip Code 20874	Transaction ID : SA11AI.5927           Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		200.00				
	Name of Employer	Occupation	I	Payroll deduction				
	First Colonies Anesthesia Asso Receipt For:	physician		_				
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 400.00					
s	UBTOTAL of Receipts This Page (optional)		•	600.00				

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

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
	ny information copied from such Reports and S for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSO	CIATES LLC POLITIC	AL ACTION COMMITTEE
Α.	Full Name (Last, First, Middle Initial) Dr. John Bunker	Date of Receipt		
	Mailing Address 15229 National Pike			12 31 2011
	City Hagerstown	State MD	Zip Code 21740	Transaction ID : SA11AI.5904           Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		200.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	1	Payroll deduction
	Receipt For:         Primary       General         Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	
в.	Full Name (Last, First, Middle Initial) Dr. Rachel Cappuccino Mailing Address 2811 Sommersby Rd.	Date of Receipt		
	City Mt. Airy	State MD	Zip Code 21771	12       31       2011         Transaction ID : SA11AI.5891         Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	100.00	
	Name of Employer First Colonies Anestheisa Asso	Occupation Physician	1	Payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	
с.	Full Name (Last, First, Middle Initial) Dr. Donald Charney			Date of Receipt
	Mailing Address 3707 Meadowhill Court	M M / D D / Y Y Y Y Y 12 31 2011		
	City Phoenix	State MD	Zip Code 21131	Transaction ID : SA11AI.5953 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		200.00
	Name of Employer	Occupation	1	Payroll deduction
	First Colonies Anesthesia	Physician		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	
F	<b>SUBTOTAL</b> of Receipts This Page (optional)			500.00

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17			
	ny information copied from such Reports and S for commercial purposes, other than using the						
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	AL ACTION COMMITTEE					
Α.	Full Name (Last, First, Middle Initial) Dr. Stayam Chary	Date of Receipt					
	Mailing Address 9 Alterwood Lane	M M / D D / Y Y Y Y 12 31 _ 2011 _					
	City Owings Mill	State MD	Zip Code 21117	Transaction ID : SA11AI.5955 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		200.00			
	Name of Employer First Colonies Anesthesia	Occupation Physician	1	<ul> <li>Payroll deduction</li> </ul>			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00				
в.	Full Name (Last, First, Middle Initial) Dr. Thomas Chau	Date of Receipt					
	Mailing Address 7204 Loch Edin Court	M M / D D / Y Y Y Y Y 12 31 2011					
	City Potomac	State MD	Transaction D . SATTAL.32				
	FEC ID number of contributing federal political committee.		200.00				
	Name of Employer First Colonies Anesthesia	Occupation Physician	1	<ul> <li>Payroll deduction</li> </ul>			
	Receipt For:         Primary       General         Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00				
<u>с</u> .	Full Name (Last, First, Middle Initial) Dr. Dwayn Chen			Date of Receipt			
	Mailing Address 11415 Commonwealth Drive #204	12 31 Y Y Y Y 12 31 2011					
	City Rockville	State MD	Zip Code 20852	Transaction ID : SA11AI.5931           Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		200.00			
	Name of Employer	Occupation	1	Payroll deduction			
	First Colonies Anesthesia	Physician					
	Receipt For:         Primary       General         Other (specify) ▼	Primary General Aggregate real-to-Date V					
⊢	UBTOTAL of Receipts This Page (optional)			600.00			

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17			
	ny information copied from such Reports and S for commercial purposes, other than using the			rson for the purpose of soliciting contributions			
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSO	CIATES LLC POLITIC	AL ACTION COMMITTEE			
Α.	Full Name (Last, First, Middle Initial) Dr. Edward Chen			Date of Receipt			
	Mailing Address 10209 Fleming Avenue	12 31 2011					
	City	Transaction ID : SA11AI.5929					
	Bethesda	MD	20814	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		200.00			
	Name of Employer	Occupation		Payroll deduction			
	First Colonies Anesthesia	Physician					
	Receipt For:	Aggregate	Year-to-Date 🔻				
	Primary General Other (specify) ▼		600.00				
В.	Full Name (Last, First, Middle Initial) Dr. Jen Chen			Date of Receipt			
	Mailing Address 1104 Mill Ridge Road	12 31 2011					
	City	State	Zip Code	Transaction ID : SA11AI.5930			
	McLean	VA	22102	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		200.00			
	Name of Employer First Colonies Anesthesia	Occupation Physician		<ul> <li>Payroll deduction</li> </ul>			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00				
<u>с</u> .	Full Name (Last, First, Middle Initial) Dr. William Chester			Date of Receipt			
	Mailing Address 5801 Nicholon Lane #1915	M M / D D / Y Y Y Y 12 31 2011					
	City North Bethesda	State MD	Zip Code 20852	Transaction ID : SA11AI.5932 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		Payroll deduction			
	Name of Employer	Name of Employer Occupation					
	First Colonies Anesthesia	Physician					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00				
	<b>CUBTOTAL</b> of Receipts This Page (optional)		· ·	600.00			

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

Use separate schedule(s) for each category of the

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
	ny information copied from such Reports and S for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSO	CIATES LLC POLITICA	AL ACTION COMMITTEE
Α.	Full Name (Last, First, Middle Initial) Dr. Lincoln Coore Mailing Address 4846 Lee Hollow Place			Date of Receipt
	City	State	Zip Code	12 31 2011 Transaction ID : SA11AI.5956
	Ellicott City FEC ID number of contributing	MD C	21043	Amount of Each Receipt this Period
	federal political committee. Name of Employer	Occupation		Payroll deduction
	First Colonies Anesthsia Receipt For:	Physician	Year-to-Date ▼	_
	Primary General Other (specify) ▼		900.00	
в.	Full Name (Last, First, Middle Initial) Dr. Melvin Coursey	Date of Receipt		
	Mailing Address 18720 Shremor Drive	12 31 2011		
	City Derwood	State MD	Zip Code 20855	Transaction ID : SA11AI.5933 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		200.00
	Name of Employer First Colonies Anesthesia	Occupation Physician		Payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	
с.	Full Name (Last, First, Middle Initial) Dr. Lauren Deloach			Date of Receipt
	Mailing Address 15114 Pepperridge Drive	12 31 / Y Y Y Y 12 31 2011		
	City Bowie	State MD	Zip Code 20721	Transaction ID : SA11AI.5893 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		200.00 Payroll deduction
	Name of Employer	Occupation		
	First Colonies Anesthesia Receipt For:	Physician Aggregate	Year-to-Date ▼	_
	Primary General Other (specify)		600.00	
s	UBTOTAL of Receipts This Page (optional)		▶	700.00
ד	<b>'OTAL</b> This Period (last page this line number			

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
	ny information copied from such Reports and S for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSC	CIATES LLC POLITIC	AL ACTION COMMITTEE
A.		Date of Receipt		
	Mailing Address 17136 Wesley Chapel Rd.	State	Zip Code	12 31 2011 Transaction ID : SA11AI.5894
	Monkton	MD	21111	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		100.00
	Name of Employer	Occupation	l	Payroll deduction
	First Colonies Anesthesia Asso Receipt For:	Physician		_
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	
В.	Full Name (Last, First, Middle Initial) Dr. Danielle Dugan	Date of Receipt		
	Mailing Address 104 Ellingwood Lane	12 31 _2011 _		
	City Frederick	State MD	Zip Code 21702	Transaction ID : SA11AI.5907 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		200.00	
	Name of Employer First Colonies Anesthesia	Occupation Physician	1	Payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 360.00	
<u>с</u> .	Full Name (Last, First, Middle Initial) Dr. Karen Dugan			Date of Receipt
	Mailing Address 4107 Vickie Lynn Court	M = M / D = D / Y = Y = Y = Y 12 31 2011		
	City Mt. Airy	State MD	Zip Code 21771	Transaction ID : SA11AI.5905 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		80.00
	Name of Employer	Occupation	1	Payroll deduction
	First Colonies Anesthsia	Physician		
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 480.00	
F	GUBTOTAL of Receipts This Page (optional)			380.00

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17			
	y information copied from such Reports and S for commercial purposes, other than using the						
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSO	CIATES LLC POLITIC	AL ACTION COMMITTEE			
Α.	Full Name (Last, First, Middle Initial)         Dr. Ali Ememhosseini         Mailing Address 306 Prettyman Dr.	Ememhosseini					
	Apt. 8409	12 31 2011					
	City	State	Zip Code	Transaction ID : SA11AI.5934			
	Rockville	MD	20850	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		200.00			
	Name of Employer	Occupation	1	Payroll deduction			
	First Colonies Anesthesia Asso	Physician					
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General	33 - 3					
	Other (specify)	L	600.00				
в.	Full Name (Last, First, Middle Initial) Dr. Todd Epstein	Date of Receipt					
	Mailing Address 11305 Struttman Terrace	12 31 2011					
	City	State	Zip Code	Transaction ID : SA11AI.5968			
	North Bethesda	MD	20852	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		200.00			
	Name of Employer	Occupation	I	Payroll deduction			
	First Colonies Anesthesia	Physician					
	Receipt For:	Aggregate	Year-to-Date ▼				
	Primary General	, .gg. oguto					
	Other (specify)	L	600.00				
с.	Full Name (Last, First, Middle Initial) Dr. Richard Evans	Date of Receipt					
	Mailing Address 6436 West Langley Lane	12 31 2011					
	City	State	Zip Code	Transaction ID : SA11AI.5982			
	McLean	VA	22101	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		200.00			
	Name of Employer	Occupation	I	Payroll deduction			
	First Colonies Anesthesia Asso	physician					
	Receipt For:	Agareaate	Year-to-Date ▼	—			
	Primary General	33 94.0					
	Other (specify) ▼	L	600.00	600.00			
s	UBTOTAL of Receipts This Page (optional)			600.00			

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

FOR LINE NUMBER:

(check only one)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17	
	y information copied from such Reports and S for commercial purposes, other than using the				
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	AL ACTION COMMITTEE			
Α.		Date of Receipt			
	Mailing Address 4107 Vickie Lynn Court	State	Zip Code	12 31 2011	
	Mt. Airy	MD	21771	Transaction ID : SA11AI.5908         Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		120.00	
	Name of Employer	Occupation	l	<ul> <li>Payroll deduction</li> </ul>	
	First Colonies Anesthesia Receipt For:	Physician		_	
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 360.00		
в.	Full Name (Last, First, Middle Initial) Ronald Flax	Date of Receipt			
	Mailing Address 3715 Birchmere Ct.	12 31 2011			
	City Owings Mills	State MD	Zip Code 21117	Transaction ID : SA11AI.5958 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		100.00	
	Name of Employer First Colonies Anesthesia	Occupation Physician		Payroll deductin	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00		
с.	Full Name (Last, First, Middle Initial) Dr. Tamara Gabrielli	Date of Receipt			
	Mailing Address 504 Reserve Champion Drive	12 31 2011			
	City Rockvillem	State MD	Zip Code 20850	Transaction ID : SA11AI.5909 Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		200.00	
	Name of Employer	Occupation	1	Payroll deduction	
	First Colonies Anesthesia	Physician		_	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 600.00		
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			420.00	

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

Use separate schedule(s) for each category of the

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(check only one)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         16	17
	ny information copied from such Reports and S for commercial purposes, other than using the				s
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSO	CIATES LLC POLITIC	AL ACTION COMMITTEE	
Α.	Full Name (Last, First, Middle Initial) Thomas Gambon	Date of Receipt			
	Mailing Address 7700 Charleston Dr.	12 31 2011			
	City Bethesda	State MD	Zip Code 20817	Transaction ID : SA11AI.5910 Amount of Each Receipt this Period	-
	FEC ID number of contributing federal political committee.	С		200.00	
	Name of Employer First Colonies Anesthesia Asso	Occupation physician	1	Payroll deduction	
	Receipt For:         Primary       General         Other (specify) ▼				
в.	Full Name (Last, First, Middle Initial) Dr. James Glass	Date of Receipt			
	Mailing Address 1441 Rhode Island Ave., N.W. #410	12 31 2011			
	City Washington	State DC	Zip Code 20005	Transaction ID : SA11AI.5983           Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	200.00			
	Name of Employer First Colonies Anesthesia Asso	1	Payroll deduction		
	Receipt For: Primary General Other (specify) ▼				
<u>с</u> .	Full Name (Last, First, Middle Initial) Dr. Steven Grube			Date of Receipt	
	Mailing Address 13895 Foxtower Road	M M / D D / Y Y Y Y Y 12 31 2011			
	City Thurmont	State MD	Zip Code 21788	Transaction ID : SA11AI.5911           Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С			
	Name of Employer	Occupation	1	Payroll deduction	
	First Colonies Anesthesia Receipt For:	Physician			
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 600.00		
F	UBTOTAL of Receipts This Page (optional)			600.00	

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

Use separate schedule(s) for each category of the

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(check only one)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
	ny information copied from such Reports and S for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSC	CIATES LLC POLITIC	AL ACTION COMMITTEE
Α.	Full Name (Last, First, Middle Initial) Dr. Keith Hairston Mailing Address 12312 Highstakes Drive			Date of Receipt
	City Reisterstown	State MD	Zip Code 21136	12     31     2011       Transaction ID : SA11AI.5959       Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		200.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	1	Payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	
В.	Full Name (Last, First, Middle Initial) Dr. John Hanna Mailing Address 9310 Leigh Mill Ct.	Date of Receipt		
	City Great Falls	State VA	Zip Code 22066	12     31     2011       Transaction ID : SA11AI.5969       Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		200.00
	Name of Employer First Colonies Anesthesia Asso	Occupation physician	1	Payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 400.00	
с.	Full Name (Last, First, Middle Initial) Dr. Glen Hessinger	Date of Receipt		
	Mailing Address 8101 Ruston Crossing Road	12 31 2011 Transaction ID : SA11AI.5960		
	Towson	State MD	Zip Code 21204	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		200.00
	Name of Employer	Occupation	1	Payroll deduction
	First Colonies Anesthesia Receipt For:	Physician		_
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 600.00	
5	<b>UBTOTAL</b> of Receipts This Page (optional)		•••••	600.00
1	TOTAL This Period (last page this line number	only)	••••••	

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

Use separate schedule(s) for each category of the

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(check only one)

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
	y information copied from such Reports and S for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSO	CIATES LLC POLITIC	AL ACTION COMMITTEE
Α.	Full Name (Last, First, Middle Initial) Dr. Jean-Max Hogarth Mailing Address 1614 Randallwood Court			Date of Receipt
	City Jarretsville	State MD	Zip Code 21084	Transaction ID : SA11AI.5961 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		200.00
	Name of Employer First Colonies Anesthesia	Occupation Physician		Payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	
в.	Full Name (Last, First, Middle Initial) Dr. Sung Hong	Date of Receipt		
	Mailing Address 8525 Huntspring Drive	12 31 2011		
	Lutherville	State MD	Zip Code 21093	Transaction ID : SA11AI.5895 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		200.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	1	Payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	
с.	Full Name (Last, First, Middle Initial) Dr. Steven Hopper			Date of Receipt
	Mailing Address 4550 N. Park Avenue #101	M = M / D = D / Y = Y = Y = Y 12 31 2011		
	City Chevy Chase	State MD	Zip Code 20815	Transaction ID : SA11AI.5970           Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		200.00
	Name of Employer	Occupation	l	Payroll deduction
	First Colonies Anesthesia Receipt For:	Physician		_
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	
s	UBTOTAL of Receipts This Page (optional)		•	600.00

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

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

Use separate schedule(s) for each category of the

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		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHI	ESIA ASSC	CIATES LLC POLITIC	CAL ACTION COMMITTEE
Full Name (Last, First, Middle Initial)         Dr. Stuart Hough         Mailing Address 9110 Travener Circle         City         Frederick         FEC ID number of contributing federal political committee.         Name of Employer         First Colonies Anesthesia         Receipt For:         Primary       General         Other (specify) ▼	State MD C Occupation Physician Aggregate	Zip Code 21704 Year-to-Date ▼ 900.00	Date of Receipt 12 31 2011 Transaction ID : SA11AI.5935 Amount of Each Receipt this Period 300.00 Payroll deduction
Full Name (Last, First, Middle Initial)         B. Dr. Sean Isaac         Mailing Address 920 Newington Ave.         City         Baltimore         FEC ID number of contributing federal political committee.         Name of Employer         First Colonies Anesthesia Asso         Receipt For:         Primary       General         Other (specify) ▼	State MD C Occupation physician Aggregate	Zip Code 21217 Year-to-Date ▼ 600.00	Date of Receipt 12 31 2011 Transaction ID : SA11AI.5962 Amount of Each Receipt this Period 200.00 Payroll deduction
Full Name (Last, First, Middle Initial)         Dr. Supriya Jagannath         Mailing Address       6260 Glen Vally Terrace         Unit G         City         Frederick         FEC ID number of contributing         federal political committee.         Name of Employer         First Colonies Anesthesia Asso         Receipt For:         Primary       General         Other (specify) ▼	State MD C Occupation physician Aggregate	Zip Code 21701 Year-to-Date ▼ 300.00	Date of Receipt 12 31 2011 Transaction ID : SA11AI.5912 Amount of Each Receipt this Period 100.00 Payroll deduction
SUBTOTAL of Receipts This Page (optional)	)		600.00

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

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

Use separate schedule(s) for each category of the

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17		
	ny information copied from such Reports and S for commercial purposes, other than using the					
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSC	CIATES LLC POLITIC	AL ACTION COMMITTEE		
Α.	Full Name (Last, First, Middle Initial) Dr. David Johnson Mailing Address 5506 Bootjack Drive	Date of Receipt				
	City	State	Zip Code	12 31 2011 Transaction ID : SA11AI.5913		
	Frederick FEC ID number of contributing federal political committee.	MD C	21702	Amount of Each Receipt this Period		
	Name of Employer First Colonies Anesthesia	Occupation Physician	1	- Payroll deduction		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00			
В.	Full Name (Last, First, Middle Initial) Dr. James Kaufman Mailing Address 7514 Arrowwood Road	Date of Receipt				
	City Bethesda	State MD	Zip Code 20817	12     31     2011       Transaction ID : SA11AI.5971       Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.		200.00			
	Name of Employer First Colonies Anesthesia	Occupation Physician	1	Payroll deduction		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00			
с.	Full Name (Last, First, Middle Initial) Dr. Cynthia Kenol	Date of Receipt				
	Mailing Address 6579 Prestwick Drive	12 / 31 / 2011				
	Highland	State MD	Zip Code 20777	Transaction ID : SA11AI.5914           Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		200.00		
	Name of Employer	Occupation	1	Payroll deduction		
	First Colonies Anesthesia Receipt For:	Physician		_		
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00			
5	UBTOTAL of Receipts This Page (optional)		•••••	600.00		
1	OTAL This Period (last page this line number					

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

Use separate schedule(s) for each category of the

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		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17			
	erson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	AL ACTION COMMITTEE					
Full Name (Last, First, Middle Initial)         A.       Dr. Del Kirkpatrick         Mailing Address 3004 Hollow Crest Place         City	Dr. Del Kirkpatrick Mailing Address 3004 Hollow Crest Place					
Brookeville	MD	20833	Transaction ID : SA11AI.5936 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		200.00			
Name of Employer	Occupation	1	Payroll deduction			
First Colonies Anesthesia Asso	physician					
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 600.00	]			
Full Name (Last, First, Middle Initial) B. Dr. Richard Ko						
Mailing Address 4101 Hunt Road	Date of Receipt					
City	State	Zip Code	Transaction ID : SA11AI.5937			
Fairfax	VA	22032	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		200.00			
Name of Employer	Occupation	1	Payroll deduction			
First Colonies Anesthesia	Physician					
Receipt For:	Aggregate	Year-to-Date <b>V</b>				
Other (specify)		600.00	]			
Full Name (Last, First, Middle Initial) C. Dr. Harkisan Laheri			Date of Receipt			
Mailing Address 11722 Split Tree Circle	Mailing Address 11722 Split Tree Circle					
City	State	Zip Code	Transaction ID : SA11AI.5938			
Potomac	MD	20854	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		200.00 Payroll deductoin			
Name of Employer	Occupation	1				
First Colonies Anesthesia	Physician					
Receipt For:	Aggregate	Year-to-Date ▼				
Other (specify)		600.00	]			
SUBTOTAL of Receipts This Page (optional	' al)		600.00			

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

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

Use separate schedule(s) for each category of the

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         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) FIRST COLONIES ANESTHES	IA ASSO	CIATES LLC POLITIC	AL ACTION COMMITTEE					
Full Name (Last, First, Middle Initial)           Dr. Kathleen Leavitt           Mailing Address 3467 North Venice Street				Date of Receipt					
	City Arlington	State VA	Zip Code 22207	Transaction ID : SA11AI.5972					
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period					
	Name of Employer	Occupation		Payroll deduction					
	First Colonies Anesthesia	Physician							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00						
В.	Full Name (Last, First, Middle Initial) Dr. Thomas Malone			Date of Receipt					
	Mailing Address 11667 Fairmont Place	12 31 2011							
	City	State	Zip Code	Transaction ID : SA11AI.5915					
	Ijamsville	MD	21754	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		300.00					
	Name of Employer	Occupation	I	Payroll deduction					
	First Colonies Anesthesia	Physician							
	Receipt For:	Aggregate	Year-to-Date ▼						
	Primary General Other (specify) ▼		900.00						
с.	Full Name (Last, First, Middle Initial) Dr. Mollyann March	Date of Receipt							
	Mailing Address 6504 Greentree Road	12 31 2011							
	City	State	Zip Code	Transaction ID : SA11AI.5896					
	Bethesda	MD	20817	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		300.00					
	Name of Employer	Occupation		Payroll deduction					
	First Colonies Anesthesia	Physician							
	Receipt For:	For: Aggregate Year-to-Date ▼							
	Primary General Other (specify)		900.00						
s	UBTOTAL of Receipts This Page (optional)		•	800.00					
1									

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

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

Use separate schedule(s) for each category of the

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(check only one)

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	EMIZED RECEIPTS		for each catego Detailed Summ		X         11a         11b         11c         12           13         14         15         16         17
	ny information copied from such Reports and Sta for commercial purposes, other than using the				
$\Big\rangle$	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESI	A ASSO	CIATES LLC	POLITICA	L ACTION COMMITTEE
A.	Full Name (Last, First, Middle Initial)         Dr. Stephen Martin         Mailing Address 3336 O Street, NW         City         Washington         FEC ID number of contributing federal political committee.         Name of Employer         First Colonies Anesthesia         Receipt For:         Primary       General         Other (specify) ▼	State DC C Occupation Physician Aggregate	Zip Code 20007	600.00	Date of Receipt
Β.	Full Name (Last, First, Middle Initial)         Dr. Thomas Munro         Mailing Address 311 Alderwood Dr.         City         Gaithersburg         FEC ID number of contributing federal political committee.         Name of Employer         First Colonies Anesthesia Asso         Receipt For:         Primary       General         Other (specify) ▼	State MD Occupation Physician Aggregate	Zip Code 20878	900.00	Date of Receipt 12 31 2011 Transaction ID : SA11AI.5916 Amount of Each Receipt this Period 300.00 Payroll deduction
C.	Full Name (Last, First, Middle Initial)         Dr. Anna Noriega-Nalls         Mailing Address 603 Queen Street         #4         City         Alexandria         FEC ID number of contributing         federal political committee.         Name of Employer         First Colonies Anesthesia         Receipt For:         Primary       General         Other (specify) ▼	State VA C Occupation Physician Aggregate	Zip Code 22314 Year-to-Date ▼	1200.00	Date of Receipt 12 31 2011 Transaction ID : SA11AI.5940 Amount of Each Receipt this Period 400.00 Payroll deduction
	UBTOTAL of Receipts This Page (optional)				900.00
L 1	<b>OTAL</b> This Period (last page this line number o	· · · · y )	•••••	•••••••	

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17		
	ny information copied from such Reports and S for commercial purposes, other than using the					
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSO	CIATES LLC POLITICA	AL ACTION COMMITTEE		
Α.	Full Name (Last, First, Middle Initial) Dr. Denis O'Fallon Mailing Address 12123 Merricks Court	Date of Receipt				
	City Monrovia	State MD	Zip Code 21770	_ 12 31 2011		
	FEC ID number of contributing federal political committee.	С				
	Name of Employer First Colonies Anesthesia	Occupation Physician		Payroll deduction		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00			
В.	Full Name (Last, First, Middle Initial) Dr. Philip Owens Mailing Address 141 Adams Street, NW	Date of Receipt				
	City Washington	State DC	Zip Code 20001	12     31     2011       Transaction ID : SA11AI.5941       Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.		200.00 Payroll deduction			
	Name of Employer First Colonies Anesthesia	Occupation Physician				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00			
с.	Full Name (Last, First, Middle Initial) Dr. Kent Ozkum			Date of Receipt		
	Mailing Address 10720 Dern Road	12 / D D / Y Y Y Y 12 31 2011				
	City Emmisburg	State MD	Zip Code 21727	Transaction ID : SA11AI.5918 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		200.00 Payroll deduction		
	Name of Employer	Occupation				
	First Colonies Anesthesia Asso Receipt For: Primary General	physician Aggregate	Year-to-Date ▼			
	Other (specify)		600.00			
s	UBTOTAL of Receipts This Page (optional)		•	600.00		
ד	<b>'OTAL</b> This Period (last page this line number	only)	····· •			

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

Use separate schedule(s) for each category of the

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17			
	ny information copied from such Reports and S for commercial purposes, other than using the						
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	AL ACTION COMMITTEE					
Α.	Full Name (Last, First, Middle Initial) Dr. Paul Park	Date of Receipt					
	Mailing Address 821 Oak Knoll Terrace	12 31 2011					
	City Rockville	State MD	Zip Code 20850	Transaction ID : SA11AI.5942 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		200.00			
	Name of Employer First Colonies Anesthesia	Occupation Physician	1	Payroll deduction			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00				
В.	Full Name (Last, First, Middle Initial) Dr. Kestutis Pauliukonis Mailing Address 1813 Solitaire Lane	Date of Receipt					
	City McLean	State VA	Zip Code 22101	12       31       2011         Transaction ID : SA11AI.5943         Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		200.00			
	Name of Employer First Colonies Anesthesia	Occupation Physician	1	Payroll deduction			
	Receipt For: Primary General Other (specify) ▼						
с.	Full Name (Last, First, Middle Initial) Dr. Michael Peck						
	Mailing Address 4 Farm Haven Court	M M / D D / Y Y Y Y 12 31 2011					
	City Rockville	State MD	Zip Code 20852	Transaction ID : SA11AI.5973           Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		300.00			
	Name of Employer	Occupation	1	Payroll deduction			
	First Colonies Anesthesia	Physician					
	Receipt For:         Primary       General         Other (specify) ▼	Aggregate	Year-to-Date ▼ 900.00				
F	SUBTOTAL of Receipts This Page (optional)			700.00			

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

Use separate schedule(s) for each category of the

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
	ny information copied from such Reports and S for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSO	CIATES LLC POLITIC	AL ACTION COMMITTEE
Α.	Mailing Address 8400 Tysons Trace Court			Date of Receipt
	City Vienna	State VA	Zip Code 22182	Transaction ID : SA11AI.5944
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer	Occupation		Payroll deduction
	First Colonies Anesthesia	Physician		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	
_	Full Name (Last, First, Middle Initial)			
В.	Dr. Eugen Pirovic			Date of Receipt
	Mailing Address 3912 Calverton Drive	12 31 Y Y Y Y Y 12 31 2011		
	City Hyattsville	State MD	Zip Code 20782	Transaction ID : SA11AI.5974
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer First Colonies Anesthesia	Occupation Physician		Payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	
с.	Full Name (Last, First, Middle Initial) Dr. Jeffrey Richman	Date of Receipt		
	Mailing Address 6906 Granite Ridge Ct.	M M / D D / Y Y Y Y Y 12 31 2011		
	City Baltimore	State MD	Zip Code 21209	Transaction ID : SA11AI.5963           Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		200.00
	Name of Employer	Occupation		Payroll deduction
	First Colonies Anesthesia Asso	physician		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	
s	UBTOTAL of Receipts This Page (optional)		•••••	600.00

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

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

Use separate schedule(s) for each category of the

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		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17		
Any information copied from such Reports and or for commercial purposes, other than using t					
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSC	OCIATES LLC POLITIC	AL ACTION COMMITTEE		
Full Name (Last, First, Middle Initial) A. Dr. Charles Rizzuto Mailing Address 6409 Pinehurst Road City Baltimore	State MD	Zip Code 21212	Date of Receipt		
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period		
Name of Employer First Colonis Anesthesia Receipt For: Primary General Other (specify)	Occupation Physician Aggregate	Year-to-Date ▼ 600.00	Payroll deduction		
B. Full Name (Last, First, Middle Initial) Dr. Timothy Robinson Mailing Address 2212 Dalewood Road	Dr. Timothy Robinson				
City Timonium	State MD	Zip Code 21093	12     31     2011       Transaction ID : SA11AI.5965       Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		200.00 Payroll deduction		
Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician Aggregate	Year-to-Date ▼ 600.00			
Full Name (Last, First, Middle Initial) C. Dr. Jeremy Roth					
Mailing Address 913 Hillstead Drive	Mailing Address 913 Hillstead Drive				
City Lutherville	State MD	Zip Code 21093	Transaction ID : SA11AI.5897           Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		120.00 Payroll deduction		
Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician				
Primary General Other (specify)	Aggregate	Year-to-Date ▼ 360.00			
SUBTOTAL of Receipts This Page (optional).		•••••	520.00		

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

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

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			for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
	ny information copied from such Reports and S for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSO	CIATES LLC POLITICA	AL ACTION COMMITTEE
Α.	Full Name (Last, First, Middle Initial)         Dr. Alexander Rubin         Mailing Address       6611 Hunter Trail Way			Date of Receipt
	City Frederick	State MD	Zip Code 21702	12     31     2011       Transaction ID : SA11AI.5919       Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		200.00
	Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician		<ul> <li>Payroll deduction</li> </ul>
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	
В.	Full Name (Last, First, Middle Initial) Leudvig Sardarian Mailing Address 505 Main Street	Date of Receipt		
	City Gaithersburg	State MD	Zip Code 20878	12     31     2011       Transaction ID : SA11AI.5920       Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		200.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	1	Payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
c.	Full Name (Last, First, Middle Initial) Dr. Suzanne Scattergood			Date of Receipt
	Mailing Address 14700 Crossway Road	12 / D D / Y Y Y Y 12 31 2011		
	Rockville	State MD	Zip Code 20853	Transaction ID : SA11AI.5921 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		400.00 Payroll deduction
	Name of Employer	Occupation	l	
	First Colonies Anesthesia Receipt For:	Physician		_
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1200.00	
s	UBTOTAL of Receipts This Page (optional)		•	800.00
ר	TOTAL This Period (last page this line number	only)	••••••	

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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Bethesda     MD     20817       FEC ID number of contributing federal political committee.     C     Amount of Payroll de       Name of Employer     Occupation       First Colonies Anesthesia     Physician	11b         11c         12           14         15         16         17
FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTIO         Full Name (Last, First, Middle Initial)         A. Dr. Gerald Scheinman         Mailing Address 8010 Summer Mill Court         City       State       Zip Code         Bethesda       MD       20817         FEC ID number of contributing federal political committee.       Occupation       Payroll de         Name of Employer       Occupation       Payroll de	
A. Dr. Gerald Scheinman       Date of F         Mailing Address 8010 Summer Mill Court       Image: Contemporal State       Zip Code         City       State       Zip Code         Bethesda       MD       20817         FEC ID number of contributing federal political committee.       C       Image: Contemporal State         Name of Employer       Occupation       Payroll de         First Colonies Anesthesia       Physician       Payroll de	N COMMITTEE
Bethesda     MD     20817       FEC ID number of contributing federal political committee.     C     Amount of Payroll de       Name of Employer     Occupation     Payroll de       First Colonies Anesthesia     Physician     Payroll de	Receipt 31 2011 ction ID : SA11AI.5945
FEC ID number of contributing federal political committee.     C     Payroll de       Name of Employer     Occupation     Payroll de       First Colonies Anesthesia     Physician	of Each Receipt this Period
First Colonies Anesthesia Physician	200.00
Popoint For:	duction
Beceipt For:	
Primary       General         Other (specify)       ✓	
Full Name (Last, First, Middle Initial)         B. Dr. Mark Seymour         Date of F	Receipt
Mailing Address 2932 Thurston Rd.	/         D         /         Y
City State Zip Code Transac	ction ID : SA11AI.5922
Frederick MD 21704 Amount of	of Each Receipt this Period
FEC ID number of contributing federal political committee.	200.00
Name of Employer     Occupation     Payroll dec       First Colonies Anesthesai Asso     physician	duction
Receipt For: Aggregate Year-to-Date ▼	
Primary     General       Other (specify) ▼     600.00	
Full Name (Last, First, Middle Initial) C. Dr. Nader Soliman Date of F	Receipt
Mailing Address 22905 David Mill Road	/ D = D / Y = Y = Y 31 2011
	ction ID : SA11AI.5946
Germantown MD 20876 Amount of	of Each Receipt this Period
FEC ID number of contributing federal political committee.	200.00
Name of Employer         Occupation         Payroll de	CUCION
First Colonies Anesthesia Physician	
Receipt For: Aggregate Year-to-Date ▼	
Primary     General       Other (specify)     ▼	
SUBTOTAL of Receipts This Page (optional)	

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

FOR LINE NUMBER:

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TTEMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$		
Any information copied from such Reports and or for commercial purposes, other than using the					
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOC	IATES LLC POLITIC	AL ACTION COMMITTEE		
Full Name (Last, First, Middle Initial)         A.       Dr. James Sowry         Mailing Address 9589 Norfolk Ave         City         Laurel         FEC ID number of contributing federal political committee.         Name of Employer         First Colonies Anesthesia Asso         Receipt For:         Primary       General         Other (specify) ▼	State MD C Occupation physician Aggregate Ye	Zip Code 20723 ar-to-Date ▼ 300.00	Date of Receipt          12       31       2011         Transaction ID : SA11AI.5898         Amount of Each Receipt this Period         100.00         Payroll deduction		
Full Name (Last, First, Middle Initial)         Dr. Robert Study         Mailing Address 6 Beall Spring Court         City         Potomac         FEC ID number of contributing federal political committee.	State MD	Zip Code 20854	Date of Receipt          12       31       2011         Transaction ID : SA11AI.5975         Amount of Each Receipt this Period         200.00		
Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician Aggregate Ye	ar-to-Date ▼ 600.00	Payroll deduction		
C. Full Name (Last, First, Middle Initial) Mailing Address 2454 Five Schillings Road	Dr. Lisa Sullivan				
City Frederick FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthsia Receipt For: □ Primary □ General Other (specify) ▼	State MD C Occupation Physician Aggregate Ye	Zip Code 21701 ar-to-Date ▼ 600.00	12     31     2011       Transaction ID : SA11AI.5923       Amount of Each Receipt this Period     200.00       Payroll deduction     200.00		
SUBTOTAL of Receipts This Page (optional).			500.00		

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

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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TIEMIZED RECEIPTS		tor each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17		
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions e to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSC	CIATES LLC POLITIC	CAL ACTION COMMITTEE		
A. Full Name (Last, First, Middle Initial) Dr. Robert Sullivan Mailing Address 2454 Five Schillings Road			Date of Receipt		
City Frederick	State MD	Zip Code 21701	12 31 2011 Transaction ID : SA11AI.5924		
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period		
Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	Occupation Physician Aggregate	Year-to-Date ▼ 600.00	Payroll deduction		
Full Name (Last, First, Middle Initial)         B.       Dr. Louis Swann         Mailing Address PO Box 6081			Date of Receipt		
City McLean	State VA	Zip Code 22106	12     31     2011       Transaction ID : SA11AI.5976       Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia	Occupation		200.00 Payroll deduction		
Receipt For: Primary General Other (specify) ▼	Physician           Aggregate	Year-to-Date ▼ 600.00	]		
Full Name (Last, First, Middle Initial) C. Dr. John Tam					
Mailing Address 10905 Cripplegate Road	Mailing Address 10905 Cripplegate Road				
Potomac	State MD	Zip Code 20854	Transaction ID : SA11AI.5947           Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		200.00 Payroll deduction		
Name of Employer First Colonies Anesthesia	Occupation Physician	1			
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 600.00	]		
SUBTOTAL of Receipts This Page (optional).			600.00		

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

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17				
	ny information copied from such Reports and S for commercial purposes, other than using the							
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSO	CIATES LLC POLITICA	AL ACTION COMMITTEE				
Α.	Full Name (Last, First, Middle Initial) Dr. Rojack Tan	Date of Receipt						
	Mailing Address 507 Goodland Place	12 31 2011						
	City Rockville	State MD	Zip Code 20850	Transaction ID : SA11AI.5977 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		200.00				
	Name of Employer First Colonies Anesthesia	Occupation Physician	1	<ul> <li>Payroll deduction</li> </ul>				
	Receipt For:         Primary       General         Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00					
В.	Full Name (Last, First, Middle Initial) Dr. Bernard Tsai	Date of Receipt						
	Mailing Address 10013 New London Drive							
	Potomac	State MD	Zip Code 20854	Transaction ID : SA11AI.5948 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	s a l						
	Name of Employer First Colonies Anesthesia	Occupation Physician	1	<ul> <li>Payroll deduction</li> </ul>				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00					
<u>с</u> .	Full Name (Last, First, Middle Initial) Dr. Reed Underwood	Date of Receipt						
	Mailing Address 1518 T Street, NW	12 31 2011						
	City Washington	State DC	Zip Code 20009	Transaction ID : SA11AI.5984 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		200.00				
	Name of Employer	Occupation	1	Payroll deduction				
	First Colonies Anesthesia Asso	physician		_				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00					
	<b>CUBTOTAL</b> of Receipts This Page (optional)			600.00				

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

Use separate schedule(s) for each category of the

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		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17		
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSC	OCIATES LLC POLITIC	AL ACTION COMMITTEE		
A. Full Name (Last, First, Middle Initial) Dr. Arnaldo Valedon Mailing Address 22 Woodfield Court	State	Zip Code	Date of Receipt		
Reisterstown	MD	21136	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		200.00		
Name of Employer	Occupation	1	Payroll deduction		
First Colonies Anesthesia	Physician				
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 600.00	]		
B.         Full Name (Last, First, Middle Initial)           Dr. Martha Van Clief           Mailing Address         405 Apple Grove Road	Dr. Martha Van Clief				
<u></u>	Ctoto	Zin Codo	12 31 2011		
City Silver Spring	State MD	Zip Code 20904	Transaction ID : SA11AI.5900		
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period		
Name of Employer First Colonies Anesthesia	Occupation Physician	1	Payroll deduction		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	]		
Full Name (Last, First, Middle Initial) C. Dr. Sanjay Vanguri					
Mailing Address 6260 Glen Valley Terrace Unit G					
City Frederick	State MD	Zip Code 21701	Transaction ID : SA11AI.5925 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		100.00		
Name of Employer	Occupation	1	Payroll deduction		
First Colonies Anesthesia Asso	physician				
Receipt For:	Aggregate	Year-to-Date ▼			
Other (specify)		300.00			
SUBTOTAL of Receipts This Page (optional).			500.00		

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

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

Use separate schedule(s) for each category of the

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TIEMIZED RECEIPTS	for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
Any information copied from such Reports and St or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSOCIATES LLC POLITIC	AL ACTION COMMITTEE
Full Name (Last, First, Middle Initial)         Dr. Paul Van Nice         Mailing Address 71401 Meadow Lane         City         Chevy Chase         FEC ID number of contributing federal political committee.         Name of Employer         First Colonies Anesthesia         Receipt For:         Primary       General         Other (specify)	State     Zip Code       MD     20815       C       Occupation       Physician       Aggregate Year-to-Date ▼       600.00	Date of Receipt          Date of Receipt         12       31         2011         Transaction ID : SA11AI.5949         Amount of Each Receipt this Period         200.00         Payroll deduction
Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Nicholas Visnich Jr. Mailing Address 10816 Willow Run Circle		Date of Receipt
City Potomac FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	State     Zip Code       MD     20854       C       Occupation       Physician       Aggregate Year-to-Date ▼       300.00	Transaction ID : SA11AI.5978         Amount of Each Receipt this Period         100.00         Payroll deduction
Full Name (Last, First, Middle Initial)         C.       Dr. Mark Vogt         Mailing Address 1149 Colonial Road         City         McLean         FEC ID number of contributing federal political committee.         Name of Employer         First Colonies Anesthesia         Receipt For:         Primary       General         Other (specify)	State       Zip Code         VA       22101         C       Occupation         Physician       Aggregate Year-to-Date ▼         600.00       600.00	Date of Receipt 12 31 2011 Transaction ID : SA11AI.5979 Amount of Each Receipt this Period 200.00 Payroll deduction
SUBTOTAL of Receipts This Page (optional)	•	500.00

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

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17		
	y information copied from such Reports and S for commercial purposes, other than using the					
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSO	CIATES LLC POLITIC	AL ACTION COMMITTEE		
Α.	Full Name (Last, First, Middle Initial)         Dr. Christopher Wahlgren         Mailing Address       1200 Colvin Meadows Lane			Date of Receipt		
	City Great Falls	State VA	Zip Code 22066	12     31     2011       Transaction ID : SA11AI.5950       Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		200.00		
	Name of Employer First Colonies Anesthesia	Occupation Physician		Payroll deduction		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00			
в.	Full Name (Last, First, Middle Initial) Dr. Timothy Wex	Date of Receipt				
	Mailing Address 11429 Cedar Ridge Drive	12 31 Y Y Y Y 12 31				
	City Potomac	State VA	Zip Code 20854	Transaction ID : SA11AI.5980		
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period		
	Name of Employer First Colonies Anesthesia	Occupation Physician		Payroll deduction		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00			
с.	Full Name (Last, First, Middle Initial) Dr. David Wheeler	Date of Receipt				
	Mailing Address 7108 Collingwood Court	12 31 2011				
	City Elkridge	State MD	Zip Code 21075	Transaction ID : SA11AI.5966 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	ů – L				
	Name of Employer	Occupation		Payroll deduction		
	First Colonies Anesthesia					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00			
s	UBTOTAL of Receipts This Page (optional)		•	600.00		

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

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17
	ny information copied from such Reports and S for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSC	CIATES LLC POLITIC	AL ACTION COMMITTEE
Α.	Full Name (Last, First, Middle Initial) Dr. Thomas Wherry Mailing Address 611 W. 2nd Street			Date of Receipt
	City Frederick	State MD	Zip Code 21701	12 31 2011
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer First Colonies Anesthesia	Occupation Physician	I	Payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	
в.	Full Name (Last, First, Middle Initial) Dr. Howard Wilpon Mailing Address 18212 Wickham Road	Date of Receipt		
	City Olney	State MD	Zip Code 20832	12     31     2011       Transaction ID : SA11AI.5902       Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		200.00
	Name of Employer First Colonies Anesthesia	Occupation Physician		Payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	
C.	Full Name (Last, First, Middle Initial) Dr. Monfold Wolf	Date of Receipt		
	Mailing Address 4822 Tilly Dr.	12 / 31 / 2011		
	Sykesville	State MD	Zip Code 21784	Transaction ID : SA11AI.5903           Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		200.00
	Name of Employer	Occupation	1	Payroll deduction
	First Colonies Anesthesia Asso Receipt For:	Physician	Versite Data 🗖	
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 600.00	
s	UBTOTAL of Receipts This Page (optional)		•	600.00
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# SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         17			
	y information copied from such Reports and S for commercial purposes, other than using the						
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSC	CIATES LLC POLITIC	AL ACTION COMMITTEE			
Α.	Full Name (Last, First, Middle Initial) You Wu			Date of Receipt			
	Mailing Address 910 Dunlavin Ct.			12 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City Timonium	State MD	Zip Code 21093	Transaction ID : SA11AI.5967 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		200.00			
	Name of Employer First Colonies Anesthesia Asso	Occupation Physician	1	<ul> <li>Payroll deduction</li> </ul>			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00				
в.	Full Name (Last, First, Middle Initial) Dr. Aiqin Yu	Date of Receipt					
	Mailing Address 13508 Gumspring Road	12 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
	City Rockville	State MD	Zip Code 20850	Transaction ID : SA11AI.5951 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		200.00			
	Name of Employer First Colonies Anesthesia	Occupation Physician	1	Payroll deduction			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00				
<u>с</u> .	Full Name (Last, First, Middle Initial) Dr. Jungim Yun			Date of Receipt			
	Mailing Address 2057 Thurston Road	12 31 Y Y Y Y Y Y 2011					
	City Frederick	State MD	Zip Code 21704	Transaction ID : SA11AI.5926 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		200.00			
	Name of Employer	Occupation	1	Payroll deduction			
	First Colonies Anesthesia						
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 600.00				
s	UBTOTAL of Receipts This Page (optional)		••••••	600.00			
Т	OTAL This Period (last page this line number	only)	••••••	18020.00			

FOR LINE NUMBER:       PAGE 36 OF 43         TEMIZED DISBURSEMENTS       Use expanse schedule(s)       PAGE 36 OF 43         Main construction       Page 28	S	CHEDULE B (FEC Form 3X)			F						PA	GE 36	OF 43
Any information copied from such Reports and Statements may not be sold or used by any portion for the propose of soliciting contributions from such committee.       22       28<	IT	EMIZED DISBURSEMENTS	for each	category of the		heck	c only o	one)		23			
ar for commercial puppess, other than using the name and address of any political committee to solicit contributions from such committee.          NAME OF CONNITTEE (n Full)         FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE         Full Name (Last, First, Middle Initial)         • Citizens for Bryan Simonaire         Mailing Address 7661 Beny Drive         City         Pasadens         Mailing Address 7661 Beny Drive         City         Pasadens         Mailing Address 7661 Beny Drive         Contribution         State:         Disbursement         Propose of Disbursement         State:         Disbursement         Committee to Elect Catherine E. Pugh         Mailing Address 819 E. Baltimore St.         City         State:       Disbursement For: 2011         Propose of Disbursement         Contribution         Contribution         Contribution         Contribution         Co													
FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE         Full Name (Last, First, Middle Initial)         Citizens for Bryan Simonaire         Mailing Address 7661 Berry Drive         City         Pasadena         Mailing Address 7661 Berry Drive         City         Pasadena         Mailing Address 7661 Berry Drive         Contribution         Contribution         Contribution         Contribution         Contribution         Contribution         Contribution         State:         Disbursement For: 2011         Primary         State:         Disbursement For: 2011         Primary         State:         City         State:         Disbursement         City         State:         Disbursement         City         State:         Disbursement         Contribution         Candidate Name         Candidate Name         Disbursement         Disbursement         Disbursement         Disbursement         Disbursement <td< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></td<>													
✓       Full Name (Last, First, Middle Initial)         A: Citizens for Bryan Simonaire       Date of Disbursement         Mailing Address 7861 Beny Drive       Transaction ID : SB23.6001         City       State       Zip Code         Pasadena       MD       21122         Propose of Disbursement       Category:       7         Office Sought:       House       Disbursement For: 2011       Amount of Each Disbursement         State:       District       Other (specify)       Date of Disbursement         Full Name (Last, First, Middle Initial)       Date of Disbursement       Date of Disbursement         Corribution       MD       2102       Transaction ID : SB23.6018         Mailing Address 819 E. Battimore St.       Date of Disbursement       Transaction ID : SB23.6018         Contribution       MD       2102       Transaction ID : SB23.6018         Purpose of Disbursement       Category/       Transaction ID : SB23.6018         Purpose of Disbursement       Category/       Transaction ID : SB23.6018         Contribution       MD       2102       Transaction ID : SB23.6018         Purpose of Disbursement       Other (specify)        Transaction ID : SB23.6018         Contribution       Category/       Transaction ID : SB23.593	$\setminus$												
A. Citizens for Bryan Simonaire       Date of Diabursement.         Mailing Address 7661 Berry Drive       Image: City and the second se		FIRST COLONIES ANESTHESIA	ASSOC	IATES LLC	POL	ITI.	CAL	ACTI	ON	СО	MMIT	ΓEΕ	
City       State       Zip Code         Pasadena       MD       21122         Propose of Diabursement       Category/ Type       Transaction ID: SB23,6001         Amount of Each Diabursement for:       2011         Contribution       Category/ Type       250.00         Office Sought:       House       Disbursement For:       2011         State:       Disbursement       Other (specify) ▼       Category/ Type         State:       Disbursement For:       2011         State:       Disbursement       Category/ Type       250.00         Office Sought:       House       Disbursement For:       2011         Mailing Address 819 E. Baltimore St.       City       State       Zip Code         Baltimore       MD       21202       Transaction ID: SB23,6018         Purpose of Disbursement for:       2011       Category/ Type       Zip Code         Office Sought:       House       Disbursement For:       2011       Transaction ID: SB23,6018         Amount of Each Disbursement for:       2011       Transaction ID: SB23,6018       Transaction ID: SB23,6018         Contribution       Disbursement for:       2011       Transaction ID: SB23,6018       Transaction ID: SB23,6018         Contribution	Δ							Date of	f Dieł		ment		
City       State       Zip Code       Transaction ID : SB23.6001         Purpose of Disbursement       Contribution       Category       Amount of Each Disbursement this Period         Candidate Name       Disbursement For: 2011       Category       Amount of Each Disbursement this Period         Office Sought:       House       Disbursement For: 2011       Date of Disbursement         State:       District:       Category       Transaction ID : SB23.6018         Name (Last, First, Middle Initial)       Date of Disbursement       Date of Disbursement         City       State       Zip Code         Batimore       MD       21202         Purpose of Disbursement       Category/         Contribution       Category/         Candidate Name       Disbursement For: 2011         Propose of Disbursement       Disbursement For: 2011         Contribution       President         State:       Disbursement         District:       Disbursement         Full Name (Last, First, Middle Initial)       Date of Disbursement         Contribution       District:         Full Name (Last, First, Middle Initial)       Date of Disbursement         Contribution       District:         Candidate Name       MD	/11											YY	Y
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Purpose of Disbursement Contribution       Amount of Each Disbursement this Period         Candidate Name       Category/ Type         Office Sought:       House President       Disbursement For: 2011 Other (specify) ▼         State:       District:         Full Name (Last, First, Middle Initial)       Date of Disbursement 2007 / 2011         Amount of Each Disbursement this Period         Mailing Address 819 E. Baltimore St.         City       State:         Purpose of Disbursement         Contribution         Candidate Name         Office Sought:       House         President         District:         Purpose of Disbursement for:       2011         Candidate Name       Category/ Type         Office Sought:       House         District:       Disbursement For:         State:       District:         Full Name (Last, First, Middle Initial)         Committee to Elect Jam Brochin         Mailing Address 17 West Countiand Street         Suite 210         Category/ Type         Office Sought:       House         Disbursement         Contribution         Candidate Name         Office Sought:       House         Di		-						Trans	actio	n ID :	: SB23.60	001	
Candidate Name       Category/ Type       Category/ Type       Category/ Type       Category/ Type       Category/ Type       Category/ Type       Disbursement Category/ Type       Date of Disbursement Category/ Type       Transaction ID : SE23.6018         Mailing Address 819 E. Baltimore St.       MD       21202       Transaction ID : SE23.6018         Chiry Baltimore Candidate Name       Disbursement Disbursement Category/ Type       Transaction ID : SE23.6018         Office Sought:       House President       Disbursement For: 2011 Disbursement For: 2011 Disbursement       Transaction ID : SE23.6018         Amount of Each Disbursement Category/ Type       Date of Disbursement To 10       Date of Disbursement         Committee to Elect Jim Brochin       Date of Disbursement To 10       Date of Disbursement         Mailing Address 17 West Courtland Street Suite 210       MD       21014         Purpose of Disbursement Contribution       MD       21014         President President       Disbursement For: 2011 Disbursement for:		Purpose of Disbursement		21122	_	_							
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State:       District:         Full Name (Last, First, Middle Initial)       Date of Disbursement         Mailing Address a19 E. Baltimore St.       Initial         City       State       Zip Code         Baltimore       MD       21202         Purpose of Disbursement       Category/       Transaction ID : SB23.6018         Candidate Name       Category/       Transaction ID : SB23.6018         Candidate Name       Disbursement For: 2011       Amount of Each Disbursement this Period         Office Sought:       House       Disbursement For: 2011       Disbursement         Purpose of Disbursement       Other (specify) ▼       Date of Disbursement         State:       District:       Disbursement For: 2011       Date of Disbursement         Purpose of Disbursement       Other (specify) ▼       Date of Disbursement         State:       District:       Date of Disbursement         Purpose of Disbursement       Category/       Transaction ID : SB23.5993         Amount of Each Disbursement this Period       Category/       Transaction ID : SB23.000         Office Sought:       House       Disbursement For: 2011       Transaction ID : SB23.5993         Office Sought:       House       Disbursement For: 2011       Category/         Office Sought:		Senate	Primary	K General									
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Mailing Address       819 E. Baltimore St.       12       07       2011         City       State       Zip Code       Transaction ID : SB23.6018         Purpose of Disbursement       Candidate Name       Category/ Type       Transaction ID : SB23.6018         Office Sought:       House       Disbursement For: 2011       Amount of Each Disbursement this Period         State:       District:       Primary       General Other (specify)       Date of Disbursement         Full Name (Last, First, Middle Initial)       Date of Disbursement       Date of Disbursement       2011         City       State       Zip Code       Transaction ID : SB23.5993         Mailing Address 17 West Courtland Street       MD       21014         Suite 210       MD       21014         City       State       Zip Code         Bel Air       MD       21014         Purpose of Disbursement       Category/       Transaction ID : SB23.5993         Amount of Each Disbursement this Period       Category/       250.00         Office Sought:       House       Disbursement For: 2011       Category/         Senate       President       Other (specify)       Category/         Office Sought:       House       Disbursement For: 2011       Category/	В.	Committee to Elect Catherine E. Pugh							_				
Baltimore       MD       21202         Purpose of Disbursement Contribution       Image: Category/ Category/ Type       Image: Category/ Type       Amount of Each Disbursement this Period         Office Sought:       House       Disbursement For: 2011       Amount of Each Disbursement this Period         Office Sought:       House       Disbursement For: 2011       Category/ Type       250.00         Office Sought:       District:       Disbursement For: 2011       Date of Disbursement         Full Name (Last, First, Middle Initial)       Date of Disbursement       Date of Disbursement         City       State       Zip Code         Bel Air       MD       21014         Purpose of Disbursement       Category/ Type       Transaction ID : SB23.5993         Office Sought:       House       Disbursement For: 2011       Amount of Each Disbursement this Period         Candidate Name       Disbursement For: 2011       Category/ Type       Z50.00         Office Sought:       House       Disbursement For: 2011       Category/ Type       Z50.00         Office Sought:       House       Disbursement For: 2011       Category/ Type       Z50.00         Office Sought:       House       Disbursement For: 2011       Category/ Type       Z50.00		Mailing Address 819 E. Baltimore St.									Y		
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Candidate Name       Category/ Type       Prinduit of Each Disbursement for: 2011 President       Primary X General Other (specify) ▼       Primary X General Other (specify) ▼         State:       District:       Disbursement For: 2011 Other (specify) ▼       Date of Disbursement         Mailing Address       17 West Courtland Street Suite 210       Date of Disbursement         City       State       Zip Code MD         Bel Air       MD       21014         Purpose of Disbursement Contribution       Disbursement For: 2011 City       Transaction ID : SB23.5993         Office Sought:       House       Disbursement For: 2011 Other (specify) ▼       Amount of Each Disbursement this Period         Office Sought:       House       Disbursement For: 2011 Other (specify) ▼       Category/ Type       750.00		Purpose of Disbursement			-								
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Office Sought:       House       Disbursement For: 2011         State:       District:         Full Name (Last, First, Middle Initial)         Committee to Elect Jim Brochin         Mailing Address 17 West Countand Street         Suite 210         City       State         State       Zip Code         Bel Air       MD         Propose of Disbursement       Category/         Candidate Name       Disbursement For: 2011         Office Sought:       House         Disbursement For: 2011       Other (specify)         State:       Disbursement For: 2011         State:       Disbursement For: 2011         Office Sought:       House         Disbursement For: 2011       Other (specify)         State:       District:		Januidate Inditie					у/					25	50.00
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Candidate Name       Category/ Type       Amount of Each Disbursement this Period         Office Sought:       House       Disbursement For: 2011         Senate       Primary       General         President       Other (specify)       Televice		Purpose of Disbursement	UIVI	21014	_	_							
Office Sought:     House     Disbursement For: 2011     250.00       Office Sought:     President     Primary     General       Other (specify)     ✓		Contribution						Amoun	t of E	Each I	Disburser	nent this	Period
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	s	UBTOTAL of Disbursements This Page (optional)									7	75	0.00
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S	CHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 37 OF 43
IT	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	
	ny information copied from such Reports and Stater for commercial purposes, other than using the nan			
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA	ASSOCIATES LLC	POLITICAI	_ ACTION COMMITTEE
Α.	Full Name (Last, First, Middle Initial) Friends for Geraldine Valentino-Sn	Date of Disbursement		
	Mailing Address 12127 Long Ridge Lane			12 07 2011
	Bowie	State Zip Code MD 20715		Transaction ID : SB23.6015
	Purpose of Disbursement Contribution			Amount of Each Disbursement this Period
	Candidate Name		Category/ Type	125.00
	Office Sought:     House     Disburser       Senate     President     Image: Constraint of the senate of the senat of the senate of the senate of the senate of the senat of the se	ment For: 2011 Primary X General Other (specify) ▼		
в.	State:     District:       Full Name (Last, First, Middle Initial)       Friends of Anthony G. Brown			Date of Disbursement
	Mailing Address 1010 Hull Street Suite 202		12 07 Y Y Y Y 12 07 2011	
	Baltimore	StateZip CodeMD21230		Transaction ID : SB23.6014
	Purpose of Disbursement Contribution			Amount of Each Disbursement this Period
	Candidate Name		Category/ Type	250.00
	Office Sought: House Disburser Senate President State: MD District:	ment For: 2011 Primary X General Other (specify) ▼		
c.	Full Name (Last, First, Middle Initial)			Date of Disbursement
	Mailing Address 401 Miller Office Building		11 08 2011	
	City S Annapolis Purpose of Disbursement	State Zip Code MD 21401		Transaction ID : SB23.6005
	Candidate Name		Category/ Type	Amount of Each Disbursement this Period 100.00
	Office Sought: House Disburser Senate President State: MD District:	ment For: 2011 Primary X General Other (specify) ▼	711-	
s	SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>	475.00
⊢	OTAL This Period (last page this line number only)			

S	CHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 38 OF 43
_	EMIZED DISBURSEMENTS	for each Detailed	arate schedule(s) category of the Summary Page	(check only 21b 27	/ one) 22 X 23 24 25 26 28a 28b 28c 29 30b
	y information copied from such Reports and Stater for commercial purposes, other than using the nam				
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA	ASSOC	IATES LLC	POLITICA	L ACTION COMMITTEE
Α.	Full Name (Last, First, Middle Initial) Friends of Doug Gansler				Date of Disbursement
	Mailing Address 200 St. Paul Place				11 04 2011
	Baltimore	State MD	Zip Code 21202		Transaction ID : SB23.5997
	Purpose of Disbursement Contribution			· · · ]	Amount of Each Disbursement this Period
	Candidate Name			Category/ Type	500.00
	Office Sought: House Disburser Senate President State: MD District:	ment For: Primary Other (spe	X General		
в.	Full Name (Last, First, Middle Initial) Friends of EJ Pipkin Mailing Address PO Box 39				Date of Disbursement
	Stevensville Purpose of Disbursement	State MD	Zip Code 21666		Transaction ID : SB23.5998
	Contribution Candidate Name			Category/ Type	Amount of Each Disbursement this Period 250.00
	Office Sought: House Disburser Senate President State: District:	nent For: Primary Other (spe	2011 X General ecify) ▼		
<u></u> с.	Full Name (Last, First, Middle Initial) Friends of Joanne Benson				Date of Disbursement
	Mailing Address PO Box 4700		11 / D D / Y Y Y Y 11 08 / 2011		
	City Capitol Heights Purpose of Disbursement	State MD	Zip Code 20791		Transaction ID : SB23.6007
	Contribution Candidate Name			Category/	Amount of Each Disbursement this Period 200.00
	Office Sought: House Disburser Senate President State: MD District:	nent For: Primary Other (spe	X General	Туре	
s	UBTOTAL of Disbursements This Page (optional)			••••••	950.00
Т	OTAL This Period (last page this line number only)	)		•••••	

S	CHEDULE B (FEC Form 3X)	[		FOR LINE	NUMBER: PAGE 39 OF 43
	EMIZED DISBURSEMENTS	Use separate sch for each category Detailed Summary	of the	(check only 21b	
	y information copied from such Reports and Stater for commercial purposes, other than using the nan			by any perso	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA	ASSOCIATES	S LLC P	OLITICAL	_ ACTION COMMITTEE
Α.	Full Name (Last, First, Middle Initial) Friends of John Astle				Date of Disbursement
	Mailing Address 51 Fleet St.				11 08 2011
	City S Annapolis Purpose of Disbursement	StateZip CoMD21401	de		Transaction ID : SB23.6004
	Contribution Candidate Name				Amount of Each Disbursement this Period
		ment For: 2011		Category/ Type	250.00
	Senate President		eneral		
в.	State:     District:       Full Name (Last, First, Middle Initial)       Friends of Justin Ready				Date of Disbursement
	Mailing Address PO Box 402		12 07 Y Y Y Y Y 2011		
	City S Westminster	State Zip Co MD 21158			Transaction ID : SB23.6020
	Purpose of Disbursement Contribution				Amount of Each Disbursement this Period
	Candidate Name			Category/ Type	100.00
	Office Sought: House Disburser Senate President District:	nent For: 2011 Primary X G Other (specify)	eneral		
с.	Full Name (Last, First, Middle Initial) Friends of Kathy Szeliga				Date of Disbursement
	Mailing Address PO Box 40		11 08 2011		
	City Kingsville Purpose of Disbursement	State Zip Co MD 21087	de		Transaction ID : SB23.6006
	Contribution Candidate Name			Category/ Type	Amount of Each Disbursement this Period 150.00
	Senate President	nent For: 2011 Primary X G Other (specify) ▼	eneral	.,,,,,	
s	State:         MD         District:           UBTOTAL         of         Disbursements         This         Page         (optional)			····· •	500.00
Т	OTAL This Period (last page this line number only)			····· ►	

S	CHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 40 OF 43
	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	rone) 22 X 23 24 25 26 28a 28b 28c 29 30b
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	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA	ASSOCIATES LLC	POLITICAI	_ ACTION COMMITTEE
<b>A</b> .	Full Name (Last, First, Middle Initial) Friends of Mike Busch			Date of Disbursement
	Mailing Address PO Box 2241			12 07 2011
	Annapolis	StateZip CodeMD21404		Transaction ID : SB23.6019
	Purpose of Disbursement Contribution			Amount of Each Disbursement this Period
	Candidate Name		Category/ Type	500.00
	Senate X President	ment For: 2011 Primary General Other (specify) ▼		
	State:     District:       Full Name (Last, First, Middle Initial)			
В.	Andy Harris	Date of Disbursement		
	Mailing Address 301 W Pennsylvania Ave	11 22 2011		
	Towson	StateZip CodeMD20214		Transaction ID : SB23.6008
	Purpose of Disbursement Contribution			Amount of Each Disbursement this Period
	Candidate Name		Category/ Type	500.00
	Office Sought: House Disburser State: MD District:	ment For: 2011 Primary X General Other (specify) ▼		
C.	Full Name (Last, First, Middle Initial) Marylanders for Miller			Date of Disbursement
	Mailing Address 8808 Old Branch Ave.		12 07 Y Y Y Y 12 07 2011	
	City Clinton	StateZip CodeMD20735		Transaction ID : SB23.6013
	Purpose of Disbursement Contribution		Amount of Each Disbursement this Period	
	Candidate Name		Category/ Type	2000.00
	Senate President	ment For: 2011 Primary X General Other (specify) ▼		
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s	UBTOTAL of Disbursements This Page (optional)		····· •	3000.00
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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER PAGE 41 OF 43			
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NAME OF COMMITTEE (In Full)		_				
FIRST COLONIES ANESTHESIA	ASSOCIATES LLC F	POLITICAL	_ ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)						
A. Pat McDonough Leadership Team	Date of Disbursement					
Mailing Address PO Box 15470			12 07 Y Y Y Y 2011			
Baltimore	StateZip CodeMD21220		Transaction ID : SB23.6010			
Purpose of Disbursement Contribution			Amount of Each Disbursement this Period			
Candidate Name		Category/	100.00			
Office Sought: House Disburse	ment For: 2011	Туре				
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State: District:						
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Purpose of Disbursement		Amount of Each Disbursement this Period				
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State: District:						
Full Name (Last, First, Middle Initial)			Deta of Dichurooment			
C.	Date of Disbursement					
Mailing Address						
City	City State Zip Code					
Purpose of Disbursement						
Candidate Name	Category/ Type	Amount of Each Disbursement this Period				
Senate       President	ment For: Primary General Other (specify) V					
State: District:						
SUBTOTAL of Disbursements This Page (optional).		••••••	100.00			
TOTAL This Period (last page this line number only	)	••••••	5775.00			

S	CHEDULE B (FEC Form 3X)				NUMBER: PAGE 42 OF 43
	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 27	y one) 22 23 24 25 26 28a 28b 28c X 29 30b
	y information copied from such Reports and Stater for commercial purposes, other than using the nan				
$\setminus$	NAME OF COMMITTEE (In Full)		_	_	
	FIRST COLONIES ANESTHESIA	ASSOC	IATES LLC	POLITICA	L ACTION COMMITTEE
Α.	Full Name (Last, First, Middle Initial) Barbara Marx Brocato & Associate	S			Date of Disbursement
	Mailing Address 18 Pinkney Street				10 31 2011
	Annapolis	State MD	Zip Code 21401		Transaction ID : SB29.6030
	Purpose of Disbursement Lobbying fees			· · · · ·	Amount of Each Disbursement this Period
	Candidate Name			Category/ Type	1250.00
	Office Sought: House Disburser Senate President	nent For: Primary Other (spe	General cify) ▼		
	State: District:				
B.	Full Name (Last, First, Middle Initial) • Barbara Marx Brocato & Associates				Date of Disbursement
	Mailing Address 18 Pinkney Street	12 07 2011			
	Annapolis	State MD	Zip Code 21401		Transaction ID : SB29.6032
	Purpose of Disbursement Lobbying fees			· · · · ]	Amount of Each Disbursement this Period
	Candidate Name			Category/ Type	1250.00
	Office Sought: House Disburser Senate President	nent For: Primary Other (spec	General cify) ▼		
_	State: District: Full Name (Last, First, Middle Initial)				
C.	Barbara Marx Brocato & Associate	S			Date of Disbursement
	Mailing Address 18 Pinkney Street			12 09 2011	
	Annapolis	State MD	Zip Code 21401		Transaction ID : SB29.6033
	Purpose of Disbursement Lobbying fees	· · · · ]	Amount of Each Disbursement this Period		
	Candidate Name			Category/ Type	1250.00
	Office Sought: House Disburser Senate President State: District:	nent For: Primary Other (spe	General cify) ▼		
s	UBTOTAL of Disbursements This Page (optional)			····· •	3750.00
т	OTAL This Period (last page this line number only)	)		····· ►	

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 24 25 26 28a 28b 28c 29 30b			
Any information copied from such Reports and Staten or for commercial purposes, other than using the name						
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA	ASSOCIATES LLC P	OLITICAL	ACTION COMMITTEE			
Full Name (Last, First, Middle Initial) A. PB Dye Golf Management			Date of Disbursement			
Mailing Address 9526 Doctor Perry Road			10 10 2011			
ljamsville	State Zip Code MD 21754		Transaction ID : SB29.6031			
Purpose of Disbursement Expense reimbursement			Amount of Each Disbursement this Period			
Candidate Name		Category/ Type	348.06			
	nent For: Primary General Other (specify) ▼					
State: District:						
Full Name (Last, First, Middle Initial) B.			Date of Disbursement			
Mailing Address						
	State Zip Code					
Purpose of Disbursement Candidate Name	[	Category/	Amount of Each Disbursement this Period			
	nent For: Primary General Other (specify) ▼	Туре				
State: District:						
Full Name (Last, First, Middle Initial)			Date of Disbursement			
Mailing Address	Mailing Address					
City	City State Zip Code					
Purpose of Disbursement		Amount of Each Disbursement this Period				
Candidate Name		Category/ Type				
	nent For: Primary General Other (specify) ▼					
			348.06			
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)			4098.06			