

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Fresenius Medical Care North America PAC

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		7264.51
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	12169.06									
(c) Total Receipts (from Line 19)	2922.60	8992.15								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	15091.66	16256.66								
7. Total Disbursements (from Line 31)	12505.00	13670.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2586.66	2586.66								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Fresenius Medical Care North America PAC

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	1980.00	5296.88
(i) Itemized (use Schedule A)	942.60	3695.27
(ii) Unitemized	2922.60	8992.15
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	2922.60	8992.15
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	2922.60	8992.15
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	2922.60	8992.15

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	5.00	170.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	5.00	170.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12500.00	13500.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	12505.00	13670.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12505.00	13670.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	2922.60	8992.15
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2922.60	8992.15
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	5.00	170.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5.00	170.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 12
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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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)
Fresenius Medical Care North America PAC

A.

Full Name (Last, First, Middle Initial)
Claire Callahan

Mailing Address 1557 Surrey Dr

City State Zip Code
Wheaton IL 60187-7248

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

Name of Employer Occupation
Fresenius Medical Care NA VP of Human Resources

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 692.28

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2009

Transaction ID: 90407.C683

Amount of Each Receipt this Period
230.76

Receipt

Payroll Deduction: (230.7-6/Monthly)

B.

Full Name (Last, First, Middle Initial)
David Carter

Mailing Address 5215 Wiltonwood Ct

City State Zip Code
Indianapolis IN 46254-9665

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

Name of Employer Occupation
Fresenius Medical Care NA VP Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2009

Transaction ID: 90407.C739

Amount of Each Receipt this Period
130.00

Receipt

Payroll Deduction: (130.0-0/Monthly)

C.

Full Name (Last, First, Middle Initial)
Simon D Castellanos

Mailing Address 2670 S Youngfield Ct

City State Zip Code
Denver CO 80228-4937

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

Name of Employer Occupation
Fresenius Medical Care NA Business Unit President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 692.40

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2009

Transaction ID: 90407.C685

Amount of Each Receipt this Period
230.80

Receipt

Payroll Deduction: (230.8-0/Monthly)

SUBTOTAL of Receipts This Page (optional) ► **591.56**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Fresenius Medical Care North America PAC

A.	Full Name (Last, First, Middle Initial) Carol A Ernst	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 22370 N 64th Ave	Transaction ID: 90407.C692
	City State Zip Code Glendale AZ 85310-4259	Amount of Each Receipt this Period 76.92
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Fresenius Medical Care NA	Occupation Area Manager	Payroll Deduction: (76.92- /Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.76	

B.	Full Name (Last, First, Middle Initial) Mark R Fawcett	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 100 Franklin Street	Transaction ID: 90407.C744
	City State Zip Code Arlington MA 02474-3214	Amount of Each Receipt this Period 76.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Fresenius Medical Care NA	Occupation Director	Payroll Deduction: (76.00- /Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 228.00	

C.	Full Name (Last, First, Middle Initial) James Freedman	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 269 Rolling Meadow	Transaction ID: 90407.C695
	City State Zip Code Holliston MA 01746-1521	Amount of Each Receipt this Period 80.00
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Fresenius Medical Care NA	Occupation VP Leadership & Prof Dev	Payroll Deduction: (80.00- /Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	232.92
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 12
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Fresenius Medical Care North America PAC

A.

Full Name (Last, First, Middle Initial)
Brian H Lipinski

Mailing Address 4308 Castle Rock Ct

City Irving State TX Zip Code 75038-6438

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

Name of Employer: Fresenius Medical Care NA Occupation: Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 461.52

Date of Receipt: 03 / 31 / 2009

Transaction ID: 90407.C743

Amount of Each Receipt this Period: 153.84

Receipt

Payroll Deduction: (153.8-4/Monthly)

B.

Full Name (Last, First, Middle Initial)
Robert McGorty

Mailing Address 2 Walter Circle

City Westford State MA Zip Code 01886-4533

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

Name of Employer: Fresenius Medical Care NA Occupation: VP Finance & Admin

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 692.28

Date of Receipt: 03 / 31 / 2009

Transaction ID: 90407.C708

Amount of Each Receipt this Period: 230.76

Receipt

Payroll Deduction: (230.7-6/Monthly)

C.

Full Name (Last, First, Middle Initial)
David Santis

Mailing Address 4 Mill Dam Rd

City Acton State MA Zip Code 01720-5841

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

Name of Employer: Fresenius Medical Care NA Occupation: VP Supply Chain Mgt & Tech Srv

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.76

Date of Receipt: 03 / 31 / 2009

Transaction ID: 90407.C716

Amount of Each Receipt this Period: 76.92

Receipt

Payroll Deduction: (76.92-/Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ **461.52**

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

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

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

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NAME OF COMMITTEE (In Full)
Fresenius Medical Care North America PAC

A.	Full Name (Last, First, Middle Initial) Kim Sonnen	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 240 S Madison St	Transaction ID: 90407.C718
	City State Zip Code Denver CO 80209-3010	Amount of Each Receipt this Period 260.00
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (260.0-0/Monthly)
Name of Employer Fresenius Medical Care NA	Occupation SVP Marketing & Managed Care	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	

B.	Full Name (Last, First, Middle Initial) Liam Walsh	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 5809 Chatham Ln	Transaction ID: 90407.C722
	City State Zip Code The Colony TX 75056-7109	Amount of Each Receipt this Period 134.00
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (134.0-0/Monthly)
Name of Employer Fresenius Medical Care NA	Occupation VP Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 662.40	

C.	Full Name (Last, First, Middle Initial) Paul Zabetakis	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 38 Westwind Drive	Transaction ID: 90407.C723
	City State Zip Code Jamestown RI 02835-1001	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (300.0-0/Monthly)
Name of Employer Fresenius Medical Care NA	Occupation President Renal Research	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

SUBTOTAL of Receipts This Page (optional)	694.00
TOTAL This Period (last page this line number only)	1980.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 10 / 12

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

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NAME OF COMMITTEE (In Full)
Fresenius Medical Care North America PAC

A.	Full Name (Last, First, Middle Initial) Senate Majority Fund Mailing Address 507 Capitol Ct NE City Washington State DC Zip Code 20002-7705 Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name SENATE MAJORITY FUND Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ annual/other	Transaction ID: 90325.E105 Date of Disbursement 03 / 17 / 2009 Amount of Each Disbursement this Period 2500.00 DIRECT CONTRIBUTION
B.	Full Name (Last, First, Middle Initial) Friends of Max Baucus Mailing Address P.O. Box 586 City Helena State MT Zip Code 59624-0586 Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name MAX BAUCUS Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00 Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90306.E101 Date of Disbursement 03 / 02 / 2009 Amount of Each Disbursement this Period 1000.00 DIRECT CONTRIBUTION
C.	Full Name (Last, First, Middle Initial) Cedillo for Congress Mailing Address 1212 S Victory Blvd City Burbank State CA Zip Code 91502-2551 Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name GILBERT CEDILLO Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 32 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ special	Transaction ID: 90325.E106 Date of Disbursement 03 / 25 / 2009 Amount of Each Disbursement this Period 2500.00 DIRECT CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional)	6000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Fresenius Medical Care North America PAC

A.	Full Name (Last, First, Middle Initial) Friends of Blanche Lincoln <hr/> Mailing Address 303 Massachusetts Ave NE <hr/> City Washington State DC Zip Code 20002-5701 <hr/> Purpose of Disbursement DIRECT CONTRIBUTION <hr/> Candidate Name BLANCHE LAMBERT LINCOLN <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AR District: 00	Transaction ID: 90306.E103 Date of Disbursement 03 / 05 / 2009 <hr/> Amount of Each Disbursement this Period 2500.00 <hr/> DIRECT CONTRIBUTION
B.	Full Name (Last, First, Middle Initial) Friends for Harry Reid <hr/> Mailing Address 426 C Street, NE Rear Building <hr/> City Washington State DC Zip Code 20002-5818 <hr/> Purpose of Disbursement DIRECT CONTRIBUTION <hr/> Candidate Name HARRY REID <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NV District: 00	Transaction ID: 90325.E104 Date of Disbursement 03 / 10 / 2009 <hr/> Amount of Each Disbursement this Period 2000.00 <hr/> DIRECT CONTRIBUTION
C.	Full Name (Last, First, Middle Initial) Committee to Elect Nydia M. Velazquez <hr/> Mailing Address 315 Inspiration Lane <hr/> City Gaithersburg State MD Zip Code 20878-5808 <hr/> Purpose of Disbursement DIRECT CONTRIBUTION <hr/> Candidate Name NYDIA M VELAZQUEZ <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NY District: 12	Transaction ID: 90407.E110 Date of Disbursement 03 / 31 / 2009 <hr/> Amount of Each Disbursement this Period 1000.00 <hr/> DIRECT CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional) ▶

5500.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 12 / 12

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

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NAME OF COMMITTEE (In Full)
Fresenius Medical Care North America PAC

A.

Full Name (Last, First, Middle Initial)
Wyden for Senate

Mailing Address P.O. Box 3498

City State Zip Code
Portland OR 97208-3498

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name
RONALD LEE WYDEN

Office Sought: House
 Senate
 President

State: OR District: 00

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: 90407.E109

Date of Disbursement

/ /

Amount of Each Disbursement this Period

DIRECT CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional) ►

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