Image# 12970872201 PAGE 1 / 62

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	For Other Than An Aut	norizea Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
MVP Health Care Inc.	Federal PAC		
ADDRESS (number and street)	625 State Street		
Check if different			
than previously reported. (ACC)	Schenectady		NY 12305 - L
2. FEC IDENTIFICATION N	UMBER ▼ CIT	Y 🛦	STATE ▲ ZIP CODE ▲
C C00431429		S THIS NEW (N) OI	AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	20 (M2) May 20 (M	(Non-Election Year Only)
(a) Quarterly Reports:		20 (M3) Jun 20 (M	(Non-Election Year Only)
April 15 Quarterly Report (20 (M4) Jul 20 (M7	
X July 15 Quarterly Report ((C) 12-Day	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report (Report for the:	Convention (12C)	Special (12S)
January 31 Year-End Report (Floatio	on on	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	on (d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	t Electio	on on	in the State of
5. Covering Period 0		through 06	M / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examined the	his Report and to the best of	my knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasure	er Mr. Frank Fanshawe		
Signature of Treasurer Mr.	Frank Fanshawe	[Electronically Filed]	Date 04 10 / 2012
NOTE: Submission of false, error	neous, or incomplete information	n may subject the person signin	g this Report to the penalties of 2 U.S.C. §437g.
Office Use			FEC FORM 3X Rev. 12/2004

SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)	OF RECEIPTS AND DISBURSEMENTS	Page 2
Write or Type Committee Name		
MVP Health Care Inc. Federal PA	C	
Report Covering the Period: From:	04 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	: 06 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2010		36700.84
(b) Cash on Hand at Beginning of Reporting Period	34410.84	
(c) Total Receipts (from Line 19)	15407.00	23622.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	49817.84	60322.84
7. Total Disbursements (from Line 31)	6012.50	16517.50
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	43805.34	43805.34
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)	483.00	
This committee has qualified as a multication	andidate committee. (see FEC FORM 1M)	
	For further information contact:	
	Federal Election Commission 999 E Street, NW Washington, DC 20463	
	Toll Free 800-424-9530 Local 202-694-1100	

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

ivi v i Tiedilii Odie IIIG. I edelalii Al	MVP	IVP Health	n Care	Inc.	Federal	PAC
---	-----	------------	--------	------	---------	-----

I. Receipts Ontributions (other than loans) From: Individuals/Persons Other Than Political Committees	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
) Individuals/Persons Other	<u>'</u>	
Then Delitical Committees		
	44700.00	12000 00
(i) Itemized (use Schedule A)	11730.00	12890.00
// · · · · · · · · · · · · · · · · · ·	0077.00	10732.00
	3677.00	10732.00
	15407.00	23622.00
Lines Tr(a)(i) and (ii)	, 10-101.00	
Political Party Committees	0.00	0.00
(such as PACs)	0.00	0.00
Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		20222 22
Totals to Line 33, page 5)▶	15407.00	23622.00
ansfers From Affiliated/Other		
arty Committees	0.00	0.00
Loans Received	0.00	0.00
an Repayments Received	0.00	0.00
	7	7
efunds, Rebates, etc.)		
arry Totals to Line 37, page 5)	0.00	0.00
efunds of Contributions Made		
Federal Candidates and Other		
	0.00	0.00
The state of the s	0.00	0.00
	0.00	0.00
(IIOIII Ociledale 110)	0.00	0.00
Lovin Funda (from Cohadula LIF)	0.00	0.00
Levill Fullus (IIOIII Schedule H5)	7	0.00
Total Transfers (add 18(a) and 18(b))	0.00	0.00
	(such as PACs)) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry	(iii) TOTAL (add Lines 11(a)(i) and (ii)

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
	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calcination four to Butto
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating		
	Expenditures	0.00	0.00
(c) Total Operating Expenditures	0.00	0.00
22.]	(add 21(a)(i), (a)(ii), and (b))▶ Fransfers to Affiliated/Other Party	0.00	0.00
	Committees	0.00	0.00
F	Contributions to Federal Candidates/Committees and Other Political Committees	6000.00	16500.00
	ndependent Expenditures		
(use Schedule E)	0.00	0.00
(Coordinated Party Expenditures 2 U.S.C. §441a(d))	0.00	222
(use Schedule F)	0.00	0.00
26. l	oan Repayments Made	0.00	0.00
ו קס	oans Made	0.00	0.00
28. F	Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	5.00	5.00
			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	5.00	5.00
	(add Lines 28(a), (b), and (c))▶		3.00
29. (Other Disbursements	7.50	12.50
RO F	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
`	(from Schedule H6)		
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
((b) Federal Election Activity Paid Entirely		
	With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
31.	Total Disbursements (add Lines 21(c), 22,		
2	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	6012.50	16517.50
32.	Total Federal Disbursements		
	subtract Line 21(a)(ii) and Line 30(a)(ii)		
f	rom Line 31)	6012.50	16517.50

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	15407.00	23622.00
4. Total Contribution Refunds (from Line 28(d))	5.00	5.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15402.00	23617.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

	FOR LINE	NUMBER:	PAGE	= 6 ()⊢
Use separate schedule(s)	(check only	one)			
for each category of the Detailed Summary Page	X 11a	11b	11c	12	
	13	14	15	16	

Any information copied from such Reports a pr for commercial purposes, other than usin	and Statements may not be sold or used by any per ng the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MVP Health Care Inc. Feder	ral PAC	
Full Name (Last, First, Middle Initial) Karla Austen Mailing Address 157 Old Hyde Road		Date of Receipt
		05 14 2010
City Weston	State Zip Code CT 06883	Transaction ID : SA11AI.8437
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer MVP Health Care	Occupation VP	Individual Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Ms. Mary Bianchi Mailing Address o Paris Priva	·	Date of Receipt
Mailing Address 6 Doris Drive		04 08 2010
City	State Zip Code	Transaction ID : SA11AI.7863
Scotia	NY 12302	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	30.00
Name of Employer MVP Service Corp	Occupation VP, Sales Ops	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial)	1	Date of Receipt
Mailing Address 6 Doris Drive		04 22 2010
City Scotia	State Zip Code NY 12302	Transaction ID : SA11AI.7864
FEC ID number of contributing federal political committee.	C 12502	Amount of Each Receipt this Period 30.00
Name of Employer	Occupation	_
MVP Service Corp	VP, Sales Ops	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
SUBTOTAL of Receipts This Page (options	al)	1060.00
TOTAL This Period (last page this line nur	nber only)	

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

FOR LINE	NUMBER	:	PAGE	:	1	OF	62
(check only	one)						
X 11a	11b		11c		12		
13	14		15		16		17

ny information copied from such Reports and for commercial purposes, other than using	d Statements may not be sold or used by any per the name and address of any political committee to	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federa	I PAC	
Full Name (Last, First, Middle Initial) Ms. Mary Bianchi		Date of Receipt
Mailing Address 6 Doris Drive		05 06 2010 1 THE RESERVE OF THE PROPERTY OF TH
City	State Zip Code	Transaction ID : SA11AI.7865
Scotia	NY 12302	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	+
MVP Service Corp	VP, Sales Ops	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	
Full Name (Last, First, Middle Initial) Ms. Mary Bianchi		Date of Receipt
Mailing Address 6 Doris Drive		05 20 2010
City	State Zip Code	Transaction ID : SA11AI.7866
Scotia	NY 12302	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	1
MVP Service Corp	VP, Sales Ops	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Ms. Mary Bianchi		Date of Receipt
Mailing Address 6 Doris Drive		M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City	State Zip Code	Transaction ID : SA11AI.7867
Scotia	NY 12302	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	+
MVP Service Corp	VP, Sales Ops	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	330.00	
SUBTOTAL of Receipts This Page (optional).	· · · · · · · · · · · · · · · · · · ·	90.00
OTAL This Period (last page this line numb	<u>^</u>	

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: **PAGE** Use separate schedule(s) (check only one) X 11a 11b 11c

8 OF 62 ITEMIZED RECEIPTS for each category of the 12 Detailed Summary Page 13 14 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Ms. Mary Bianchi Date of Receipt Mailing Address 6 Doris Drive 2010 06 City Zip Code State Transaction ID: SA11AI.7868 NY Scotia 12302 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation MVP Service Corp VP, Sales Ops Receipt For: Aggregate Year-to-Date ▼ Primary General 360.00 Other (specify) Full Name (Last, First, Middle Initial) B. Charles Bloss Date of Receipt Mailing Address 708 Stephens Place 04 80 2010 City State Zip Code Transaction ID: SA11AI.7875 NY Schenectady 12303 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation MVP VP & chief Actuary Receipt For: Aggregate Year-to-Date ▼ Primary General 280.00 Other (specify) Full Name (Last, First, Middle Initial) c. Charles Bloss Date of Receipt Mailing Address 708 Stephens Place 04 22 2010 City Zip Code State Transaction ID: SA11AI.7876 NY Schenectady 12303 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation MVP VP & chief Actuary Receipt For: Aggregate Year-to-Date ▼ Primary General 320.00 Other (specify) 110.00 SUBTOTAL of Receipts This Page (optional).....

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

FOR LINE NUMBER: **PAGE** 9 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 13 14 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Charles Bloss Date of Receipt Mailing Address 708 Stephens Place 2010 06 City Zip Code State Transaction ID: SA11AI.7878 NY Schenectady 12303 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation MVP VP & chief Actuary Receipt For: Aggregate Year-to-Date ▼ Primary General 360.00 Other (specify) Full Name (Last, First, Middle Initial) B. Charles Bloss Date of Receipt Mailing Address 708 Stephens Place 05 20 2010 City State Zip Code Transaction ID: SA11AI.7879 NY Schenectady 12303 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation MVP VP & chief Actuary Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) c. Charles Bloss Date of Receipt Mailing Address 708 Stephens Place 06 03 2010 City Zip Code State Transaction ID: SA11AI.7880 NY Schenectady 12303 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation MVP VP & chief Actuary Receipt For: Aggregate Year-to-Date ▼ Primary General 440.00 Other (specify) 120.00 SUBTOTAL of Receipts This Page (optional).....

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

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 10 OF 62

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and State or for commercial purposes, other than using the na	ements may not be sold or used by any per ime and address of any political committee to	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federal PA	С	
Name of Employer MVP Receipt For: Primary Other (specify) ▼ Other (specify) ▼	State Zip Code NY 12303 C Decupation P & chief Actuary Aggregate Year-to-Date ▼ 480.00	Date of Receipt 06 17 2010 Transaction ID: SA11AI.7881 Amount of Each Receipt this Period 40.00
Name of Employer MVP Service Corp Descript For:	State Zip Code NY 12303 C Decupation irrector of Compliance Aggregate Year-to-Date 250.00	Date of Receipt 05 24 2010 Transaction ID: SA11AI.8452 Amount of Each Receipt this Period 250.00 Individual Contribution
Name of Employer MVP Receipt For:	State Zip Code NY 12203 C Decupation Medical Director Aggregate Year-to-Date ▼ 300.00	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)	•	590.00
TOTAL This Period (last page this line number only	y)	

FOR LINE NUMBER: PAGE 11 OF 62 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Sue Ann Brown Date of Receipt Mailing Address 9 Wembly Court 2010 06 0.3 City Zip Code State Transaction ID: SA11AI.7891 NY Delmar 12054 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer Occupation MVP Administrative Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) Full Name (Last, First, Middle Initial) B. Sue Ann Brown Date of Receipt Mailing Address 9 Wembly Court 17 06 2010 City State Zip Code Transaction ID: SA11AI.7892 NY Delmar 12054 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation MVP Administrative Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ms Lisa A. Brubaker Date of Receipt Mailing Address 9 Mile Post Lane 05 14 2010 City Zip Code State Transaction ID: SA11AI.8451 NY Pittsford 14534 Amount of Each Receipt this Period FEC ID number of contributing 1500.00 С federal political committee. Individual Contribution Name of Employer Occupation **EVP Rochester/Government Programs** MVP Service Corp Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) 1540.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

	FOR LINE NUMBER: PAGE 12							12 OF	Ξ
Use separate schedule(s)	(chec	k only	or	ie)					
for each category of the Detailed Summary Page	×	11a		11b		11c		12	
		13		14		15		16	

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or for commercial purposes, other than usi	ng the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MVP Health Care Inc. Fede	eral PAC	
Full Name (Last, First, Middle Initial) Carl Cameron Mailing Address 285 Willowcrest Drive		Date of Receipt
		04 08 2010
City	State Zip Code NY 14618	Transaction ID : SA11AI.7893
Rochester	NY 14618	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	
MVP	VP Medical Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial) 3. Carl Cameron		Date of Receipt
Mailing Address 285 Willowcrest Drive		04 222010
City	State Zip Code	Transaction ID : SA11AI.7894
Rochester	NY 14618	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	
MVP	VP Medical Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) Carl Cameron		Date of Receipt
Mailing Address 285 Willowcrest Drive		05 06 2010
City	State Zip Code	Transaction ID : SA11AI.7895
Rochester	NY 14618	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	
MVP	VP Medical Director	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	270.00	
SUBTOTAL of Receipts This Page (option	nal)	90.00
TOTAL This Period (last page this line nu	ımber only)	

FOR LINE NUMBER: PAGE 13 OF 62 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Carl Cameron Date of Receipt Mailing Address 285 Willowcrest Drive 2010 20 City Zip Code State Transaction ID: SA11AI.7896 NY Rochester 14618 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation MVP VP Medical Director Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Carl Cameron Date of Receipt Mailing Address 285 Willowcrest Drive 06 03 2010 City State Zip Code Transaction ID: SA11AI.7897 NY Rochester 14618 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation MVP VP Medical Director Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) Full Name (Last, First, Middle Initial) c. Carl Cameron Date of Receipt Mailing Address 285 Willowcrest Drive 06 17 2010 City Zip Code State Transaction ID: SA11AI.7898 NY Rochester 14618 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation **VP Medical Director** MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 360.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOR LINE N	IUMBER:	PAGE	E 14 OI	=
Use separate schedule(s)	(check only	one)			
for each category of the Detailed Summary Page	X 11a	11b	11c	12	
	13	14	15	16	

	nd Statements may not be sold or used by any personal the name and address of any political committee to	
NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federa	al PAC	
Full Name (Last, First, Middle Initial) Jennifer Cenzano Mailing Address 1177 North Rd.		Date of Receipt
City	State Zip Code	05 14 2010 Transaction ID : SA11AI.8443
W Glenville FEC ID number of contributing	NY 12010	Amount of Each Receipt this Period 250.00
Receipt For: Primary Other (specify) General	Occupation Director Aggregate Year-to-Date ▼	-
Full Name (Last, First, Middle Initial) Mr. Thomas J. Combs Mailing Address 1620 Scribner Road		Date of Receipt 05 14 2010
City Penfield FEC ID number of contributing	State Zip Code NY 14526	Transaction ID : SA11AI.8449 Amount of Each Receipt this Period 1050.00
Federal political committee. Name of Employer MVP Service Corp. Receipt For:	Occupation Sr. Management	Individual Contribution
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00	
Full Name (Last, First, Middle Initial) Patricia Deferio		Date of Receipt
Mailing Address 7723 Majestic Drive		04 08 2010
City Liverpool	State Zip Code NY 13090	Transaction ID : SA11AI.7924 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer MVP	Occupation Regional Network Director	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
SUBTOTAL of Receipts This Page (ontional)	1330.00
TOTAL This Period (last page this line num	<u>, </u>	

FOR LINE NUMBER: PAGE 15 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Patricia Deferio Date of Receipt Mailing Address 7723 Majestic Drive 04 2010 22 City State Zip Code Transaction ID: SA11AI.7925 NY Liverpool 13090 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation MVP Regional Network Director Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) B. Patricia Deferio Date of Receipt Mailing Address 7723 Majestic Drive 05 06 2010 City State Zip Code Transaction ID: SA11AI.7927 NY Liverpool 13090 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation MVP Regional Network Director Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name (Last, First, Middle Initial) c. Patricia Deferio Date of Receipt Mailing Address 7723 Majestic Drive 20 05 2010 City State Zip Code Transaction ID: SA11AI.7928 NY Liverpool 13090 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation Regional Network Director MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 310.00 Other (specify) 100.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 16 OF 62 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Patricia Deferio Date of Receipt Mailing Address 7723 Majestic Drive 2010 06 0.3 City State Zip Code Transaction ID: SA11AI.7929 NY Liverpool 13090 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation MVP Regional Network Director Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Patricia Deferio Date of Receipt Mailing Address 7723 Majestic Drive 06 2010 17 City State Zip Code Transaction ID: SA11AI.7930 NY Liverpool 13090 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation MVP Regional Network Director Receipt For: Aggregate Year-to-Date ▼ Primary General 390.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Frank Fanshawe Date of Receipt Mailing Address 430 Ridgehill Road 80 04 2010 City Zip Code State Transaction ID: SA11AI.7938 NY Schenectady 12303 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation MVP Treasurer Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) 110.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Mr. Frank Fanshawe Date of Receipt Mailing Address 430 Ridgehill Road 04 2010 22 City State Zip Code Transaction ID: SA11AI.7939 NY Schenectady 12303 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation MVP Treasurer Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Frank Fanshawe Date of Receipt Mailing Address 430 Ridgehill Road 2010 05 06 City State Zip Code Transaction ID: SA11AI.7940 NY 12303 Schenectady Amount of Each Receipt this Period FEC ID number of contributing 20.00

federal political committee.	O	30.00
Name of Employer MVP	Occupation Treasurer	
Receipt For: Primary Gene Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	
Full Name (Last, First, Middle C. Mr. Frank Fanshawe		Date of Receipt
Mailing Address 430 Ridgehi	II Road	05 20 2010
City	State Zip Code	Transaction ID : SA11AI.7941
Schenectady	NY 12303	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	
MVP	Treasurer	
Receipt For: Primary ☐ Gene Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
CURTOTAL of Bossiele This E	Jana (antiqual)	90.00

SUBTOTAL of Receipts This Page (optional).....

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14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Mark Fish Date of Receipt Mailing Address 500 Normanskill Place 04 2010 22 City State Zip Code Transaction ID: SA11AI.7963 NY Slingerlands 12159 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation MVP EVP, CFO Receipt For: Aggregate Year-to-Date ▼ Primary General 320.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mark Fish Date of Receipt Mailing Address 500 Normanskill Place 05 06 2010 City State Zip Code Transaction ID: SA11AI.7964 Slingerlands NY 12159 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation MVP EVP, CFO Receipt For: Aggregate Year-to-Date ▼ Primary General 360.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mark Fish Date of Receipt Mailing Address 500 Normanskill Place 20 05 2010 City State Zip Code Transaction ID: SA11AI.7965 NY Slingerlands 12159 Amount of Each Receipt this Period FEC ID number of contributing 60.00 С federal political committee. Name of Employer Occupation EVP, CFO MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 420.00 Other (specify) 140.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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for each category of the Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Mark Fish Date of Receipt Mailing Address 500 Normanskill Place 2010 03 City State Zip Code Transaction ID: SA11AI.7966 NY Slingerlands 12159 Amount of Each Receipt this Period FEC ID number of contributing C 60.00 federal political committee. Name of Employer Occupation MVP EVP, CFO Receipt For: Aggregate Year-to-Date ▼ Primary General 480.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mark Fish Date of Receipt Mailing Address 500 Normanskill Place 06 17 2010 City State Zip Code Transaction ID: SA11AI.7967 Slingerlands NY 12159 Amount of Each Receipt this Period FEC ID number of contributing 60.00 federal political committee. Name of Employer Occupation MVP EVP, CFO Receipt For: Aggregate Year-to-Date ▼ Primary General 540.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Al Gatti Date of Receipt Mailing Address 8 Wendy Lane 80 04 2010 City State Zip Code Transaction ID: SA11AI.7993 CT W. Hartford 06117 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation Exec VP MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 280.00 Other (specify) 160.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Al Gatti Date of Receipt Mailing Address 8 Wendy Lane 2010 03 City State Zip Code Transaction ID: SA11AI.7997 CT W. Hartford 06117 Amount of Each Receipt this Period FEC ID number of contributing C 45.00 federal political committee. Name of Employer Occupation MVP Exec VP Receipt For: Aggregate Year-to-Date ▼ Primary General 445.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Al Gatti Date of Receipt Mailing Address 8 Wendy Lane 06 17 2010 City State Zip Code Transaction ID: SA11AI.7998 W. Hartford CT 06117 Amount of Each Receipt this Period FEC ID number of contributing 45.00 federal political committee. Name of Employer Occupation MVP Exec VP Receipt For: Aggregate Year-to-Date ▼ Primary General 490.00 Other (specify) Full Name (Last, First, Middle Initial) c. Bill Geddings Date of Receipt Mailing Address 75 Robinwood Drive 03 06 2010 City Zip Code State Transaction ID: SA11AI.8009 NY Clifton Park 12065 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation **VP Health Services** MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) 110.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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		13		14		15		16		17

	and Statements may not be sold or used by any pers g the name and address of any political committee to	
NAME OF COMMITTEE (In Full) MVP Health Care Inc. Feder	ral PAC	
Full Name (Last, First, Middle Initial) Bill Geddings Mailing Address 75 Rebinward Drive		Date of Receipt
Mailing Address 75 Robinwood Drive		06 17 2010
City Clifton Book	State Zip Code	Transaction ID : SA11AI.8010
Clifton Park	NY 12065	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	1
MVP	VP Health Services	
Receipt For: Primary General Other (coogify)	Aggregate Year-to-Date ▼	
Other (specify) ▼	240.00	
Full Name (Last, First, Middle Initial) Patrick Glavey	ı	Date of Receipt
Mailing Address 165 Windemere Road		04 08 2010
City	State Zip Code	Transaction ID : SA11AI.8018
Rochester	NY 14610	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer	Occupation	1
MVP	VP, Medicare Products	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	420.00	
Full Name (Last, First, Middle Initial) • Patrick Glavey	 	Date of Receipt
Mailing Address 165 Windemere Road		04 22 2010
City Rochester	State Zip Code NY 14610	Transaction ID : SA11AI.8019 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer	Occupation	-
MVP	VP, Medicare Products	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	480.00	
SUBTOTAL of Receipts This Page (options	al)	140.00
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SCHEDULE A (FEC Form 3X)

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TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
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NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federal P	AC	
Full Name (Last, First, Middle Initial) Patrick Glavey Mailing Address 165 Windemere Road City Rochester FEC ID number of contributing federal political committee. Name of Employer MVP Receipt For: Primary General Other (specify)	State Zip Code NY 14610 C Occupation VP, Medicare Products Aggregate Year-to-Date ▼	Date of Receipt M
Full Name (Last, First, Middle Initial) Patrick Glavey Mailing Address 165 Windemere Road City Rochester FEC ID number of contributing federal political committee. Name of Employer MVP Receipt For: Primary General Other (specify)	State Zip Code NY 14610 C Occupation VP, Medicare Products Aggregate Year-to-Date ▼	Date of Receipt Mark
Full Name (Last, First, Middle Initial) Patrick Glavey Mailing Address 165 Windemere Road City Rochester FEC ID number of contributing federal political committee. Name of Employer MVP Receipt For: Primary General Other (specify)	State Zip Code NY 14610 C Occupation VP, Medicare Products Aggregate Year-to-Date ▼	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)	>	220.00
TOTAL This Period (last page this line number of	only)	

SCHEDULE A (FEC Form 3X)

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TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name ar		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federal PAC		
Possint For:	14610	Date of Receipt M M / 2010 Transaction ID: SA11AI.8023 Amount of Each Receipt this Period 80.00
Pagaint For:	12303	Date of Receipt 04 08 2010 Transaction ID: SA11AI.8030 Amount of Each Receipt this Period 60.00
Possint For:	12303	Date of Receipt 04 22 2010 Transaction ID: SA11AI.8031 Amount of Each Receipt this Period 60.00
SUBTOTAL of Receipts This Page (optional)		200.00
TOTAL This Period (last page this line number only)		

		LINE			:	PAGE	: 2	26	OF	62
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	nd Statements may not be sold or used by any person the name and address of any political committee t	
NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federa	al PAC	
Full Name (Last, First, Middle Initial) Denise Gonick Mailing Address 803 Via Marchella		Date of Receipt
City Schenectady	State Zip Code NY 12303	05 06 2010 Transaction ID : SA11AI.8032
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 60.00
Name of Employer MVP Health Care, Inc. Receipt For: Primary General Other (specify) ▼	Occupation EVP & Chief Legal Officer Aggregate Year-to-Date ▼ 540.00	
Full Name (Last, First, Middle Initial) 3. Denise Gonick Mailing Address 803 Via Marchella		Date of Receipt
City Schenectady	State Zip Code NY 12303	Transaction ID : SA11Al.8033 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer MVP Health Care, Inc.	Occupation EVP & Chief Legal Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Denise Gonick		Date of Receipt
Mailing Address 803 Via Marchella	7. 0.1	06 03 / Y=Y=Y=Y
City Schenectady	State Zip Code NY 12303	Transaction ID : SA11AI.8034 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	70.00
Name of Employer MVP Health Care, Inc.	Occupation EVP & Chief Legal Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 670.00	
SUBTOTAL of Receipts This Page (optional)	190.00
TOTAL This Period (last page this line num	ber only)	

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for each category of the Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Denise Gonick Date of Receipt Mailing Address 803 Via Marchella 2010 06 City Zip Code State Transaction ID: SA11AI.8035 NY Schenectady 12303 Amount of Each Receipt this Period FEC ID number of contributing C 70.00 federal political committee. Name of Employer Occupation MVP Health Care, Inc. **EVP & Chief Legal Officer** Receipt For: Aggregate Year-to-Date ▼ Primary General 740.00 Other (specify) Full Name (Last, First, Middle Initial) B. Christopher Henchey Date of Receipt Mailing Address 144 Berry Road 04 80 2010 City State Zip Code Transaction ID: SA11AI.8046 NH Loudon 03307 Amount of Each Receipt this Period FEC ID number of contributing 80.00 federal political committee. Name of Employer Occupation MVP Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 560.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Christopher Henchey Date of Receipt Mailing Address 144 Berry Road 04 22 2010 City Zip Code State Transaction ID: SA11AI.8047 NH Loudon 03307 Amount of Each Receipt this Period FEC ID number of contributing 80.00 С federal political committee. Name of Employer Occupation Vice President MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 640.00 Other (specify) 230.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Christopher Henchey Date of Receipt Mailing Address 144 Berry Road 2010 06 City Zip Code State Transaction ID: SA11AI.8048 NH Loudon 03307 Amount of Each Receipt this Period FEC ID number of contributing C 80.00 federal political committee. Name of Employer Occupation MVP Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 720.00 Other (specify) Full Name (Last, First, Middle Initial) B. Christopher Henchey Date of Receipt Mailing Address 144 Berry Road 05 20 2010 City State Zip Code Transaction ID: SA11AI.8049 NH Loudon 03307 Amount of Each Receipt this Period FEC ID number of contributing 80.00 federal political committee. Name of Employer Occupation MVP Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Christopher Henchey Date of Receipt Mailing Address 144 Berry Road 03 06 2010 City Zip Code State Transaction ID: SA11AI.8050 NH Loudon 03307 Amount of Each Receipt this Period FEC ID number of contributing 80.00 С federal political committee. Name of Employer Occupation Vice President MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 880.00 Other (specify) 240.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Loudon FEC ID number of contributing federal political committee. Name of Employer MVP Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) David Henderson Mailing Address 1 Loudon Heights City State Zip Code Transact	Receipt 17 2010 ction ID: SA11AI.8051 of Each Receipt this Period 80.00
Date of F Mailing Address 1 Loudon Heights City State Zip Code Loudonville NY 12211 FEC ID number of contributing federal political committee. Name of Employer MVP Receipt For: Primary General Date of F M M M 04 C Transac Amount of Aggregate Year-to-Date ▼	
	Receipt 08 2010 ction ID: SA11AI.8052 of Each Receipt this Period 60.00
Laurdan illa	Receipt 22 2010 ction ID: SA11AI.8053 of Each Receipt this Period 60.00
SUBTOTAL of Receipts This Page (optional)	200.00

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	Statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federal	PAC	
Full Name (Last, First, Middle Initial) A. David Henderson		Date of Receipt
Mailing Address 1 Loudon Heights		05 06 2010
City Loudonville	State Zip Code NY 12211	Transaction ID : SA11AI.8054 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer MVP Receipt For: Primary General	Occupation EVP, Sales and Marketing Aggregate Year-to-Date ▼	-
Other (specify) ▼ Full Name (Last, First, Middle Initial) James R. Hopsicker Mailing Address 4209 Oakdale CT	540.00	Date of Receipt
City	State Zip Code	05 24 2010 Transaction ID : SA11Al.8463
Schenectady FEC ID number of contributing federal political committee.	NY 12303	Amount of Each Receipt this Period 750.00
Name of Employer MVP Service Corp.	Occupation RPH	Individual Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 38 Fox Hill Drive		04 08 2010
City Fairport	State Zip Code NY 14450	Transaction ID : SA11AI.8081 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	-
MVP Receipt For: Primary General Other (specify) ▼	VP Information Technology Aggregate Year-to-Date ▼ 210.00	_
SUBTOTAL of Receipts This Page (optional)		840.00
TOTAL This Period (last page this line number	<u> </u>	

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14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Kevin Husted Date of Receipt Mailing Address 38 Fox Hill Drive 04 2010 22 City Zip Code State Transaction ID: SA11AI.8082 NY Fairport 14450 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation VP Information Technology MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kevin Husted Date of Receipt Mailing Address 38 Fox Hill Drive 05 06 2010 City State Zip Code Transaction ID: SA11AI.8083 NY Fairport 14450 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation MVP VP Information Technology Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kevin Husted Date of Receipt Mailing Address 38 Fox Hill Drive 20 05 2010 City Zip Code State Transaction ID: SA11AI.8084 NY Fairport 14450 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation VP Information Technology MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Kevin Husted Date of Receipt Mailing Address 38 Fox Hill Drive 2010 06 0.3 City Zip Code State Transaction ID: SA11AI.8085 NY Fairport 14450 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation VP Information Technology MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kevin Husted Date of Receipt Mailing Address 38 Fox Hill Drive 06 2010 17 City State Zip Code Transaction ID: SA11AI.8086 NY Fairport 14450 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation MVP VP Information Technology Receipt For: Aggregate Year-to-Date ▼ Primary General 360.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dawn Jablonski Date of Receipt Mailing Address 213 Hansen Ave 09 04 2010 City Zip Code State Transaction ID: SA11AI.8095 NY Albany 12208 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation VP of Legal Affairs MVP Health Care Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	d Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federa	I PAC	
Full Name (Last, First, Middle Initial) Dawn Jablonski		Date of Receipt
Mailing Address 213 Hansen Ave		04 23 2010
City Albany	State Zip Code NY 12208	Transaction ID : SA11Al.8096
FEC ID number of contributing federal political committee.	C 12200	Amount of Each Receipt this Period 30.00
Name of Employer MVP Health Care Receipt For: Primary General Other (specify) ▼	Occupation VP of Legal Affairs Aggregate Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) Dawn Jablonski Mailing Address 213 Hansen Ave		Date of Receipt
City Albany	State Zip Code NY 12208	Transaction ID : SA11AI.8097 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer MVP Health Care	Occupation VP of Legal Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	
Full Name (Last, First, Middle Initial) Dawn Jablonski		Date of Receipt
Mailing Address 213 Hansen Ave		05 21 2010
City Albany	State Zip Code NY 12208	Transaction ID : SA11AI.8098 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer	Occupation	_
MVP Health Care Receipt For:	VP of Legal Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	
SUBTOTAL of Receipts This Page (optional)		100.00
TOTAL This Period (last page this line numb	er only)	

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14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Dawn Jablonski Date of Receipt Mailing Address 213 Hansen Ave 04 2010 06 City Zip Code State Transaction ID: SA11AI.8099 NY Albany 12208 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation MVP Health Care VP of Legal Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dawn Jablonski Date of Receipt Mailing Address 213 Hansen Ave 06 18 2010 City State Zip Code Transaction ID: SA11AI.8100 NY Albany 12208 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation MVP Health Care VP of Legal Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General 390.00 Other (specify) Full Name (Last, First, Middle Initial) c. David Kadish Date of Receipt Mailing Address 44 Surrey Mall 05 24 2010 City Zip Code State Transaction ID: SA11AI.8455 NY Slingerlands 12159 Amount of Each Receipt this Period FEC ID number of contributing 300.00 С federal political committee. Name of Employer Occupation **VP Contracts** MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 380.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Dennis Kant Date of Receipt Mailing Address 11 White Briar 04 08 2010 City Zip Code State Transaction ID: SA11AI.8112 NY Pittsford 14534 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation MVP **VP Finance** Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dennis Kant Date of Receipt Mailing Address 11 White Briar 04 22 2010 City State Zip Code Transaction ID: SA11AI.8113 Pittsford NY 14534 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation MVP VP Finance Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Dennis Kant Date of Receipt Mailing Address 11 White Briar 06 05 2010 City Zip Code State Transaction ID: SA11AI.8114 NY Pittsford 14534 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation **VP Finance** MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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MVP Health Care Inc. Feder	ral PAC	
Full Name (Last, First, Middle Initial) Joseph Lia		Date of Receipt
Mailing Address 12 Sutherland Drive		04 08 2010
City	State Zip Code	Transaction ID : SA11AI.8129
Highland Mills	NY 10930	_ Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	†
MVP	VP of Mid-Hudson Region	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General	00 0	
Other (specify) ▼	210.00	
Full Name (Last, First, Middle Initial) 3. Joseph Lia		Date of Receipt
Mailing Address 12 Sutherland Drive		04 22 _2010 _
City	State Zip Code	Transaction ID : SA11AI.8130
Highland Mills	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С	30.00
Name of Employer	Occupation	1
MVP	VP of Mid-Hudson Region	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	240.00	
Full Name (Last, First, Middle Initial) Joseph Lia	'	Date of Receipt
Mailing Address 12 Sutherland Drive		05 06 2010
City	State Zip Code	Transaction ID : SA11AI.8131
Highland Mills	NY 10930	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	30.00
Name of Employer	Occupation	+
MVP	VP of Mid-Hudson Region	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	272.00	
Other (specify) ▼	270.00	
SUBTOTAL of Receipts This Page (options	al)	90.00
	mber only)	
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for each category of the Detailed Summary Page 13 14 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Joseph Lia Date of Receipt Mailing Address 12 Sutherland Drive 2010 20 City Zip Code State Transaction ID: SA11AI.8132 NY Highland Mills 10930 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation MVP VP of Mid-Hudson Region Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Joseph Lia Date of Receipt Mailing Address 12 Sutherland Drive 06 03 2010 City State Zip Code Transaction ID: SA11AI.8133 NY Highland Mills 10930 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation MVP VP of Mid-Hudson Region Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) Full Name (Last, First, Middle Initial) c. Joseph Lia Date of Receipt Mailing Address 12 Sutherland Drive 06 17 2010 City Zip Code State Transaction ID: SA11AI.8134 NY Highland Mills 10930 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation VP of Mid-Hudson Region MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 360.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Leonard Lindenmuth Date of Receipt Mailing Address 33 Oak Street 04 08 2010 City Zip Code State Transaction ID: SA11AI.8135 NY Binghamton 13905 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation MVP VP Southern Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) Full Name (Last, First, Middle Initial) B. Leonard Lindenmuth Date of Receipt Mailing Address 33 Oak Street 04 22 2010 City State Zip Code Transaction ID: SA11AI.8136 NY Binghamton 13905 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation MVP VP Southern Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) c. Leonard Lindenmuth Date of Receipt Mailing Address 33 Oak Street 06 05 2010 City Zip Code State Transaction ID: SA11AI.8137 NY Binghamton 13905 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation VP Southern MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Leonard Lindenmuth Date of Receipt Mailing Address 33 Oak Street 2010 20 City Zip Code State Transaction ID: SA11AI.8138 NY Binghamton 13905 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation MVP VP Southern Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Leonard Lindenmuth Date of Receipt Mailing Address 33 Oak Street 06 03 2010 City State Zip Code Transaction ID: SA11AI.8139 NY Binghamton 13905 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation MVP VP Southern Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) Full Name (Last, First, Middle Initial) c. Leonard Lindenmuth Date of Receipt Mailing Address 33 Oak Street 2010 06 17 City Zip Code State Transaction ID: SA11AI.8140 NY Binghamton 13905 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation VP Southern MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 360.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) William V. Little Date of Receipt Mailing Address 300 Partridge Lane 04 08 2010 City State Zip Code Transaction ID: SA11AI.8141 VT Charlotte 05445 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation MVP Service Corp. VP Vermont Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) Full Name (Last, First, Middle Initial) B. William V. Little Date of Receipt Mailing Address 300 Partridge Lane 04 22 2010 City State Zip Code Transaction ID: SA11AI.8142 Charlotte VT 05445 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation MVP Service Corp. VP Vermont Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) c. William V. Little Date of Receipt Mailing Address 300 Partridge Lane 06 05 2010 City Zip Code State Transaction ID: SA11AI.8143 Charlotte VT 05445 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation **VP Vermont** MVP Service Corp. Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X	11a		11b	11c	12	
		Detailed Sulfilliary Page	_	13		14	15	16	17
Any information copied from such Reports and or for commercial purposes, other than using the									
NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federal	PAC								
Full Name (Last, First, Middle Initial) A. William V. Little			D	ate of	Re	ceipt			
Mailing Address 300 Partridge Lane				м = м 05	′	20		2010	Y
City	State VT	Zip Code					SA11AI		
Charlotte	VI	05445	Ar	mount	of	Each F	Receipt t	his Period	d
FEC ID number of contributing federal political committee.	С				_	,	7	3	0.00
Name of Employer	Occupation								
MVP Service Corp.	VP Vermon	t							
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		300.00							
Full Name (Last, First, Middle Initial) 3. William V. Little	ı		Di	ate of	Re	ceipt			
Mailing Address 300 Partridge Lane	06 03 2010								
City		Transa	acti	on ID :	SA11AI	.8145			
Charlotte	Ar	mount	of	Each F	Receipt t	his Period	b		
FEC ID number of contributing federal political committee.		30.00							
Name of Employer MVP Service Corp.	Occupation VP Vermon								
Receipt For:			\dashv						
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 330.00]						
Full Name (Last, First, Middle Initial) C. William V. Little			Di	ate of	Re	ceipt			
Mailing Address 300 Partridge Lane				M M	/	17		2010	Y
City	State	Zip Code		Trans	acti	on ID	SA11A	.8146	
Charlotte	VT	05445	1A	mount	of	Each F	Receipt t	his Period	t
FEC ID number of contributing federal political committee.	С					,	- 7	3	0.00
Name of Employer	Occupation								
MVP Service Corp.	VP Vermon	<u>t</u>							
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		360.00]						
SUBTOTAL of Receipts This Page (optional))						90	0.00
TOTAL This Period (last page this line number	only)					,	- 7		

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TEMIZED RECEIPTS		for each category of the Detailed Summary Page		11a		11b	11c	12	
		Detailed Summary Page		13		14	15	16	17
Any information copied from such Reports a or for commercial purposes, other than usir									
NAME OF COMMITTEE (In Full) MVP Health Care Inc. Fede	ral PAC								
Full Name (Last, First, Middle Initial) A. Carl Maleri Jr.			Da	ate of	Re	ceipt			
Mailing Address 19 Crimson Way				м = м 04	/	08) / Y	2010	Y
City	State	Zip Code		Trans	acti	on ID :	SA11AI.	.8166	
Webster	NY	14580	Ar	mount	of	Each F	Receipt th	nis Period	I
FEC ID number of contributing federal political committee.	C					7		40	0.00
Name of Employer	Occupation								
MVP	VP, Underw	riting and Analysis							
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		280.00							
Full Name (Last, First, Middle Initial) 3. Carl Maleri Jr.	'		Da	ate of	Re	ceipt			
Mailing Address 19 Crimson Way		04 22 2010							
City		Γransa	acti	on ID :	SA11AI.	8167			
Webster	Ar	nount	of	Each F	Receipt th	nis Period	I		
FEC ID number of contributing federal political committee.					7	-	40	0.00	
Name of Employer	Occupation								
MVP	VP, Underw	riting and Analysis							
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		320.00]						
Full Name (Last, First, Middle Initial) Carl Maleri Jr.	<u>'</u>		Da	ate of	Re	ceipt			
Mailing Address 19 Crimson Way	_			м м 05	/	06	J L	2010	Y
City Webster	State NY	Zip Code 14580					SA11AI. Receipt th	.8168 nis Period	I
FEC ID number of contributing federal political committee.	C					7	-	40	0.00
Name of Employer	Occupation		\dashv						
MVP	VP, Underv	riting and Analysis							
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Primary General Other (specify) ▼		360.00]						
SUBTOTAL of Receipts This Page (option	al))				7		120	.00
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Detailed Summary Page 13 14 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Carl Maleri Jr. Date of Receipt Mailing Address 19 Crimson Way 2010 20 City Zip Code State Transaction ID: SA11AI.8169 NY Webster 14580 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation MVP VP, Underwriting and Analysis Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Carl Maleri Jr. Date of Receipt Mailing Address 19 Crimson Way 06 03 2010 City State Zip Code Transaction ID: SA11AI.8170 NY Webster 14580 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation MVP VP, Underwriting and Analysis Receipt For: Aggregate Year-to-Date ▼ Primary General 440.00 Other (specify) Full Name (Last, First, Middle Initial) c. Carl Maleri Jr. Date of Receipt Mailing Address 19 Crimson Way 17 06 2010 City Zip Code State Transaction ID: SA11AI.8171 NY Webster 14580 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation VP, Underwriting and Analysis MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 480.00 Other (specify) 120.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Detailed Summary Page	13 14 15 16	17

	d Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federa	al PAC	
Full Name (Last, First, Middle Initial) Laurie Metheny Mailing Address 31 Jacobs Prints		Date of Receipt
Mailing Address 21 Joellen Drive		04 08 2010
City	State Zip Code	Transaction ID : SA11AI.8183
Rochester	NY 14626	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer	Occupation	
MVP	VP, Business Excellence	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	
Full Name (Last, First, Middle Initial) Laurie Metheny Mailing Address 21 Joellen Drive		Date of Receipt
		04 22 2010
City Rochester	State Zip Code NY 14626	Transaction ID : SA11AI.8184
	14020	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer MVP	Occupation VP, Business Excellence	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	
Full Name (Last, First, Middle Initial) Laurie Metheny		Date of Receipt
Mailing Address 21 Joellen Drive		05 06 2010
City Rochester	State Zip Code NY 14626	Transaction ID : SA11AI.8185 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer	Occupation	-
MVP	VP, Business Excellence	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	360.00	
SUBTOTAL of Receipts This Page (optional)	120.00
TOTAL This Period (last page this line numl	per only)	

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62 Use separate schedule(s) for each category of the Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Laurie Metheny Date of Receipt Mailing Address 21 Joellen Drive 2010 20 City Zip Code State Transaction ID: SA11AI.8186 NY Rochester 14626 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation MVP VP, Business Excellence Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Laurie Metheny Date of Receipt Mailing Address 21 Joellen Drive 06 03 2010 City State Zip Code Transaction ID: SA11AI.8187 NY Rochester 14626 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation MVP VP, Business Excellence Receipt For: Aggregate Year-to-Date ▼ Primary General 440.00 Other (specify) Full Name (Last, First, Middle Initial) c. Laurie Metheny Date of Receipt Mailing Address 21 Joellen Drive 06 17 2010 City Zip Code State Transaction ID: SA11AI.8188 NY Rochester 14626 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation VP, Business Excellence MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 480.00 Other (specify) 120.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) James Morrill Date of Receipt Mailing Address 54 Henderson Road 04 2010 08 City State Zip Code Transaction ID: SA11AI.8195 NY 12077 Glenmont Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation MVP EVP, HR Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. James Morrill Date of Receipt Mailing Address 54 Henderson Road 04 22 2010 City State Zip Code Transaction ID: SA11AI.8196 NY Glenmont 12077 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation MVP EVP, HR Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) C. James Morrill Date of Receipt Mailing Address 54 Henderson Road 06 05 2010 City Zip Code State Transaction ID: SA11AI.8197 NY Glenmont 12077 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation MVP EVP, HR Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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for each category of the Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) James Morrill Date of Receipt Mailing Address 54 Henderson Road 2010 20 City State Zip Code Transaction ID: SA11AI.8198 NY 12077 Glenmont Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation MVP EVP, HR Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. James Morrill Date of Receipt Mailing Address 54 Henderson Road 06 03 2010 City State Zip Code Transaction ID: SA11AI.8199 NY Glenmont 12077 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation MVP EVP, HR Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name (Last, First, Middle Initial) C. James Morrill Date of Receipt Mailing Address 54 Henderson Road 17 06 2010 City Zip Code State Transaction ID: SA11AI.8200 NY Glenmont 12077 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation MVP EVP, HR Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 48 OF 62

EMIZED RECEIPTS	for each category of the Detailed Summary Page	`	ck only 11a 13	´	e) 11b 14	110	; [12 16		<u></u> 1	17
y information copied from such Reports and Statements ma	ay not be sold or used by any pe	rson f	or the	purpo	ose of	solici	ing o	ontri	ibutio	ns	

An 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) David Orlando Date of Receipt Mailing Address 3 Clare Castle 04 80 2010 City State Zip Code Transaction ID: SA11AI.8223 NY 12205 Albany Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation MVP Health Care, Inc. Corp VP of Operations Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) Full Name (Last, First, Middle Initial) B. David Orlando Date of Receipt Mailing Address 3 Clare Castle 04 22 2010 City State Zip Code Transaction ID: SA11AI.8224 NY Albany 12205 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation MVP Health Care, Inc. Corp VP of Operations Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) c. David Orlando Date of Receipt Mailing Address 3 Clare Castle 06 05 2010 City State Zip Code Transaction ID: SA11AI.8225 NY Albany 12205 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation Corp VP of Operations MVP Health Care, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

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	d Statements may not be sold or used by any personal the name and address of any political committee to	
NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federa	al PAC	
Full Name (Last, First, Middle Initial) David Orlando Mailing Address & Slave Scatter		Date of Receipt
Mailing Address 3 Clare Castle		05 20 _ 2010 _
City	State Zip Code	Transaction ID : SA11AI.8226
Albany	NY 12205	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	1
MVP Health Care, Inc.	Corp VP of Operations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) 3. David Orlando		Date of Receipt
Mailing Address 3 Clare Castle	Otata Zin Onda	06 03 / 2010
City Albany	State Zip Code NY 12205	Transaction ID : SA11AI.8227
FEC ID number of contributing federal political committee.	C 12203	Amount of Each Receipt this Period 30.00
Name of Employer MVP Health Care, Inc.	Occupation Corp VP of Operations	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	
Full Name (Last, First, Middle Initial) David Orlando	•	Date of Receipt
Mailing Address 3 Clare Castle		06 17 2010
City Albany	State Zip Code NY 12205	Transaction ID : SA11AI.8228 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	1
MVP Health Care, Inc.	Corp VP of Operations	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	360.00	
SUBTOTAL of Receipts This Page (optional)	90.00
TOTAL This Period (last page this line numl	per only)	

FOR LINE NUMBER: PAGE 50 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

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14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Ellen Runyon Date of Receipt Mailing Address 625 State Street 2010 06 03 City Zip Code State Transaction ID: SA11AI.8297 NY Schenectady 12047 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer Occupation MVP VP of E Business Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ellen Runyon Date of Receipt Mailing Address 625 State Street 06 17 2010 City State Zip Code Transaction ID: SA11AI.8298 NY Schenectady 12047 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation MVP VP of E Business Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) c. Thomas Ryan Date of Receipt Mailing Address 24 Bluestone Ridge 09 04 2010 City Zip Code State Transaction ID: SA11AI.8299 NY Clifton Park 12065 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation VP Underwriting MVP Health Care Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) 70.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	FOR LINE NUMBER:	PAGE 51 OF
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for each category of the Detailed Summary Page	X 11a 11b	11c 12
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	nd Statements may not be sold or used by any pers g the name and address of any political committee to	
NAME OF COMMITTEE (In Full) MVP Health Care Inc. Feder	al PAC	
Full Name (Last, First, Middle Initial) Thomas Ryan Mailing Address 34 Physicians Bidgs		Date of Receipt
Mailing Address 24 Bluestone Ridge		04 23 2010
City	State Zip Code	Transaction ID : SA11AI.8300
Clifton Park	NY 12065	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	-
MVP Health Care	VP Underwriting	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) Thomas Ryan Mailing Address 24 Bluestone Ridge		Date of Receipt
Mailing / Maross 24 Bluestone Ridge		05 07 _2010 _
City	State Zip Code	Transaction ID : SA11AI.8301
Clifton Park	NY 12065	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	1
MVP Health Care	VP Underwriting	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	270.00	
Full Name (Last, First, Middle Initial) C. Thomas Ryan		Date of Receipt
Mailing Address 24 Bluestone Ridge		05 21 2010
City Clifton Park	State Zip Code NY 12065	Transaction ID : SA11AI.8302 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	-
MVP Health Care	VP Underwriting	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (optional	ı) >	90.00
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FOR LINE NUMBER: PAGE 52 OF 62 Use separate schedule(s) for each category of the Detailed Summary Page

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	d Statements may not be sold or used by any pers the name and address of any political committee t	
NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federa	I PAC	
Full Name (Last, First, Middle Initial) Thomas Ryan		Date of Receipt
Mailing Address 24 Bluestone Ridge		06 04 _ 2010 _
City	State Zip Code	Transaction ID : SA11AI.8303
Clifton Park	NY 12065	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	1
MVP Health Care	VP Underwriting	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 330.00	
Full Name (Last, First, Middle Initial) 3. Thomas Ryan		Date of Receipt
Mailing Address 24 Bluestone Ridge		Date of Receipt M M M / D D / Y D Y D Y D Y D Y D Y D Y D Y D
City	State Zip Code	Transaction ID : SA11AI.8304
Clifton Park	NY 12065	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	1
MVP Health Care	VP Underwriting	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	360.00	
Full Name (Last, First, Middle Initial) C. Daniel Sauer	'	Date of Receipt
Mailing Address 160 Fifth Avenue		04 08 2010
City Saratoga Springs	State Zip Code NY 12866	Transaction ID : SA11AI.8305 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	
MVP	VP Sales	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	210.00	
SUBTOTAL of Receipts This Page (optional)	>	90.00
TOTAL This Period (last page this line numb	er only)	

FOR LINE NUMBER: PAGE 53 OF Use separate schedule(s)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and Stateme or for commercial purposes, other than using the name		
NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federal PAC		
MVP Receipt For: Primary Other (specify) ▼ Aggr	7 12866	Date of Receipt M M M / 22 2010 Transaction ID: SA11AI.8306 Amount of Each Receipt this Period 30.00
MVP VP Si	12866 Ipation	Date of Receipt M M M / D D / 2010 Transaction ID: SA11AI.8307 Amount of Each Receipt this Period 30.00
MVP VP S	12866	Date of Receipt 05 20 2010 Transaction ID : SA11AI.8308 Amount of Each Receipt this Period 30.00
SUBTOTAL of Receipts This Page (optional)		90.00

FOR LINE NUMBER: PAGE 54 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Daniel Sauer Date of Receipt Mailing Address 160 Fifth Avenue 2010 06 03 City State Zip Code Transaction ID: SA11AI.8309 NY Saratoga Springs 12866 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation MVP **VP Sales** Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) Full Name (Last, First, Middle Initial) B. Daniel Sauer Date of Receipt Mailing Address 160 Fifth Avenue 06 17 2010 City State Zip Code Transaction ID: SA11AI.8310 NY Saratoga Springs 12866 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation MVP VP Sales Receipt For: Aggregate Year-to-Date ▼ Primary General 360.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Tracy Tadaro-Ott Date of Receipt Mailing Address 33 Everett Drive 80 04 2010 City Zip Code State Transaction ID: SA11AI.8347 NY Rochester 14624 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation VP, Sales MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 55 OF Use separate schedule(s)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
	d Statements may not be sold or used by any p the name and address of any political committee	
NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federa	I PAC	
Full Name (Last, First, Middle Initial) Tracy Tadaro-Ott Mailing Address 33 Everett Drive City Rochester FEC ID number of contributing federal political committee. Name of Employer MVP Receipt For: Primary General Other (specify)	State Zip Code NY 14624 C Occupation VP, Sales Aggregate Year-to-Date ▼	Date of Receipt M M M / 22 2010 Transaction ID: SA11AI.8348 Amount of Each Receipt this Period 30.00
Full Name (Last, First, Middle Initial) Tracy Tadaro-Ott Mailing Address 33 Everett Drive City Rochester FEC ID number of contributing federal political committee. Name of Employer MVP Receipt For: Primary General Other (specify)	State Zip Code NY 14624 C Occupation VP, Sales Aggregate Year-to-Date ▼ 270.00	Date of Receipt 05 06 2010 Transaction ID : SA11AI.8349 Amount of Each Receipt this Period 30.00
Full Name (Last, First, Middle Initial) Tracy Tadaro-Ott Mailing Address 33 Everett Drive City Rochester FEC ID number of contributing federal political committee. Name of Employer MVP Receipt For: Primary General Other (specify)	State Zip Code NY 14624 C Occupation VP, Sales Aggregate Year-to-Date ▼ 310.00	Date of Receipt Mark
SUBTOTAL of Receipts This Page (optional).)	100.00
TOTAL This Period (last page this line number	er only)	

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NAME OF COMMITTEE (In Full)						
igwedge MVP Health Care Inc. Federal P	PAC					
Full Name (Last, First, Middle Initial) 1. Tracy Tadaro-Ott	Date of Receipt					
Mailing Address 33 Everett Drive		06 03 2010				
City	State Zip Code	Transaction ID : SA11AI.8351				
Rochester	NY 14624	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	40.00				
Name of Employer	Occupation					
MVP	VP, Sales					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	350.00					
Full Name (Last, First, Middle Initial) Tracy Tadaro-Ott		Date of Receipt				
Mailing Address 33 Everett Drive		06 17 2010 _				
City	State Zip Code	Transaction ID : SA11AI.8352				
Rochester	NY 14624	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	40.00				
Name of Employer						
MVP	VP, Sales					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00					
Full Name (Last, First, Middle Initial) C. John Vangraafeiland		Date of Receipt				
Mailing Address 85 Pinehurst Place		04 08 _ 2010 _				
City	State Zip Code	Transaction ID : SA11AI.8368				
Middletown	CT 06457	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	30.00				
Name of Employer						
MVP	CIO					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	210.00					
SUBTOTAL of Receipts This Page (optional)	>	110.00				
TOTAL This Period (last page this line number of	only)					

FOR LINE NUMBER: PAGE 57 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) John Vangraafeiland Date of Receipt Mailing Address 85 Pinehurst Place 04 2010 22 City State Zip Code Transaction ID: SA11AI.8369 CT Middletown 06457 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation MVP CIO Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) B. John Vangraafeiland Date of Receipt Mailing Address 85 Pinehurst Place 05 06 2010 City State Zip Code Transaction ID: SA11AI.8370 Middletown CT 06457 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation MVP CIO Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name (Last, First, Middle Initial) c. John Vangraafeiland Date of Receipt Mailing Address 85 Pinehurst Place 20 05 2010 City State Zip Code Transaction ID: SA11AI.8372 CT Middletown 06457 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation CIO MVP Receipt For: Aggregate Year-to-Date ▼ Primary General 310.00 Other (specify) 100.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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for each category of the Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) John Vangraafeiland Date of Receipt Mailing Address 85 Pinehurst Place 2010 06 03 City State Zip Code Transaction ID: SA11AI.8373 CT Middletown 06457 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation MVP CIO Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. John Vangraafeiland Date of Receipt Mailing Address 85 Pinehurst Place 06 17 2010 City State Zip Code Transaction ID: SA11AI.8374 Middletown CT 06457 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation MVP CIO Receipt For: Aggregate Year-to-Date ▼ Primary General 390.00 Other (specify) Full Name (Last, First, Middle Initial) c. Shanon Vollmer Date of Receipt Mailing Address 30 Wilton Court 80 04 2010 City Zip Code State Transaction ID: SA11AI.8375 NY Clifton Park 12065 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation MVP Health Care, Inc. Associate Counsel Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) 110.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 59 OF

TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check online)	y one) 11b 14	11c	12	17	
Any information copied from such Reports and or for commercial purposes, other than using			rson for the	purpose of	soliciting	contribut	ions	
NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federa	I PAC							
Full Name (Last, First, Middle Initial) Shanon Vollmer Mailing Address 30 Wilton Court			Date of	f Receipt	/ V	- Y - Y -	V	
			04	22		2010		
City Clifton Park	State NY	Zip Code 12065	Trans					
FEC ID number of contributing federal political committee.	C		Amoun	t of Each R	eceipt th	30	.00	
Name of Employer	Occupation							
MVP Health Care, Inc.	Associate Co	unsel						
Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 240.00						
Full Name (Last, First, Middle Initial) 3. Shanon Vollmer			Date of	f Receipt				
Mailing Address 30 Wilton Court	05	/ 06	/ Y	2010	Y			
City	State NY	Zip Code		Transaction ID : SA11AI.8377				
Clifton Park		12065	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C				7	30.	00	
Name of Employer MVP Health Care, Inc.	Occupation Associate Co	unsel						
Receipt For:	Aggregate Y	ear-to-Date ▼						
Primary General Other (specify) ▼		270.00						
Full Name (Last, First, Middle Initial) C. Shanon Vollmer			Date of	f Receipt				
Mailing Address 30 Wilton Court			M M M	/ D D	/ Y	2010	Y	
City Clifton Park	State NY	Zip Code 12065		saction ID: t of Each R				
FEC ID number of contributing federal political committee.	C			7	- 1	30	.00	
Name of Employer								
MVP Health Care, Inc. Receipt For:	Associate Co		_					
Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 300.00						
SUBTOTAL of Receipts This Page (optional).		·····				90.	00	
TOTAL This Period (last page this line numb	er only)							

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for each category of the Detailed Summary Page 14 13 15 16 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Shanon Vollmer Date of Receipt Mailing Address 30 Wilton Court 2010 06 03 City Zip Code State Transaction ID: SA11AI.8379 NY Clifton Park 12065 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation MVP Health Care, Inc. Associate Counsel Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) Full Name (Last, First, Middle Initial) B. Shanon Vollmer Date of Receipt Mailing Address 30 Wilton Court 06 2010 17 City State Zip Code Transaction ID: SA11AI.8380 Clifton Park NY 12065 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation MVP Health Care, Inc. Associate Counsel Receipt For: Aggregate Year-to-Date ▼ Primary General 360.00 Other (specify) Full Name (Last, First, Middle Initial) c. Joe Wild Date of Receipt Mailing Address 2040 Mill Road 05 24 2010 City Zip Code State Transaction ID: SA11AI.8456 NY West Falls 14170 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation MVP Health Care Director Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 310.00 SUBTOTAL of Receipts This Page (optional)..... 11730.00 TOTAL This Period (last page this line number only).....

S	CHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 61 OF 62				
IT	EMIZED DISBURSEMENTS	DISBURSEMENTS Use separate schedule(s) (check of the separate schedule)		(check only	only one)			
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	for commercial purposes, other than using the nam							
\setminus	NAME OF COMMITTEE (In Full)							
$ \rangle$	MVP Health Care Inc. Federal PAC	;						
\angle	Full Name (Last, First, Middle Initial)							
Α.	FRANK GUINTA				Date of Disl	bursement		
			M = M /	D D / Y Y Y Y Y				
	Mailing Address 221 CRESTVIEW ROAD				06 25 2010			
	City	State	Zip Code					
	-	NH	03104		Transactio	on ID : SB23.7833		
	Purpose of Disbursement			12.7				
	Campaign Contribution Candidate Name			011	Amount of E	Each Disbursement this Period		
	Frank Guinta			Category/ Type		2000.00		
		nent For: 2	2010	Type				
		Primary	X General					
		Other (spe	cify) \blacktriangledown					
_	State: NH District: 01							
В	,	Full Name (Last, First, Middle Initial) Mike McMahon MIKE MCMAHON FOR CONGRESS						
	WIRE WEWAITON WIRE WEWAITON TON CONGRESS				Date of Disbursement			
	Mailing Address 66 Arnold Street		05 22 2010					
	,	State	Zip Code		Transactio	on ID : SB23.7831		
	Staten Island Purpose of Disbursement	NY	10301					
Purpose of Disbursement Campaign Contribution				011	Amount of E	Each Disbursement this Period		
	Candidate Name			Category/				
	MIKE MCMAHON FOR CONGRES			Туре		2000.00		
		nent For:						
		Primary Other (spec	General					
	State: District:	or (oper	」/ ▼					
	Full Name (Last, First, Middle Initial)							
C.	TOM REED FOR CONGRESS					bursement		
	Mailing Address 99 W FIRST ST				05 /	06 2010		
	Maining Address 33 W FIKS! 31		0.0	2010				
	,	State NY	Zip Code 14830		Transactio	on ID : SB23.8476		
	CORNING Purpose of Disbursement							
	Political Contribution				Amount of Each Disbursement this Po			
	Candidate Name			Category/	A THOUSE OF L			
	THOMAS W REED II			Type		2000.00		
		nent For: 2						
		Primary Other (spe	General Cify) ▼					
	State: NY District: 29	Cirior (opo	o.i.y) ▼					
Г	<u> </u>							
5	SUBTOTAL of Disbursements This Page (optional)					6000.00		
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SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

Excluding Loans

(Use separate schedule(s) for each numbered line)

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	ME OF COMMITTEE (In Full) VP Health Care Inc. Federal PAC							
	A. Full Name (Last, First, Middle Initial) of Debto Deluxe Business Checks	Nature of Debt (Purpose): Check Printing						
	Mailing Address P.O. Box 742572	1						
٠	City State Cincinnati							
	Outstanding Balance Beginning This Period	Transaction ID: SD10.4163						
	145.00							
	Amount Incurred This Period	Paym	nent This Period	Outstanding Balance at Close of This Period				
	0.00		0.00	145.00				
	B. Full Name (Last, First, Middle Initial) of Debtor Media Well Done	r or Creditor		Nature of Debt (Purpose): Advertising				
	Mailing Address 96 Jay Street							
	City State Schenectady							
	Outstanding Balance Beginning This Period 338.00	Transaction ID : SD10.4165						
	Amount Incurred This Period	Outstanding Balance at Close of This Period						
	0.00	338.00						
	C. Full Name (Last, First, Middle Initial) of Debto	Nature of Debt (Purpose):						
	Mailing Address			_				
	City	State	Zip Code					
	Outstanding Balance Beginning This Period							
	Amount Incurred This Period	Paym	nent This Period	Outstanding Balance at Close of This Period				
1)	SUBTOTALS This Period This Page (optional)		>	483.00				
2)	TOTALS This Period (last page this line number	only)	>	483.00				
3)	TOTAL OUTSTANDING LOANS from Schedule	0.00						
4)	ADD 2) and 3) and carry forward to appropriate	483.00						