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### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines MVP Health Care Inc. Federal PAC 625 State Street ADDRESS (number and street) Check if different than previously Schenectady NY 12305 reported. (ACC) FEC IDENTIFICATION NUMBER STATE A ZIPCODE A CITY A IS THIS NEW **AMENDED** C00431429 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Х Runoff (30R) Special (30S) Post -Election General (30G) Report for the: **Termination Report** (TER) in the 04 2008 NY 11 Election on State of 10 16 2008 24 2008 11 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Mr. Frank Fanshawe Type or Print Name of Treasurer Electronically Filed by Mr. Frank Fanshawe 12 05 2008 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

FEC Form 3X (Rev. 02/2003)

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

OF RECEIPTS AND DISBURSEMENTS

Page 2

R	eport Covering the Period: From:	16 2000	To: 11 24 2008
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
	(a) Cash on Hand January 1 Ž008 Y Y		18579.84
	(b) Cash on Hand at Begining of Reporting Period	19103.84	
	(c) Total Receipts (from Line 19)	3796.00	22107.00
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	22899.84	40686.84
	Total Disbursements (from Line 31)	5500.00	23287.00
	Cash on Hand at Close of		
	Reporting Period (subtract Line 7 from Line 6(d))	17399.84	17399.84
	Debts and Obligations owed TO		
	the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
١.	Debts and Obligations owed BY		
	the committee (Itemize all on Schedule C and/or Schedule D)	483.00	
	This Committee has qualified as a multicandid	ate committee. (see FEC FORM 1M)	
	F	or further information contact:	
		Federal Election Commission	
		999 E street, NW	

### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name
MVP Health Care Inc. Federal PAC

Report Covering the Period:

From:

16

<sup>Y</sup> 2 0 0 8

то: 1 1

<sup>D</sup> 2 4

<sup>Y</sup> 2008

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From:		
	(a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	2960.00	14610.00
	(ii) Unitemized	836.00	7497.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	3796.00	22107.00
		0.00	0.00
	<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li></ul>		
	(c) Other Political Committees (such as PACs) (d) Total Contributions (add Lines	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	3796.00	22107.00
2.	Transfers From Affiliated/Other Party Committees	0.00	0.00
_	All Large Descript	0.00	0.00
ა.	All Loans Received		
4. 5.	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
6.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
	to Federal candidates and Other Political Committees	0.00	0.00
7.	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
8.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	3796.00	22107.00
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	3796.00	22107.00

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures:  (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)  (i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating Expenditures	0.00	0.00
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	0.00	0.00
22.	Transfers to Affiliated/Other Party Committees	0.00	0.00
23.	Contributions to Federal Candidates/Committees and Other Political Committees	5500.00	23250.00
4.	Independent Expenditure (use Schedule E)	0.00	0.00
5.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6.	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
8.	Refunds of Contributions To:  (a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
9.	Other Disbursements	0.00	37.00
80.	Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1.	Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	5500.00	23287.00
2.	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	5500.00	23287.00

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	3796.00	22107.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	3796.00	22107.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FE6AN026

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6/34 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using t	Lack tasements may not be sold or used by any personal statements may not be sold or used by any personal tase to the name and address of any political committee to	13 14 15 16 on for the purpose of soliciting contributions o 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		10 23 2008
City Scotia	State Zip Code NY 12302	Transaction ID: SA11AI.4918
FEC ID number of contributing federal political committee.	C 12302	Amount of Each Receipt this Period  30.00
Name of Employer MVP Service Corp	Occupation VP, Sales Ops	Political Contribution
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼  360.00	
Full Name (Last, First, Middle Initial) Ms. Mary Bianchi		Date of Receipt
Mailing Address 6 Doris Drive		1 1 0 6 2 0 0 8
City	State Zip Code	Transaction ID: SA11AI.4948
Scotia  FEC ID number of contributing federal political committee.	NY 12302	Amount of Each Receipt this Period  30.00
Name of Employer MVP Service Corp	Occupation	Political Contribution
Receipt For:	VP, Sales Ops  Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	390.00	
Full Name (Last, First, Middle Initial) Ms. Mary Bianchi		Date of Receipt
Mailing Address 6 Doris Drive		1 1 2 1 2 0 0 8
City Scotia	State Zip Code NY 12302	Transaction ID: SA11AI.4949  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer MVP Service Corp	Occupation VP, Sales Ops	Political Contribution
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	
SUBTOTAL of Receipts This Page (optional)		90.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7/34 (check only one)    X		
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	I Statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions		
MVP Health Care Inc. Federal PAC				
Full Name (Last, First, Middle Initial) Charles Bloss		Date of Receipt		
Mailing Address 708 Stephens Place		10 23 2008		
City <u>Schenectady</u>	State Zip Code NY 12303	Transaction ID: SA11AI.4893  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	40.00		
Name of Employer MVP	Occupation VP & chief Actuary	Political Contribution		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00			
Full Name (Last, First, Middle Initial)  Charles Bloss	Date of Receipt			
Mailing Address 708 Stephens Place				
City Schenectady	State Zip Code NY 12303	Transaction ID: SA11AI.4944		
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 40.00		
Name of Employer MVP	Occupation VP & chief Actuary	Political Contribution		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00			
Full Name (Last, First, Middle Initial) C. Charles Bloss	1	Date of Receipt		
Mailing Address 708 Stephens Place		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Schenectady	State Zip Code NY 12303	Transaction ID: SA11AI.4972  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	40.00		
Name of Employer MVP	Occupation VP & chief Actuary	Political Contribution		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 560.00			
SUBTOTAL of Receipts This Page (optional)		120.00		
TOTAL This Period (last page this line numb	er only)			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 8 / 34   (check only one)
Any information copied from such Reports and or for commercial purposes, other than using t	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
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			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Delmar	State NY	Zip Code	Transaction ID: SA11AI.4969
FEC ID number of contributing federal political committee.	C	12054	Amount of Each Receipt this Period  20.00
Name of Employer MVP	Occupation Administ		Political Contribution
Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼		e Year-to-Date ▼ 220.00	
Full Name (Last, First, Middle Initial) Carl Cameron	1		Date of Receipt
Mailing Address 285 Willowcrest Driv	/e		10 23 2008
City Rochester	State NY	Zip Code 14618	Transaction ID: SA11AI.4892
FEC ID number of contributing federal political committee.	C	14010	Amount of Each Receipt this Period  30.00
Name of Employer MVP	Occupation VP Medic	n cal Director	Political Contribution
Receipt For:  Primary General  Other (specify) ▼	<del>- + +</del>	Year-to-Date ▼ 360.00	
Full Name (Last, First, Middle Initial) Carl Cameron			Date of Receipt
Mailing Address 285 Willowcrest Driv	/e		11 06 2008
City Rochester	State NY	Zip Code 14618	Transaction ID: SA11AI.4943
FEC ID number of contributing federal political committee.	C	14010	Amount of Each Receipt this Period  30.00
Name of Employer MVP	Occupation VP Medic	n cal Director	Political Contribution
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 390.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>		80.00

ITE	HEDULE A (FEC Form 3X)  EMIZED RECEIPTS  information copied from such Reports and St	tatements mai	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 34 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
or fo	NAME OF COMMITTEE (In Full)  MVP Health Care Inc. Federal PAC	name and add	dress of any political committee to	o solicit contributions from such committee.
<b>4.</b> (	Full Name (Last, First, Middle Initial) Carl Cameron  Mailing Address 285 Willowcrest Drive			Date of Receipt
	Dity Rochester	State NY	Zip Code 14618	Transaction ID: SA11AI.5001  Amount of Each Receipt this Period
f	FEC ID number of contributing ederal political committee.	C		30.00 Political Contribution
_	Name of Employer MVP  Receipt For:  Primary General  Other (specify) ▼		n cal Director e Year-to-Date ▼ 420.00	Political Contribution
3. <u> </u>	Full Name (Last, First, Middle Initial) Patricia Deferio Mailing Address 7723 Majestic Drive			Date of Receipt  10 23 2008
Ō	Dity	State	Zip Code	Transaction ID: SA11AI.4920
F f	Liverpool FEC ID number of contributing ederal political committee.	C	13090	Amount of Each Receipt this Period  30.00  Political Contribution
_	Name of Employer MVP  Receipt For: Primary General Other (specify)		n Network Director e Year-to-Date ▼ 360.00	
;. <u>F</u>	Full Name (Last, First, Middle Initial) Patricia Deferio Mailing Address 7723 Majestic Drive			Date of Receipt  1 1 0 6 2 0 0 8
	Dity	State	Zip Code	Transaction ID: SA11AI.4991
F	Liverpool FEC ID number of contributing ederal political committee.	C	13090	Amount of Each Receipt this Period  30.00
_	Name of Employer MVP	Occupation Regional	n Network Director	Political Contribution
F	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 390.00	
su	BTOTAL of Receipts This Page (optional)			90.00

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 34 (check only one)    X   11a
nny information copied from such Reports and a r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MVP Health Care Inc. Federal PAC	Statements may not be sold or used by any pe e name and address of any political committed	erson for the purpose of soliciting contributions
/ MVP Health Care Inc. Federal PAC		
Full Name (Last, First, Middle Initial) Patricia Deferio  Mailing Address 7723 Majestic Drive		Date of Receipt
		11 21 2008
City	State Zip Code	Transaction ID: SA11AI.4992
Liverpool	NY 13090	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00 Political Contribution
Name of Employer MVP	Occupation Regional Network Director	Political Contribution
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	420.00	0
Full Name (Last, First, Middle Initial) Mr. Frank Fanshawe	1	Date of Receipt
Mailing Address 430 Ridgehill Road		10 23 YYYY 2008
City	State Zip Code	Transaction ID: SA11AI.4906
Schenectady	NY 12303	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer MVP	Occupation Treasurer	Political Contribution
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	330.00	0
Full Name (Last, First, Middle Initial) Mr. Frank Fanshawe	I	Date of Receipt
Mailing Address 430 Ridgehill Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.4946
Schenectady	NY 12303	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer MVP	Occupation Treasurer	Political Contribution
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	360.00	
SUBTOTAL of Receipts This Page (optional) .	1	90.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 34 (check only one)    X   11a
A oi	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MVP Health Care Inc. Federal PAC			
٠.	Full Name (Last, First, Middle Initial) Mr. Frank Fanshawe			Date of Receipt
	Mailing Address 430 Ridgehill Road			11 21 2008
	City Schenectady	State NY	Zip Code 12303	Transaction ID: SA11AI.4947  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer MVP	Occupation Treasure		Political Contribution
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 390.00	
	Full Name (Last, First, Middle Initial) Mark Fish			Date of Receipt
	Mailing Address 500 Normanskill Place	Э		10 23 2008
	City	State	Zip Code	Transaction ID: SA11Al.4917
	Slingerlands FEC ID number of contributing	NY	12159	Amount of Each Receipt this Period
	federal political committee.	C		40.00
	Name of Employer MVP	Occupation EVP Net	n work Management	Political Contribution
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		480.00	
	Full Name (Last, First, Middle Initial) Mark Fish			Date of Receipt
	Mailing Address 500 Normanskill Place	Э		1 1 0 6 2 0 0 8
	City	State	Zip Code	Transaction ID: SA11AI.4970
	Slingerlands FEC ID number of contributing federal political committee.	C	12159	Amount of Each Receipt this Period 40.00
	Name of Employer MVP	Occupation EVP Net	n work Management	Political Contribution
	Receipt For:  Primary General  Other (specify) ▼	<del>, '</del>	e Year-to-Date ▼ 520.00	
	SUBTOTAL of Receipts This Page (optional)	1		110.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 34 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personal statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions
MVP Health Care Inc. Federal PAC		
Full Name (Last, First, Middle Initial)  Mark Fish  Mailing Address 500 Normanskill Plac	0	Date of Receipt
City	State Zip Code	Transaction ID: SA11Al.4971
Slingerlands	NY 12159	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer MVP	Occupation EVP Network Management	Political Contribution
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 560.00	
Full Name (Last, First, Middle Initial) Al Gatti		Date of Receipt
Mailing Address 8 Wendy Lane		10 23 7 2008
City	State Zip Code	Transaction ID: SA11AI.4886
W. Hartford	CT 06117	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00  Political Contribution
Name of Employer MVP	Occupation Exec VP	Political Contribution
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	480.00	
Full Name (Last, First, Middle Initial) Al Gatti		Date of Receipt
Mailing Address 8 Wendy Lane		11 06 2008
City W. Hartford	State Zip Code CT 06117	Transaction ID: SA11AI.4937  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer MVP	Occupation Exec VP	Political Contribution
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	
SURTOTAL of Receipts This Page (ontional)		120.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 34 (check only one)    X
A	r for commercial purposes, other than using th	Statements may not be sold or used by any e name and address of any political committ	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  MVP Health Care Inc. Federal PAC		
۸.	Full Name (Last, First, Middle Initial) Al Gatti		Date of Receipt
	Mailing Address 8 Wendy Lane	State Zip Code	111 21 2008
	City W. Hartford	State Zip Code CT 06117	Transaction ID: SA11AI.4997  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer MVP	Occupation Exec VP	Political Contribution
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 560.00	
_	Full Name (Last, First, Middle Initial) Bill Geddings	Date of Receipt	
	Mailing Address 75 Robinwood Drive		10 23 7 2008
	City	State Zip Code	Transaction ID: SA11AI.4888
	Clifton Park  FEC ID number of contributing federal political committee.	NY 12065	Amount of Each Receipt this Period  20.00
	Name of Employer MVP	Occupation VP Health Services	Political Contribution
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
_	Full Name (Last, First, Middle Initial) Bill Geddings	1	Date of Receipt
	Mailing Address 75 Robinwood Drive		111 06 7 9 9 9
	City Clifton Park	State Zip Code NY 12065	Transaction ID: SA11AI.4939  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer MVP	Occupation VP Health Services	Political Contribution
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	
\[ \frac{1}{2}	SUBTOTAL of Receipts This Page (optional) .	1	80.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule for each category of th Detailed Summary Pag	e (crieck offly offe)
A or	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by are name and address of any political comm	ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
	MVP Health Care Inc. Federal PAC		
	Full Name (Last, First, Middle Initial) Bill Geddings		Date of Receipt
	Mailing Address 75 Robinwood Drive		11 21 2008
	City	State Zip Code	Transaction ID: SA11AI.4964
	Clifton Park	NY 12065	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer MVP	Occupation VP Health Services	Political Contribution
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	280.	00
	Full Name (Last, First, Middle Initial) Patrick Glavey		Date of Receipt
	Mailing Address 165 Windemere Road		10 23 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.4921
	Rochester	NY 14610	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	60.00  Political Contribution
	Name of Employer MVP	Occupation VP, Medicare Products	Political Contribution
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify)	720.	00
_	Full Name (Last, First, Middle Initial) Patrick Glavey		Date of Receipt
	Mailing Address 165 Windemere Road		1 1 0 6 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.4956
	Rochester	NY 14610	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	60.00
	Name of Employer MVP	Occupation VP, Medicare Products	Political Contribution
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	780.	00
	NUDTOTAL of Descript This Description		140.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separat for each cate Detailed Sur		FOR LINE NUMBER: PAGE 15 / 34 (check only one)  X 11a 11b 11c 12 13 14 15 16
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	Statements may not be sold or a name and address of any poli	used by any person tical committee to so	for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial)			
Patrick Glavey  Mailing Address 165 Windemere Road			Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
City Rochester	State Zip Code NY 14610		Transaction ID: SA11AI.4957
FEC ID number of contributing federal political committee.	C 14610		Amount of Each Receipt this Period 60.00
Name of Employer MVP	Occupation VP, Medicare Products	S	Political Contribution
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date		
Full Name (Last, First, Middle Initial)  Denise Gonick			Date of Receipt
Mailing Address 803 Via Marchella			10 23 7 2008
City Schenectady	State Zip Code NY 12303		Transaction ID: SA11AI.4903
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 60.00
Name of Employer MVP	Occupation EVP & Chief Legal Off	icer	Political Contribution
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date	720.00	
Full Name (Last, First, Middle Initial) Denise Gonick			Date of Receipt
Mailing Address 803 Via Marchella			1 1 0 6 2 0 0 8
City Schenectady	State Zip Code NY 12303		Transaction ID: SA11AI.4954  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		60.00
Name of Employer MVP	Occupation EVP & Chief Legal Off	icer	Political Contribution
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date	780.00	
SUBTOTAL of Receipts This Page (optional) .			180.00

ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 16/34   (check only one)
Any information copied from such Reports and or for commercial purposes, other than using t	Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions 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			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Schenectady	State NY	Zip Code 12303	Transaction ID: SA11AI.4955
FEC ID number of contributing federal political committee.	C	12303	Amount of Each Receipt this Period  60.00
Name of Employer MVP	Occupation EVP & C	n hief Legal Officer	Political Contribution
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 840.00	
Full Name (Last, First, Middle Initial) Christopher Henchey			Date of Receipt
Mailing Address 144 Berry Road			10 23 7 2008
City	State NH	Zip Code	Transaction ID: SA11AI.4895
Loudon  FEC ID number of contributing federal political committee.	C	03307	Amount of Each Receipt this Period  80.00
Name of Employer MVP	Occupation Vice Pres		Political Contribution
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 960.00	
Full Name (Last, First, Middle Initial) Christopher Henchey			Date of Receipt
Mailing Address 144 Berry Road			1 1 0 6 2 0 0 8
City Loudon	State NH	Zip Code 03307	Transaction ID: SA11AI.5003  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		80.00
Name of Employer MVP	Occupation Vice Pres		Political Contribution
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1040.00	
SUBTOTAL of Receipts This Page (optional)			220.00

SCHEDULE A	(FEC Form 3X) CEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 34 (check only one)    X   11a
Any information copies or for commercial purp	oses, other than using the r	atements may name and add	not be sold or used by any pers ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
MVP Health Ca	re Inc. Federal PAC			
Full Name (Last, F Christopher Henche				Date of Receipt
	144 Berry Road			11 21 7 2008
City Loudon		State NH	Zip Code 03307	Transaction ID: SA11AI.5004  Amount of Each Receipt this Period
FEC ID number of federal political cor		C		80.00
Name of Employer MVP		Occupation Vice Presi		Political Contribution
Receipt For: Primary Other (specif	General y) ▼	_	Year-to-Date ▼ 1120.00	
Full Name (Last, F				Date of Receipt
Mailing Address	1 Loudon Heights			10 23 Y Y Y Y Y
City		State	Zip Code	Transaction ID: SA11AI.4900
Loudonville		NY	12211	Amount of Each Receipt this Period
FEC ID number of federal political cor		C		60.00  Political Contribution
Name of Employer MVP			es and Marketing	1 ontical contribution
Receipt For: Primary Other (specif	General y) <b>▼</b>	Aggregate	Year-to-Date ▼ 720.00	
Full Name (Last, F David Henderson	irst, Middle Initial)			Date of Receipt
Mailing Address	1 Loudon Heights			11 06 2008
City Loudonville		State NY	Zip Code	Transaction ID: SA11AI.4983
FEC ID number of federal political cor		C	12211	Amount of Each Receipt this Period  60.00
Name of Employer MVP		Occupation EVP, Sale	es and Marketing	Political Contribution
Receipt For: Primary Other (specif	General y) ▼		Year-to-Date ▼ 780.00	
SUBTOTAL of Rece	ints This Page (optional)			200.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 34 (check only one)  X 11a 11b 11c 12 13 14 15 16
0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perename and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
	MVP Health Care Inc. Federal PAC		
•	Full Name (Last, First, Middle Initial)  David Henderson  Mailing Address 1 Loudon Heights		Date of Receipt
	Mailing Address 1 Loudon Heights		11 21 2008
	City Loudonville	State Zip Code NY 12211	Transaction ID: SA11AI.4984
	FEC ID number of contributing federal political committee.	NY 12211	Amount of Each Receipt this Period  60.00
	Name of Employer MVP	Occupation EVP, Sales and Marketing	Political Contribution
	Receipt For:  Primary  General  Other (specify)	Aggregate Year-to-Date ▼  840.00	
	Full Name (Last, First, Middle Initial) Kim Ann Hess		Date of Receipt
	Mailing Address 237 Jacobs Road		10 23 7 2008
	City Macedon	State Zip Code NY 14502	Transaction ID: SA11AI.4914
	FEC ID number of contributing federal political committee.	NY 14502	Amount of Each Receipt this Period  30.00
	Name of Employer MVP Service Corp.	Occupation VP Medicaid & Safety Net	Political Contribution
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	360.00	
_	Full Name (Last, First, Middle Initial) Kim Ann Hess		Date of Receipt
	Mailing Address 237 Jacobs Road		1 1 0 6 2 0 0 8
	City	State Zip Code	Transaction ID: SA11AI.4950
	Macedon FEC ID number of contributing	NY 14502	Amount of Each Receipt this Period  30.00
	Name of Employer MVP Service Corp.	Occupation	Political Contribution
		VP Medicaid & Safety Net	
	Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼ 390.00	
			120.00

SCHEDULE A (FEC Form	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 34 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Report or for commercial purposes, other than to NAME OF COMMITTEE (In Full)	rts and Statements may not be sold or used by any persousing the name and address of any political committee to	on for the purpose of soliciting contributions
MVP Health Care Inc. Federal	PAC	
Full Name (Last, First, Middle Initial) Kim Ann Hess		Date of Receipt
Mailing Address 237 Jacobs Ro	ad State Zip Code	1 1 2 1 2 0 0 8  Transaction ID: SA11AI.4951
Macedon	NY 14502	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 Medicaid & Safety Net	Political Contribution
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 420.00	
Full Name (Last, First, Middle Initial) Kevin Husted		Date of Receipt
Mailing Address 38 Fox Hill Driv	е	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.4913
<u>Fairport</u>	NY 14450	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer MVP	Occupation VP Information Technology	Political Contribution
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	
Full Name (Last, First, Middle Initial) Kevin Husted		Date of Receipt
Mailing Address 38 Fox Hill Driv	е	1 1 0 6 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.5021
<u>Fairport</u>	NY 14450	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00 Political Contribution
Name of Employer MVP	Occupation VP Information Technology	Political Continuution
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	
CURTOTAL of Descipts This Desc (or	otional)	90.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 34 (check only one)    X   11a
A or	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MVP Health Care Inc. Federal PAC		
۸.	Full Name (Last, First, Middle Initial) Kevin Husted		Date of Receipt
	Mailing Address 38 Fox Hill Drive	7.0.1	11 21 2008
	City Fairport	State Zip Code NY 14450	Transaction ID: SA11AI.5022  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30.00
	Name of Employer MVP	Occupation VP Information Technology	Political Contribution
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 420.00	
	Full Name (Last, First, Middle Initial) Dennis Kant		Date of Receipt
	Mailing Address 11 White Briar		10 23 7 9 9 9
	City	State Zip Code	Transaction ID: SA11AI.4904
	Pittsford  FEC ID number of contributing federal political committee.	NY 14534	Amount of Each Receipt this Period  30.00
	Name of Employer MVP	Occupation VP Finance	Political Contribution
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	
_	Full Name (Last, First, Middle Initial) Dennis Kant		Date of Receipt
	Mailing Address 11 White Briar		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Pittsford	State Zip Code NY 14534	Transaction ID: SA11AI.4995  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30.00
	Name of Employer MVP	Occupation VP Finance	Political Contribution
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 390.00	
	SUBTOTAL of Receipts This Page (optional)		90.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 34 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
A C	r for commercial purposes, other than using the	Statements may not be sold or used by any pename and address of any political committee	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  MVP Health Care Inc. Federal PAC		
۷.	Full Name (Last, First, Middle Initial) Dennis Kant		Date of Receipt
	Mailing Address 11 White Briar  City	State Zip Code	11 21 2008
	Pittsford	NY 14534	Transaction ID: SA11AI.4996  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30.00
	Name of Employer MVP	Occupation VP Finance	Political Contribution
	Receipt For:  Primary  General  Other (specify)	Aggregate Year-to-Date ▼ 420.00	
 3.	Full Name (Last, First, Middle Initial) Joseph Lia		Date of Receipt
	Mailing Address 12 Sutherland Drive		10 23 7 2008
	City	State Zip Code	Transaction ID: SA11AI.4910
	Highland Mills	NY 10930	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30.00 Political Contribution
	Name of Employer MVP	Occupation VP of Mid-Hudson Region	Tomical Commodition
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	
. –	Full Name (Last, First, Middle Initial) Joseph Lia		Date of Receipt
	Mailing Address 12 Sutherland Drive		11 06 7 908
	City	State Zip Code	Transaction ID: SA11AI.4962
	Highland Mills  FEC ID number of contributing federal political committee.	NY 10930	Amount of Each Receipt this Period  30.00
	Name of Employer MVP	Occupation VP of Mid-Hudson Region	Political Contribution
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	
	SUBTOTAL of Receipts This Page (optional) .	1	90.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 34 (check only one)    X   11a
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federal PAC	atements may not be sold or used by any pers name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Joseph Lia Mailing Address 12 Sutherland Drive  City Highland Mills  FEC ID number of contributing federal political committee.  Name of Employer MVP  Receipt For: Primary General Other (specify)	State Zip Code NY 10930  C  Occupation VP of Mid-Hudson Region Aggregate Year-to-Date ▼  420.00	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) Leonard Lindenmuth Mailing Address 33 Oak Street  City Binghamton  FEC ID number of contributing federal political committee.  Name of Employer MVP  Receipt For: Primary General Other (specify)	State Zip Code NY 13905  C  Occupation VP Southern  Aggregate Year-to-Date ▼  360.00	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) Leonard Lindenmuth  Mailing Address 33 Oak Street  City Binghamton  FEC ID number of contributing federal political committee.  Name of Employer MVP  Receipt For: Primary General Other (specify)	State Zip Code NY 13905  C  Occupation VP Southern  Aggregate Year-to-Date ▼  390.00	Date of Receipt    M
SUBTOTAL of Receipts This Page (optional)		90.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 34 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MVP Health Care Inc. Federal PAC	itatements may not be sold or used by any pe name and address of any political committee	rson for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Leonard Lindenmuth		Date of Receipt
Mailing Address 33 Oak Street  City	State Zip Code	Transaction ID: SA11AI.5026
Binghamton  FEC ID number of contributing federal political committee.	NY 13905	Amount of Each Receipt this Period 30.00
Name of Employer MVP	Occupation VP Southern	Political Contribution
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	
Full Name (Last, First, Middle Initial) William V. Little Mailing Address 300 Partridge Lane	1	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Charlotte	State Zip Code VT 05445	Transaction ID: SA11AI.4924  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer MVP Service Corp.	Occupation VP Vermont	Political Contribution
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	
Full Name (Last, First, Middle Initial) William V. Little	1	Date of Receipt
Mailing Address 300 Partridge Lane		11 06 7 2008
City Charlotte	State Zip Code VT 05445	Transaction ID: SA11AI.4952  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer MVP Service Corp.	Occupation VP Vermont	Political Contribution
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 390.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	90.00
TOTAL This Period (last page this line number	only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 34 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MVP Health Care Inc. Federal PAC	tatements may not be sold or used by any pers name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) William V. Little Mailing Address 300 Partridge Lane  City Charlotte  FEC ID number of contributing federal political committee.  Name of Employer MVP Service Corp.  Receipt For: Primary General	State Zip Code VT 05445  C Occupation VP Vermont Aggregate Year-to-Date	Date of Receipt    M   M   D   D   2 0 0 8   Transaction ID: SA11AI.4953   Amount of Each Receipt this Period 30.00   Political Contribution
Other (specify) ▼  Full Name (Last, First, Middle Initial) Carl Maleri, Jr.  Mailing Address 19 Crimson Way  City  Webster  FEC ID number of contributing federal political committee.  Name of Employer  MVP  Receipt For:  Primary General  Other (specify) ▼	State Zip Code NY 14580  C  Occupation VP, Underwriting and Analysis Aggregate Year-to-Date   480.00	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) Carl Maleri, Jr.  Mailing Address 19 Crimson Way  City Webster  FEC ID number of contributing federal political committee.  Name of Employer MVP  Receipt For: Primary General Other (specify)	State Zip Code NY 14580  C  Occupation VP, Underwriting and Analysis Aggregate Year-to-Date  520.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		110.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 34 (check only one)  X 11a 11b 11c 12  13 14 15 16
A or	ny information copied from such Reports and so for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any per e name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
	MVP Health Care Inc. Federal PAC		
	Full Name (Last, First, Middle Initial) Carl Maleri, Jr.		Date of Receipt
	Mailing Address 19 Crimson Way		11 21 2008
	City Webster	State Zip Code NY 14580	Transaction ID: SA11AI.4990
	FEC ID number of contributing federal political committee.	C 14350	Amount of Each Receipt this Period 40.00
	Name of Employer MVP	Occupation VP, Underwriting and Analysis	Political Contribution
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼  560.00	
	Full Name (Last, First, Middle Initial) Laurie Metheny	1	Date of Receipt
	Mailing Address 21 Joellen Drive		10 23 7 2008
	City	State Zip Code	Transaction ID: SA11AI.4915
	Rochester	NY 14626	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00 Political Contribution
	Name of Employer MVP	Occupation VP, Business Excellence	Political Contribution
	Receipt For: Primary General	Aggregate Year-to-Date ▼	_
	Other (specify)	480.00	
	Full Name (Last, First, Middle Initial) Laurie Metheny	•	Date of Receipt
	Mailing Address 21 Joellen Drive		1 1 0 6 2 0 0 8
	City	State Zip Code	Transaction ID: SA11AI.5023
	Rochester FEC ID number of contributing federal political committee.	NY 14626	Amount of Each Receipt this Period 40.00
	Name of Employer MVP	Occupation VP, Business Excellence	Political Contribution
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 520.00	
Γ	NUDTOTAL of Descript This Description		120.00

SCHEDULE ITEMIZED I	E A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 34 (check only one)    X   11a
or for commercial	opied from such Reports and St purposes, other than using the DMMITTEE (In Full) Care Inc. Federal PAC	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Laurie Metheny Mailing Addres  City Rochester  FEC ID numb federal politica  Name of Emp MVP  Receipt For: Primary	er of contributing al committee.		ness Excellence 2 Year-to-Date ▼ 560.00	Date of Receipt    M
Full Name (La James Morrill Mailing Address City Glenmont FEC ID numb federal political Name of Emp MVP Receipt For:	er of contributing al committee.	State NY  C  Occupation EVP, HR Aggregate		Date of Receipt  M M M
James Morrill Mailing Addres  City Glenmont  FEC ID numb federal politica  Name of Emp MVP  Receipt For: Primary	er of contributing al committee.	State NY  C  Occupation EVP, HR Aggregate		Date of Receipt  M M M O 6 2008  Transaction ID: SA11AI.4977  Amount of Each Receipt this Period  50.00  Political Contribution
SUBTOTAL of F	Receipts This Page (optional)		)	140.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	(Crieck Only Onle)
r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any name and address of any political commit	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
MVP Health Care Inc. Federal PAC		
Full Name (Last, First, Middle Initial) James Morrill		Date of Receipt
Mailing Address 54 Henderson Road		11 21 2008
City	State Zip Code	Transaction ID: SA11AI.4978
Glenmont	NY 12077	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MVP	Occupation EVP, HR	Political Contribution
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	0
Full Name (Last, First, Middle Initial) David Orlando		Date of Receipt
Mailing Address 3 Clare Castle		10 23 7 2008
City	State Zip Code	Transaction ID: SA11AI.4901
Albany	NY 12205	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer MVP	Occupation Corp VP of Operations	Political Contribution
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	360.00	
Full Name (Last, First, Middle Initial) David Orlando	I	Date of Receipt
Mailing Address 3 Clare Castle		1 1 0 6 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.5009
Albany	NY 12205	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00  Political Contribution
Name of Employer MVP	Occupation Corp VP of Operations	Folitical Contribution
Receipt For:	Aggregate Year-to-Date ▼	
Primary ☐ General Other (specify) ▼	390.00	0
UBTOTAL of Receipts This Page (optional)	1	110.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 34 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
A or	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may n e name and addre	ot be sold or used by any persess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MVP Health Care Inc. Federal PAC			
	Full Name (Last, First, Middle Initial) David Orlando			Date of Receipt
	Mailing Address 3 Clare Castle			11 21 2008
	City	State NY	Zip Code	Transaction ID: SA11AI.5010
	Albany FEC ID number of contributing federal political committee.	C	12205	Amount of Each Receipt this Period  30.00
	Name of Employer MVP	Occupation Corp VP of	Operations	Political Contribution
	Receipt For: Primary General Other (specify)	<del>- '                                   </del>	ear-to-Date ▼ 420.00	
	Full Name (Last, First, Middle Initial) Dawn Ryman			Date of Receipt
	Mailing Address 213 Hansen Avenue			10 23 2008
	City	State	Zip Code	Transaction ID: SA11AI.4902
	Albany	NY	12208	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00  Political Contribution
	Name of Employer MVP	Occupation VP of Lega	l Affairs	Folitical Contribution
	Receipt For: Primary General Other (specify)	Aggregate Y	ear-to-Date ▼ 360.00	
_	Full Name (Last, First, Middle Initial) Dawn Ryman			Date of Receipt
	Mailing Address 213 Hansen Avenue			1 1 0 6 2 0 0 8
	City Albany	State NY	Zip Code 12208	Transaction ID: SA11AI.4958  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer MVP	Occupation VP of Lega	ıl Affairs	Political Contribution
	Receipt For:  Primary  General  Other (specify)    ▼	Aggregate Y	ear-to-Date ▼ 390.00	
	SUBTOTAL of Receipts This Page (optional) .	1		90.00

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule for each category of the Detailed Summary Pag	(Crieck only one)
r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by an ename and address of any political comm	y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
MVP Health Care Inc. Federal PAC		
Full Name (Last, First, Middle Initial) Dawn Ryman  Mailing Address 213 Hansen Avenue		Date of Receipt
213 Harrsen Avenue		11 21 2008
City	State Zip Code	Transaction ID: SA11AI.4959
Albany	NY 12208	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00 Political Contribution
Name of Employer MVP	Occupation	Folitical Contribution
Receipt For:	VP of Legal Affairs  Aggregate Year-to-Date ▼	
Primary General Other (specify)	420.0	00
Full Name (Last, First, Middle Initial) Daniel Sauer	<u>I</u>	Date of Receipt
Mailing Address 160 Fifth Avenue		10 23 2008
City	State Zip Code	Transaction ID: SA11AI.4898
Saratoga Springs	NY 12866	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer MVP	Occupation VP Sales	Political Contribution
Receipt For:	Aggregate Year-to-Date ▼	
Primary ☐ General Other (specify) ▼	360.0	00
Full Name (Last, First, Middle Initial) Daniel Sauer		Date of Receipt
Mailing Address 160 Fifth Avenue		1 1 0 6 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.5007
Saratoga Springs	NY 12866	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer MVP	Occupation VP Sales	Political Contribution
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	390.0	00
LIPTOTAL of Possints This Page (antional)		90.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 34 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
4	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements may not be sold or used by any per- e 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. Federal PAC		
∠ 4.	Full Name (Last, First, Middle Initial) Daniel Sauer		Date of Receipt
	Mailing Address 160 Fifth Avenue		11 21 7 2008
	City Saratoga Springs	State Zip Code NY 12866	Transaction ID: SA11AI.5008  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30.00
	Name of Employer MVP	Occupation VP Sales	Political Contribution
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	
_ 3.	Full Name (Last, First, Middle Initial) Tracy Tadaro-Ott Mailing Address 33 Everett Drive		Date of Receipt
	Walling Address 33 Everett Drive		10 23 2008
	City	State Zip Code NY 14624	Transaction ID: SA11AI.4923
	Rochester  FEC ID number of contributing federal political committee.	NY 14624	Amount of Each Receipt this Period  30.00
	Name of Employer MVP	Occupation VP, Sales	Political Contribution
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	
_ }.	Full Name (Last, First, Middle Initial) Tracy Tadaro-Ott		Date of Receipt
	Mailing Address 33 Everett Drive		11 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.4960
	Rochester  FEC ID number of contributing federal political committee.	NY 14624	Amount of Each Receipt this Period 30.00
	Name of Employer MVP	Occupation VP, Sales	Political Contribution
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	
Γ	SUBTOTAL of Receipts This Page (optional)	1	90.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 34 (check only one)    X
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personant and address of any political committee to	
MVP Health Care Inc. Federal PAC		
Full Name (Last, First, Middle Initial) Tracy Tadaro-Ott  Mailing Address 33 Everett Drive		Date of Receipt
City	State Zip Code	1 1 2 1 2 0 0 8 Transaction ID: SA11AI.4961
Rochester	NY 14624	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer MVP	Occupation VP, Sales	Political Contribution
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	420.00	
Full Name (Last, First, Middle Initial) John Vangraafeiland		Date of Receipt
Mailing Address 85 Pinehurst Place		10 23 2008
City	State Zip Code	Transaction ID: SA11AI.4911
Middletown	CT 06457	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00  Political Contribution
Name of Employer MVP	Occupation CIO	Political Contribution
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	360.00	
Full Name (Last, First, Middle Initial) John Vangraafeiland		Date of Receipt
Mailing Address 85 Pinehurst Place		11 06 2008
City	State Zip Code	Transaction ID: SA11AI.5017
Middletown 550 ID acret to a first time.	CT 06457	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00 Political Contribution
Name of Employer MVP	Occupation CIO	- Ontioal Contribution
Receipt For: Primary General	Aggregate Year-to-Date ▼	_
Other (specify)	390.00	
SUBTOTAL of Receipts This Page (optional)	1	90.00

A.

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

FOR LINE NUMBER: PAGE 32/34 Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Date of Receipt John Vangraafeiland Mailing Address 85 Pinehurst Place 1.1 21 2008 City State Zip Code Transaction ID: SA11AI.5018 Middletown CT 06457 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Political Contribution Name of Employer MVP Occupation CIO Receipt For: Aggregate Year-to-Date Primary General 420.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	30.00
TOTAL This Period (last page this line number only)	<u> </u>	2960.00

SCHEDULE B (FEC FOIII 3X)	Use separate schedule	(S)   (check on	E NUMBER: PAGE 33 / 34
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Pag	21b 27	22 X 23 24 25 28a 28b 28c 29
Any Information copied from such Reports and Star or for commercial purposes, other than using the na NAME OF COMMITTEE (In Full)			
MVP Health Care Inc. Federal PAC			
Full Name (Last, First, Middle Initial) John SUNUNU			Transaction ID: SB23.4877 Date of Disbursement
Mailing Address PO BOX 500			1 0 M / D 2 4 / Y 2 0 0 8 Y
City RYE	State Zip Code NH 03870		Amount of Each Disbursement this Perio
Purpose of Disbursement Political Contribution		011	3000.00
Candidate Name MVP Health Care Inc. Federal PAC		Category/ Type	
Senate President	rsement For: 2008 Primary X Gener Other (specify)	al	
State: District:  Full Name (Last, First, Middle Initial)			Transaction ID: SB23,4876
PAUL DAVID TONKO			Date of Disbursement
Mailing Address 137 PRINCETON STF	REET		10 M / D 16 / Y Y Y O Y 8 Y
City AMSTERDAM	State Zip Code NY 12010		Amount of Each Disbursement this Period
Purpose of Disbursement Political Contribution		011	2000.00
Candidate Name MVP Health Care Inc. Federal PAC		Category/ Type	
Senate President	rsement For: 2008 Primary X Gener Other (specify)	al	
State: District:  Full Name (Last, First, Middle Initial)			Transaction ID: SB23.4879
PETER WELCH			Date of Disbursement
Mailing Address 346 TOWN FARM HIL	L ROAD		1 0 M / 2 8 / Y 2 0 0 8 Y
City HARTLAND	State Zip Code VT 05048		Amount of Each Disbursement this Perio
Purpose of Disbursement Political Contribution		011	500.00
Candidate Name MVP Health Care Inc. Federal PAC		Category/ Type	
Office Sought: House Disbute Senate President	rsement For: 2008 Primary X Gener Other (specify)	al	
State: District:			
SUBTOTAL of Disbursements This Page (options	al)	<b>&gt;</b>	5500.00
TOTAL This Period (last page this line number or			5500.00

### **SCHEDULE D (FEC Form 3X)** DERTS AND ORLIGATIONS

(Use separate schedule(s)

PAGE 34 / 34 FOR LINE NUMBER: \_\_\_

DEDI	3	-NAL	J	DL	ı
Evolu	din	~ I /	han		

JEBIS AND OBLIGATIONS	for each numbered line)	9			
Excluding Loans  NAME OF COMMITTEE (In Full)		nambered line)		X   10	
MVP Health Care Inc. Federal PAC					
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Deluxe Business Checks			ebt (Purpose):		
Deluxe Busiliess Checks		Check Fil	Check Printing		
Mailing Address P.O. Box 742572					
City State	ZIP Code				
Cincinnati OH	45274				
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.4	163	
145.00					
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of	This Period	
		Outstandin	-	1 1	
0.00	0.00			145.00	
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of D	ebt (Purpose):		
Media Well Done		Advertisin			
Mailing Address 96 Jay Street					
ivialing Address 96 Jay Street					
City State	ZIP Code				
Schenectady NY	12305				
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.4	165	
338.00					
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of	This Period	
0.00	0.00			338.00	
1) SUBTOTALS This Period This Page (optional)		<b>&gt;</b>	483.	00	
2) TOTALS This Period (last page this line number of	nly)	<b>&gt;</b>	483.	00	
3) TOTAL OUTSTANDING LOANS from Schedu	le C (last page only)	<b>&gt;</b>	0.0	00	
4) ADD 2) and 3) and carry forward to appropriate li	ne of Summary Page (last page only)	<b>-</b>	483.	00	