

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

SCA-MC VBP, INC. POLITICAL ACTION COMMITTEE (SCA PAC)

ADDRESS (number and street)

569 BROOKWOOD VILLAGE

SUITE 901

Check if different  
than previously  
reported. (ACC)

BIRMINGHAM

AL

35209

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00440743

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report (Q1)July 15  
Quarterly Report (Q2)October 15  
Quarterly Report (Q3)January 31  
Year-End Report (YE)July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
01 01 2017

through

M M M / D D D / Y Y Y Y Y Y  
06 30 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Sharff, Richard, L., Jr.

Type or Print Name of Treasurer

Signature of Treasurer

Sharff, Richard, L., Jr.

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
07 25 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

SCA-MC VBP, INC. POLITICAL ACTION COMMITTEE (SCA PAC)

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
01 / 01 / 2017 To: M M / D D / Y Y Y Y Y Y  
06 / 30 / 2017

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2017</span>		<span style="border: 1px solid black; padding: 2px;">101971.48</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">101971.48</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">34374.37</span>	<span style="border: 1px solid black; padding: 2px;">34374.37</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">136345.85</span>	<span style="border: 1px solid black; padding: 2px;">136345.85</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">56250.00</span>	<span style="border: 1px solid black; padding: 2px;">56250.00</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">80095.85</span>	<span style="border: 1px solid black; padding: 2px;">80095.85</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	

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

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

SCA-MC VBP, INC. POLITICAL ACTION COMMITTEE (SCA PAC)

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		0	1		2	0	1	7		

To:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		3	0		2	0	1	7		

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).....	24198.82	24198.82
(ii) Unitemized .....	10123.55	10123.55
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	34322.37	34322.37
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	34322.37	34322.37
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	52.00	52.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (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)) .....	34374.37	34374.37
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	34374.37	34374.37

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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.....	5000.00	5000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	51250.00	51250.00
30. Federal Election Activity (52 U.S.C. § 30101(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 Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	56250.00	56250.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	56250.00	56250.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

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) .....	34322.37	34322.37
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	34322.37	34322.37
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

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

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

FOR LINE NUMBER: PAGE 6 OF 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

SCA-MC VBP, INC. POLITICAL ACTION COMMITTEE (SCA PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Aguayo, David, J., ,

Mailing Address 569 Brookwood Village  
Suite 901City  
BirminghamState  
ALZip Code  
35209FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care AffiliatesOccupation (for Individual)  
Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : SA11AI.6503

Amount of Each Receipt this Period

520.00

☐ Memo Item

Payroll deduction \$40.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Barsamian-Armstrong, Judith, E., ,

Mailing Address 569 Brookwood Village  
Suite 901City  
BirminghamState  
ALZip Code  
35209FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care AffiliatesOccupation (for Individual)  
Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : SA11AI.6506

Amount of Each Receipt this Period

130.00

☐ Memo Item

Payroll deduction \$10.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Breen, Bryan, , ,

Mailing Address 569 Brookwood Village  
Suite 901City  
BirminghamState  
ALZip Code  
35209FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care AffiliatesOccupation (for Individual)  
VP, Strategy and Payer Engagement

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : SA11AI.6513

Amount of Each Receipt this Period

325.00

☐ Memo Item

Payroll deduction \$25.00 biweekly

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

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

975.00

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

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

FOR LINE NUMBER: PAGE 7 OF 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SCA-MC VBP, INC. POLITICAL ACTION COMMITTEE (SCA PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Buono, Timothy, M., ,

Mailing Address 1 Dorlon Pt.

City  
NorwalkState  
CTZip Code  
06855FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care AffiliatesOccupation (for Individual)  
VP of Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : SA11AI.6517

Amount of Each Receipt this Period

520.00

☐ Memo Item

Payroll deduction \$40.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Burns, Vicki, , ,

Mailing Address 569 Brookwood Village  
Suite 901City  
BirminghamState  
ALZip Code  
35209FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care AffiliatesOccupation (for Individual)  
Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : SA11AI.6519

Amount of Each Receipt this Period

247.00

☐ Memo Item

Payroll deduction \$19.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Chokski, Ajay, , ,

Mailing Address 569 Brookwood Village  
Suite 901City  
BirminghamState  
ALZip Code  
35209FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care AffiliatesOccupation (for Individual)  
Group Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : SA11AI.6524

Amount of Each Receipt this Period

650.00

☐ Memo Item

Payroll deduction \$50.00 biweekly

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

1417.00

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 8 OF 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SCA-MC VBP, INC. POLITICAL ACTION COMMITTEE (SCA PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Chye, Eleanor, , ,

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliates

Occupation (for Individual)  
Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : SA11AI.6525

Amount of Each Receipt this Period

780.00

☐ Memo Item

Payroll deduction \$60.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Colbert, Joseph, E., ,

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliates

Occupation (for Individual)  
Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : SA11AI.6526

Amount of Each Receipt this Period

260.00

☐ Memo Item

Payroll deduction \$20.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Collins, Kelli, , ,

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliates

Occupation (for Individual)  
Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : SA11AI.6527

Amount of Each Receipt this Period

247.00

☐ Memo Item

Payroll deduction \$19.00 biweekly

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

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

1287.00



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

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

FOR LINE NUMBER: PAGE 9 OF 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SCA-MC VBP, INC. POLITICAL ACTION COMMITTEE (SCA PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Coronado, Mishelle, , ,

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliates

Occupation (for Individual)  
VP, Regulatory Compliance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : SA11AI.6529

Amount of Each Receipt this Period

260.00

☐ Memo Item

Payroll deduction \$20.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Courtay, Rena, , ,

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliates

Occupation (for Individual)  
VP, Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : SA11AI.6530

Amount of Each Receipt this Period

325.00

☐ Memo Item

Payroll deduction \$25.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Crump, Carol, , ,

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliates

Occupation (for Individual)  
VP, Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : SA11AI.6533

Amount of Each Receipt this Period

260.00

☐ Memo Item

Payroll deduction \$20.00 biweekly

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

845.00

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 10 OF 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SCA-MC VBP, INC. POLITICAL ACTION COMMITTEE (SCA PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Cutter, David, , ,

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliates

Occupation (for Individual)  
Director, Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : SA11AI.6534

Amount of Each Receipt this Period

247.00

☐ Memo Item

Payroll deduction \$19.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Donnelly, Alison, , ,

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliates

Occupation (for Individual)  
Director, External Communications

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : SA11AI.6536

Amount of Each Receipt this Period

325.00

☐ Memo Item

Payroll deduction \$25.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dragolovic, Goran, , ,

Mailing Address 2012 E. Glenoaks Blvd

City  
Glendale

State  
CA

Zip Code  
91206

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliates

Occupation (for Individual)  
SVP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : SA11AI.6537

Amount of Each Receipt this Period

1235.00

☐ Memo Item

Payroll deduction \$95.00 biweekly

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

1807.00

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

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

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

FOR LINE NUMBER: PAGE 11 OF 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**SCA-MC VBP, INC. POLITICAL ACTION COMMITTEE (SCA PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Dugan, Ann, L., ,**

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliates

Occupation (for Individual)  
Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2017

**Transaction ID : SA11AI.6538**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Payroll deduction \$25.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Edler, Marie, , ,**

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliates

Occupation (for Individual)  
SDR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2017

**Transaction ID : SA11AI.6541**

Amount of Each Receipt this Period

455.00

☐ Memo Item

Payroll deduction \$35.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Elia, Viva, , ,**

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliates

Occupation (for Individual)  
Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1001.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2017

**Transaction ID : SA11AI.6543**

Amount of Each Receipt this Period

1001.00

☐ Memo Item

Payroll deduction \$77.00 biweekly

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

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

1706.00

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

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

FOR LINE NUMBER: PAGE 12 OF 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SCA-MC VBP, INC. POLITICAL ACTION COMMITTEE (SCA PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Ellison, Christian, D., ,

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliates

Occupation (for Individual)  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1495.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : SA11AI.6545

Amount of Each Receipt this Period

1495.00

☐ Memo Item

Payroll deduction \$115.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fees, Nicholas, , ,

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliates

Occupation (for Individual)  
Assistant Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : SA11AI.6548

Amount of Each Receipt this Period

260.00

☐ Memo Item

Payroll deduction \$20.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Festi, David, J., ,

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliates

Occupation (for Individual)  
Director, Managed Care

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : SA11AI.6549

Amount of Each Receipt this Period

247.00

☐ Memo Item

Payroll deduction \$19.00 biweekly

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

2002.00

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 13 OF 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**SCA-MC VBP, INC. POLITICAL ACTION COMMITTEE (SCA PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Frazier, Brandon, T., ,**

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliates

Occupation (for Individual)  
VP, Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2017

**Transaction ID : SA11AI.6550**

Amount of Each Receipt this Period

325.00

☐ Memo Item

Payroll deduction \$25.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. George, Margaret, , ,**

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliates

Occupation (for Individual)  
Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2017

**Transaction ID : SA11AI.6558**

Amount of Each Receipt this Period

260.00

☐ Memo Item

Payroll deduction \$20.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Hayek, Andrew, P., ,**

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliates

Occupation (for Individual)  
Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2307.60

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2017

**Transaction ID : SA11AI.6570**

Amount of Each Receipt this Period

2307.60

☐ Memo Item

Payroll deduction \$192.30 biweekly

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

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

2892.60

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

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

FOR LINE NUMBER: PAGE 14 OF 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**SCA-MC VBP, INC. POLITICAL ACTION COMMITTEE (SCA PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Hess, Cory, , ,**

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliates

Occupation (for Individual)  
Regional VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : SA11AI.6572

Amount of Each Receipt this Period

325.00

☐ Memo Item

Payroll deduction \$25.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Ho, Huong, , ,**

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliates

Occupation (for Individual)  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : SA11AI.6573

Amount of Each Receipt this Period

260.00

☐ Memo Item

Payroll deduction \$20.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Klassen, Christopher, , ,**

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliates

Occupation (for Individual)  
Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : SA11AI.6580

Amount of Each Receipt this Period

260.00

☐ Memo Item

Payroll deduction \$20.00 biweekly

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

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

845.00

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

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

FOR LINE NUMBER: PAGE 15 OF 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**SCA-MC VBP, INC. POLITICAL ACTION COMMITTEE (SCA PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Lally, Thomas, J., ,**

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliates

Occupation (for Individual)  
Regional Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2017

Transaction ID : SA11AI.6583

Amount of Each Receipt this Period

260.00

☐ Memo Item

Payroll deduction \$20.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Langston, Mark, , ,**

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliates

Occupation (for Individual)  
VP, Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2017

Transaction ID : SA11AI.6584

Amount of Each Receipt this Period

325.00

☐ Memo Item

Payroll deduction \$25.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Laperriere, Nicolas, , ,**

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliates

Occupation (for Individual)  
Regional Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

455.00

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2017

Transaction ID : SA11AI.6585

Amount of Each Receipt this Period

455.00

☐ Memo Item

Payroll deduction \$35.00 biweekly

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

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

1040.00



<b>X</b>	11a		11b		11c		12		
	13		14		15		16		17

SCA-MC VBP, INC. POLITICAL ACTION COMMITTEE (SCA PAC)

FEC Schedule A (Form 3X) Rev. 06/2016



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

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

FOR LINE NUMBER: PAGE 17 OF 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SCA-MC VBP, INC. POLITICAL ACTION COMMITTEE (SCA PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Lozier, Jeffrey, , ,

Mailing Address 17787 Del Paso Drive

City  
PowayState  
CAZip Code  
92064FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care AffiliatesOccupation (for Individual)  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 04 / 2017

Transaction ID : SA11AI.6591

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lucey, Michael, , ,

Mailing Address 5715 N Bay Ridge Avenue

City  
Whitefish BayState  
WIZip Code  
53217FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care AffiliatesOccupation (for Individual)  
Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : SA11AI.6592

Amount of Each Receipt this Period

260.00

☐ Memo Item

Payroll deduction \$20.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mathis, Brian, , ,

Mailing Address 569 Brookwood Village  
Suite 901City  
BirminghamState  
ALZip Code  
35209FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care AffiliatesOccupation (for Individual)  
Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : SA11AI.6593

Amount of Each Receipt this Period

325.00

☐ Memo Item

Payroll deduction \$25.00 biweekly

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

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

885.00

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

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

FOR LINE NUMBER: PAGE 18 OF 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SCA-MC VBP, INC. POLITICAL ACTION COMMITTEE (SCA PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Melancon, Willis, P, ,

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Surgical Care Affiliates

Occupation (for Individual)

Senior Director, Financial Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : SA11AI.6602

Amount of Each Receipt this Period

325.00

☐ Memo Item

Payroll deduction \$25.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Millsap, Carrie, , ,

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Surgical Care Affiliates

Occupation (for Individual)

Director, Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : SA11AI.6604

Amount of Each Receipt this Period

325.00

☐ Memo Item

Payroll deduction \$25.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Olson, Bryan, , ,

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Surgical Care Affiliates

Occupation (for Individual)

Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : SA11AI.6611

Amount of Each Receipt this Period

325.00

☐ Memo Item

Payroll deduction \$25.00 biweekly

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

975.00

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

<b>X</b>	11a		11b		11c		12		
	13		14		15		16		17

SCA-MC VBP, INC. POLITICAL ACTION COMMITTEE (SCA PAC)

FEC Schedule A (Form 3X) Rev. 06/2016

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

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

FOR LINE NUMBER: PAGE 20 OF 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

SCA-MC VBP, INC. POLITICAL ACTION COMMITTEE (SCA PAC)

<b>A. Rucker, Michael, A., ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 569 Brookwood Village Suite 901 City Birmingham State AL Zip Code 35209 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Surgical Care Affiliates Occupation (for Individual) Executive Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 576.90			Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2017 <b>Transaction ID : SA11AI.6626</b> Amount of Each Receipt this Period 576.90 <input type="checkbox"/> Memo Item Payroll deduction \$57.69 biweekly
<b>B. Seidler, Scott, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 569 Brookwood Village Suite 901 City Birmingham State AL Zip Code 35209 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Surgical Care Affiliates Occupation (for Individual) Director, Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 247.00			Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2017 <b>Transaction ID : SA11AI.6628</b> Amount of Each Receipt this Period 247.00 <input type="checkbox"/> Memo Item Payroll deduction \$19.00 biweekly
<b>C. Semeraro, Nicole, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 569 Brookwood Village Suite 901 City Birmingham State AL Zip Code 35209 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Surgical Care Affiliates Occupation (for Individual) Regional VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 494.00			Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 30 / 2017 <b>Transaction ID : SA11AI.6629</b> Amount of Each Receipt this Period 494.00 <input type="checkbox"/> Memo Item Payroll deduction \$38.00 biweekly
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			1317.90
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

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

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

FOR LINE NUMBER: PAGE 21 OF 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**SCA-MC VBP, INC. POLITICAL ACTION COMMITTEE (SCA PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Sharff, Richard, L., , Jr.**

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliates

Occupation (for Individual)  
EVP & Gen Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2017

**Transaction ID : SA11AI.6630**

Amount of Each Receipt this Period

1153.80

☐ Memo Item

Payroll deduction \$96.15 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Sinha, Saptarshi, , ,**

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliates

Occupation (for Individual)  
Regional VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2017

**Transaction ID : SA11AI.6632**

Amount of Each Receipt this Period

260.00

☐ Memo Item

Payroll deduction \$20.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Smith, Gordon, , ,**

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliates

Occupation (for Individual)  
Senior Director, Training and Quality

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2017

**Transaction ID : SA11AI.6633**

Amount of Each Receipt this Period

260.00

☐ Memo Item

Payroll deduction \$20.00 biweekly

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

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

1673.80

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

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

FOR LINE NUMBER: PAGE 22 OF 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**SCA-MC VBP, INC. POLITICAL ACTION COMMITTEE (SCA PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Strauss, Jason, J., ,**

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliates

Occupation (for Individual)  
Group Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : SA11AI.6641

Amount of Each Receipt this Period

1040.00

☐ Memo Item

Payroll deduction \$80.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Sweatman, Daniel, , ,**

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliates

Occupation (for Individual)  
Director, Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : SA11AI.6642

Amount of Each Receipt this Period

260.00

☐ Memo Item

Payroll deduction \$20.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Tidmarsh, Lachlan, , ,**

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliates

Occupation (for Individual)  
Chief Information Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : SA11AI.6645

Amount of Each Receipt this Period

260.00

☐ Memo Item

Payroll deduction \$20.00 biweekly

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

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

1560.00

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

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

FOR LINE NUMBER: PAGE 23 OF 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SCA-MC VBP, INC. POLITICAL ACTION COMMITTEE (SCA PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Torbatian, Veronica, , ,

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliates

Occupation (for Individual)  
Senior Director, Revenue Cycle

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : SA11AI.6646

Amount of Each Receipt this Period

520.00

☐ Memo Item

Payroll deduction \$40.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wachsmann, Leslie, , ,

Mailing Address 569 Brookwood Village  
Suite 901

City  
Birmingham

State  
AL

Zip Code  
35209

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Surgical Care Affiliate

Occupation (for Individual)  
Vice President, Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2017

Transaction ID : SA11AI.6650

Amount of Each Receipt this Period

247.00

☐ Memo Item

Payroll deduction \$19.00 biweekly

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

767.00

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

24198.82

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 25

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

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NAME OF COMMITTEE (In Full)

**SCA-MC VBP, INC. POLITICAL ACTION COMMITTEE (SCA PAC)**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF CHRIS MURPHY**

Mailing Address PO BOX 127

City  
CHESHIREState  
CTZip Code  
06410Purpose of Disbursement  
Contribution

011

Candidate Name

**MURPHY, CHRISTOPHER S MR, , ,**Category/  
Type

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CT

District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	3			2	0	1	7		

FEC Identification Number

C C00492645

**Transaction ID : SB23.6663**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5000.00

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

5000.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 25 OF 25

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

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NAME OF COMMITTEE (In Full)

**SCA-MC VBP, INC. POLITICAL ACTION COMMITTEE (SCA PAC)**

Full Name (Last, First, Middle Initial)

**A. Democratic Governors Association**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2017

Mailing Address 1225 Eye St. NW  
Suite 1100City  
WashingtonState  
DCZip Code  
20005Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

**Transaction ID : SB29.6671**

Amount of Each Disbursement this Period

25000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Florida Leadership Committee**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2017

Mailing Address 610 S. Boulevard

City  
TampaState  
FLZip Code  
33606Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

**Transaction ID : SB29.6668**

Amount of Each Disbursement this Period

1250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Republican Governors Association**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2017

Mailing Address 1747 Pennsylvania Ave. NW  
# 250City  
WashingtonState  
DCZip Code  
20006Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

**Transaction ID : SB29.6673**

Amount of Each Disbursement this Period

25000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

51250.00

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

51250.00