

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
21st Century Oncology, Inc. Political Action Committee

ADDRESS (number and street) 2234 Colonial Blvd.
Attn: Margarita Suarez
Fort Myers FL 33907
Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00385120
3. IS THIS REPORT NEW (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)
[X] 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)
Mar 20 (M3)
Apr 20 (M4)
May 20 (M5)
Jun 20 (M6)
Jul 20 (M7)
Aug 20 (M8)
Sep 20 (M9)
Oct 20 (M10)
Nov 20 (M11) (Non-Election Year Only)
Dec 20 (M12) (Non-Election Year Only)
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 / 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 / D D / Y Y Y Y Y Y in the State of

5. Covering Period 07 / 01 / 2015 through 12 / 31 / 2015

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

Type or Print Name of Treasurer Daniel E. Dosoretz MD

Signature of Treasurer Daniel E. Dosoretz MD [Electronically Filed] Date 01 / 28 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

21st Century Oncology, Inc. Political Action Committee

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		12174.57
(b) Cash on Hand at Beginning of Reporting Period.....	6065.57	
(c) Total Receipts (from Line 19)	37634.00	65540.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	43699.57	77714.57
7. Total Disbursements (from Line 31).....	27532.00	61547.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	16167.57	16167.57
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

21st Century Oncology, Inc. Political Action Committee

Report Covering the Period: From: / / To: / /

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).....	32424.00	59875.00
(ii) Unitemized	210.00	665.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	32634.00	60540.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	32634.00	60540.00
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.....	5000.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total 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))..... ▶	37634.00	65540.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	37634.00	65540.00

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) 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.....	22500.00	56500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	5032.00	5047.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. 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)) ..	27532.00	61547.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	27532.00	61547.00

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)	32634.00	60540.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	32634.00	60540.00
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

**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 20
(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)
21st Century Oncology, Inc. Political Action Committee

A. DR. MICHAEL J. KATIN MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1212 COCONUT DRIVE
 City State Zip Code
 FORT MYERS FL 33901-6609
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 21st Century Oncology, LLC Medical Doctor
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 03 / 2015
Transaction ID : 38431444
 Amount of Each Receipt this Period
 5000.00
 Contribution

B. DR. DANIEL E. DOSORETZ MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 13221 PONDEROSA WAY
 City State Zip Code
 FORT MYERS FL 33907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 21st Century Oncology, Inc Medical Doctor
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 04 / 2015
Transaction ID : 38440873
 Amount of Each Receipt this Period
 5000.00
 Contribution

c. Madlyn Dornaus
 Full Name (Last, First, Middle Initial)
 Mailing Address 18930 Knoll Landing Drive
 City State Zip Code
 Fort Myers FL 33908-4760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 21st Century Oncology Services, Inc VP Operations
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1425.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015
Transaction ID : 39034371
 Amount of Each Receipt this Period
 0.00
[MEMO ITEM]
 6 Payroll Deductions only for this period

SUBTOTAL of Receipts This Page (optional).....▶ 10000.00
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: (check only one)	PAGE 7 OF 20
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
21st Century Oncology, Inc. Political Action Committee

A. Richard Rolland Lewis
Full Name (Last, First, Middle Initial)

Mailing Address 9272 River Otter Dr

City Fort Myers State FL Zip Code 33912-8922

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

Name of Employer 21st Century Oncology Services, Inc Occupation Director of Ops. Financial

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt **12 / 31 / 2015**

Transaction ID : 39034383

Amount of Each Receipt this Period **0.00**

[MEMO ITEM]
10 Payroll deductions only for this period

B. Michael J. Tompkins
Full Name (Last, First, Middle Initial)

Mailing Address 9070 Pittsburgh Blvd

City Fort Myers State FL Zip Code 33967-7205

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

Name of Employer 21st Century Oncology Services, Inc Occupation Director of Ancillary Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt **12 / 31 / 2015**

Transaction ID : 39034395

Amount of Each Receipt this Period **0.00**

[MEMO ITEM]
3 Payroll deductions only for this period

C. Jonathan D. Weinbach
Full Name (Last, First, Middle Initial)

Mailing Address 210 W 19th St Apt 2 J

City New York State NY Zip Code 10011-4067

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

Name of Employer 21st Century Oncology Services, Inc Occupation Dir Referrals, Marketing & Network Dev

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt **12 / 31 / 2015**

Transaction ID : 39034452

Amount of Each Receipt this Period **0.00**

[MEMO ITEM]
3 Payroll deductions only for this period

SUBTOTAL of Receipts This Page (optional)..... **0.00**

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: (check only one)	PAGE 8 OF 20
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
21st Century Oncology, Inc. Political Action Committee

A. Dr Christopher Chen
Full Name (Last, First, Middle Initial)

Mailing Address 1010 SEMINOLE DRIVE
APT 1107

City FORT LAUDERDALE State FL Zip Code 33304-3220

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

Name of Employer 21st Century Oncology, LLC Occupation Medical Doctor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
12 / 31 / 2015
Transaction ID : 39050340

Amount of Each Receipt this Period
0.00

[MEMO ITEM]
Total payroll deduction up to \$5,000 reached

B. Dr Christopher Chen
Full Name (Last, First, Middle Initial)

Mailing Address 1010 SEMINOLE DRIVE
APT 1107

City FORT LAUDERDALE State FL Zip Code 33304-3220

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

Name of Employer 21st Century Oncology, LLC Occupation Medical Doctor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
12 / 31 / 2015
Transaction ID : PR1567028839763

Amount of Each Receipt this Period
2504.00

P/R Deduction (\$192.00 Bi-Weekly)

C. Mr. DAVID E. LEE
Full Name (Last, First, Middle Initial)

Mailing Address 9741 Mar Largo Circle

City Fort Myers State FL Zip Code 33919-7325

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

Name of Employer 21st Century Oncology, LLC Occupation Physician Assistant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1350.00

Date of Receipt
12 / 31 / 2015
Transaction ID : PR1567085139763

Amount of Each Receipt this Period
700.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	3204.00
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: (check only one)	PAGE 9 OF 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
21st Century Oncology, Inc. Political Action Committee

A. Mrs. VICTORIA DANTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1409 Davis Drive
 City Fort Myers State FL Zip Code 33919-1069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer 21st Century Oncology Services, Inc Occupation Director of Revenue Integrity
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2025.00

Date of Receipt 12 / 31 / 2015
Transaction ID : PR1580095139763
 Amount of Each Receipt this Period 1050.00
 P/R Deduction (\$75.00 Bi-Weekly)

B. MARIA ANNAZONE
 Full Name (Last, First, Middle Initial)
 Mailing Address 10361 Witts End
 City Alva State FL Zip Code 33936
 FEC ID number of contributing federal political committee. **C**
 Name of Employer 21st Century Oncology Services, Inc Occupation Director Health Information Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 12 / 31 / 2015
Transaction ID : PR1580877839763
 Amount of Each Receipt this Period 140.00
 P/R Deduction (\$10.00 Bi-Weekly)

C. QUINTEN Curtis BLACK MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1404 Kenton Lane
 City Asheville State NC Zip Code 28803-2468
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RTA of Western NC, PA Occupation Medical Doctor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2160.00

Date of Receipt 12 / 31 / 2015
Transaction ID : PR1580879439763
 Amount of Each Receipt this Period 1120.00
 P/R Deduction (\$80.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	2310.00
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: (check only one)	PAGE 10 OF 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
21st Century Oncology, Inc. Political Action Committee

A. Mark Robert Jones MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1400 LONG RUN ROAD
 City LOUISVILLE State KY Zip Code 40245-4334
 FEC ID number of contributing federal political committee. **C**
 Name of Employer 21st Century Oncology of Kentucky (KEN) Occupation Medical Doctor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1350.00**

Date of Receipt **12 / 31 / 2015**
Transaction ID : PR1580886839763
 Amount of Each Receipt this Period **700.00**
 P/R Deduction (\$50.00 Bi-Weekly)

B. TAM NGUYEN MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2798 Bellini Road
 City Henderson State NV Zip Code 89052-3118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Michael J. Katin, MD, PC - MJK Occupation Medical Doctor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2700.00**

Date of Receipt **12 / 31 / 2015**
Transaction ID : PR1580891939763
 Amount of Each Receipt this Period **1400.00**
 P/R Deduction (\$100.00 Bi-Weekly)

C. Claire Skowronski
 Full Name (Last, First, Middle Initial)
 Mailing Address 1312 SW 7th TERRACE
 City CAPE CORAL State FL Zip Code 33991-2145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer 21st Century Oncology Services, Inc Occupation Director - Radiation Therapy School
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **270.00**

Date of Receipt **12 / 31 / 2015**
Transaction ID : PR1580896439763
 Amount of Each Receipt this Period **140.00**
 P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	2240.00
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: (check only one)	PAGE 11 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
21st Century Oncology, Inc. Political Action Committee

A. PAUL TREADWELL MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 9916 COZY GLEN CIRCLE
 City LAS VEGAS State NV Zip Code 89117-0940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Michael J. Katin, MD, PC Occupation Medical Doctor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt 12 / 31 / 2015
Transaction ID : PR1580898539763
 Amount of Each Receipt this Period 280.00
 P/R Deduction (\$20.00 Bi-Weekly)

B. Dr Patrick Michael Francke
 Full Name (Last, First, Middle Initial)
 Mailing Address 7 Winnebago Road
 City Sea Ranch Lakes State FL Zip Code 33308-2305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Carolina Regional Cancer Center, LLC Occupation Medical Doctor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1080.00

Date of Receipt 12 / 31 / 2015
Transaction ID : PR1633307939763
 Amount of Each Receipt this Period 560.00
 P/R Deduction (\$40.00 Bi-Weekly)

C. Dr Keith Lawrence Miller
 Full Name (Last, First, Middle Initial)
 Mailing Address 12731 Terabella Way
 City Fort Myers State FL Zip Code 33912-0910
 FEC ID number of contributing federal political committee. **C**
 Name of Employer 21st Century Oncology, LLC Occupation Medical Doctor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4050.00

Date of Receipt 12 / 31 / 2015
Transaction ID : PR1692755739763
 Amount of Each Receipt this Period 2100.00
 P/R Deduction (\$150.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	2940.00
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: (check only one)	PAGE 12 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
21st Century Oncology, Inc. Political Action Committee

A. Dr. Dwight Fitch
 Full Name (Last, First, Middle Initial)
 Mailing Address 9122 16th Ave Circle, NW
 City Bradenton State FL Zip Code 34209-8133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer 21st Century Oncology, LLC Occupation Medical Doctor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2015
Transaction ID : PR2127270539763
 Amount of Each Receipt this Period
 1400.00
 P/R Deduction (\$100.00 Bi-Weekly)

B. Brian P Quaranta MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 Vista Lake Drive Apt 108
 City Candler State NC Zip Code 28715-5103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Radiation Therapy Associates of Wester Occupation Medical Doctor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1080.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2015
Transaction ID : PR2127272439763
 Amount of Each Receipt this Period
 560.00
 P/R Deduction (\$40.00 Bi-Weekly)

C. Madlyn Dornaus
 Full Name (Last, First, Middle Initial)
 Mailing Address 18930 Knoll Landing Drive
 City Fort Myers State FL Zip Code 33908-4760
 FEC ID number of contributing federal political committee. **C**
 Name of Employer 21st Century Oncology Services, Inc Occupation VP Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2015
Transaction ID : PR2232241739763
 Amount of Each Receipt this Period
 450.00
 P/R Deduction (\$75.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	2410.00
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: (check only one)	PAGE 13 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
21st Century Oncology, Inc. Political Action Committee

A. Chaundre Cross
 Full Name (Last, First, Middle Initial)
 Mailing Address 6845 Wellington Drive
 City Naples State FL Zip Code 34109-7207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer 21st Century Oncology, LLC Occupation Medical Doctor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **675.00**

Date of Receipt **12 / 31 / 2015**
Transaction ID : PR2232246239763
 Amount of Each Receipt this Period **350.00**
 P/R Deduction (\$25.00 Bi-Weekly)

B. Alexis Harvey
 Full Name (Last, First, Middle Initial)
 Mailing Address 2127 Race St
 City Philadelphia State NJ Zip Code 19103-1009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer 21st Century Oncology of New Jersey, I Occupation Medical Doctor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **540.00**

Date of Receipt **12 / 31 / 2015**
Transaction ID : PR2232248539763
 Amount of Each Receipt this Period **280.00**
 P/R Deduction (\$20.00 Bi-Weekly)

C. Dr. Peter Greenberg
 Full Name (Last, First, Middle Initial)
 Mailing Address 77-840 Flora Rd
 City Palm Desert State CA Zip Code 92211-4109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer 21st Century Oncology of California, P Occupation Medical Doctor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **12 / 31 / 2015**
Transaction ID : PR2366842339763
 Amount of Each Receipt this Period **2400.00**
 P/R Deduction (\$200.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	3030.00
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: (check only one)	PAGE 14 OF 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
21st Century Oncology, Inc. Political Action Committee

A. Dr David Horvick
Full Name (Last, First, Middle Initial)
Mailing Address 953 Creek Rock Rd
City Bel Air State MD Zip Code 21014
FEC ID number of contributing federal political committee. **C**
Name of Employer 21st Century Onc of Harford County, Ma Occupation Medical Doctor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 12 / 31 / 2015
Transaction ID : PR2366842539763
Amount of Each Receipt this Period 700.00
P/R Deduction (\$50.00 Bi-Weekly)

B. Marc A. Melser MD
Full Name (Last, First, Middle Initial)
Mailing Address 27090 Harbor Oaks Boulevard
City Punta Gorda State FL Zip Code 33983-6507
FEC ID number of contributing federal political committee. **C**
Name of Employer 21st Century Oncology, LLC Occupation Medical Doctor - Urologist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 12 / 31 / 2015
Transaction ID : PR2412064439763
Amount of Each Receipt this Period 1400.00
P/R Deduction (\$100.00 Bi-Weekly)

C. Richard Rolland Lewis
Full Name (Last, First, Middle Initial)
Mailing Address 9272 River Otter Dr
City Fort Myers State FL Zip Code 33912-8922
FEC ID number of contributing federal political committee. **C**
Name of Employer 21st Century Oncology Services, Inc Occupation Director of Ops. Financial
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 460.00

Date of Receipt 12 / 31 / 2015
Transaction ID : PR2492181139763
Amount of Each Receipt this Period 200.00
P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 2300.00
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: (check only one)	PAGE 15 OF 20
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
21st Century Oncology, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Robert L. Long		Date of Receipt 12 / 31 / 2015 Transaction ID : PR2492181539763
Mailing Address 909 Mar Walt Drive		Amount of Each Receipt this Period 1400.00
City Fort Walton Beach	State FL	Zip Code 32547-6635
FEC ID number of contributing federal political committee. C	Name of Employer 21st Century Oncology, LLC	Occupation Medical Doctor
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2700.00	P/R Deduction (\$100.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. Jake J. Strikowski		Date of Receipt 12 / 31 / 2015 Transaction ID : PR2492181839763
Mailing Address 1360 S. Ocean Blvd #2001		Amount of Each Receipt this Period 280.00
City Pompano Beach	State FL	Zip Code 33062-7164
FEC ID number of contributing federal political committee. C	Name of Employer 21st Century Oncology Services, Inc	Occupation Regional Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. Michael J. Tompkins		Date of Receipt 12 / 31 / 2015 Transaction ID : PR2492181939763
Mailing Address 9070 Pittsburgh Blvd		Amount of Each Receipt this Period 150.00
City Fort Myers	State FL	Zip Code 33967-7205
FEC ID number of contributing federal political committee. C	Name of Employer 21st Century Oncology Services, Inc	Occupation Director of Ancillary Services
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	1830.00
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: (check only one)	PAGE 16 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
21st Century Oncology, Inc. Political Action Committee

A. Jonathan D. Weinbach
 Full Name (Last, First, Middle Initial)
 Mailing Address 210 W 19th St
 Apt 2 J
 City New York State NY Zip Code 10011-4067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer 21st Century Oncology Services, Inc Occupation Dir Referrals, Marketing & Network Dev
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **320.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2015
Transaction ID : PR2492182039763
 Amount of Each Receipt this Period
 60.00
 P/R Deduction (\$20.00 Bi-Weekly)

B. Rie Alhara
 Full Name (Last, First, Middle Initial)
 Mailing Address 14270 Royal Harbor
 City Fort Myers State FL Zip Code 33908-6503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer 21st Century Oncology, LLC Occupation Medical Doctor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1350.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2015
Transaction ID : PR2497582239763
 Amount of Each Receipt this Period
 700.00
 P/R Deduction (\$50.00 Bi-Weekly)

C. Kevin J. Kerlin
 Full Name (Last, First, Middle Initial)
 Mailing Address 904 Mill Rd
 City Goldsboro State NC Zip Code 27534-8951
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Radiation Therapy Associates of Wester Occupation Medical Doctor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2700.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2015
Transaction ID : PR2598671239763
 Amount of Each Receipt this Period
 1400.00
 P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....	2160.00
TOTAL This Period (last page this line number only).....	32424.00

**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 20
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
21st Century Oncology, Inc. Political Action Committee

A. Friends For Harry Reid
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 19163
 City Las Vegas State NV Zip Code 89132
 FEC ID number of contributing federal political committee. **C** C00204370
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 09 / 2015
Transaction ID : 38707766
 Amount of Each Receipt this Period
 5000.00
 Refund of Contribution due to Candidate not running

B.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 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

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 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

SUBTOTAL of Receipts 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 Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
21st Century Oncology, Inc. Political Action Committee

Full Name (Last, First, Middle Initial)

A. Searchlight Leadership Fund

Mailing Address 700 13ths Street, NW
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
Contribution

011

Candidate Name

Searchlight Leadership Fund

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 14 / 2015

Transaction ID : 38494095

Amount of Each Disbursement this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Tom Rice For Congress

Mailing Address 950 48th Avenue North Ste 200

City Myrtle Beach State SC Zip Code 29577

Purpose of Disbursement
Contribution

011

Candidate Name

Mr. Tom Rice

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: SC District: 07

Date of Disbursement

MM / DD / YYYY
08 / 20 / 2015

Transaction ID : 38509008

Amount of Each Disbursement this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

C. Impact

Mailing Address 192 Lexington Ave
Suite 1001

City New York State NY Zip Code 10016

Purpose of Disbursement
Contribution

011

Candidate Name

Impact

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2015

Transaction ID : 38598481

Amount of Each Disbursement this Period

5000.00

Contribution

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

12500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
21st Century Oncology, Inc. Political Action Committee

Full Name (Last, First, Middle Initial)

A. LEGPAC

Mailing Address 38 ivy St

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

Candidate Name

LEGPAC

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 38598483

Amount of Each Disbursement this Period

Contribution

Full Name (Last, First, Middle Initial)

B. Pallone For Congress

Mailing Address PO Box 3176

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement
Contribution

Candidate Name

Rep. Frank Pallone Jr.

Office Sought: House Senate President

State: NJ District: 06

Disbursement For: 2016 Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 38721721

Amount of Each Disbursement this Period

Contribution

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
21st Century Oncology, Inc. Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michigan Democratic State Central Committee

Mailing Address 606 Townsend Street

City Lansing State MI Zip Code 48933

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : 38601134

Amount of Each Disbursement this Period

Contribution

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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