

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

American Hospital Association PAC

ADDRESS (number and street)

325 Seventh Street, NW

Suite 700

☐ Check if different than previously reported. (ACC)

Washington

DC

20004

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00106146

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)☐ 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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

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

through

M M M /

D D D /

Y Y Y Y Y Y

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 Ms. Melinda Hatton

Signature of Treasurer

Ms. Melinda Hatton

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y

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

Office
Use
Only

FEC FORM 3X

Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American Hospital Association PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
06 01 2011 To: M M / D D / Y Y Y Y Y Y
06 30 2011

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2011		1836473.19
(b) Cash on Hand at Beginning of Reporting Period.....	2339470.10	
(c) Total Receipts (from Line 19)	132614.30	968765.35
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	2472084.40	2805238.54
7. Total Disbursements (from Line 31)	127753.58	460907.72
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2344330.82	2344330.82
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)

Page 3

Write or Type Committee Name

American Hospital Association PAC

Report Covering the Period:

From:

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

To:

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

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).....	81336.83	381233.47
(ii) Unitemized	37841.07	106049.22
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	119177.90	487282.69
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	119177.90	492282.69
12. Transfers From Affiliated/Other Party Committees.....	13175.00	468675.00
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	1334.52
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	5500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	261.40	973.14
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))	132614.30	968765.35
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	132614.30	968765.35

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	253.58	3157.72
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	253.58	3157.72
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	127500.00	457750.00
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	0.00	0.00
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)) ..	127753.58	460907.72
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	127753.58	460907.72

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)	119177.90	492282.69
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	119177.90	492282.69
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	253.58	3157.72
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	1334.52
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	253.58	1823.20

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)

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Mary C. Becker

Mailing Address 7800 South Eagle Road

City

Columbia

State

MO

Zip Code

65203-9017

FEC ID number of contributing
federal political committee.

C

Name of Employer

Missouri Hospital Association

Occupation

Senior VP, Commc. & Health Improvement

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.75

Date of Receipt

06 / 03 / 2011

Transaction ID : 19176828

Amount of Each Receipt this Period

43.75

Full Name (Last, First, Middle Initial)

B. Mr. Herb B Kuhn

Mailing Address 5310 Saddlebrooke Lane

City

Lohman

State

MO

Zip Code

65053-9353

FEC ID number of contributing
federal political committee.

C

Name of Employer

Missouri Hospital Association

Occupation

President and CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

06 / 03 / 2011

Transaction ID : 19176869

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

C. Mr. Daniel R. Landon

Mailing Address 1811 Forest Park Court

City

Jefferson City

State

MO

Zip Code

65109-9782

FEC ID number of contributing
federal political committee.

C

Name of Employer

Missouri Hospital Association

Occupation

Sr. Vice President, Governmental Relat

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.50

Date of Receipt

06 / 03 / 2011

Transaction ID : 19176872

Amount of Each Receipt this Period

62.50

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

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

231.25

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Kathleen C. Poff

Mailing Address 5119 Coventry Waye

City State Zip Code
 Jefferson City MO 65101-8284

FEC ID number of contributing federal political committee.

C

Name of Employer

Missouri Hospital Association

Occupation

Senior Vice President & CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 03 / 2011

Transaction ID : 19176894

Amount of Each Receipt this Period

43.75

Full Name (Last, First, Middle Initial)

B. Mr. Jerry M. Sill

Mailing Address 2906 Valley View Terrace

City State Zip Code
 Jefferson City MO 65109-1069

FEC ID number of contributing federal political committee.

C

Name of Employer

Missouri Hospital Association

Occupation

Senior Vice President & General Course

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 03 / 2011

Transaction ID : 19176902

Amount of Each Receipt this Period

43.75

Full Name (Last, First, Middle Initial)

C. Mr. Leonard Hernandez

Mailing Address 445 Hilltop Street

City State Zip Code
 Elkhart KS 67950-0937

FEC ID number of contributing federal political committee.

C

Name of Employer

Morton County Health System

Occupation

Chief Executive Officer

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 / 03 / 2011

Transaction ID : 19176989

Amount of Each Receipt this Period

250.00

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

337.50

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
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Stephen M. Ahnen

Mailing Address 125 Airport Road

City

Concord

State

NH

Zip Code

03301-7300

FEC ID number of contributing
federal political committee.

C

Name of Employer

New Hampshire Hospital Association

Occupation

President and CEO

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

541.96

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 06 / 06 / 2011

Transaction ID : 19177077

Amount of Each Receipt this Period

41.64

Full Name (Last, First, Middle Initial)

B. Mr. Michael E Henze

Mailing Address 54 Hospital Drive

City

Osage Beach

State

MO

Zip Code

65065-3050

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lake Regional Health System

Occupation

Chief Executive Officer

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 06 / 07 / 2011

Transaction ID : 19177617

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

c. Mr. Gary L Barnett

Mailing Address P O Box 372

City

Mattoon

State

IL

Zip Code

61938-0372

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sarah Bush Lincoln Health Center

Occupation

President and Chief Executive Officer

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 / 01 / 2011

Transaction ID : 19178497

Amount of Each Receipt this Period

250.00

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

891.64

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Daniel A Parod

Mailing Address 2400 North Rockton Avenue

City

Rockford

State

IL

Zip Code

61103-3655

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rockford Memorial Hospital

Occupation

Senior Vice President Administrative A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
06 / 01 / 2011

Transaction ID : 19178607

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. Henry Scybold

Mailing Address 529 South Summit Street

City

Barrington

State

IL

Zip Code

60010-4413

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rockford Memorial Hospital

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
06 / 01 / 2011

Transaction ID : 19179486

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Ms. Helen M. Brooks

Mailing Address 2400 North Rockton Avenue

City

Rockford

State

IL

Zip Code

61103-3655

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rockford Memorial Hospital

Occupation

Executive Director, Foundation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
06 / 01 / 2011

Transaction ID : 19179488

Amount of Each Receipt this Period

500.00

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

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

1500.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. William R. Dilts

Mailing Address 11873 Warblers Way

City

Roscoe

State

IL

Zip Code

61073-7541

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rockford Memorial Hospital

Occupation

Vice President, Strategic Plng/Relatio

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 01 / 2011

Transaction ID : 19179489

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. Gary E Kaatz

Mailing Address 2400 North Rockton Avenue

City

Rockford

State

IL

Zip Code

61103-3692

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rockford Memorial Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 01 / 2011

Transaction ID : 19179502

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Phillip M Kambic

Mailing Address 350 North Wall Street

City

Kankakee

State

IL

Zip Code

60901-2901

FEC ID number of contributing
federal political committee.

C

Name of Employer

Riverside Medical Center

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 01 / 2011

Transaction ID : 19179503

Amount of Each Receipt this Period

250.00

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

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

1000.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Dr. Alice Ackerman MD

Mailing Address 3905 Piney Ridge RD

City State Zip Code
 Roanoke VA 24033

FEC ID number of contributing
federal political committee.

C

Name of Employer

Carilion Clinic

Occupation

Department Chair

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY
 06 / 03 / 2011

Transaction ID : 19179533

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. Mr. Carl Bahnlein

Mailing Address 1701 North George Mason Drive

City State Zip Code
 Arlington VA 22205-3698

FEC ID number of contributing
federal political committee.

C

Name of Employer

Virginia Hospital Center - Arlington

Occupation

Executive Vice President and Chief Ope

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY
 06 / 03 / 2011

Transaction ID : 19179534

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Ms. Sharon M. Bass Jr.

Mailing Address 2619 Blue Hernon Circle

City State Zip Code
 Roanoke VA 24018-5133

FEC ID number of contributing
federal political committee.

C

Name of Employer

Carilion Clinic

Occupation

Vice President Imaging & Pharmacy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY
 06 / 03 / 2011

Transaction ID : 19179535

Amount of Each Receipt this Period

350.00

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

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

1050.00

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

Use separate schedule(s)
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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms Lori Brown

Mailing Address 40349 Braddock Rd

City State Zip Code
Aldie VA 20105-2719

FEC ID number of contributing
federal political committee.

C

Name of Employer
Inova Health System

Occupation
Assistant Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 03 / 2011

Transaction ID : 19179536

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. Mr. Ramon Darcey

Mailing Address 535 Independence Parkway
Suite 200

City State Zip Code
Chesapeake VA 23320-5176

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sentara Healthcare

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 03 / 2011

Transaction ID : 19179537

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Mr. Michael Dudley

Mailing Address 4417 Corporation Lane

City State Zip Code
Virginia Beach VA 23462-3162

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sentara Healthcare

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 03 / 2011

Transaction ID : 19179589

Amount of Each Receipt this Period

350.00

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

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

1050.00

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

Use separate schedule(s)
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(check only one)

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Robert L Graves

Mailing Address 100 Sentara Circle

City

Williamsburg

State

VA

Zip Code

23188-5713

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sentara Williamsburg Regional Medical

Occupation

Vice President and Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY
06 / 03 / 2011

Transaction ID : 19179590

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. Mr. James E Haden

Mailing Address 459 Locust Avenue

City

Charlottesville

State

VA

Zip Code

22902-4808

FEC ID number of contributing
federal political committee.

C

Name of Employer

Martha Jefferson Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY
06 / 03 / 2011

Transaction ID : 19179591

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Ms. Kay Hix

Mailing Address 2784 Lakeview Road

City

Troutville

State

VA

Zip Code

24175-2750

FEC ID number of contributing
federal political committee.

C

Name of Employer

Carilion Clinic

Occupation

Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY
06 / 03 / 2011

Transaction ID : 19179593

Amount of Each Receipt this Period

350.00

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

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

1050.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Walter J Kiwall

Mailing Address 1001 Sam Perry Boulevard

City

Fredericksburg

State

VA

Zip Code

22401-3354

FEC ID number of contributing
federal political committee.

C

Name of Employer

Stafford Hospital

Occupation

Executive Vice President and Chief Ope

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

06 / 03 / 2011

Transaction ID : 19179594

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. Mr. Rob Lockridge

Mailing Address 14304 Horseshoe Ford Rd

City

Ashland

State

VA

Zip Code

23005-3163

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Virginia Medical Center

Occupation

Director, Government Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

06 / 03 / 2011

Transaction ID : 19179595

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Ms Darleen Mastin

Mailing Address 4748 Totteridge Lane

City

Virginia Beach

State

VA

Zip Code

23462

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sentara Healthcare

Occupation

Sr. Vice President/COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

06 / 03 / 2011

Transaction ID : 19179597

Amount of Each Receipt this Period

350.00

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

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

1050.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Sylvia Richendollar

Mailing Address 5466 Hunt Club Drive

City

Virginia Beach

State

VA

Zip Code

23462-3413

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sentara Norfolk General Hospital

Occupation

Director Laboratory Services

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 03 / 2011

Transaction ID : 19179599

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. Ms Rachel Schneider

Mailing Address 2328 Santa Fe Drive

City

Virginia Beach

State

VA

Zip Code

23456-6752

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sentara Healthcare

Occupation

Director of Network Relations

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 03 / 2011

Transaction ID : 19179600

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Mr. Larry M Graham

Mailing Address 1701 Oak Park Boulevard

City

Lake Charles

State

LA

Zip Code

70601-8911

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lake Charles Memorial Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 07 / 2011

Transaction ID : 19184659

Amount of Each Receipt this Period

750.00

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

1450.00

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

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Clifford M Broussard

Mailing Address 2400 Hospital Drive

City

Bossier City

State

LA

Zip Code

71111-2385

FEC ID number of contributing
federal political committee.

C

Name of Employer

WK Bossier Health Center

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 07 / 2011

Transaction ID : 19184660

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Ms Nancy Cassagne

Mailing Address 1101 Medical Center Boulevard

City

Marrero

State

LA

Zip Code

70072-3147

FEC ID number of contributing
federal political committee.

C

Name of Employer

West Jefferson Medical Center

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 07 / 2011

Transaction ID : 19184661

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. John J Finan Jr

Mailing Address 4200 Essen Lane

City

Baton Rouge

State

LA

Zip Code

70809-2196

FEC ID number of contributing
federal political committee.

C

Name of Employer

Franciscan Missionaries of Our Lady He

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 07 / 2011

Transaction ID : 19184662

Amount of Each Receipt this Period

500.00

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

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

1500.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Mark E Marley

Mailing Address P O Box 2009

City

Natchitoches

State

LA

Zip Code

71457-2009

FEC ID number of contributing
federal political committee.

C

Name of Employer

Natchitoches Regional Medical Center

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 07 / 2011

Transaction ID : 19184663

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. James T Montgomery

Mailing Address 1401 Foucher Street

City

New Orleans

State

LA

Zip Code

70115-3515

FEC ID number of contributing
federal political committee.

C

Name of Employer

Touro Infirmary

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 07 / 2011

Transaction ID : 19184768

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. James E Cathey Jr

Mailing Address PO Box 2668

City

Hammond

State

LA

Zip Code

70404-2668

FEC ID number of contributing
federal political committee.

C

Name of Employer

North Oaks Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 07 / 2011

Transaction ID : 19184769

Amount of Each Receipt this Period

300.00

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

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

1300.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. M. Bryan Day

Mailing Address 3600 Florida Boulevard, 4th Floor

City

Baton Rouge

State

LA

Zip Code

70806-3842

FEC ID number of contributing
federal political committee.

C

Name of Employer

Promise Hospital of Baton Rouge

Occupation

Senior VicePresident

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 07 / 2011

Transaction ID : 19184770

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. Ricardo Guevara

Mailing Address 200 Henry Clay Avenue

City

New Orleans

State

LA

Zip Code

70118-5798

FEC ID number of contributing
federal political committee.

C

Name of Employer

Children's Hospital

Occupation

Vice President Legal Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 07 / 2011

Transaction ID : 19184771

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. Patrick J Quinlan

Mailing Address 1514 Jefferson Highway

City

New Orleans

State

LA

Zip Code

70121-2484

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ochsner Health System

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 07 / 2011

Transaction ID : 19184772

Amount of Each Receipt this Period

250.00

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

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

750.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Warner L Thomas

Mailing Address 1514 Jefferson Highway

City

New Orleans

State

LA

Zip Code

70121-2429

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ochsner Health System

Occupation

President and Chief Operating Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

06 / 07 / 2011

Transaction ID : 19184847

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. Timothy O Coffey

Mailing Address 1701 Oak Park Boulevard

City

Lake Charles

State

LA

Zip Code

70601-8911

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lake Charles Memorial Hospital

Occupation

Senior Vice President Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

06 / 07 / 2011

Transaction ID : 19184848

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

C. Mr. Todd Delahoussaye MBA

Mailing Address 1701 Oak Park Boulevard

City

Lake Charles

State

LA

Zip Code

70601-8911

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lake Charles Memorial Hospital

Occupation

Sr. VP, Specialty & Physician Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

06 / 07 / 2011

Transaction ID : 19184849

Amount of Each Receipt this Period

225.00

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

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

700.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Bernita Loyd , LD, LDN

Mailing Address 1701 Oak Park Blvd

City

Lake Charles

State

LA

Zip Code

70601-8911

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lake Charles Memorial Hospital

Occupation

Vice President, Support Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY
06 / 07 / 2011

Transaction ID : 19184850

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

B. Dr. Kevin Mocklin MD

Mailing Address 1701 Oak Park Boulevard

City

Lake Charles

State

LA

Zip Code

70601-8911

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lake Charles Memorial Hospital

Occupation

Director Medical Staff

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY
06 / 07 / 2011

Transaction ID : 19184851

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

c. Mr David Usher , FACHE

Mailing Address P O Drawer 'M'

City

Lake Charles

State

LA

Zip Code

70602

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lake Charles Memorial Hospital

Occupation

Senior Vice President, Business Develo

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY
06 / 07 / 2011

Transaction ID : 19184852

Amount of Each Receipt this Period

225.00

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

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

675.00

SCHEDULE A (FEC Form 3X)
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<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)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Charles P Whitson

Mailing Address 1701 Oak Park Boulevard

City	State	Zip Code
Lake Charles	LA	70601-8911

FEC ID number of contributing federal political committee.

C

Name of Employer

Lake Charles Memorial Hospital

Occupation

Senior Vice President Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06	/	07	/	2011

Transaction ID : 19184853

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

B. Mr. Robert L Hawley Jr

Mailing Address 1001 Gause Boulevard

City	State	Zip Code
Slidell	LA	70458-2987

FEC ID number of contributing federal political committee.

C

Name of Employer

Slidell Memorial Hospital

Occupation

Former - Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06	/	07	/	2011

Transaction ID : 19184871

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Mr. John Hanshaw

Mailing Address 6985 Union Park Ctr Ste 550

City	State	Zip Code
Midvale	UT	84047-4177

FEC ID number of contributing federal political committee.

C

Name of Employer

HCA

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06	/	16	/	2011

Transaction ID : 19189026

Amount of Each Receipt this Period

350.00

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

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

625.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Thomas A Biga

Mailing Address 29 Highand Avenue

City

Fair Haven

State

NJ

Zip Code

07704-3620

FEC ID number of contributing
federal political committee.

C

Name of Employer

Barnabas Health

Occupation

ExecutiveVice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

06 / 10 / 2011

Transaction ID : 19192471

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Dr. Richard Aubut

Mailing Address 55 Fogg Road

City

South Weymouth

State

MA

Zip Code

02190-2432

FEC ID number of contributing
federal political committee.

C

Name of Employer

South Shore Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

06 / 10 / 2011

Transaction ID : 19192585

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

C. Dr. Howard R Grant

Mailing Address 41 Mall Road

City

Burlington

State

MA

Zip Code

01805-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lahey Clinic Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

06 / 10 / 2011

Transaction ID : 19192587

Amount of Each Receipt this Period

375.00

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

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

2125.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Robert A Gundersen

Mailing Address 2001 Washington Street

City

Braintree

State

MA

Zip Code

02184-8658

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kindred Hospital Northeast-Braintree

Occupation

Chief Executive Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

562.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 10 / 2011

Transaction ID : 19192588

Amount of Each Receipt this Period

562.50

Full Name (Last, First, Middle Initial)

B. Ms. Kathleen Jose MSN

Mailing Address 41 Mall Rd

City

Burlington

State

MA

Zip Code

01805-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lahey Clinic Hospital

Occupation

Sr VP, Nursing Services

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 10 / 2011

Transaction ID : 19192589

Amount of Each Receipt this Period

112.50

Full Name (Last, First, Middle Initial)

C. Mr. Karl B Gills

Mailing Address 1024 Central Park Drive

City

Steamboat Springs

State

CO

Zip Code

80487-8813

FEC ID number of contributing
federal political committee.

C

Name of Employer

Yampa Valley Medical Center

Occupation

Chief Executive Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 10 / 2011

Transaction ID : 19192592

Amount of Each Receipt this Period

250.00

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

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

925.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Victor A Broccolino

Mailing Address 5755 Cedar Lane

City
Columbia

State
MD

Zip Code
21044-2999

FEC ID number of contributing
federal political committee.

C

Name of Employer

Howard County General Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

06 / 10 / 2011

Transaction ID : 19192603

Amount of Each Receipt this Period

340.00

Full Name (Last, First, Middle Initial)

B. Mr. Ronald R Peterson

Mailing Address 733 North Broadway, BRB 104

City
Baltimore

State
MD

Zip Code
21205

FEC ID number of contributing
federal political committee.

C

Name of Employer

Johns Hopkins Health System

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

06 / 10 / 2011

Transaction ID : 19192630

Amount of Each Receipt this Period

255.00

Full Name (Last, First, Middle Initial)

C. Mr. Michael B Robbins

Mailing Address P.O. Box 8207

City
Elkridge

State
MD

Zip Code
21075-8207

FEC ID number of contributing
federal political committee.

C

Name of Employer

Maryland Hospital Association

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

06 / 10 / 2011

Transaction ID : 19192632

Amount of Each Receipt this Period

510.00

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

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

1105.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Cynthia M Grueber

Mailing Address 3181 SW Sam Jackson Park Road

City State Zip Code
 Portland OR 97239-3011

FEC ID number of contributing
federal political committee.

C

Name of Employer

OHSU Hospital

Occupation

Chief Operating Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 13 / 2011

Transaction ID : 19192649

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. Roy G Vinyard

Mailing Address 2650 Siskiyou Boulevard, Suite 200

City State Zip Code
 Medford OR 97504-8170

FEC ID number of contributing
federal political committee.

C

Name of Employer

Asante Health System

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 13 / 2011

Transaction ID : 19192652

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Terry Murphy

Mailing Address 640 South State Street

City State Zip Code
 Dover DE 19901-3597

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bayhealth Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 13 / 2011

Transaction ID : 19192658

Amount of Each Receipt this Period

500.00

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

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

1250.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Donald R Avery

Mailing Address P O Box 1408

City

Dublin

State

GA

Zip Code

31040-1408

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fairview Park Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 13 / 2011

Transaction ID : 19192679

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Ms. Jean Aycok

Mailing Address 821 North Cobb Street

City

Milledgeville

State

GA

Zip Code

31061-2343

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oconee Regional Health System

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 13 / 2011

Transaction ID : 19192680

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Kevin Bierschenk

Mailing Address P O Box 4309

City

Eastman

State

GA

Zip Code

31023-4309

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dodge County Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 13 / 2011

Transaction ID : 19192681

Amount of Each Receipt this Period

250.00

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

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

1000.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Lance B Duke

Mailing Address 707 Center Street, Suite 400

City State Zip Code
Columbus GA 31901-1575

FEC ID number of contributing
federal political committee.

C

Name of Employer

Columbus Regional Healthcare System

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 13 / 2011

Transaction ID : 19192687

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. Lex S Anderson

Mailing Address 1923 South Utica Avenue

City State Zip Code
Tulsa OK 74104-6502

FEC ID number of contributing
federal political committee.

C

Name of Employer

Marian Health System

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 21 / 2011

Transaction ID : 19192728

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. Chris Hammes

Mailing Address 3300 NW Expressway

City State Zip Code
Oklahoma City OK 73112-4418

FEC ID number of contributing
federal political committee.

C

Name of Employer

Integris Baptist Medical Center

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 21 / 2011

Transaction ID : 19192729

Amount of Each Receipt this Period

250.00

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

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

750.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Debra K Boardman

Mailing Address 750 East 34th Street

City
Hibbing

State
MN

Zip Code
55746-2341

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fairview Range Regional Health Service

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 14 / 2011

Transaction ID : 19192774

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Ms. Sharon P. Andre

Mailing Address P.O. Box 9010

City
Stuart

State
FL

Zip Code
34995-9010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Martin Memorial Health Systems

Occupation

Admin Director, Ed., Diabetes & OH

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 15 / 2011

Transaction ID : 19192797

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. John R. Brownlow

Mailing Address 5608 Bear Lake Circle

City
Apopka

State
FL

Zip Code
32703-1916

FEC ID number of contributing
federal political committee.

C

Name of Employer

Florida Hospital

Occupation

Sr. Vice President, Managed Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 15 / 2011

Transaction ID : 19192800

Amount of Each Receipt this Period

250.00

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

750.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Timothy W Cook

Mailing Address P O Box 9400

City
Sebring

State
FL

Zip Code
33871-9400

FEC ID number of contributing
federal political committee.

C

Name of Employer

Florida Hospital Heartland Medical Cen

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 15 / 2011

Transaction ID : 19192803

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr Frances Crunk

Mailing Address 2880 David Walker Dr #333

City
Eustis

State
FL

Zip Code
32726-6172

FEC ID number of contributing
federal political committee.

C

Name of Employer

Florida Hospital Waterman

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 15 / 2011

Transaction ID : 19192804

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. Bill Ellis

Mailing Address 6450 US Highway 1

City
Rockledge

State
FL

Zip Code
32955-5747

FEC ID number of contributing
federal political committee.

C

Name of Employer

Health First, Inc.

Occupation

Vice President Government and Industry

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 15 / 2011

Transaction ID : 19192823

Amount of Each Receipt this Period

250.00

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

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

1000.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Richard M Irwin Jr

Mailing Address 10000 West Colonial Drive

City State Zip Code
 Ocoee FL 34761-3493

FEC ID number of contributing
federal political committee.

C

Name of Employer

Health Central

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

06 / 15 / 2011

Transaction ID : 19192826

Amount of Each Receipt this Period

700.00

Full Name (Last, First, Middle Initial)

B. Mr. George Mikitarian Jr

Mailing Address 951 North Washington Avenue

City State Zip Code
 Titusville FL 32796-2163

FEC ID number of contributing
federal political committee.

C

Name of Employer

Parrish Medical Center

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 15 / 2011

Transaction ID : 19192830

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. James R Nathan

Mailing Address P O Box 2218

City State Zip Code
 Fort Myers FL 33902-2218

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lee Memorial Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

06 / 15 / 2011

Transaction ID : 19193023

Amount of Each Receipt this Period

1000.00

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

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

1950.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Gregory P. Ohe

Mailing Address 10000 West Colonial Drive

City State Zip Code
 Ocoee FL 34761-3493

FEC ID number of contributing
federal political committee.

C

Name of Employer

Health Central

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 15 / 2011

Transaction ID : 19193024

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. Zeff Ross

Mailing Address 3501 Johnson Street

City State Zip Code
 Hollywood FL 33021-5421

FEC ID number of contributing
federal political committee.

C

Name of Employer

Memorial Regional Hospital

Occupation

Senior Vice President and Chief Execut

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

06 / 15 / 2011

Transaction ID : 19193026

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Ms. Deanna Schaeffer

Mailing Address 400 N. Clyde Morris Blvd

City State Zip Code
 Daytona Beach FL 32114-2731

FEC ID number of contributing
federal political committee.

C

Name of Employer

Halifax Health Medical Center of Dayto

Occupation

CEO, Healthy Communities & GR Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 15 / 2011

Transaction ID : 19193027

Amount of Each Receipt this Period

500.00

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

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

1750.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Camilla Schmitz

Mailing Address PO Box 391

City

Chipley

State

FL

Zip Code

32428-0391

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northwest Florida Community Hospital

Occupation

Chief Financial Officer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 15 / 2011

Transaction ID : 19193028

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. Andrew Stein

Mailing Address 3315 Harbour Place

City

Panama City

State

FL

Zip Code

32405-1638

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bay Medical Center

Occupation

Board Trustee

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 15 / 2011

Transaction ID : 19193064

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. Daryl Tol

Mailing Address 701 West Plymouth Avenue

City

Deland

State

FL

Zip Code

32720-3236

FEC ID number of contributing
federal political committee.

C

Name of Employer

Florida Hospital DeLand

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 15 / 2011

Transaction ID : 19193066

Amount of Each Receipt this Period

500.00

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

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

1250.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Steve Truluck

Mailing Address 9798 NW CR 241

City

Lake Butler

State

FL

Zip Code

32054

FEC ID number of contributing
federal political committee.

C

Name of Employer

Shands at the University of Florida

Occupation

Director Safety Security & Transportat

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 15 / 2011

Transaction ID : 19193067

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Allen S Weiss

Mailing Address 350 Seventh Street North

City

Naples

State

FL

Zip Code

34102-5754

FEC ID number of contributing
federal political committee.

C

Name of Employer

NCH Downtown Naples Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

06 / 15 / 2011

Transaction ID : 19193068

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Mr. John F Wilbanks

Mailing Address 800 Prudential Drive

City

Jacksonville

State

FL

Zip Code

32207-8202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Baptist Health

Occupation

Chief Operating Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 15 / 2011

Transaction ID : 19193069

Amount of Each Receipt this Period

500.00

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

1750.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Eileen Dohmann

Mailing Address 6508 Flowerdew Hundred Ct.

City State Zip Code
 Centreville VA 20120-3755

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Mary Washington Hospital

Occupation
 Vice President, Nursing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY
 06 / 15 / 2011

Transaction ID : 19193261

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. Ms. Amy Adome

Mailing Address 1001 Sam Perry Blvd.

City State Zip Code
 Fredericksburg VA 22401-4453

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Mediacorp Health System

Occupation
 Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY
 06 / 17 / 2011

Transaction ID : 19193332

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Mr. William D Jacobsen

Mailing Address 180 Floyd Avenue

City State Zip Code
 Rocky Mount VA 24151-1318

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Carilion Franklin Memorial Hospital

Occupation
 Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY
 06 / 17 / 2011

Transaction ID : 19193334

Amount of Each Receipt this Period

350.00

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

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

1050.00

SCHEDULE A (FEC Form 3X)
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<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)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Scott A Miller

Mailing Address 1521 Sea Breeze Tr

City

Virginia Beach

State

VA

Zip Code

23452-4742

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sentara Healthcare

Occupation

Vice President Medical Affairs

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	17	/	2011

Transaction ID : 19193335

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. Ms. Melina Dee Perdue

Mailing Address 101 Elm Avenue SE

City

Roanoke

State

VA

Zip Code

24013-2222

FEC ID number of contributing
federal political committee.

C

Name of Employer

Carilion Clinic

Occupation

Senior Vice President

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	17	/	2011

Transaction ID : 19193336

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Ms. Melissa Smith

Mailing Address 11325 Bright Pond Lane

City

Reston

State

VA

Zip Code

20194-1006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mary Washington Healthcare

Occupation

Vice President

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	17	/	2011

Transaction ID : 19193339

Amount of Each Receipt this Period

350.00

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

1050.00

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

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. David L Ramsey

Mailing Address P O Box 1547

City

Charleston

State

WV

Zip Code

25326-1547

FEC ID number of contributing
federal political committee.

C

Name of Employer

Charleston Area Medical Center Health

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 20 / 2011

Transaction ID : 19193341

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. Jeffrey Matton

Mailing Address 1132 Nichols Ct.

City

Millersville

State

MD

Zip Code

21108-2152

FEC ID number of contributing
federal political committee.

C

Name of Employer

Good Samaritan Hospital of Maryland

Occupation

Senior Vice President and COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.00

Date of Receipt

06 / 20 / 2011

Transaction ID : 19193447

Amount of Each Receipt this Period

408.00

Full Name (Last, First, Middle Initial)

C. Ms. Paula Minnehan

Mailing Address 283 Gallopiny Hill Road

City

Hopkinton

State

NH

Zip Code

03229-3402

FEC ID number of contributing
federal political committee.

C

Name of Employer

New Hampshire Hospital Association

Occupation

V.P., Finance and Rural Hospitals

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

06 / 20 / 2011

Transaction ID : 19194561

Amount of Each Receipt this Period

14.50

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

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

922.50

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Stephen M. Ahnen

Mailing Address 125 Airport Road

City

Concord

State

NH

Zip Code

03301-7300

FEC ID number of contributing
federal political committee.

C

Name of Employer

New Hampshire Hospital Association

Occupation

President and CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.60

Date of Receipt

06 / 20 / 2011

Transaction ID : 19194562

Amount of Each Receipt this Period

41.64

Full Name (Last, First, Middle Initial)

B. Ms. Pamala Maples

Mailing Address P O Box 428

City

Jackson

State

WY

Zip Code

83001-0428

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. John's Medical Center and Living C

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 20 / 2011

Transaction ID : 19194565

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. Paul Janke

Mailing Address 1775 Thompson Road

City

Coos Bay

State

OR

Zip Code

97420-2125

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bay Area Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 20 / 2011

Transaction ID : 19194568

Amount of Each Receipt this Period

500.00

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

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

791.64

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Dennis J Doran

Mailing Address 701 South Dellwood Street

City State Zip Code
 Cambridge MN 55008-1920

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Cambridge Medical Center

Occupation
 President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 20 / 2011

Transaction ID : 19194572

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. Jeffrey Lockhart

Mailing Address 27 Raynes Neck Rd

City State Zip Code
 York ME 03909-5036

FEC ID number of contributing
federal political committee.

C

Name of Employer
 York Hospital

Occupation
 Director Surgery, Special Procedures

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 07 / 2011

Transaction ID : 19194596

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Steven R Michaud

Mailing Address 33 Fuller Road

City State Zip Code
 Augusta ME 04330-4910

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Maine Hospital Association

Occupation
 President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 13 / 2011

Transaction ID : 19194604

Amount of Each Receipt this Period

250.00

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

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

1000.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Sean J. Hopkins

Mailing Address 6180 Lower Mountain Road

City

New Hope

State

PA

Zip Code

18938-5760

FEC ID number of contributing
federal political committee.

C

Name of Employer

New Jersey Hospital Association

Occupation

Sr. VP., Health Economics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.93

Date of Receipt

06 / 24 / 2011

Transaction ID : 19194924

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

B. Ms. Deborah Zastocki

Mailing Address 97 West Parkway

City

Pompton Plains

State

NJ

Zip Code

07444-1647

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chilton Memorial Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 24 / 2011

Transaction ID : 19194940

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

c. Ms. Laura D. Appel

Mailing Address 224 Vicksburg

City

Lansing

State

MI

Zip Code

48917-9607

FEC ID number of contributing
federal political committee.

C

Name of Employer

Michigan Health & Hospital Association

Occupation

Vice President, Federal Policy & Advoc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19194945

Amount of Each Receipt this Period

500.00

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

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

1005.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Sally L Berglin

Mailing Address P O Box 209

City

Paw Paw

State

MI

Zip Code

49079-0209

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bronson LakeView Hospital

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19194947

Amount of Each Receipt this Period

275.00

Full Name (Last, First, Middle Initial)

B. Mr. James Bosscher

Mailing Address 27870 Cabot Drive

City

Novi

State

MI

Zip Code

48377-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Trinity Health

Occupation

Vice President, Treasury

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19194949

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr David J Campbell

Mailing Address 27 Oxford Road

City

Grosse Pointe Shores

State

MI

Zip Code

48236-1835

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oakwood Healthcare, Inc.

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19194950

Amount of Each Receipt this Period

250.00

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

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

775.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. James M Connelly

Mailing Address 7123 Kennowy Court

City

West Bloomfield

State

MI

Zip Code

48322-3276

FEC ID number of contributing
federal political committee.

C

Name of Employer

Henry Ford Health System

Occupation

Executive Vice President Finance and A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19194951

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. William Conway

Mailing Address 998 Brookwood St.

City

Birmingham

State

MI

Zip Code

48009-1102

FEC ID number of contributing
federal political committee.

C

Name of Employer

Henry Ford Health System

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19194952

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr Van Conway

Mailing Address 401 S Old Woodward, Suite 340

City

Birmingham

State

MI

Zip Code

48009-6621

FEC ID number of contributing
federal political committee.

C

Name of Employer

Beaumont Health System

Occupation

Trustee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19194953

Amount of Each Receipt this Period

2100.00

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

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

2600.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Beverly Erickson

Mailing Address 1841 Maryland Blvd

City

Birmingham

State

MI

Zip Code

48009-4119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Trinity Health

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19194956

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. Garry C Faja

Mailing Address 400 West Russell Street

City

Saline

State

MI

Zip Code

48176-1183

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Joseph Mercy Saline Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19194958

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Mr. James B Falahee Jr

Mailing Address 7463 Cottage Oak Drive

City

Portage

State

MI

Zip Code

49024-2352

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bronson Healthcare Group Inc

Occupation

Senior Vice President Legal and Legis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19194959

Amount of Each Receipt this Period

325.00

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

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

1575.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Alice Gerard

Mailing Address 3231 Bangor Rd.

City

State

Zip Code

Bay City

MI

48706-1852

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Bay Regional Medical Center

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

990.00

Date of Receipt

MM / DD / YYYY
06 / 23 / 2011

Transaction ID : 19194960

Amount of Each Receipt this Period

990.00

Full Name (Last, First, Middle Initial)

B. Mr. Peter Graham

Mailing Address 2233 Quarry Road

City

State

Zip Code

East Lansing

MI

48823-7234

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Sparrow Hospital

Vice President, Sparrow Medical Group

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

MM / DD / YYYY
06 / 23 / 2011

Transaction ID : 19194961

Amount of Each Receipt this Period

375.00

Full Name (Last, First, Middle Initial)

C. Mr. John T. Hayden

Mailing Address 5864 Blue Jay Drive

City

State

Zip Code

Kalamazoo

MI

49009-0800

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Bronson Healthcare Group Inc

Vice President Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

MM / DD / YYYY
06 / 23 / 2011

Transaction ID : 19194964

Amount of Each Receipt this Period

325.00

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

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

1690.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Dr. Michael Haynes MD

Mailing Address 13144 Balfour Ave

City

Huntington Woods

State

MI

Zip Code

48070-1701

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. John Hospital and Medical Center

Occupation

Chief Medical Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
06 / 23 / 2011

Transaction ID : 19194965

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Harry N. Herkowitz

Mailing Address 2700 W. Long Lake Rd.

City

West Bloomfield

State

MI

Zip Code

48323-1832

FEC ID number of contributing
federal political committee.

C

Name of Employer

Beaumont Health System

Occupation

Chairman of Orthopaedic Surgery

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
06 / 23 / 2011

Transaction ID : 19194967

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Dennis R Herrick

Mailing Address 1450 Redding

City

Birmingham

State

MI

Zip Code

48009-1027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Beaumont Health System

Occupation

Senior Vice President and Chief Financ

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
06 / 23 / 2011

Transaction ID : 19194968

Amount of Each Receipt this Period

250.00

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

1000.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Donna Hoban

Mailing Address 81 Handy Road

City

Grosse Pointe Farms

State

MI

Zip Code

48236-3808

FEC ID number of contributing
federal political committee.

C

Name of Employer

Beaumont Health System

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19194969

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. Robert Hoban

Mailing Address 911 Balfour

City

Grosse Pointe Park

State

MI

Zip Code

48230-1815

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. John Providence Health System

Occupation

Sr. Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19194970

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. Charles Hoffman

Mailing Address 2440 Antietam Drive

City

Ann Arbor

State

MI

Zip Code

48105-1471

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Joseph Mercy Livingston Hospital

Occupation

Vice President Financial Services and

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19194971

Amount of Each Receipt this Period

250.00

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

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

750.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Victoria Hollingsworth

Mailing Address 1255 Concord

City

Rochester Hills

State

MI

Zip Code

48309-2859

FEC ID number of contributing
federal political committee.

C

Name of Employer

Beaumont Health System

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19194972

Amount of Each Receipt this Period

375.00

Full Name (Last, First, Middle Initial)

B. Mr. David B. Jahn

Mailing Address 3341 Lakeshore Drive

City

Sault Sainte Marie

State

MI

Zip Code

49783-1111

FEC ID number of contributing
federal political committee.

C

Name of Employer

War Memorial Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19194974

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. John L. Jones Jr.

Mailing Address 1814 Hazel Avenue

City

Kalamazoo

State

MI

Zip Code

49008-2844

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bronson Healthcare Group Inc

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19194975

Amount of Each Receipt this Period

275.00

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

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

1150.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Peter Karadjoff

Mailing Address 304 Fairway Court

City

State

Zip Code

St. Clair

MI

48079-3570

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

St. Joseph Mercy Port Huron

President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19194976

Amount of Each Receipt this Period

475.00

Full Name (Last, First, Middle Initial)

B. Ms. Cheryl Knapp

Mailing Address 7183 Cross Country Drive

City

State

Zip Code

Kalamazoo

MI

49009-7588

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Bronson Healthcare Group Inc

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19194978

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

C. Dr. Scott Larson MD

Mailing Address 1531 Academy Street

City

State

Zip Code

Kalamazoo

MI

49006-4400

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Bronson Healthcare Group Inc

Senior Vice President Medical Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19194980

Amount of Each Receipt this Period

325.00

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

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

1025.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Dr. William J Mayer MD

Mailing Address 3521 Whistling Ln.

City

State

Zip Code

Portage

MI

49024-5513

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bronson Healthcare Group Inc

Occupation

Vice President Medical Staff Clinical

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19194984

Amount of Each Receipt this Period

275.00

Full Name (Last, First, Middle Initial)

B. Ms. Mary M. Meitz

Mailing Address 11425 Long Point Dr.

City

State

Zip Code

Plainwell

MI

49080-9265

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bronson Healthcare Group Inc

Occupation

Vice President, Finance

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19194986

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

C. Dr Duane Mezwa

Mailing Address 3250 Wauil Ridge Circle

City

State

Zip Code

Rochester Hills

MI

48309

FEC ID number of contributing
federal political committee.

C

Name of Employer

Beaumont Health System

Occupation

Vice Chief of Diagnostic Radiology

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19194987

Amount of Each Receipt this Period

500.00

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

1000.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Dr. Paul Misch

Mailing Address 1618 Stony Creek Drive

City
Rochester

State
MI

Zip Code
48307-1783

FEC ID number of contributing
federal political committee.

C

Name of Employer

Beaumont Hospital - Troy

Occupation

Senior Vice President and Medical Dire

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19194988

Amount of Each Receipt this Period

375.00

Full Name (Last, First, Middle Initial)

B. Ms. Denise Neely RN

Mailing Address 11808 S 26th Street

City
Vicksburg

State
MI

Zip Code
49097-8366

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bronson Healthcare Group Inc

Occupation

Director of Pain Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19194991

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

C. Mr. Charles Nelson

Mailing Address 205 Osceola Street

City
Laurium

State
MI

Zip Code
49913-2134

FEC ID number of contributing
federal political committee.

C

Name of Employer

Aspirus Keweenaw Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19194992

Amount of Each Receipt this Period

250.00

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

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

850.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Dr Anthony Oliva

Mailing Address 10621 Bear Lake Trail

City

State

Zip Code

Portage

MI

49024-6207

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Borgess Health

Chief Medical Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19194993

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. Christopher Palazzolo

Mailing Address 3260 Charlwood Dr.

City

State

Zip Code

Rochester Hills

MI

48306-3614

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Genesys Health System

Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19194994

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. Steve Paulus

Mailing Address 17020 Carriage Way

City

State

Zip Code

Northville

MI

48168-6602

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

St. Joseph Mercy Hospital

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19194995

Amount of Each Receipt this Period

250.00

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

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

750.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Michelle Serbenski Pelletier

Mailing Address 51255 38th Street

City

Paw Paw

State

MI

Zip Code

49079-8315

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bronson Healthcare Group Inc

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19194996

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

B. Ms. Annette S Phillips

Mailing Address 718 North Macomb Street

City

Monroe

State

MI

Zip Code

48162-7815

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mercy Memorial Hospital System

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19194997

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. John J. Polanski

Mailing Address 32551 Myrna

City

Livonia

State

MI

Zip Code

48154-2911

FEC ID number of contributing
federal political committee.

C

Name of Employer

Henry Ford Health System

Occupation

Group Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19194999

Amount of Each Receipt this Period

250.00

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

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

975.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Dr. John Popovich Jr., MD

Mailing Address 264 Chesterfield Avenue

City

Birmingham

State

MI

Zip Code

48009-1285

FEC ID number of contributing
federal political committee.

C

Name of Employer

Henry Ford Health System

Occupation

Physician/Hospital Administration

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
06 / 23 / 2011

Transaction ID : 19195000

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Larry Rawsthorne MD

Mailing Address 1215 East Michigan Avenue

City

Lansing

State

MI

Zip Code

48912-1811

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sparrow Health System

Occupation

Senior Vice President Medical Affairs

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

MM / DD / YYYY
06 / 23 / 2011

Transaction ID : 19195003

Amount of Each Receipt this Period

375.00

Full Name (Last, First, Middle Initial)

C. Ms. Sue Reinoehl

Mailing Address 8804 Weeping Pine Ln

City

Kalamazoo

State

MI

Zip Code

49009-6733

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bronson Healthcare Group Inc

Occupation

Vice President

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
06 / 23 / 2011

Transaction ID : 19195004

Amount of Each Receipt this Period

250.00

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

875.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Donna Roach

Mailing Address 2662 Innisbrook Drive

City

State

Zip Code

Portage

MI

49024-7872

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Bronson Healthcare Group Inc

CIO

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19195005

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Mr. Joseph Ruth

Mailing Address 6480 Kernwood

City

State

Zip Code

East Lansing

MI

48823-9432

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Sparrow Hospital

Executive Vice President and Chief Ope

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19195007

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Mr. James J Sexton

Mailing Address 27100 Loma Court

City

State

Zip Code

Grosse Ile

MI

48138-2170

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Henry Ford Wyandotte Hospital

President and Chief Executive Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19195011

Amount of Each Receipt this Period

250.00

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

850.00

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

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Camille Shy

Mailing Address 13200 Cambridge Court

City

Plymouth

State

MI

Zip Code

48170-3099

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Joseph Mercy Hospital

Occupation

Vice President Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19195012

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. Joseph R Swedish

Mailing Address 27870 Cabot Drive

City

Novi

State

MI

Zip Code

48377-2920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Trinity Health

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19195016

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Kenneth L Taft

Mailing Address 301 John Street

City

Kalamazoo

State

MI

Zip Code

49007-5295

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bronson Healthcare Group Inc

Occupation

Executive Vice President and Chief Ope

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19195017

Amount of Each Receipt this Period

375.00

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

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

1125.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Robert S. Taubman

Mailing Address 200 East Long Lake Road

City

Bloomfield Hills

State

MI

Zip Code

48304-2314

FEC ID number of contributing
federal political committee.

C

Name of Employer

Taubman Center/William Beaumont Hospit

Occupation

Trustee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19195018

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. Randall J Wagner

Mailing Address 4691 Old Grand River Tr

City

Ada

State

MI

Zip Code

49301-8614

FEC ID number of contributing
federal political committee.

C

Name of Employer

Saint Mary's Health Care

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19195022

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. Sam R. Watson

Mailing Address 1240 E. Mill Street

City

Hastings

State

MI

Zip Code

49058-9185

FEC ID number of contributing
federal political committee.

C

Name of Employer

Michigan Health & Hospital Association

Occupation

Associate Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19195023

Amount of Each Receipt this Period

750.00

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

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

1500.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Mike Way

Mailing Address 7049 Turkey Glen Trail

City State Zip Code
 Kalamazoo MI 49009-7031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bronson Healthcare Group Inc

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
 06 / 23 / 2011

Transaction ID : 19195024

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. Jack Weiner

Mailing Address 44405 Woodward Avenue

City State Zip Code
 Pontiac MI 48341-5023

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Joseph Mercy Oakland

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
 06 / 23 / 2011

Transaction ID : 19195025

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

c. Dr. Michael C. Wiemann M.D.

Mailing Address 5748 Heatherfield Court

City State Zip Code
 West Bloomfield MI 48322-1333

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. John Providence Health System

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
 06 / 23 / 2011

Transaction ID : 19195027

Amount of Each Receipt this Period

250.00

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

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

1000.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Lawrence Wilhite

Mailing Address 1215 East Michigan Avenue

City

Lansing

State

MI

Zip Code

48912-1811

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sparrow Health System

Occupation

Vice President Legal and Risk Manageme

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19195028

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. Scott Wilkerson

Mailing Address 4094 Breakwater Dr.

City

Okemos

State

MI

Zip Code

48864-4410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sparrow Hospital

Occupation

President, Physicians Health Plan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19195029

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. Samuel Yamin

Mailing Address 5532 Lakeview Dr.

City

Bloomfield

State

MI

Zip Code

48302-2728

FEC ID number of contributing
federal political committee.

C

Name of Employer

Beaumont Health System

Occupation

Trustee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19195032

Amount of Each Receipt this Period

500.00

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

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

1000.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Keith A. Hovan

Mailing Address 316 Marys Pond Rd

City
Rochester

State
MA

Zip Code
02770-4012

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southcoast Hospitals Group

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

06 / 24 / 2011

Transaction ID : 19195062

Amount of Each Receipt this Period

375.00

Full Name (Last, First, Middle Initial)

B. Mr. Louis J Woolf

Mailing Address 1200 Centre Street

City
Boston

State
MA

Zip Code
02131-1011

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hebrew Rehabilitation Center

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

06 / 24 / 2011

Transaction ID : 19195072

Amount of Each Receipt this Period

262.50

Full Name (Last, First, Middle Initial)

C. Mrs. Kathleen Harrelson

Mailing Address 6181 Karabrook Court

City
Kalamazoo

State
MI

Zip Code
49009-8961

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bronson Healthcare Group Inc

Occupation

Vice President of Nursing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19195073

Amount of Each Receipt this Period

275.00

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

912.50

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Joseph L Woodin

Mailing Address P O Box 2000

City

Randolph

State

VT

Zip Code

05060-2000

FEC ID number of contributing
federal political committee.

C

Name of Employer

Gifford Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

06 / 21 / 2011

Transaction ID : 19195077

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. Ms Karen Perdue

Mailing Address 943 West 6th Avenue, Suite 120

City

Anchorage

State

AK

Zip Code

99501-2033

FEC ID number of contributing
federal political committee.

C

Name of Employer

Alaska State Hospital and Nursing Home

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

06 / 21 / 2011

Transaction ID : 19195845

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Mr. David Ross

Mailing Address 172 Kinsley Street

City

Nashua

State

NH

Zip Code

03060-3648

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Joseph Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 21 / 2011

Transaction ID : 19195848

Amount of Each Receipt this Period

500.00

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

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

1850.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Nancy A. Formella

Mailing Address One Medical Center Drive

City

Lebanon

State

NH

Zip Code

03756-1000

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dartmouth-Hitchcock Medical Center

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

06 / 21 / 2011

Transaction ID : 19195850

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. Mr. Gregory J Walker

Mailing Address 789 Central Avenue

City

Dover

State

NH

Zip Code

03820-2526

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wentworth-Douglass Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

06 / 21 / 2011

Transaction ID : 19195851

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Mr. John W Bluford

Mailing Address 2301 Holmes Street

City

Kansas City

State

MO

Zip Code

64108-2640

FEC ID number of contributing
federal political committee.

C

Name of Employer

Truman Medical Centers

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

06 / 22 / 2011

Transaction ID : 19195867

Amount of Each Receipt this Period

1000.00

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

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

1700.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Ronald B Ashworth

Mailing Address 14528 South Outer 40, Suite 100

City

Chesterfield

State

MO

Zip Code

63017-5743

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mercy Health

Occupation

Chair

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 22 / 2011

Transaction ID : 19195868

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Ms. Liza Jensen

Mailing Address 8109 Fredericksburg Rd

City

San Antonio

State

TX

Zip Code

78229-3311

FEC ID number of contributing
federal political committee.

C

Name of Employer

Methodist Specialty and Transplant Hos

Occupation

Executive Director, Department of Psyc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

06 / 22 / 2011

Transaction ID : 19195870

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Dr. Stuart Buttlair

Mailing Address 1950 Franklin Street
4th Floor

City

Oakland

State

CA

Zip Code

94612-5190

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kaiser Foundation Hospitals

Occupation

Regional Dir of Inpatient Psychiatry

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19195890

Amount of Each Receipt this Period

350.00

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

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

950.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Debra A Flores

Mailing Address 3000 Coliseum Drive

City

Hampton

State

VA

Zip Code

23666-5963

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sentara CarePlex Hospital

Occupation

President and Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19195908

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. Mr. Dougal Hewitt

Mailing Address 8260 Atlee Road

City

Mechanicsville

State

VA

Zip Code

23116-1844

FEC ID number of contributing
federal political committee.

C

Name of Employer

Memorial Regional Medical Center

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19195910

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Ms. Shirley Holland

Mailing Address 161 Lila Lane

City

Boones Mill

State

VA

Zip Code

24065-3749

FEC ID number of contributing
federal political committee.

C

Name of Employer

Carilion Clinic

Occupation

Vice President/Strategic Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19195911

Amount of Each Receipt this Period

350.00

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

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

1050.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. David Jenkins

Mailing Address 2620 Pleasant Run Drive

City

Richmond

State

VA

Zip Code

23233-2114

FEC ID number of contributing
federal political committee.

C

Name of Employer

Virginia Hospital & Healthcare Associa

Occupation

Director of Human Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY
06 / 23 / 2011

Transaction ID : 19195912

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Mr. Randall L Kelley

Mailing Address P O Box 6000

City

Leesburg

State

VA

Zip Code

20177-0600

FEC ID number of contributing
federal political committee.

C

Name of Employer

Inova Loudoun Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY
06 / 23 / 2011

Transaction ID : 19195925

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Ms. Genemarie P McGee

Mailing Address 3728 Ballahack Road

City

Chesapeake

State

VA

Zip Code

23322-3201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sentara Leigh Hospital

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY
06 / 23 / 2011

Transaction ID : 19195927

Amount of Each Receipt this Period

350.00

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

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

900.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Dr. Archie McPherson MD

Mailing Address 1701 North George Mason Drive

City

Arlington

State

VA

Zip Code

22205-3698

FEC ID number of contributing
federal political committee.

C

Name of Employer

Virginia Hospital Center - Arlington

Occupation

Vice President and Chief Medical Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

06 / 23 / 2011

Transaction ID : 19195928

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. Mr. Olas A Hubbs III

Mailing Address 500 London Avenue

City

Marysville

State

OH

Zip Code

43040-5512

FEC ID number of contributing
federal political committee.

C

Name of Employer

Memorial Hospital of Union County

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 24 / 2011

Transaction ID : 19197902

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Dale E Thornton

Mailing Address 45 St Lawrence Drive

City

Tiffin

State

OH

Zip Code

44883-8310

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mercy Tiffin Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

06 / 24 / 2011

Transaction ID : 19198627

Amount of Each Receipt this Period

1250.00

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

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

2100.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. R. Reed Fraley

Mailing Address 257 Clouse Lane

City

Granville

State

OH

Zip Code

43023-1428

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ohio Hospital Association

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

06 / 24 / 2011

Transaction ID : 19198639

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. Raymond M Chorey

Mailing Address P O Box 610

City

Cambridge

State

OH

Zip Code

43725-0610

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southeastern Ohio Regional Medical Cen

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 24 / 2011

Transaction ID : 19198650

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. William Annable

Mailing Address 2464 Guilford RD

City

Cleveland Heights

State

OH

Zip Code

44118-4104

FEC ID number of contributing
federal political committee.

C

Name of Employer

University Hospitals

Occupation

Chief Quality Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 24 / 2011

Transaction ID : 19198653

Amount of Each Receipt this Period

500.00

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

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

1250.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Mary Alice Annecharico

Mailing Address 234 Goodman Street

City

Cincinnati

State

OH

Zip Code

45219-2364

FEC ID number of contributing
federal political committee.

C

Name of Employer

University Hospital

Occupation

Sr. Vice President and Chief Informati

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 24 / 2011

Transaction ID : 19200507

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Dr. Achilles Demetriou

Mailing Address 11100 Euclid Avenue

City

Cleveland

State

OH

Zip Code

44106-1716

FEC ID number of contributing
federal political committee.

C

Name of Employer

University Hospitals

Occupation

Chief Operating Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 24 / 2011

Transaction ID : 19200509

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Richard Hanson

Mailing Address 12340 Bass Lake Road

City

Chardon

State

OH

Zip Code

44024-8327

FEC ID number of contributing
federal political committee.

C

Name of Employer

University Hospitals Extended Care Cam

Occupation

President

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 24 / 2011

Transaction ID : 19200510

Amount of Each Receipt this Period

500.00

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

1500.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Janet L Miller

Mailing Address 11100 Euclid Avenue

City

Cleveland

State

OH

Zip Code

44106-5000

FEC ID number of contributing
federal political committee.

C

Name of Employer

University Hospitals

Occupation

Chief Legal Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 24 / 2011

Transaction ID : 19200513

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Dr. Fred C Rothstein

Mailing Address 11100 Euclid Avenue

City

Cleveland

State

OH

Zip Code

44106-1716

FEC ID number of contributing
federal political committee.

C

Name of Employer

University Hospitals Case Medical Cent

Occupation

President

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 24 / 2011

Transaction ID : 19200515

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Paul Tait

Mailing Address 6560 Thorntree Drive

City

Brecksville

State

OH

Zip Code

44141-1769

FEC ID number of contributing
federal political committee.

C

Name of Employer

University Hospitals

Occupation

Sr VP, Strategic Planning & Bus Develo

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 24 / 2011

Transaction ID : 19200516

Amount of Each Receipt this Period

500.00

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

1500.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Thomas F Zenty III

Mailing Address 11100 Euclid Avenue

City
Cleveland

State
OH

Zip Code
44106-1716

FEC ID number of contributing
federal political committee.

C

Name of Employer

University Hospitals

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 24 / 2011

Transaction ID : 19200517

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Ms. Susan Croushore

Mailing Address 2139 Auburn Avenue

City
Cincinnati

State
OH

Zip Code
45219-2906

FEC ID number of contributing
federal political committee.

C

Name of Employer

Christ Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 24 / 2011

Transaction ID : 19200518

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. Harlan Hallquist

Mailing Address 9855 West 78th Street
Suite 270

City
Eden Prairie

State
MN

Zip Code
55344-8002

FEC ID number of contributing
federal political committee.

C

Name of Employer

J.E. Dunn Construction Company

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 27 / 2011

Transaction ID : 19200530

Amount of Each Receipt this Period

500.00

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

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

1250.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Thomas K Prusak

Mailing Address 523 North Third Street

City

Brainerd

State

MN

Zip Code

56401-3098

FEC ID number of contributing
federal political committee.

C

Name of Employer

Essentia Health St. Joseph's Medical C

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

06 / 27 / 2011

Transaction ID : 19200533

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Mr. Carl P. Vaagenes

Mailing Address 111 17th Avenue East

City

Alexandria

State

MN

Zip Code

56308-5273

FEC ID number of contributing
federal political committee.

C

Name of Employer

Douglas County Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 27 / 2011

Transaction ID : 19200534

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Ms. Jani M Wiebolt

Mailing Address 523 North Third Street

City

Brainerd

State

MN

Zip Code

56401-3098

FEC ID number of contributing
federal political committee.

C

Name of Employer

Essentia Health St. Joseph's Medical C

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

06 / 27 / 2011

Transaction ID : 19200535

Amount of Each Receipt this Period

25.00

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

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

300.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Stanley K Hammack

Mailing Address 2451 Fillingim Street

City State Zip Code
 Mobile AL 36617-2238

FEC ID number of contributing federal political committee.

C

Name of Employer
 University of South Alabama Hospitals

Occupation
 Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 28 2011

Transaction ID : 19200536

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Mr. J Michael Horsley

Mailing Address 500 N. East Boulevard

City State Zip Code
 Montgomery AL 36117-2214

FEC ID number of contributing federal political committee.

C

Name of Employer
 Alabama Hospital Association

Occupation
 President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 28 2011

Transaction ID : 19200537

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Ms. Linda U Jordan

Mailing Address P O Box 1270

City State Zip Code
 Ashland AL 36251-1270

FEC ID number of contributing federal political committee.

C

Name of Employer
 Clay County Hospital

Occupation
 Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 28 2011

Transaction ID : 19200538

Amount of Each Receipt this Period

1000.00

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

3000.00

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

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Dr. Roger Leonard MD

Mailing Address 11706 Split Tree Circle

City

Potomac

State

MD

Zip Code

20854-2880

FEC ID number of contributing
federal political committee.

C

Name of Employer

Montgomery General Hospital

Occupation

Vice President Medical Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

06 / 29 / 2011

Transaction ID : 19200568

Amount of Each Receipt this Period

255.00

Full Name (Last, First, Middle Initial)

B. Ms. Joanne E Pollak

Mailing Address 733 North Broadway, BRB 104

City

Baltimore

State

MD

Zip Code

21205

FEC ID number of contributing
federal political committee.

C

Name of Employer

Johns Hopkins Health System

Occupation

Vice President and General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

06 / 29 / 2011

Transaction ID : 19200580

Amount of Each Receipt this Period

510.00

Full Name (Last, First, Middle Initial)

C. Mr. Michael K Kerner

Mailing Address 150 Kingsley Lane

City

Norfolk

State

VA

Zip Code

23505-4602

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bon Secours-DePaul Medical Center

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

06 / 30 / 2011

Transaction ID : 19209902

Amount of Each Receipt this Period

350.00

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

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

1115.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Jeff King

Mailing Address 925 Ditchley Rd

City

Virginia Beach

State

VA

Zip Code

23451-3740

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sentara Healthcare

Occupation

General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

06 / 30 / 2011

Transaction ID : 19210203

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. Ms. Donna Littlepage

Mailing Address PO Box 25

City

Roanoke

State

VA

Zip Code

24002-0025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Carilion Clinic

Occupation

Vice President, Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

06 / 30 / 2011

Transaction ID : 19210206

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Mr. H. Patrick Walters

Mailing Address 8323 Private Line

City

Annandale

State

VA

Zip Code

22304-1594

FEC ID number of contributing
federal political committee.

C

Name of Employer

Inova Health System

Occupation

Vice President, Administration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

06 / 30 / 2011

Transaction ID : 19210208

Amount of Each Receipt this Period

350.00

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

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

1050.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Sean J. Hopkins

Mailing Address 6180 Lower Mountain Road

City State Zip Code
 New Hope PA 18938-5760

FEC ID number of contributing federal political committee.

C

Name of Employer
 New Jersey Hospital Association

Occupation
 Sr. VP., Health Economics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.93

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 17 / 2011

Transaction ID : 19230930

Amount of Each Receipt this Period

20.42

Full Name (Last, First, Middle Initial)

B. Mr. Michael Taylor

Mailing Address 533 Kings Grant Road

City State Zip Code
 Virginia Beach VA 23452-7051

FEC ID number of contributing federal political committee.

C

Name of Employer
 Sentara Healthcare

Occupation
 Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 15 / 2011

Transaction ID : 19230938

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Mr. John T Fox

Mailing Address 1440 Clifton Road NE, Suite 309

City State Zip Code
 Atlanta GA 30322-1053

FEC ID number of contributing federal political committee.

C

Name of Employer
 Emory Healthcare

Occupation
 Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 13 / 2011

Transaction ID : 19609411

Amount of Each Receipt this Period

500.00

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

870.42

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Melinda Reid Hatton

Mailing Address 325 Seventh Street, NW
Suite 700

City Washington State DC Zip Code 20004-2818

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Senior Vice President & General Course

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR1045726225183

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Mr. David Schulke

Mailing Address 325 Seventh Street, NW
Suite 700

City Washington State DC Zip Code 20004-2801

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

VP Research Programs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR1057462125183

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Mr. James Wadzinski

Mailing Address One North Franklin

City Chicago State IL Zip Code 60606-3436

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Vice President Account Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR1347703425183

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

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

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

200.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Jack A. Mackay

Mailing Address One North Franklin

City

Chicago

State

IL

Zip Code

60606-3436

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Vice President & CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR1347703625183

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Mr. Mark Colucci

Mailing Address 1061 N Penny Ln

City

Palatine

State

IL

Zip Code

60067-1821

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

National Director Sponsorship and Unde

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR1475133725183

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Ms. Stephanie H. Drake

Mailing Address One North Franklin

City

Chicago

State

IL

Zip Code

60606-3436

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Associate Executive Director - ASHHRA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

469.21

Date of Receipt

06 / 30 / 2011

Transaction ID : PR1492459925183

Amount of Each Receipt this Period

81.66

P/R Deduction (\$40.83 Bi-Weekly)

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

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

161.66

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Lisa Grabert

Mailing Address 325 Seventh Street, NW
Suite 700

City Washington State DC Zip Code 20004-2801

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Senior Associate Director, Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR1671258625183

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Mr Robert P. David

Mailing Address One North Franklin

City Chicago State IL Zip Code 60606-3436

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Regional Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR1677512425183

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Mr. Erik Rasmussen

Mailing Address 325 Seventh Street, NW
Suite 700

City Washington State DC Zip Code 20004-2801

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Senior Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR1819487925183

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

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

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

240.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Linda Fishman

Mailing Address 325 Seventh Street, NW
Suite 700

City Washington State DC Zip Code 20004-2818

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Senior Vice President, Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR327629125183

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Mr. Michael P. McCue

Mailing Address 122 N. Greenwood Avenue

City Park Ridge State IL Zip Code 60068-3227

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR327771625183

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Ms. Debra J. Stock

Mailing Address 1022 S. Harvey Avenue

City Oak Park State IL Zip Code 60304-2132

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Vice President, Member Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR327777825183

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

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

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

200.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Neil J. Jesuele

Mailing Address 1003 Kimberly Place

City

Great Falls

State

VA

Zip Code

22066-1546

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR327801725183

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Ms. Pamela Austin Thompson RN, MSN

Mailing Address 325 Seventh Street, NW
Suite 700

City

Washington

State

DC

Zip Code

20004-2818

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Chief Executive Officer, AONE & Sr. Vi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR327812025183

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Ms. Joan H. Lewis

Mailing Address 6034 North 22nd Street

City

Arlington

State

VA

Zip Code

22205-3408

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Regional Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR327831725183

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

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

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

160.00

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)

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Robert J. Donovan

Mailing Address One North Franklin Street

City State Zip Code
 Chicago IL 60606

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Vice President, Meetings & Travel Serv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR327846225183

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Ms. Ellen A. Pryga

Mailing Address 2401 Calvert Street, NW
 Apt. 1008

City State Zip Code
 Washington DC 20008-2614

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Director, Policy Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR327851925183

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Mr. Mark Seklecki

Mailing Address 325 Seventh Street, NW
 Suite 700

City State Zip Code
 Washington DC 20004-2818

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Vice President, Political Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR327858025183

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

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

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

160.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. John F. Barry

Mailing Address One North Franklin

City State Zip Code
 Millis MA 60606-3436

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Hospital Association-Chicago

Occupation
Regional Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2011

Transaction ID : PR327877825183

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Mr. George F. Bergstrom

Mailing Address 130 North Garland Court
 #3002

City State Zip Code
 Chicago IL 60602-4750

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Hospital Association-Chicago

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2011

Transaction ID : PR327895725183

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Mr. Richard J. Umbdenstock

Mailing Address 325 Seventh Street, NW
 Suite 700

City State Zip Code
 Washington DC 20004-2818

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Hospital Association-Washingt

Occupation
President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 30 2011

Transaction ID : PR328132825183

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

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

240.00

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

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

Use separate schedule(s)
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Barbara Lorsbach

Mailing Address 204 7th Ave

City

La Grange

State

IL

Zip Code

60525-6406

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Sr. Vice President, Member Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR328136925183

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Ms. Donna J. Melkonian

Mailing Address 5545 North Wayne

City

Chicago

State

IL

Zip Code

60640-1318

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR328223825183

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Mr. Ron O. Purcell

Mailing Address 1093 N. Faldo Way

City

Eagle

State

ID

Zip Code

83616-5369

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Regional Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR328241425183

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

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

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

200.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 OF 117

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Richard J. Pollack

Mailing Address 3475 North Venice Street

City	State	Zip Code
Arlington	VA	22207-4446

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2011

Transaction ID : PR328260925183

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Ms. Lori M. SchorMailing Address 325 Seventh Street, NW
Suite 700

City	State	Zip Code
Washington	DC	20004-2818

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Director, Political Action & Grassroot

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2011

Transaction ID : PR328341825183

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Ms. Carolyn Forcina

Mailing Address 200 Clover Hill Court

City	State	Zip Code
Yardley	PA	19067-5736

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Regional Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2011

Transaction ID : PR328511825183

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

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

240.00

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

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

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Alicia N. Mitchell

Mailing Address 1501 N. Harrison Street

City

Arlington

State

VA

Zip Code

22205-2726

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Senior Vice President, Communications

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR328512025183

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Mr. George Arges

Mailing Address One North Franklin St.

City

Chicago

State

IL

Zip Code

60606

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Senior Director, Health Data Managemen

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR328641125183

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Mr. Anthony J. Burke

Mailing Address One North Franklin Ave.

City

Chicago

State

IL

Zip Code

60606

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

President & CEO, AHA Solutions, Inc. &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR328913325183

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

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

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

160.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Rebecca Chickey

Mailing Address One North Franklin Street

City State Zip Code
Chicago IL 60606

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

SPSA Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR329013425183

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Dr. John R. Combes

Mailing Address One North Franklin

City State Zip Code
Chicago IL 60606-3436

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

President & Chief Operating Officer, C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR329071325183

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Ms. Robyn Cooke

Mailing Address 325 Seventh Street, NW
Suite 700

City State Zip Code
Washington DC 20004-2818

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Senior Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR329084425183

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

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

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

160.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. W. Thomas Deweese

Mailing Address 500 Interstate Boulevard South

City

Nashville

State

TN

Zip Code

37210-4634

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

AHA Regional Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR329215725183

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Ms. Patricia Meersman

Mailing Address One North Franklin

City

Chicago

State

IL

Zip Code

60606-3436

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Senior Director Member Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR330343325183

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Mr. Thomas Misfeldt

Mailing Address One North Franklin

City

Chicago

State

IL

Zip Code

60606-3436

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Associate Regional Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR330411625183

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

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

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

160.00

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)

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Paul N. Muraca

Mailing Address 4960 138th Circle West

City

Apple Valley

State

MN

Zip Code

55124-9229

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Regional Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR330475425183

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Mr. Gene O'Dell

Mailing Address One North Franklin

City

Chicago

State

IL

Zip Code

60606-3436

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Vice President, Strategic Planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR330547725183

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Ms. Eileen O'Keefe

Mailing Address 172 Atteridge

City

Lake Forest

State

IL

Zip Code

60045-1715

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Vice President, Constituency Section

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR330549225183

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

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

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

200.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Anthony Spohn

Mailing Address 3219 N. Oriole

City

Chicago

State

IL

Zip Code

60634-3232

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Executive Director, Associate Membersh

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR331098325183

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Ms. Darlene S. Vanderbush

Mailing Address 26 West Glendale Ave.

City

Alexandria

State

VA

Zip Code

22301-2402

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Director Advocacy and Public Policy Op

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR331304225183

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Mr. Donald May

Mailing Address 521 Great Falls St.

City

Falls Church

State

VA

Zip Code

22046-2613

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Vice President, Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR331533225183

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

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

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

200.00

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

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Elizabeth Summy

Mailing Address One North Franklin

City

Chicago

State

IL

Zip Code

60606-3436

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Vice President, PMG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR346168125183

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Ms. Megan Cundari

Mailing Address 325 Seventh Street, NW
Suite 700

City

Washington

State

DC

Zip Code

20004-2818

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Senior Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.32

Date of Receipt

06 / 30 / 2011

Transaction ID : PR518031925183

Amount of Each Receipt this Period

82.72

P/R Deduction (\$41.36 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Mr. Carlos Jackson

Mailing Address 325 Seventh Street, NW

City

Washington

State

DC

Zip Code

20004-2802

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Associate Director, Federal Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR566280925183

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

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

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

202.72

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)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Ashley B. Thompson

Mailing Address 606 S. Royal St.

City

Alexandria

State

VA

Zip Code

22314-4142

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Director, Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR766023725183

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Ms. Lisa Kidder Hrobsky

Mailing Address 325 Seventh Street, NW
Suite 700

City

Washington

State

DC

Zip Code

20004-2818

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Vice President, Legislative Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

06 / 30 / 2011

Transaction ID : PR876637225183

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C.

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

/ /

Amount of Each Receipt this Period

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

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

80.00

81336.83

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)

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Hospital and Healthsystem Assoc. of PA - Federal Political Action Comm (HAPAC)

Mailing Address Post Office Box 8600

City State Zip Code
Harrisburg PA 17105-8600

FEC ID number of contributing
federal political committee.

C C00128082

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100075.00

Date of Receipt

06 / **22** / **2011**

Transaction ID : 19192737

Amount of Each Receipt this Period

10075.00

Full Name (Last, First, Middle Initial)

B. Wisconsin Hospital Association Federal PAC

Mailing Address 5510 Research Park Drive
PO Box 259038

City State Zip Code
Madison WI 53725-9038

FEC ID number of contributing
federal political committee.

C C00422881

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

06 / **15** / **2011**

Transaction ID : 19193252

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

C. Wisconsin Hospital Association Federal PAC

Mailing Address 5510 Research Park Drive
PO Box 259038

City State Zip Code
Madison WI 53725-9038

FEC ID number of contributing
federal political committee.

C C00422881

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3100.00

Date of Receipt

06 / **28** / **2011**

Transaction ID : 19200543

Amount of Each Receipt this Period

500.00

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

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

13175.00

13175.00

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)

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Citibank, F.S.B.

Mailing Address 1400 G Street, NW

City
Washington

State Zip Code
DC 20005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

465.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2011

Transaction ID : 19230811

Amount of Each Receipt this Period

72.81

Interest Earned

Full Name (Last, First, Middle Initial)

B. TD Bank

Mailing Address 901 Seventh Street, NW

City
Washington

State Zip Code
DC 20001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.64

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2011

Transaction ID : 19230812

Amount of Each Receipt this Period

188.59

Interest Earned

Full Name (Last, First, Middle Initial)

C.

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)..... ►

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

261.40

261.40

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

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address Ste. 001

City Chicago State IL Zip Code 60679

Purpose of Disbursement
Merchant Fees

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 06 / 2011
Transaction ID : 19230799

Amount of Each Disbursement this Period

63.38

Merchant Fees

Full Name (Last, First, Middle Initial)

B. Newtek Merchant Solutions

Mailing Address 744 N 4th Street

City Milwaukee State WI Zip Code 53203

Purpose of Disbursement
Merchant Fees

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 03 / 2011
Transaction ID : 19230800

Amount of Each Disbursement this Period

87.40

Merchant Fees

Full Name (Last, First, Middle Initial)

C. PaymentechMailing Address 14221 Dallas Parkway
Building Two

City Dallas State TX Zip Code 75254

Purpose of Disbursement
Merchant Fees

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 06 / 2011
Transaction ID : 19230804

Amount of Each Disbursement this Period

102.53

Merchant Fees

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

253.31

<input checked="" 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 type="checkbox"/>	29	<input type="checkbox"/>	30b

American Hospital Association PAC

001

Category/
Type

Age Group	Percentage
18-24	10%
25-34	15%
35-44	20%
45-54	25%
55-64	30%
65-74	35%
75-84	40%
85+	0.27%

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Bank Fee

Category/
Type

Amount of Each Disbursement this Period

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Category/
Type

Amount of Each Disbursement this Period

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

253.58

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

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<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)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Cooper For CongressMailing Address 236 Massachusetts Avenue NE
Suite 603

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contribution

Candidate Name

Rep. Jim CooperOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	07	/	2011

Transaction ID : 19180792

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Nadler For Congress

Mailing Address Village Station, PO Box 40

City New York State NY Zip Code 10014

Purpose of Disbursement
Contribution

Candidate Name

Rep. Jerrold L. NadlerOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	07	/	2011

Transaction ID : 19180793

Amount of Each Disbursement this Period

1500.00

Contribution

Full Name (Last, First, Middle Initial)

C. John Tierney For Congress

Mailing Address 49 Federal Street

City Salem State MA Zip Code 01970

Purpose of Disbursement
Contribution

Candidate Name

Rep. John F. TierneyOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MA District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	07	/	2011

Transaction ID : 19180794

Amount of Each Disbursement this Period

1000.00

Contribution

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

3500.00

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

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<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)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Bass Victory Committee

Mailing Address PO Box 3451

City Concord	State NH	Zip Code 03302
-----------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Rep. Charles BassOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NH District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2011

Transaction ID : 19180795

Amount of Each Disbursement this Period

1500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Michael Burgess For Congress

Mailing Address PO Box 2334

City Denton	State TX	Zip Code 76202
----------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Rep. Michael C. Burgess M.D.Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: TX District: 26

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2011

Transaction ID : 19180796

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Blumenauer For Congress

Mailing Address 830 Ne Holladay, #105

City Portland	State OR	Zip Code 97232
------------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Rep. Earl BlumenauerOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: OR District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2011

Transaction ID : 19180797

Amount of Each Disbursement this Period

1000.00

Contribution

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

3500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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(check only one)

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<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)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Matheson For Congress

Mailing Address P.O. Box 521048

City	State	Zip Code
Salt Lake City	UT	84152

Purpose of Disbursement
Contribution

Candidate Name

Rep. James D. Matheson

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	--------------------------------------------------------------------------------------------------------------------

Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
------------------------	-------------------------------------------------------------------------------------------------------------------------------

State: UT District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2011

Transaction ID : 19180798

Amount of Each Disbursement this Period

1500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Kurt Schrader For CongressMailing Address PO Box 3314
Suite 240

City	State	Zip Code
Oregon City	OR	97045

Purpose of Disbursement
Contribution

Candidate Name

Rep. Kurt Schrader

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	--------------------------------------------------------------------------------------------------------------------

Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
------------------------	-------------------------------------------------------------------------------------------------------------------------------

State: OR District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2011

Transaction ID : 19180799

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Simpson For Congress

Mailing Address 1487 Parkway Drive

City	State	Zip Code
Blackfoot	ID	83221

Purpose of Disbursement
Contribution

Candidate Name

Rep. Michael K. Simpson

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	--------------------------------------------------------------------------------------------------------------------

Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
------------------------	-------------------------------------------------------------------------------------------------------------------------------

State: ID District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2011

Transaction ID : 19180800

Amount of Each Disbursement this Period

1000.00

Contribution

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

3500.00

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

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Adrian Smith For CongressMailing Address 3321 Avenue I
Suite 6City State Zip Code
Scottsbluff NE 69361Purpose of Disbursement
Contribution

Candidate Name

Rep. Adrian Honorable SmithOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NE District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2011

Transaction ID : 19180801

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Treasure State PAC

Mailing Address PO Box 76187

City State Zip Code
Washington DC 20013Purpose of Disbursement
2011 Contribution

Candidate Name

Treasure State PACOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2011

Transaction ID : 19184416

Amount of Each Disbursement this Period

5000.00

2011 Contribution

Full Name (Last, First, Middle Initial)

C. National Republican Senatorial Committee

Mailing Address 425 Second Street, NE

City State Zip Code
Washington DC 20002Purpose of Disbursement
2011 Contribution

Candidate Name

National Republican Senatorial CommitteeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2011

Transaction ID : 19184436

Amount of Each Disbursement this Period

15000.00

2011 Contribution

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

21000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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<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)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Democratic Congressional Campaign Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2011

Mailing Address 430 South Capitol Street

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
2011 Contribution

011

Transaction ID : 19184472

Amount of Each Disbursement this Period

15000.00

Candidate Name

Democratic Congressional Campaign CommitteeCategory/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

2011 Contribution

State: District:

Full Name (Last, First, Middle Initial)

B. Rush Holt For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2011

Mailing Address PO Box 782

City	State	Zip Code
Pennington	NJ	08534

Purpose of Disbursement
Contribution

011

Transaction ID : 19184510

Amount of Each Disbursement this Period

1000.00

Candidate Name

Rep. Rush D. HoltCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	2012
	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Contribution

State: NJ District: 12

Full Name (Last, First, Middle Initial)

C. Lance For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2011

Mailing Address PO Box 225

City	State	Zip Code
Colonia	NJ	07067

Purpose of Disbursement
Contribution

011

Transaction ID : 19184517

Amount of Each Disbursement this Period

1000.00

Candidate Name

Rep. Leonard LanceCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	2012
	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Contribution

State: NJ District: 07

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

17000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<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)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Pascrell For Congress

Mailing Address P.O. Box 640

City Totowa	State NJ	Zip Code 07511
----------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Rep. William J. Pascrell Jr.Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2011

Transaction ID : 19184530

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Steve Rothman for Congress

Mailing Address P.O. Box 714

City Hackensack	State NJ	Zip Code 07602
--------------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Rep. Steven R. RothmanOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2011

Transaction ID : 19184538

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mike Kelly For Congress

Mailing Address PO Box 476

City Lyndora	State PA	Zip Code 16045
-----------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Rep. George KellyOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2011

Transaction ID : 19184564

Amount of Each Disbursement this Period

1000.00

Contribution

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

3000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<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)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Friends Of John Barrasso

Mailing Address PO Box 52008

City	State	Zip Code
Casper	WY	82605

Purpose of Disbursement
Contribution

011

Candidate Name

Sen. John A. Barrasso MDCategory/
Type

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: WY District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2011

Transaction ID : 19187162

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Scott Brown For U.S. Senate Committee

Mailing Address P.O. Box 395

City	State	Zip Code
Wrentham	MA	02903

Purpose of Disbursement
Contribution

011

Candidate Name

Sen. Scott BrownCategory/
Type

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: MA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2011

Transaction ID : 19187221

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Bob Corker For Senate

Mailing Address 518 Georgia Ave 2nd Floor

City	State	Zip Code
Chatanooga	TN	37403

Purpose of Disbursement
Contribution

011

Candidate Name

Sen. Robert CorkerCategory/
Type

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: TN District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2011

Transaction ID : 19187234

Amount of Each Disbursement this Period

1000.00

Contribution

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

3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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<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)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Hatch Election Committee Inc

Mailing Address 175 South West Temple Suite 650

City	State	Zip Code
Salt Lake City	UT	84101

Purpose of Disbursement
Contribution

Candidate Name

Sen. Orrin G. Hatch

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: UT District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2011

Transaction ID : 19187274

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Friends Of Dick Lugar Inc

Mailing Address PO Box 55952

City	State	Zip Code
Indianapolis	IN	46205

Purpose of Disbursement
Contribution

Candidate Name

Sen. Richard G. Lugar

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: IN District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2011

Transaction ID : 19187304

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Snowe For Senate

Mailing Address PO Box 2012

City	State	Zip Code
Portland	ME	04104

Purpose of Disbursement
Contribution

Candidate Name

Sen. Olympia J. Snowe

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: ME District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2011

Transaction ID : 19187320

Amount of Each Disbursement this Period

1000.00

Contribution

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

4000.00

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

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<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)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Citizens For Altmore

Mailing Address P.O. Box 1776

City Freedom	State PA	Zip Code 15042
-----------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Rep. Jason Altmore

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	--------------------------------------------------------------------------------------------------------------------

Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> General
------------------------	-------------------------------------------------------------------------------------------	----------------------------------

State: PA District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2011

Transaction ID : 19187370

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Friends Of John Barrow

Mailing Address PO Box 8166

City Savannah	State GA	Zip Code 31412
------------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Rep. John Barrow

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	--------------------------------------------------------------------------------------------------------------------

Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> General
------------------------	-------------------------------------------------------------------------------------------	----------------------------------

State: GA District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2011

Transaction ID : 19187417

Amount of Each Disbursement this Period

1500.00

Contribution

Full Name (Last, First, Middle Initial)

C. Courtney For Congress

Mailing Address 38 Risley Road

City Vernon	State CT	Zip Code 06066
----------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Rep. Joseph D. Courtney

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	--------------------------------------------------------------------------------------------------------------------

Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> General
2012 Convention		

State: CT District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2011

Transaction ID : 19187436

Amount of Each Disbursement this Period

1000.00

Contribution

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

4500.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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(check only one)

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<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)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Wally Herger For Congress Committee

Mailing Address PO Box 1007

City Willows	State CA	Zip Code 95988
-----------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Rep. Wally HergerOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2011

Transaction ID : 19187489

Amount of Each Disbursement this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Loeb sack For Congress

Mailing Address PO Box 2720

City Cedar Rapids	State IA	Zip Code 52406
----------------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Rep. David Wayne Loeb sackOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: IA District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2011

Transaction ID : 19187504

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Diana DeGette For Congress Inc.

Mailing Address P.O. Box 61337

City Denver	State CO	Zip Code 80206
----------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Rep. Diana DeGetteOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: CO District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2011

Transaction ID : 19187523

Amount of Each Disbursement this Period

1000.00

Contribution

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

5500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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(check only one)

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<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)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Huizenga For Congress

Mailing Address 441 William Court

City Zeeland	State MI	Zip Code 49464
-----------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Rep. William HuizengaOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2011

Transaction ID : 19187543

Amount of Each Disbursement this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Peters For Congress

Mailing Address PO Box 226

City Bloomfield Hills	State MI	Zip Code 48303
--------------------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Rep. Gary C. PetersOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2011

Transaction ID : 19187619

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Cleaver For Congress

Mailing Address 4801 Main Street, Suite 1000

City Kansas City	State MO	Zip Code 64112
---------------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Rep. Emanuel Cleaver IIOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: MO District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2011

Transaction ID : 19187639

Amount of Each Disbursement this Period

1500.00

Contribution

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

4000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<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)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Searchlight Leadership FundMailing Address 700 Thirteenth Street, NW
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
2011 Contribution

Candidate Name

Searchlight Leadership Fund

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
06	/	14	/	2011

Transaction ID : 19187659

Amount of Each Disbursement this Period

2500.00

2011 Contribution

Full Name (Last, First, Middle Initial)

B. Friends Of Sherrod Brown

Mailing Address PO Box 76187

City Washington State DC Zip Code 20013

Purpose of Disbursement
Contribution

Candidate Name

Sen. Sherrod Brown

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2011

Transaction ID : 19187685

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Jaime Herrera Beutler For Congress

Mailing Address PO Box 1614

City Ridgefield State WA Zip Code 98642

Purpose of Disbursement
Contribution

Candidate Name

Rep. Jaime Herrera Beutler

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: WA District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2011

Transaction ID : 19187723

Amount of Each Disbursement this Period

1000.00

Contribution

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

4500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<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)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Friends Of Jim Clyburn

Mailing Address PO Box 12567

City	State	Zip Code
Columbia	SC	29211

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. James E. ClyburnCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: SC District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2011

Transaction ID : 19187819

Amount of Each Disbursement this Period

1500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Nancy Pelosi For CongressMailing Address 700 Thirteenth Street, NW
Suite 600

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Nancy PelosiCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2011

Transaction ID : 19187835

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Ben Chandler For Congress

Mailing Address P. O. Box 12678

City	State	Zip Code
Lexington	KY	40508

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Benjamin ChandlerCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: KY District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2011

Transaction ID : 19187855

Amount of Each Disbursement this Period

1000.00

Contribution

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

4500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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(check only one)

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<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)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Quigley For Congress

Mailing Address PO Box 13040

City	State	Zip Code
Chicago	IL	60613

Purpose of Disbursement
Contribution

Candidate Name

Rep. Michael QuigleyOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2011

Transaction ID : 19187877

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Allyson Schwartz For Congress

Mailing Address P.O. Box 2232

City	State	Zip Code
Jenkintown	PA	19046

Purpose of Disbursement
Contribution

Candidate Name

Rep. Allyson Y. SchwartzOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2011

Transaction ID : 19187900

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Carper For Senate

Mailing Address 19 East Commons Blvd Second Floor

City	State	Zip Code
New Castle	DE	19720

Purpose of Disbursement
Contribution

Candidate Name

Sen. Thomas R. CarperOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: DE District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2011

Transaction ID : 19207896

Amount of Each Disbursement this Period

2500.00

Contribution

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

4500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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<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)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Tiberi For CongressMailing Address 2931 E Dublin Granville Road
Suite 190

City Columbus State OH Zip Code 43231

Purpose of Disbursement
Contribution

Candidate Name

Rep. Patrick J. TiberiOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2011

Transaction ID : 19207979

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Friends Of Dennis Cardoza

Mailing Address PO Box 2749

City Merced State CA Zip Code 95340

Purpose of Disbursement
Contribution

Candidate Name

Rep. Dennis A. CardozaOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 18

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2011

Transaction ID : 19208225

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

C. John Carney For Congress

Mailing Address PO Box 2162

City Wilmington State DE Zip Code 19899

Purpose of Disbursement
Contribution

Candidate Name

Rep. John CarneyOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: DE District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2011

Transaction ID : 19208294

Amount of Each Disbursement this Period

1000.00

Contribution

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

4000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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(check only one)

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<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)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Kind For Congress CommitteeMailing Address 205 5th Avenue South
Suite 428

City La Crosse State WI Zip Code 54601

Purpose of Disbursement
Contribution

Candidate Name

Rep. Ron KindOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: WI District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2011

Transaction ID : 19208458

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. LoBiondo For Congress

Mailing Address P.O. Box 550

City Vineland State NJ Zip Code 08362

Purpose of Disbursement
Contribution

Candidate Name

Rep. Frank A. LoBiondoOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2011

Transaction ID : 19211248

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. America Works PAC

Mailing Address PO BOX 76187

City Washington State DC Zip Code 20013

Purpose of Disbursement
2011 Contribution

Candidate Name

America Works PACOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2011

Transaction ID : 19211315

Amount of Each Disbursement this Period

2500.00

2011 Contribution

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

4500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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(check only one)

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<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)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. BRIDGE PAC: Building Relationships In Diverse Geographic Environments PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		21		2011

Mailing Address 499 South Capitol St., SW
Suite 422

City Washington State DC Zip Code 20003

Purpose of Disbursement
2011 Contribution

011

Transaction ID : 19211662

Amount of Each Disbursement this Period

5000.00

Candidate Name

BRIDGE PAC: Building Relationships In Diverse Geographic Environments PAC

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

2011 Contribution

Full Name (Last, First, Middle Initial)

B. ERIC PAC-Every Republican is Crucial PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		21		2011

Mailing Address 209 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
2011 Contribution

011

Transaction ID : 19211722

Amount of Each Disbursement this Period

1500.00

Candidate Name

ERIC PAC-Every Republican is Crucial PACCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

2011 Contribution

Full Name (Last, First, Middle Initial)

C. VINEPAC: Victory in November Election PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		21		2011

Mailing Address 700 Thirteenth Street, NW
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
2011 Contribution

011

Transaction ID : 19211830

Amount of Each Disbursement this Period

4000.00

Candidate Name

VINEPAC: Victory in November Election PACCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

2011 Contribution

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

10500.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<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)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Daniel Webster for Congress

Mailing Address 3400 Old Winter Garden Road

City Orlando	State FL	Zip Code 32805
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Purpose of Disbursement
Contribution

Candidate Name

Rep. Daniel WebsterOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2011

Transaction ID : 19212143

Amount of Each Disbursement this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Davis For Congress/Friends Of Davis

Mailing Address 5956 W. Race Avenue

City Chicago	State IL	Zip Code 60644
-----------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Rep. Danny K. DavisOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2011

Transaction ID : 19212206

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Jesse Jackson Jr For Congress

Mailing Address P.O. Box 490286

City Chicago	State IL	Zip Code 60649
-----------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Rep. Jesse L. Jackson Jr.Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2011

Transaction ID : 19212284

Amount of Each Disbursement this Period

1000.00

Contribution

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

4500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Friends Of Nan Hayworth

Mailing Address 51 Gleneida Avenue

City Carmel	State NY	Zip Code 10512
----------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Rep. Nan HayworthOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 19

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2011

Transaction ID : 19212349

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Pete King For Congress Committee

Mailing Address Post Office Box 1428

City Seaford	State NY	Zip Code 11783
-----------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Rep. Peter T. KingOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2011

Transaction ID : 19212442

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Scott Rigell For CongressMailing Address 915 First Colonial Road
Suite 100

City Virginia Beach	State VA	Zip Code 23454
------------------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Rep. Edward Scott RigellOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: VA District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2011

Transaction ID : 19212499

Amount of Each Disbursement this Period

1000.00

Contribution

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

3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<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)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Friends Of Joe Heck

Mailing Address PO Box 750114

City	State	Zip Code
Las Vegas	NV	89136

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Joe HeckCategory/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: NV District: 03

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2011

Transaction ID : 19212828

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Blaine Luetkemeyer for Congress 2012

Mailing Address P.O. BOX 25

City	State	Zip Code
Holts Summit	MO	65043

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Blaine LuetkemeyerCategory/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: MO District: 03

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2011

Transaction ID : 19212929

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Pat Meehan For CongressMailing Address 50 S. Providence Road
PO Box 308

City	State	Zip Code
Media	PA	19063

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Patrick MeehanCategory/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: PA District: 07

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2011

Transaction ID : 19213579

Amount of Each Disbursement this Period

1000.00

Contribution

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

3000.00

SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Pat Roberts for Senate

Mailing Address PO Box 433

City	State	Zip Code
Great Bend	KS	67530

Purpose of Disbursement
Contribution

Candidate Name

Sen. Pat RobertsOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: KS District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2011

Transaction ID : 19213639

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. AMERIPAC: The Fund for a Greater AmericaMailing Address 700 Thirteenth Street, NW
Suite 600

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement
2011 Contribution

Candidate Name

AMERIPAC: The Fund for a Greater AmericaOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2011

Transaction ID : 19213859

Amount of Each Disbursement this Period

2500.00

2011 Contribution

Full Name (Last, First, Middle Initial)

C. Freedom Fund

Mailing Address 128 N. Columbus Street

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement
2011 Contribution

Candidate Name

Freedom FundOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2011

Transaction ID : 19213976

Amount of Each Disbursement this Period

1000.00

2011 Contribution

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

4500.00

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SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Victory Now!Mailing Address 10605 Concord Street
Suite 202

City Kensington State MD Zip Code 20895

Purpose of Disbursement
2011 Contribution

Candidate Name

Victory Now!Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2011

Transaction ID : 19214089

Amount of Each Disbursement this Period

1000.00

2011 Contribution

Full Name (Last, First, Middle Initial)

B. Doyle For Congress Committee

Mailing Address 205 Hawthorne Court

City Pittsburgh State PA Zip Code 15221

Purpose of Disbursement
Contribution

Candidate Name

Rep. Michael F. DoyleOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 14

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2011

Transaction ID : 19214118

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Latta For Congress

Mailing Address P.O. Box 106

City Bowling Green State OH Zip Code 43402

Purpose of Disbursement
Contribution

Candidate Name

Rep. Robert LattaOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2011

Transaction ID : 19214244

Amount of Each Disbursement this Period

1000.00

Contribution

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

3000.00

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**SCHEDULE B (FEC Form 3X)
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<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)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Betty Sutton For Congress

Mailing Address 1700 W Market St #155

City	State	Zip Code
Akron	OH	44313

Purpose of Disbursement
Contribution

Candidate Name

Rep. Betty S. SuttonOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2011

Transaction ID : 19214386

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Chris Gibson For Congress

Mailing Address PO Box 247

City	State	Zip Code
Kinderhook	NY	12106

Purpose of Disbursement
Contribution

Candidate Name

Rep. Chris GibsonOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 20

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2011

Transaction ID : 19230926

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

C. McKinley For Congress

Mailing Address 32 20th Street

City	State	Zip Code
Wheeling	WV	26003

Purpose of Disbursement
Contribution

Candidate Name

Rep. David McKinleyOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: WV District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2011

Transaction ID : 19230927

Amount of Each Disbursement this Period

1000.00

Contribution

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

4000.00

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**SCHEDULE B (FEC Form 3X)
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<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
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Wicker For Senate

Mailing Address PO Box 64

City Jackson	State MS	Zip Code 39205
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Purpose of Disbursement
Contribution

Candidate Name

Sen. Roger Wicker

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

State: MS District:

Disbursement For: 2012
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		10		2011

Transaction ID : 19230929

Amount of Each Disbursement this Period

500.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

500.00

127500.00
