Image# 12950181230			_	PAGE 1 / 117
FEC	REPORT OF I AND DISBURS or Other Than An Auth	SEMENTS		Office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, over the lines.	, type 12FE4M5	
American Hospital Asso	ociation PAC			
ADDRESS (number and street)	325 Seventh Street, NW			
Check if different	Suite 700			
than previously reported. (ACC)	Washington		DC	20004
2. FEC IDENTIFICATION NU			STATE 🔺	ZIP CODE
C C00106146	3. IS RE	THIS NE PORT (N)	~ ~	
 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q2) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q2) 	Report Due On: (c) 12-Day PRE -Election Report for the:	20 (M3) Jur 0 (M4) X Jul Primary (12P) Convention (12	20 (M6) Sep 20 (M7) Oct General	
January 31 Year-End Report (YE July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER)	(d) 30-Day	General (30G)	Runoff (3	State of
5. Covering Period		through	M M / D D / 06 30	2011
T certify that I have examined this Type or Print Name of Treasurer	-	ny knowledge and bel	lief it is true, correct and	a complete.
Signature of Treasurer	lelinda Hatton	[Electronically F	iled] Date 01	/ D D / Y Y Y Y 23 2012
NOTE: Submission of false, errone	ous, or incomplete information	may subject the persor	n signing this Report to the	ne penalties of 2 U.S.C. §437g.
Office Use Only				FEC FORM 3X Rev. 12/2004

01/23/2012 11 : 45

FE6AN026

Write or Type Committee Name American Hospital Association PAC Report Covering the Period: From: 06 01 2011 To: 06 30 CoLUMN B CoLUMN A This Period ColuMN B Calendar Year-to-Date			
Write	or Type Committee Name		
Ame	erican Hospital Association PA	С	
Repor	t Covering the Period: From:		
			COLUMN B Calendar Year-to-Date
6. (a)			1836473.19
(b)			

968765.35

2805238.54

460907.72

2344330.82

	(c) Total Receipts (from Line 19)	132614.30	
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	2472084.40	
7.	Total Disbursements (from Line 31)	127753.58	
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2344330.82	
9.	Debts and Obligations Owed TO		

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

X

Image#	12950181232
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DETAILED SUMMARY PAGE

of Receipts

Page 3

968765.35

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American Hospital Association PAC

Report Covering the Period: From: 06	/ D D / Y Y Y Y 01 2011 2011 2011 2011 2011	To: 06 / 06 / 2011
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. 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
(b) Political Party Committees(c) Other Political Committees	7 7 7	7 7
(such as PACs)	0.00	5000.0
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		400000 00
Totals to Line 33, page 5)	119177.90	492282.69
2. Transfers From Affiliated/Other	12175.00	468675.00
Party Committees	13175.00	400073.00
3. All Loans Received	0.00	0.00
I. Loan Repayments Received	0.00	0.0
5. Offsets To Operating Expenditures	7 7	7 7
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	1334.52
6. Refunds of Contributions Made		
to Federal Candidates and Other Political Committees	0.00	5500.00
7. Other Federal Receipts	0.00	7 7 7
(Dividends, Interest, etc.)	261.40	973.14
8. Transfers from Non-Federal and Levin Funds	7 7	
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.0
(a) Total Transform (add 19(c) and 19(b))	0.00	
(c) Total Transfers (add 18(a) and 18(b))	7 7 7	0.00
7. Total Receipts (add Lines 11(d),	120014.20	968765.35
12, 13, 14, 15, 16, 17, and 18(c))▶	132614.30	900705.3
0. Total Federal Receipts		

20. Total Federal Receipts (subtract Line 18(c) from Line 19)►

132614.30

FE6AN026

DETAILED SUMMARY PAGE

II. Disbursements	COLUMN A	COLUMN B
. Operating Expenditures: —	Total This Period	Calendar Year-to-Date
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.0
(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
Committees	0.00	0.00
Federal Candidates/Committees and Other Political Committees	127500.00	457750.00
Independent Expenditures	0.00	0.00
Coordinated Party Expenditures		
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees (c) Other Political Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))▶	0.00	0.00
Other Disbursements	0.00	0.00
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 (c) Total Federal Election Activity (add	0.00	0.0
Lines 30(a)(i), 30(a)(ii) and 30(b))►	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	127753.58	460907.72
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)	127753.58	460907.72
from Line 31)	121100.00	100301.12

FE6AN026

L

DETAILED SUMMARY PAGE

of Disbursements

II. Net Contributions/Operating Expenditures			
 Total Contributions (other than loans) (from Line 11(d), page 3) 	119177.90	492282.69	
I. Total Contribution Refunds (from Line 28(d))	0.00	0.00	
 Net Contributions (other than loans) (subtract Line 34 from Line 33) 	119177.90	492282.69	
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	253.58	3157.72	
 Offsets to Operating Expenditures (from Line 15, page 3) 	0.00	1334.52	
8. Net Operating Expenditures (subtract Line 37 from Line 36)	253.58	1823.20	

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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		Detailed Summary Page		X 11a		11b	11c		12		
				13		14	15		16	17	
Any information copied from such Reports and or for commercial purposes, other than using											
NAME OF COMMITTEE (In Full)											
American Hospital Associatio	n PAC										
Full Name (Last, First, Middle Initial) A. Ms. Mary C. Becker				Date o	of R	eceipt					
Mailing Address 7800 South Eagle Road				M M		/ D D) / Y		Y	Y	
	Ctoto	Zin Codo	_	06		03			011		
-	State MO	Zip Code 65203-9017	_				1917682				
	inio	03203 3017		Amoun	it of	r Each R	leceipt th	is P	eriod		
FEC ID number of contributing federal political committee.	С					7		_	43.	.75	
Name of Employer	Occupation	1									
Missouri Hospital Association	Senior VP,	Commc. & Health Improvement									
Name of Employer Missouri Hospital Association Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Herb B Kuhn Mailing Address 5310 Saddlebrooke Lane City Lohman FEC ID number of contributing	Aggregate	Year-to-Date ▼									
Primary General	00 0		11.								
Other (specify)		218.75	4								
Full Name (Last, First, Middle Initial) B. Mr. Herb B Kuhn				Date o	f R	eceipt					
Mailing Address 5310 Saddlebrooke Lane						03) / Y) 11	Y	
City	State	Zip Code		Trans	sact	tion ID :	1917686		_	_	
Lohman	MO	65053-9353		Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C					7			125.	.00	
Name of Employer	Occupation	1									
Missouri Hospital Association	President a	nd CEO									
Receipt For:	Aggregate	Year-to-Date V									
Other (specify)		, 625.00	1								
Full Name (Last, First, Middle Initial) C. Mr. Daniel R. Landon				Date o	f R	eceipt					
Mailing Address 1811 Forest Park Court				06	1	/ 0 0)11	Y	
City	State	Zip Code			sac		1917687		-		
Jefferson City	MO	65109-9782					leceipt th		eriod		
FEC ID number of contributing federal political committee.	С				62.	62.50					
Name of Employer	Occupatior	1									
Missouri Hospital Association	Sr. Vice Pr	esident, Governmental Relat									
Receipt For:		Year-to-Date ▼									
Primary General			11.								
Other (specify)		312.50									
SUBTOTAL of Receipts This Page (optional)	1				-			-	231.	25	

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

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Use separate schedule(s) for each category of the

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page		< 11a	11b	11c	12			
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may	ay not be sold or used by any p ddress of any political committe	erson	13 for the	purpose	of soliciting	16 g contribut	tions		
NAME OF COMMITTEE (In Full) American Hospital Association	-									
Full Name (Last, First, Middle Initial) Ms. Kathleen C. Poff Mailing Address 5119 Coventry Waye City Jefferson City FEC ID number of contributing federal political committee.	State MO	Zip Code 65101-8284		06 Trans	saction II		nis Period	.75		
Name of Employer Missouri Hospital Association Receipt For: Primary General Other (specify) v		President & CFO Year-to-Date ▼ 218.75]							
B. Full Name (Last, First, Middle Initial) Mr. Jerry M. Sill Mailing Address 2906 Valley View Terrace	State	Zip Code		м м 06		03 D : 1917690	2011 2	Ŷ		
Jefferson City FEC ID number of contributing federal political committee.	С	65109-1069		Amount of Each Receipt this Period 43.75						
Name of Employer Missouri Hospital Association Receipt For: Primary General Other (specify)		President & General Counse Year-to-Date ▼ 218.75	1							
Full Name (Last, First, Middle Initial) C. Mr. Leonard Hernandez Mailing Address 445 Hilltop Street City Elkbort	State	Zip Code		06 Trans	saction I	03 D : 1917698				
Elkhart FEC ID number of contributing federal political committee. Name of Employer Morton County Health System Receipt For: Primary General Other (specify) ▼		67950-0937 utive Officer Year-to-Date ▼ 250.00]	Amoun	t of Each	n Receipt th	nis Period 250			
SUBTOTAL of Receipts This Page (optiona	l)						337.	.50		

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

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Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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			Detailed Summary Page	2	X 11a		11b	110		12		
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Ar or	y information copied from such Reports and S for commercial purposes, other than using the	name and a	ay not be sold or used by any pendotress of any political committee	to s	for the olicit c	e pu ontri	rpose of butions	of solicit	ng co uch c	ontribu ommit	tions iee.	
$\left \right\rangle$	NAME OF COMMITTEE (In Full)											
	American Hospital Association	PAC										
Α.	Full Name (Last, First, Middle Initial) Mr. Stephen M. Ahnen				Date	of R	eceipt					
	Mailing Address 125 Airport Road				м 06	VI	/ D 0			y y 2011	Y	
	City	State	Zip Code		Trar	sac		: 19177				
	Concord	NH	03301-7300		Amou	nt of	f Each	Receipt	this	Period		
	FEC ID number of contributing federal political committee.	С					7			41	.64]
	Name of Employer	Occupation	1	-								
	New Hampshire Hospital Association	President a	nd CEO									
	Receipt For:	Angregate	Year-to-Date ▼									
	Primary General	, iggi oguto										
	Other (specify)		541.96									
	Full Name (Last, First, Middle Initial)											
В.	Mr. Michael E Henze				Date	of R	eceipt					
	Mailing Address 54 Hospital Drive		06 07 2011									
	City	State	Zip Code		Transaction ID : 19177617 Amount of Each Receipt this Period 600.00							
	Osage Beach	MO	65065-3050									
	FEC ID number of contributing federal political committee.	С										
	Name of Employer	Occupation	1									
	Lake Regional Health System	Chief Execu	utive Officer									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General											
	Other (specify) 🔻		, 600.00									
_	Full Name (Last, First, Middle Initial) Mr. Gary L Barnett				Date	of B	eceipt					
0.	Mailing Address P O Box 372				M		/ D	D /		Y Y	Y	
 C.	City	State	Zip Code	_	06		0			2011		
	Mattoon	IL	61938-0372	\vdash				: 19178 Receipt		Period		
	FEC ID number of contributing				Amou	11 0		neceipi	1115	renou	_	1
	federal political committee.	С			<u> </u>	-				250).00	
	Name of Employer	Occupation		7								
	Sarah Bush Lincoln Health Center	President a	nd Chief Executive Officer									
	Receipt For:	Aggregate	Year-to-Date 🔻									
	Primary General		050.00									
	Other (specify)		250.00									
Г					_			_	_	_	_	
s	UBTOTAL of Receipts This Page (optional)		••••••		L.		7			891	.64	

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

FEC Schedule A (Form 3X) Rev. 02/2003

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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111			Detailed Summary Page		< 11a 13		11b 14	11c		12 16	17				
	y information copied from such Reports and s for commercial purposes, other than using the				for the		rpose c	of solicitin		ontribu	tions				
	NAME OF COMMITTEE (In Full) American Hospital Association	PAC													
Α.	Full Name (Last, First, Middle Initial) Mr. Daniel A Parod Mailing Address 2400 North Rockton Avenue City Rockford	State IL	Zip Code 61103-3655	_		sact	tion ID		2 07	2011 Period	Y				
	FEC ID number of contributing federal political committee. Name of Employer	Occupation					7		-	500	.00				
	Rockford Memorial Hospital Receipt For: Primary General Other (specify) ▼		President Administrative A Year-to-Date ▼ 500.00]											
B. Ma	Full Name (Last, First, Middle Initial) Mr. Henry Scybold Mailing Address 529 South Summit Street						Date of Receipt								
	City Barrington FEC ID number of contributing	State IL	Zip Code 60010-4413		Transaction ID : 19179486 Amount of Each Receipt this Period										
	federal political committee. Name of Employer Rockford Memorial Hospital	Occupation Chief Finan					75	7	_	500	.00				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00												
с.	Full Name (Last, First, Middle Initial) Ms. Helen M. Brooks				Date of	of Re	eceipt								
	Mailing Address 2400 North Rockton Avenue	State	Zip Code		06 01 2011 Transaction ID : 19179488										
	Rockford FEC ID number of contributing federal political committee.	C	61103-3655		Amour	nt of	Each	Receipt t	his F	Period 500	.00				
	Name of Employer Rockford Memorial Hospital Receipt For: Primary General Other (specify)		Director, Foundation Year-to-Date ▼ 500.00]											
s	UBTOTAL of Receipts This Page (optional)			•						1500.	.00				

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

FEC Schedule A (Form 3X) Rev. 02/2003

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			Detailed Summary Page		-		11b	11c		12						
	ny information copied from such Reports and	Statements ma	av not be sold or used by any n	erson	13 for the	nur	14 1905e. 0	15 f soliciting		16 Intribut	17 ions					
	for commercial purposes, other than using th															
$\left[\right]$	NAME OF COMMITTEE (In Full)	DA O														
	American Hospital Association	PAC														
	Full Name (Last, First, Middle Initial)															
Α.					Date o	f Re	eceipt									
	Mailing Address 11873 Warblers Way				м м 06	1	01			011	Y					
	City	State	Zip Code			act		: 1917948								
	Roscoe	IL	61073-7541		Amoun	t of	Each I	Receipt th	nis F	eriod						
	FEC ID number of contributing federal political committee.	C					7		_	250	.00					
	Name of Employer	Occupation														
	Rockford Memorial Hospital	Vice Presid	ent, Strategic Plng/Relatio													
		Aggregate	Year-to-Date ▼													
	Primary General	33 - 3		11.												
	Other (specify)		250.00	4												
в.	Full Name (Last, First, Middle Initial) 3. Mr. Gary E Kaatz						eceipt									
	Mailing Address 2400 North Rockton Avenue						06 01 2011									
	City	State	Zip Code		Transaction ID : 19179502											
	Rockford	IL	61103-3692		Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С														
	Name of Employer	Occupation														
	Rockford Memorial Hospital	President a	nd Chief Executive Officer													
	Receipt For:	Aggregate	Year-to-Date ▼													
	Primary General Other (specify) ▼		, 500.00	1												
<u>с</u> .	Full Name (Last, First, Middle Initial) Mr. Phillip M Kambic	1			Date o	f Re	eceipt									
	Mailing Address 350 North Wall Street				м м 06	/	01			011	Y					
	City	State	Zip Code		Trans	sact	ion ID	: 1917950	03							
	Kankakee	IL	60901-2901		Amoun	t of	Each I	Receipt th	nis F	'eriod						
	FEC ID number of contributing federal political committee.	С					7	5	_	250	.00					
	Name of Employer	Occupation														
	Riverside Medical Center	Chief Exect	utive Officer													
	Receipt For:	Agaregate	Year-to-Date ▼													
	Primary General	33 3-10														
	Other (specify)		250.00	ц.												
[UBTOTAL of Receipts This Page (optional)				<u> </u>	-			-	1000.	00					
1 5	Service of hocopis this raye (optional)	••••••				1.0			1	- 1						

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

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page		-		11b	11c	12	<u> </u>
Any information copied from such Reports ar or for commercial purposes, other than using									
NAME OF COMMITTEE (In Full) American Hospital Association									
Full Name (Last, First, Middle Initial) Dr. Alice Ackerman MD Mailing Address 3905 Piney Ridge RD City Roanoke FEC ID number of contributing federal political committee. Name of Employer Carilion Clinic Receipt For: Primary General Other (specify) ▼	State VA C Occupation Departmen Aggregate				sact	ion ID		nis Perio	
Full Name (Last, First, Middle Initial) B. Mr. Carl Bahnlein Mailing Address 1701 North George Masor				Date o	of Re	eceipt		2011	Ý
City Arlington	State VA	Zip Code 22205-3698					: 1917953 Receipt th		d
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this F					0.00	
Name of Employer Virginia Hospital Center - Arlington	Occupation Executive V	i /ice President and Chief Ope							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	1						
Full Name (Last, First, Middle Initial) C. Ms. Sharon M. Bass Jr.				Date o	of Re	eceipt			
Mailing Address 2619 Blue Hernon Circle				м м 06	/	03		2011	Y
City Roanoke	State VA	Zip Code 24018-5133					: 191795 3 Receipt th		d
FEC ID number of contributing federal political committee.	ů – Elektrik							35	50.00
Name of Employer	Occupation								
Carilion Clinic Receipt For: Primary General Other (specify) ▼	I	lent Imaging & Pharmacy Year-to-Date ▼ 350.00]						
SUBTOTAL of Receipts This Page (optional)					7	7	1050	0.00

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X	-		11b	11c	12		
Any information copied from such Reports and s or for commercial purposes, other than using the									butio	
NAME OF COMMITTEE (In Full) American Hospital Association										
Full Name (Last, First, Middle Initial) Ms Lori Brown Mailing Address 40349 Braddock Rd City Aldie FEC ID number of contributing federal political committee. Name of Employer Inova Health System Receipt For: Primary General Other (specify) ▼	Zip Code 20105-2719 ice President Year-to-Date ▼ 350.00			sact	ion ID		nis Peri		00	
Full Name (Last, First, Middle Initial) Mr. Ramon Darcey Mailing Address 535 Independence Parkway Suite 200 City Chesapeake FEC ID number of contributing federal political committee. Name of Employer Sentara Healthcare Receipt For: Primary General Other (specify) ▼	State VA C Occupation Vice Preside Aggregate				act	03 ion ID		nis Peri		0
Full Name (Last, First, Middle Initial) Mr. Michael Dudley Mailing Address Mailing Address 4417 Corporation Lane City Virginia Beach FEC ID number of contributing federal political committee. Name of Employer Sentara Healthcare Receipt For: Primary General Other (specify) ▼	State VA C Occupation President Aggregate	Zip Code 23462-3162 Year-to-Date ▼ 350.00			sact	ion ID		nis Peri	-	
SUBTOTAL of Receipts This Page (optional)						7	- J	10	50.0	0

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam		
NAME OF COMMITTEE (In Full) American Hospital Association PAC	2	
Williamsburg FEC ID number of contributing federal political committee. Name of Employer Octoor Sentara Williamsburg Regional Medical Victoor	State Zip Code VA 23188-5713 C C Cupation the President and Administrator Igregate Year-to-Date ▼ 350.00	Date of Receipt 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		Date of Receipt 06 03 2011
Charlottesville FEC ID number of contributing federal political committee. Name of Employer Martha Jefferson Hospital Presson	State Zip Code VA 22902-4808 C C C C C C C C C C C C C C C C C C	Transaction ID : 19179591 Amount of Each Receipt this Period 350.00
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) C. Ms. Kay Hix	350.00	Date of Receipt
Mailing Address 2784 Lakeview Road	State Zip Code	06 03 2011 Transaction ID : 19179593
FEC ID number of contributing federal political committee.	VA 24175-2750 Compation ecutive Director Igregate Year-to-Date ▼ 350.00	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)......

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Image# 12950181243

SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	5	

Use separate schedule(s) for each category of the

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TEMIZED RECEIPTS		for each category of the Detailed Summary Page		11a	11	Ib	11c	12	
Any information copied from such Reports and S						se of			
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association		ddress of any political committee	e to sol	licit co	ntributio	ons	from suc		tee.
Full Name (Last, First, Middle Initial) Mr. Walter J Kiwall Mailing Address 1001 Sam Perry Boulevard City Fredericksburg FEC ID number of contributing federal political committee. Name of Employer Stafford Hospital Receipt For: Primary General Other (specify) ▼		Zip Code 22401-3354 /ice President and Chief Ope Year-to-Date ▼ 350.00		06 Trans	saction	03 03		nis Perioc	d 0.00
Full Name (Last, First, Middle Initial) Mr. Rob Lockridge Mailing Address 14304 Horseshoe Ford Rd City Ashland FEC ID number of contributing federal political committee. Name of Employer University of Virginia Medical Center Receipt For: Primary General Other (specify)	,	Zip Code 23005-3163 overnment Relations Year-to-Date ▼ 350.00		06 Trans	action	03 03		nis Perioc	y d 0.00
Full Name (Last, First, Middle Initial) Ms Darleen Mastin Mailing Address 4748 Totteridge Lane City Virgina Beach FEC ID number of contributing federal political committee. Name of Employer Sentara Healthcare Receipt For: Primary General Other (specify) ▼		Zip Code 23462 esident/COO Year-to-Date ▼ 350.00		M M 06 Trans	saction	03 03 1 ID :		nis Perioc	_
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American Ho	ospital Associatio	on PAC									
Full Name (Last, I A. Ms. Sylvia Ric	First, Middle Initial) hendollar				Date o	f Rec	ceipt				
Mailing Address 5	5466 Hunt Club Drive				м – м 06	/	03			D11	Y
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Virginia Beach		VA	23462-3413					Receipt th		eriod	
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Sentara Norfolk Ge	eneral Hospital	Director Lat	oratory Services								
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Full Name (Last, I B. Ms Rachel Sc	First, Middle Initial) chneider				Date o	f Rec	ceipt				
Mailing Address 2	328 Santa Fe Drive				м м 06	/	03		20)11	Y
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Sentara Healthcare	Э	Director of N	letwork Relations								
Receipt For: Primary Other (speci	General ify) ▼	Aggregate	Year-to-Date ▼ 350.00]							
Full Name (Last, I C. Mr. Larry M (First, Middle Initial) Graham				Date o	f Rec	ceipt				
Mailing Address 1	701 Oak Park Boulevard	I			м – м 06	/	07)11	Y
City		State	Zip Code		Trans	sactio	on ID :	: 1918465	59		
Lake Charles		LA	70601-8911		Amoun	t of E	Each F	Receipt th	nis P	eriod	
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\setminus	NAME OF COMMITTEE (In Full)												
	American Hospital Association F	PAC											
Α.	Full Name (Last, First, Middle Initial) Mr. Clifford M Broussard				D	ate o	f Re	ecei	ipt				
	Mailing Address 2400 Hospital Drive			06 07 _ 2011 _									
	City	State	Zip Code		2		sact	tion		918466		511	
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			gg										
	Full Name (Last, First, Middle Initial)												
В.	Ms Nancy Cassagne				D	ate o	f Re	ecei	ipt				
	Mailing Address 1101 Medical Center Boulevar	d			Ľ	м м 06	/	<i>_</i>	0 T D	/ Y	ү 20	у)11	Y
	City	State	Zip Code							918466			
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	Primary General Other (specify) ▼		500.00										
<u>с</u> .	Full Name (Last, First, Middle Initial) Mr. John J Finan Jr				D	ate o	f Re	ecei	ipt				
	Mailing Address 4200 Essen Lane				Γ	м м 06	/	′	07	/ Y) 11	Y
	City	State	Zip Code			Trans	sact	tion	i ID : 1	1918466	52		
	Baton Rouge	LA	70809-2196	_	Aı	moun	t of	Ea	ach Re	eceipt th	nis P	'eriod	
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	Name of Employer	Occupation	1										
	Franciscan Missionaries of Our Lady He	President a	nd Chief Executive Officer										
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	Other (specify)		500.00										
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FEC Schedule A (Form 3X) Rev. 02/2003

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NAME OF COMMITTEE (In Full) American Hospital Association P	AC									
Full Name (Last, First, Middle Initial) Mr. Mark E Marley Mailing Address P O Box 2009 City Natchitoches FEC ID number of contributing federal political committee. Name of Employer Natchitoches Regional Medical Center Receipt For: Primary General Other (specify) ▼	State Zip Code LA 71457-2009 C Occupation Occupation Chief Executive Officer Aggregate Year-to-Date ▼ €	500.00) nsac	/ ctio	07 07	191846 Receipt t	20 63	011 Period 500.	Y 00
Full Name (Last, First, Middle Initial) Mr. James T Montgomery Mailing Address 1401 Foucher Street City New Orleans FEC ID number of contributing federal political committee. Name of Employer Touro Infirmary Receipt For: Primary General Other (specify) ▼	State Zip Code LA 70115-3515 C Occupation President Aggregate Year-to-Date ▼	500.00		M Sac	/ ctio	07	191847 Receipt t	20 68	2 2 2 5 0 0.	Y 00
Full Name (Last, First, Middle Initial) Mr. James E Cathey Jr Mailing Address PO Box 2668 City Hammond FEC ID number of contributing federal political committee. Name of Employer North Oaks Medical Center Receipt For: Primary General Other (specify) ▼	State Zip Code LA 70404-2668 C Occupation President and Chief Executive Offi Aggregate Year-to-Date ▼	icer 300.00		s nsac	/ ctic	07 07		20 '69	2011 Period 300.	
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	NAME OF COMMITTEE (In Full) American Hospital Association	PAC									
Α.	Full Name (Last, First, Middle Initial) Mr. M. Bryan Day				Date o	f Re	eceipt				
	Mailing Address 3600 Florida Boulevard, 4th	Floor			м м 06	/	. 07			011	Y
	City	State	Zip Code			sact		: 1918477		• • •	
	Baton Rouge	LA	70806-3842		Amoun	t of	Each I	Receipt th	nis F	eriod	
	FEC ID number of contributing federal political committee.	С					7			250	.00
	Name of Employer	Occupation									
	Promise Hospital of Baton Rouge	Senior Vice	President								
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	Primary General			11.							
	Other (specify)		250.00								
в.	Full Name (Last, First, Middle Initial) Mr. Ricardo Guevara				Date o	f Re	eceipt				
	Mailing Address 200 Henry Clay Avenue				м м 06	/	07		2(у 011	Y
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	New Orleans	LA	70118-5798		Amoun	t of	Each I	Receipt th	nis F	'eriod	
	FEC ID number of contributing federal political committee.	С					9		_	250	.00
	Name of Employer	Occupation									
	Children's Hospital	Vice Preside	ent Legal Affairs								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]							
<u> </u>	Full Name (Last, First, Middle Initial) Dr. Patrick J Quinlan				Date o	f Re	eceipt				
	Mailing Address 1514 Jefferson Highway				м м 06	/	07			011	Y
	City	State	Zip Code		Trans	sact	tion ID	: 1918477	72		
	New Orleans	LA	70121-2484		Amoun	t of	Each I	Receipt th	nis F	'eriod	
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	Name of Employer	Occupation									
	Ochsner Health System	Chief Exect	utive Officer								
	Receipt For:	Aggregate	Year-to-Date ▼								
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FEC Schedule A (Form 3X) Rev. 02/2003

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	American Hospital Association	PAC										
Α.	Full Name (Last, First, Middle Initial) Mr. Warner L Thomas				Date	of F	Ree	ceipt				
	Mailing Address 1514 Jefferson Highway				06		/	010	/ Y		у 011	Y
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	Ochsner Health System	President a	nd Chief Operating Officer									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General	00 0		11.								
	Other (specify)		1250.00									
в.	Full Name (Last, First, Middle Initial) Mr. Timothy O Coffey				Date	of F	Red	ceipt				
	Mailing Address 1701 Oak Park Boulevard				м Об		/	07	/ Y		у 011	Y
	City	State	Zip Code		Trai	nsac	ctio	on ID : '	1918484	8		
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	FEC ID number of contributing federal political committee.	С						,	7	_	225.	00
	Name of Employer	Occupation	l									
	Lake Charles Memorial Hospital	Senior Vice	President Operations									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 225.00]								
<u>с</u> .	Full Name (Last, First, Middle Initial) Mr. Todd Delahoussaye MBA				Date	of F	Red	ceipt				
	Mailing Address 1701 Oak Park Boulevard				06		/	07	/ Y		011	Y
	City	State	Zip Code		Tra	nsa	cti	on ID :	1918484	19		
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	FEC ID number of contributing federal political committee.	С						,		_	225	.00
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	Lake Charles Memorial Hospital	Sr. VP, Spe	ecialty & Physician Services									
	Receipt For:	Aggregate	Year-to-Date ▼									
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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and		
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
A. Full Name (Last, First, Middle Initial) Ms. Bernita Loyd , LD, LDN Mailing Address 1701 Oak Park Blvd City State	Zip Code	Date of Receipt 06 / 07 / 2011 Transaction ID : 19184850
Receipt For: Aggrega Primary General Other (specify) ▼	70601-8911 on sident, Support Services te Year-to-Date ▼ 225.00	Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) B. Dr. Kevin Mocklin MD Mailing Address 1701 Oak Park Boulevard		Date of Receipt
	Zip Code 70601-8911	Transaction ID : 19184851 Amount of Each Receipt this Period 225.00
Primary General Other (specify) ▼	te Year-to-Date ▼ 225.00	
Full Name (Last, First, Middle Initial) Mr David Usher , FACHE Mailing Address PODrawer 'M'		Date of Receipt 06 07 _ 2011 _
CityStateLake CharlesLAFEC ID number of contributing federal political committee.C	Zip Code 70602	Transaction ID : 19184852 Amount of Each Receipt this Period 225.00
Name of Employer Occupati Lake Charles Memorial Hospital Senior V	on ice President, Business Develo te Year-to-Date ▼ 225.00	
SUBTOTAL of Receipts This Page (optional)	•••••	675.00

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\backslash	NAME OF COMMITTEE (In Full)												
$\langle \rangle$	American Hospital Association	PAC											
Α.	Full Name (Last, First, Middle Initial) Mr. Charles P Whitson				Date o	of R	eceipt						
	Mailing Address 1701 Oak Park Boulevard				M N	1	/ D D) / Y	Y	Y	Y		
					06		07		2	011			
	City	State	Zip Code		Transaction ID : 19184853								
	Lake Charles	LA	70601-8911		Amour	nt of	f Each R	leceipt th	is F	Period			
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	Name of Employer	Occupation	1										
	Lake Charles Memorial Hospital	Senior Vice	President Finance										
	Receipt For:	Aggregate	Year-to-Date ▼										
	Primary General		205.00	11.									
	Other (specify)		225.00	4									
B	Full Name (Last, First, Middle Initial) Mr. Robert L Hawley Jr				Date o	of B	eceint						
υ.	Mailing Address 1001 Gause Boulevard			-					v	V	V		
	Walling Address 1001 Gause Boulevard				06		07	У / Ү)11	Y		
	City	State	Zip Code			sac		1918487 [.]					
	Slidell	LA	70458-2987					leceipt th		eriod			
	FEC ID number of contributing federal political committee.	С					7			50	00		
	Name of Employer	Occupation	1	-									
	Slidell Memorial Hospital	Former - Cl	nief Executive Officer										
	Receipt For:	Aggregate	Year-to-Date ▼										
	Primary General	i iggi oʻgulo		11.									
	Other (specify)		550.00	4									
<u>с.</u>	Full Name (Last, First, Middle Initial) Mr. John Hanshaw				Date o	of R	eceipt						
	Mailing Address 6985 Union Park Ctr Ste 550				M N 06	1	/ 0 0) / Y)11	Y		
	City	State	Zip Code		Tran	sac	tion ID :	1918902		-			
	Midvale	UT	84047-4177		Amour	nt o	f Each R	leceipt th	is F	eriod			
	FEC ID number of contributing federal political committee.	С			[.	ļ	9			350	.00		
	Name of Employer	Occupation	1	_									
	НСА	President											
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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
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NAME OF COMMITTEE (In Full) American Hospital Association F	PAC	
Full Name (Last, First, Middle Initial) Mr. Thomas A Biga Mailing Address 29 Highand Avenue City Fair Haven FEC ID number of contributing federal political committee. Name of Employer Barnabas Health Receipt For: Primary General Other (specify) ▼	State Zip Code NJ 07704-3620 C Occupation ExecutiveVice President Aggregate Year-to-Date ▼ 1000.00	Date of Receipt
Full Name (Last, First, Middle Initial) Dr. Richard Aubut Mailing Address 55 Fogg Road City South Weymouth FEC ID number of contributing federal political committee. Name of Employer South Shore Hospital Receipt For: Primary General Other (specify) ▼	State Zip Code MA 02190-2432 C Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 750.00	Date of Receipt
Full Name (Last, First, Middle Initial) Dr. Howard R Grant Mailing Address 41 Mall Road City Burlington FEC ID number of contributing federal political committee. Name of Employer Lahey Clinic Hospital Receipt For: Primary General Other (specify) ▼	State Zip Code MA 01805-0001 C Occupation Occupation Chief Executive Officer Aggregate Year-to-Date ▼ 375.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional)		▶ 2125.00

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X 11a 11b 12 11c **Detailed Summary Page** 14 13 15 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Robert A Gundersen Α. Date of Receipt Mailing Address 2001 Washington Street M M / 2011 06 10 City Zip Code State Transaction ID : 19192588 Braintree MA 02184-8658 Amount of Each Receipt this Period FEC ID number of contributing С 562.50 federal political committee. Name of Employer Occupation Chief Executive Officer Kindred Hospital Northeast-Braintree Receipt For: Aggregate Year-to-Date ▼ Primary General 562.50 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Kathleen Jose MSN Date of Receipt Mailing Address 41 Mall Rd М M 06 10 2011 City State Zip Code Transaction ID: 19192589 MA Burlington 01805-0001 Amount of Each Receipt this Period FEC ID number of contributing С 112.50 federal political committee. Name of Employer Occupation Lahey Clinic Hospital Sr VP, Nursing Services Receipt For: Aggregate Year-to-Date ▼ Primarv General 225.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Mr. Karl B Gills Date of Receipt Mailing Address 1024 Central Park Drive M = M D 06 10 2011 City Zip Code State Transaction ID: 19192592 CO Steamboat Springs 80487-8813 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Chief Executive Officer Yampa Valley Medical Center Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 925.00 SUBTOTAL of Receipts This Page (optional).....

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
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NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Receipt For: Aggregate Primary General Other (specify) ▼	Zip Code 21044-2999 and Chief Executive Officer • Year-to-Date ▼ 340.00	Date of Receipt
Full Name (Last, First, Middle Initial) Mr. Ronald R Peterson Mailing Address 733 North Broadway, BRB 104 City State Baltimore MD FEC ID number of contributing federal political committee. C Name of Employer Johns Hopkins Health System Occupation President Receipt For: Aggregate Primary General Other (specify) ▼ Image: Committee	Zip Code 21205	Date of Receipt
Bossint For:	Zip Code 21075-8207 • • President • Year-to-Date ▼ 510.00	Date of Receipt
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NAME OF	COMMITTEE (In Full) an Hospital Associatio														
A. Ms. Cyn	(Last, First, Middle Initial) t hia M Grueber tress 3181 SW Sam Jackson P	ark Road			Date o		D			Y					
City Portland		State OR	Zip Code 97239-3011		06 13 2011 Transaction ID : 19192649 Amount of Each Receipt this Period										
	mber of contributing tical committee.	С					7	,	250	.00					
Paggint For:			ating Officer												
Prima		Aggregate	Year-to-Date ▼ 250.00	1											
B. Mr. Roy	(Last, First, Middle Initial) G Vinyard ^{Iress} 2650 Siskiyou Boulevard,	Suite 200			Date o	of Re	eceipt	D / Y	YY	Y					
City Medford		State Zip Code OR 97504-8170							2011 52 nis Period						
	mber of contributing tical committee.	С					1	1000.pt 1	500	.00					
Name of E	Ith System	Occupation President a	nd Chief Executive Officer												
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	Iress 640 South State Street	01.1			06 13 2011										
City Dover		State DE	Zip Code 19901-3597					: 191926 Receipt th	58 nis Period						
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
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NAME OF COMMITTEE (In Full) American Hospital Associatio	n PAC		
Full Name (Last, First, Middle Initial) Mr. Donald R Avery Mailing Address P O Box 1408 City Dublin FEC ID number of contributing federal political committee. Name of Employer Fairview Park Hospital Receipt For: Primary General Other (specify) ▼		Zip Code 31040-1408 nd Chief Executive Officer 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) Ms. Jean Aycock Mailing Address 821 North Cobb Street City Milledgeville FEC ID number of contributing federal political committee. Name of Employer Oconee Regional Health System Receipt For: Primary General Other (specify) ▼		Zip Code 31061-2343 Ind Chief Executive Officer Year-to-Date ▼ 500.00	Date of Receipt
Full Name (Last, First, Middle Initial) Mr. Kevin Bierschenk Mailing Address P O Box 4309 City Eastman FEC ID number of contributing federal political committee. Name of Employer Dodge County Hospital Receipt For: Primary General Other (specify) ▼		Zip Code 31023-4309 utive Officer Year-to-Date ▼ 250.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional)		······)	1000.00

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		Detailed Summary Page		_		11b	11c		12	
Any information copied from such Reports and or for commercial purposes, other than using										
NAME OF COMMITTEE (In Full) American Hospital Association	n PAC									
Full Name (Last, First, Middle Initial) Mr. Lance B Duke Mailing Address 707 Center Street, Suite 40 City Columbus FEC ID number of contributing federal political committee. Name of Employer Columbus Regional Healthcare System Receipt For: Primary General Other (specify) ▼	State GA C Occupation President a	Zip Code 31901-1575 nd Chief Executive Officer Year-to-Date ▼ 250.00			/sact	13 ion ID		20 87	011 'eriod 250.	Y 00
Full Name (Last, First, Middle Initial) Mr. Lex S Anderson Mailing Address 1923 South Utica Avenue City Tulsa FEC ID number of contributing federal political committee. Name of Employer Marian Health System Receipt For: Primary General	State OK C Occupation Chief Finan Aggregate				act	21		28	eriod 250.	Y 00
City Oklahoma City FEC ID number of contributing	State OK	250.00 Zip Code 73112-4418			/sact	21 ion ID		20 29)11 Period 250	
federal political committee. Name of Employer Integris Baptist Medical Center Receipt For: Primary Other (specify) SUBTOTAL of Receipts This Page (optional)		Year-to-Date ▼ 500.00]			<u>*</u>	1 y		750.	

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

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			Detailed Summary Page		11a		11b	11c		12			
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	y information copied from such Reports and St for commercial purposes, other than using the												
\backslash	NAME OF COMMITTEE (In Full)	_											
$\Big)$	American Hospital Association F	PAC											
Α.	Full Name (Last, First, Middle Initial) Ms. Debra K Boardman			Date of Receipt									
	Mailing Address 750 East 34th Street				м м 06	/	D D D 14	/ Y	۲ 20	ү 11	Y		
	City	State	Zip Code			sact		1919277					
	Hibbing	MN	55746-2341		Amoun	t of	Each R	eceipt th	nis Pe	eriod			
	FEC ID number of contributing federal political committee.	С					7		_	250.0	00		
	Name of Employer	Occupation											
	Fairview Range Regional Health Service	President a	nd Chief Executive Officer										
	Receipt For:	Aggregate	Year-to-Date 🔻										
	Primary General Other (specify) ▼		250.00										
	Full Name (Last, First, Middle Initial) Ms. Sharon P. Andre				Date o	f De	againt					•	
D.	Mailing Address P.O. Box 9010						· ·		v	V	U7		
	Walling / 441055 P.O. B0X 9010				06		15	/ 1	_201	11 _	Y		
City Sta			Zip Code		Trans	acti	ion ID :	1919279					
	Stuart	FL	34995-9010		Amoun	t of	Each R	eceipt th	nis Pe	eriod			
	FEC ID number of contributing federal political committee.	С					7			250.0	00		
	Name of Employer	Occupation											
	Martin Memorial Health Systems	Admin Direc	ctor, Ed., Diabetes & OH										
	Receipt For:	Aggregate	Year-to-Date 🔻										
	Primary General Other (specify) ▼		250.00										
			, , , , , , , , , , , , , , , , , , , ,										
c.	Full Name (Last, First, Middle Initial) Mr. John R. Brownlow				Date o	f Re	eceipt						
	Mailing Address 5608 Bear Lake Circle				м м 06	/	15	/ Y	201	ү 11	Y		
	City	State	Zip Code		Trans	sact	ion ID :	1919280)0				
	Арорка	FL	32703-1916	_	Amoun	t of	Each R	eceipt th	nis Pe	eriod			
	FEC ID number of contributing federal political committee.	С					3	7	_	250.	00		
	Name of Employer	Occupation											
	Florida Hospital	Sr. Vice Pre	esident, Managed Care										
			Year-to-Date ▼										
	Primary General Other (specify) ▼		250.00										
						_			_		_		
s	UBTOTAL of Receipts This Page (optional)		•	•		_	,			750.0	0		

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) American Hospital Association F	PAC		
Full Name (Last, First, Middle Initial) Mr. Timothy W Cook Mailing Address P O Box 9400 City Sebring FEC ID number of contributing federal political committee. Name of Employer Florida Hospital Heartland Medical Cen Receipt For: Primary General Other (specify) ▼		Zip Code 33871-9400 d Chief Executive Officer ear-to-Date ▼ 500.00	Date of Receipt
Full Name (Last, First, Middle Initial) Mr Frances Crunk Mailing Address 2880 David Walker Dr #333 City Eustis FEC ID number of contributing federal political committee. Name of Employer Florida Hospital Waterman Receipt For: Primary General Other (specify) ▼	State FL Occupation Chief Financia Aggregate Y	Zip Code 32726-6172 al Officer ear-to-Date ▼ 250.00	Date of Receipt
Full Name (Last, First, Middle Initial) Mr. Bill Ellis Mailing Address 6450 US Highway 1 City Rockledge FEC ID number of contributing federal political committee. Name of Employer Health First, Inc. Receipt For: Primary General Other (specify) ▼		Zip Code 32955-5747 nt Government and Industry ear-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)			▶ 1000.00

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

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	ny information copied from such Reports and for commercial purposes, other than using t													
\backslash	NAME OF COMMITTEE (In Full)													
	American Hospital Association	n PAC												
Α.	Full Name (Last, First, Middle Initial) Mr. Richard M Irwin Jr				Da	ate of	R	eceipt						
	Mailing Address 10000 West Colonial Drive				IV	06	1	15			о 11	Y		
	City	State	Zip Code		Т		act		1919282					
	Ocoee	FL	34761-3493		Am	nount	t of	Each F	Receipt th	is F	'eriod			
	FEC ID number of contributing federal political committee.	С						,		_	700			
	Name of Employer	Occupation	1											
Health Central Presider			nd Chief Executive Officer											
	Receipt For:	Agareaate	Year-to-Date ▼											
	Primary General	55 - 5		11										
	Other (specify)		700.00											
в.	Full Name (Last, First, Middle Initial) Mr. George Mikitarian Jr				Da	ate of	R	eceipt						
	Mailing Address 951 North Washington Aver	nue			IV	06	1	15))))	Y		
	City	State	Zip Code		Т	rans	act		1919283		_			
	Titusville	FL	32796-2163		Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С						л. I		_	250.	.00		
	Name of Employer	Occupation	1											
	Parrish Medical Center	Chief Exec	utive Officer											
	Receipt For:	Aggregate	Year-to-Date ▼											
	Primary General Other (specify) ▼		250.00											
<u>с</u> .	Full Name (Last, First, Middle Initial) Mr. James R Nathan				Da	ate of	R	eceipt						
	Mailing Address P O Box 2218				IV	о 06	1	15) 011	Y		
	City	State	Zip Code		T	rans	ac	tion ID :	1919302					
	Fort Myers	FL	33902-2218		An	nount	tof	Each F	Receipt th	is F	'eriod	_	_	
	FEC ID number of contributing federal political committee.	C			Amount of Each Receipt this Period									
	Name of Employer	Occupation	1											
	Lee Memorial Hospital	President a	and Chief Executive Officer											
	Receipt For:	Agareaate	Year-to-Date ▼											
	Primary General			11										
	Other (specify)		1000.00											
Γ		1			Г	-	-			—	1950.	00	٦	
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Associati	on PAC		
Full Name (Last, First, Middle Initial) Mr. Gregory P. Ohe Mailing Address 10000 West Colonial Driv City Ocoee FEC ID number of contributing federal political committee. Name of Employer Health Central Receipt For: Primary General Other (specify) ▼	State FL Occupation Senior Vice		Date of Receipt
Full Name (Last, First, Middle Initial) Mr. Zeff Ross Mailing Address 3501 Johnson Street City Hollywood FEC ID number of contributing federal political committee. Name of Employer Memorial Regional Hospital Receipt For: Primary General Other (specify) ▼		Zip Code 33021-5421 President and Chief Execut Year-to-Date ▼ 1000.00	Date of Receipt
Full Name (Last, First, Middle Initial) Ms. Deanna Schaeffer Mailing Address 400 N. Clyde Morris Blvc City Daytona Beach FEC ID number of contributing federal political committee. Name of Employer Halifax Health Medical Center of Dayto Receipt For: Primary General Other (specify) ▼	State FL Occupation CEO, Healt	Zip Code 32114-2731 hy Communities & GR Officer Year-to-Date ▼ 500.00	Date of Receipt
SUBTOTAL of Receipts This Page (optiona	al)		1750.00

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Stater or for commercial purposes, other than using the nar		
NAME OF COMMITTEE (In Full) American Hospital Association PA	С	
Chipley FEC ID number of contributing federal political committee. Name of Employer Northwest Florida Community Hospital Chipley Chi	State Zip Code FL 32428-0391 C C ccupation nief Financial Officer ggregate Year-to-Date ▼ 500.00	Date of Receipt
Full Name (Last, First, Middle Initial) B. Mr. Andrew Stein Mailing Address 3315 Harbour Place		Date of Receipt
Panama City	State Zip Code FL 32405-1638	Transaction ID : 19193064 Amount of Each Receipt this Period 250.00
Name of Employer Oo Bay Medical Center Bo	ccupation pard Trustee ggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) C. Mr. Daryl Tol		Date of Receipt
Mailing Address 701 West Plymouth Avenue	State Zip Code	06 / 15 / Y Y Y Y 06 15 2011 Transaction ID : 19193066
Deland FEC ID number of contributing federal political committee. Name of Employer Florida Hospital DeLand Pr Pagoint For:	FL 32720-3236 C Compation resident and Chief Executive Officer ggregate Year-to-Date ▼ 500.00	Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)	•	1250.00

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) American Hospital Association F	PAC	
Full Name (Last, First, Middle Initial) Mr. Steve Truluck Mailing Address 9798 NW CR 241 City Lake Butler FEC ID number of contributing federal political committee. Name of Employer Shands at the University of Florida Receipt For: Primary General Other (specify) ▼	State Zip Code FL 32054 C Occupation Director Saftey Security & Transportat Aggregate Year-to-Date ▼ 250.00	Date of Receipt
Full Name (Last, First, Middle Initial) B. Dr. Allen S Weiss Mailing Address 350 Seventh Street North City Naples FEC ID number of contributing federal political committee. Name of Employer NCH Downtown Naples Hospital Receipt For: Primary General Other (specify) ▼	State Zip Code FL 34102-5754 C Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 1000.00	Date of Receipt
Full Name (Last, First, Middle Initial) Mr. John F Wilbanks Mailing Address 800 Prudential Drive City Jacksonville FEC ID number of contributing federal political committee. Name of Employer Baptist Health Receipt For: Primary General Other (specify) ▼	State Zip Code FL 32207-8202 C Occupation Occupation Chief Operating Officer Aggregate Year-to-Date ▼ 500.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional)	•	1750.00

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	or commercial purposes, other than using													
	NAME OF COMMITTEE (In Full)													
	American Hospital Associatio	n PAC												
	Full Name (Last, First, Middle Initial) Ms. Eileen Dohmann				Date of Receipt									
	Mailing Address 6508 Flowerdew Hundred Ct.						· ·		N N	N/				
					0.6	ľ	15		20	11 _	Y			
(City	State Zip Code			Transaction ID : 19193261									
-	Centreville	VA	20120-3755		Amoun	t of	Each F	Receipt th	nis Pe	eriod				
	FEC ID number of contributing ederal political committee.	С					7			350.	00			
Ī	Name of Employer	Occupation	1											
	Mary Washington Hospital	Vice Presid	ent, Nursing											
I	Receipt For:	Aggregate	Year-to-Date V											
	Primary General Other (specify)		350.00											
			7 7 7											
	Full Name (Last, First, Middle Initial) . Ms. Amy Adome				Date o	f Re	ceint							
-	Mailing Address 1001 Sam Perry Blvd.				M M	/		D / Y	Y	Y	Y			
-							17		201	1				
	City Fredericksburg	State VA	Zip Code 22401-4453		Transaction ID : 19193332 Amount of Each Receipt this Period									
-		••	22401-4455	_	Amoun	t of	Each F	Receipt tr	nis Pe	eriod	_			
	FEC ID number of contributing ederal political committee.	С					y			350.0	00			
	Name of Employer	Occupation												
	Medicorp Health System	Vice Presid												
ł	Receipt For: Primary General	Aggregate	Year-to-Date ▼											
	Other (specify) ▼		350.00											
	Full Name (Last, First, Middle Initial) Mr. William D Jacobsen				Data o	f Re	coint							
-	Mailing Address 180 Floyd Avenue				Date of Receipt									
-						06 17 2011								
	City	State		Transaction ID : 19193334										
-	Rocky Mount	VA	24151-1318		Amoun	t of	Each F	Receipt th	nis Pe	eriod				
	FEC ID number of contributing federal political committee.						,	7	_	350.	00			
Ī	Name of Employer Occupation													
_	Carilion Franklin Memorial Hospital	rial Hospital Chief Executive Officer												
I		Aggregate												
	Primary General Other (specify) ▼		350.00											
SI	JBTOTAL of Receipts This Page (optional)	<u> </u>			-				1	050.0	0			

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) American Hospital Association	PAC		
Full Name (Last, First, Middle Initial) Mr. Scott A Miller Mailing Address 1521 Sea Breeze Tr City Virginia Beach FEC ID number of contributing federal political committee. Name of Employer Sentara Healthcare Receipt For: Primary General Other (specify) ▼	1	Zip Code 23452-4742 Ient Medical Affairs Year-to-Date ▼ 350.00	Date of Receipt
Full Name (Last, First, Middle Initial) Ms. Melina Dee Perdue Mailing Address 101 Elm Avenue SE City Roanoke FEC ID number of contributing federal political committee. Name of Employer Carilion Clinic Receipt For: Primary General Other (specify) ▼	State VA C Occupation Senior Vice Aggregate		Date of Receipt
Full Name (Last, First, Middle Initial) Ms. Melissa Smith Mailing Address 11325 Bright Pond Lane City Reston FEC ID number of contributing federal political committee. Name of Employer Mary Washington Healthcare Receipt For: Primary General Other (specify) ▼	State VA C Occupation Vice Presic Aggregate		Date of Receipt
SUBTOTAL of Receipts This Page (optional)			1050.00

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	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the		/ person for the purpose of soliciting contributions ttee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association	PAC	
Full Name (Last, First, Middle Initial) Mr. David L Ramsey Mailing Address P O Box 1547 City Charleston FEC ID number of contributing federal political committee. Name of Employer Charleston Area Medical Center Health Receipt For: Primary General Other (specify) ▼	State Zip Code WV 25326-1547 C Occupation President and Chief Executive Officer 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) Mr. Jeffrey Matton Mailing Address 1132 Nichols Ct. City Millersville FEC ID number of contributing federal political committee. Name of Employer Good Samaritan Hospital of Maryland Receipt For: Primary General Other (specify) ▼	State Zip Code MD 21108-2152 C Occupation Senior Vice President and COO Aggregate Year-to-Date ▼ 408.00	Date of Receipt
Full Name (Last, First, Middle Initial) Ms. Paula Minnehan Mailing Address 283 Gallopiny Hill Road City Hopkinton FEC ID number of contributing federal political committee. Name of Employer New Hampshire Hospital Association Receipt For: Primary General Other (specify)	State Zip Code NH 03229-3402 C Occupation V.P., Finance and Rural Hospitals 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)		922.50

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Any information copied from such Reports and Sta or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) American Hospital Association P	AC	
Full Name (Last, First, Middle Initial) Mr. Stephen M. Ahnen Mailing Address 125 Airport Road City Concord FEC ID number of contributing federal political committee. Name of Employer New Hampshire Hospital Association Receipt For: Primary General Other (specify) ▼	State Zip Code NH 03301-7300 C Occupation President and CEO 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) Ms. Pamala Maples Mailing Address P O Box 428 City Jackson FEC ID number of contributing federal political committee. Name of Employer St. John's Medical Center and Living C Receipt For: Primary General Other (specify) ▼	State Zip Code WY 83001-0428 C C Occupation C Chief Executive Officer Aggregate Year-to-Date ▼ 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) Mr. Paul Janke Mailing Address 1775 Thompson Road City Coos Bay FEC ID number of contributing federal political committee. Name of Employer Bay Area Hospital Receipt For: Primary General Other (specify) ▼	State OR Zip Code 97420-2125 C Occupation President and Chief Executive Officer 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)	•	791.64

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	ny information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions to solicit contributions from such committee.									
	NAME OF COMMITTEE (In Full) American Hospital Association	PAC											
Α.	Full Name (Last, First, Middle Initial) Mr. Dennis J Doran Mailing Address 701 South Dellwood Street	Date of Receipt											
	City Cambridge	State MN	Zip Code 55008-1920	Transaction ID : 19194572 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		250.00									
	Name of Employer	Occupation											
	Cambridge Medical Center	President											
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00										
В.	Full Name (Last, First, Middle Initial) Mr. Jeffrey Lockhart			Date of Receipt									
	Mailing Address 27 Raynes Neck Rd	06 07 2011											
	City	State	Zip Code	Transaction ID : 19194596									
	York	ME	03909-5036	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		500.00									
	Name of Employer	Occupation											
	York Hospital	Director Sur	gery, Special Procedures										
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 500.00										
c.	Full Name (Last, First, Middle Initial) Mr. Steven R Michaud			Date of Receipt									
	Mailing Address 33 Fuller Road			06 / D D / Y Y Y Y 2011									
	City Augusta	State ME	Zip Code 04330-4910	Transaction ID : 19194604									
			04330-4910	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С		250.00									
	Name of Employer	Occupation											
	Maine Hospital Association	President											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00										
s	UBTOTAL of Receipts This Page (optional)		•	1000.00									

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	ny information copied from such Reports an for commercial purposes, other than using																
	NAME OF COMMITTEE (In Full) American Hospital Associatio	n PAC															
Α.	Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins Mailing Address 6180 Lower Mountain Roa City New Hope FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify)	State PA C Occupation Sr. VP., He	Zip Code 18938-5760 alth Economics Year-to-Date ▼ 217.93			sact	24	4 : 191949 2	his Period	ý 5.00							
В.	Full Name (Last, First, Middle Initial) 3. Ms. Deborah Zastocki Mailing Address 97 West Parkway						Date of Receipt										
	City Pompton Plains FEC ID number of contributing federal political committee. Name of Employer Chilton Memorial Hospital Receipt For: Primary General Other (specify) ▼		Zip Code 07444-1647 Ind Chief Executive Officer Year-to-Date ▼ 500.00					: 1919494 Receipt tl	40 his Period 500	_							
C.	Full Name (Last, First, Middle Initial) Ms. Laura D. Appel Mailing Address 224 Vicksburg City Lansing FEC ID number of contributing federal political committee. Name of Employer Michigan Health & Hospital Association Receipt For: Primary General Other (specify)		Zip Code 48917-9607 lent, Federal Policy & Advoc Year-to-Date ▼ 500.00			sact	tion ID	3 : 191949 4	his Period								
s	UBTOTAL of Receipts This Page (optional)			•					1005	.00							

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statement or for commercial purposes, other than using the name a		
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Bassint For:	49079-0209	Date of Receipt 06 23 2011 Transaction ID : 19194947 Amount of Each Receipt this Period 275.00
Primary General Other (specify) ▼	275.00	
Pagaint For:	48377-2920 ation resident, Treasury gate Year-to-Date ▼	Date of Receipt 06 23 2011 Transaction ID : 19194949 Amount of Each Receipt this Period 250.00
C. Other (specify) ▼ Full Name (Last, First, Middle Initial) Mailing Address 27 Oxford Road City Grosse Pointe Shores MI	250.00 e Zip Code 48236-1835	Date of Receipt 06 23 2011 Transaction ID : 19194950
FEC ID number of contributing federal political committee. Name of Employer Occupation Oakwood Healthcare, Inc. Admini	ation	Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)	•	775.00

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	ny information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association	PAC		
Α.	Mill Name (Last, First, Middle Initial) Mr. James M Connelly Mailing Address 7123 Kennowy Court			Date of Receipt
City West Bloomfield		State MI	Zip Code 48322-3276	06 23 2011 Transaction ID : 19194951 Amount of Each Receipt this Revised
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
	Name of Employer Henry Ford Health System Receipt For: Primary General Other (specify)		/ice President Finance and A Year-to-Date ▼ 250.00	
в.	Full Name (Last, First, Middle Initial) Mr. William Conway Mailing Address 998 Brookwood St.	Date of Receipt		
	City Birmingham	State MI	Zip Code 48009-1102	06 23 2011 Transaction ID : 19194952 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Henry Ford Health System	Occupation Administrat		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
c.	Full Name (Last, First, Middle Initial) Mr Van Conway			Date of Receipt
	Mailing Address 401 S Old Woodward, Suite 3	40 State	Zip Code	06 / 23 / 2011 Transaction ID : 19194953
	Birmingham	MI	48009-6621	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		2100.00
	Name of Employer Beaumont Health System	Occupation Trustee	1	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2100.00	
s	SUBTOTAL of Receipts This Page (optional)			2600.00

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS		ED RECEIPTS for each category of the Detailed Summary Page			
				erson for the purpose of soliciting contributions to solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full) American Hospital Association	PAC			
Α.	Full Name (Last, First, Middle Initial) Ms. Beverly Erickson Mailing Address 1841 Maryland Blvd City	State	Zip Code	Date of Receipt 06 23 2011 Transaction ID : 19194956	
	Birmingham FEC ID number of contributing federal political committee.	С	48009-4119	Amount of Each Receipt this Period	
	Name of Employer Trinity Health Receipt For: Primary General Other (specify) ▼	Occupation Vice Presid Aggregate]	
В.	Full Name (Last, First, Middle Initial) Mr. Garry C Faja Mailing Address 400 West Russell Street	Date of Receipt			
	City Saline FEC ID number of contributing	State MI	Zip Code 48176-1183	06 23 2011 Transaction ID : 19194958 Amount of Each Receipt this Period 1000.00	
	federal political committee. Name of Employer St. Joseph Mercy Saline Hospital Receipt For:	Occupation President a	nd Chief Executive Officer		
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00		
c.				Date of Receipt	
	Mailing Address 7463 Cottage Oak Drive	State	Zip Code	06 23 2011 Transaction ID : 19194959	
	Portage FEC ID number of contributing federal political committee.	С	49024-2352	Amount of Each Receipt this Period	
	Name of Employer Bronson Healthcare Group Inc	Occupation Senior Vice	President Legal and Legisl		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00]	
s	UBTOTAL of Receipts This Page (optional)			1575.00	

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

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(check only one)

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) American Hospital Association	PAC	
Full Name (Last, First, Middle Initial) Ms. Alice Gerard Mailing Address 3231 Bangor Rd. City Bay City FEC ID number of contributing federal political committee. Name of Employer Bay Regional Medical Center Receipt For: Primary General Other (specify) ▼	State Zip Code MI 48706-1852 C Occupation Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 990.00	Date of Receipt
Full Name (Last, First, Middle Initial) Mr. Peter Graham Mailing Address 2233 Quarry Road City East Lansing FEC ID number of contributing federal political committee. Name of Employer Sparrow Hospital Receipt For: Primary General Other (specify) ▼	State Zip Code MI 48823-7234 C Image: Comparison of the state of the	Date of Receipt
Full Name (Last, First, Middle Initial) Mr. John T. Hayden Mailing Address 5864 Blue Jay Drive City Kalamazoo FEC ID number of contributing federal political committee. Name of Employer Bronson Healthcare Group Inc Receipt For: Primary General Other (specify)	State Zip Code MI 49009-0800 C Occupation Occupation Vice President Human Resources Aggregate Year-to-Date ▼ 325.00	Date of Receipt 06 23 2011 Transaction ID : 19194964 Amount of Each Receipt this Period 325.00
SUBTOTAL of Receipts This Page (optional)		1690.00

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

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the n		
NAME OF COMMITTEE (In Full) American Hospital Association Pa	AC	
	State Zip Code MI 48070-1701 C Occupation Chief Medical Officer Aggregate Year-to-Date ▼ 250.00	Date of Receipt 06 / 23 / 2011 Transaction ID : 19194965 Amount of Each Receipt this Period 250.00
Decument Legith System	State Zip Code MI 48323-1832 C Occupation Chairman of Orthopaedic Surgery Aggregate Year-to-Date ▼ 500.00	Date of Receipt 06 / 23 / 2011 Transaction ID : 19194967 Amount of Each Receipt this Period 500.00
	State MI Zip Code MI 48009-1027 C C Occupation C Senior Vice President and Chief Financ Aggregate Year-to-Date ▼ 250.00	Date of Receipt 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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SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	5	

Use separate schedule(s) for each category of the

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page											
Any information copied from such Reports and Sta or for commercial purposes, other than using the												
NAME OF COMMITTEE (In Full) American Hospital Association P												
Full Name (Last, First, Middle Initial) Ms. Donna Hoban Mailing Address 81 Handy Road City Grosse Pointe Farms FEC ID number of contributing federal political committee. Name of Employer Beaumont Health System Receipt For: Primary General Other (specify) ▼	State Zip Code MI 48236-3808 C Occupation Senior Vice President Aggregate Year-to-Date ▼ 250.00	Date of Receipt										
Full Name (Last, First, Middle Initial) B. Mr. Robert Hoban Mailing Address 911 Balfour	Date of Receipt											
City Grosse Pointe Park	State Zip Code MI 48230-1815	Transaction ID : 19194970 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee. Name of Employer St. John Providence Health System Receipt For: Primary General Other (specify) ▼	Occupation Sr. Vice President Aggregate Year-to-Date ▼ 250.00											
Full Name (Last, First, Middle Initial) C. Mr. Charles Hoffman		Date of Receipt										
Mailing Address 2440 Antietam Drive		06 23 2011										
City Ann Arbor	StateZip CodeMI48105-1471	Transaction ID : 19194971 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C	250.00										
Name of Employer St. Joseph Mercy Livingston Hospital Receipt For: Primary Other (specify) ▼	Occupation Vice President Financial Services and Aggregate Year-to-Date ▼ 250.00	1										
SUBTOTAL of Receipts This Page (optional)		750.00										

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

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			for each category of the Detailed Summary Page		< 11a 13		11b 14	11c		12 16	1 17	7						
	y information copied from such Reports and St. for commercial purposes, other than using the				for the		pose of	f soliciting	g con	ntributi	ons							
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) American Hospital Association F	PAC																
Α.	Full Name (Last, First, Middle Initial) Victoria Hollingsworth Mailing Address 1255 Concord				Date o	_	eceipt 23		Y 20	y)11	Y							
	City Rochester Hills	State MI	Zip Code 48309-2859		Transaction ID : 19194972 Amount of Each Receipt this Period													
	FEC ID number of contributing federal political committee.	С							IS PE	s Period 375.00								
	Name of Employer Beaumont Health System Receipt For: Primary General Other (specify) ▼	Occupation Vice Preside Aggregate																
в.	Full Name (Last, First, Middle Initial) Mr. David B. Jahn Mailing Address 3341 Lakeshore Drive	Date of Receipt 06 23 2011																
	City Sault Sainte Marie FEC ID number of contributing federal political committee.	State MI	Zip Code 49783-1111		Trans		ion ID :	1919497 Receipt th	4		00]						
	Name of Employer War Memorial Hospital	Occupation Chief Execu										-						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00															
C.	Full Name (Last, First, Middle Initial) Mr. John L. Jones Jr.				Date o	f Re	eceipt											
	Mailing Address 1814 Hazel Avenue				м м 06	1	23		20 ²	Y 11	Y							
	City Kalamazoo	State MI	Zip Code 49008-2844		Trans		ion ID :	: 1919497 Receipt th	75									
	FEC ID number of contributing federal political committee.	С					,	7		275.	00							
	Name of Employer	Occupation																
	Bronson Healthcare Group Inc Receipt For:	Vice Presid																
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 275.00															
s	UBTOTAL of Receipts This Page (optional)			· •			7	7	1	1150.0	0]						
т	OTAL This Period (last page this line number o	nly)		. 🕨			7	- 7										

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Stateme or for commercial purposes, other than using the name		
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
St. Clair M FEC ID number of contributing federal political committee. C Name of Employer Occursion St. Joseph Mercy Port Huron Pres	ate Zip Code I 48079-3570 upation ident & CEO regate Year-to-Date ▼ 475.00	Date of Receipt
Full Name (Last, First, Middle Initial) Ms. Cheryl Knapp Mailing Address 7183 Cross Country Drive		Date of Receipt
Kalamazoo Mi FEC ID number of contributing federal political committee. C Name of Employer Bronson Healthcare Group Inc Occur Vice	ate Zip Code I 49009-7588 upation President regate Year-to-Date ▼ 225.00	Transaction ID : 19194978 Amount of Each Receipt this Period 225.00
Kalamazoo M FEC ID number of contributing federal political committee. C Name of Employer Occu Bronson Healthcare Group Inc Bassint Equ	ate Zip Code II 49006-4400 upation for Vice President Medical Affairs regate Year-to-Date ▼ 325.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional)	▶	1025.00

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

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) American Hospital Association F	PAC		
Full Name (Last, First, Middle Initial) Dr. William J Mayer MD Mailing Address 3521 Whistling Ln. City Portage FEC ID number of contributing federal political committee. Name of Employer Bronson Healthcare Group Inc Receipt For: Primary General Other (specify) ▼		Zip Code 49024-5513 ent Medical Staff Clinical 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 Plainwell FEC ID number of contributing federal political committee. Name of Employer Bronson Healthcare Group Inc Receipt For: Primary General Other (specify) ▼		Zip Code 49080-9265 ent, Finance 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) Dr Duane Mezwa Mailing Address 3250 Wauil Ridge Circle City Rochester Hills FEC ID number of contributing federal political committee. Name of Employer Beaumont Health System Receipt For: Primary General Other (specify) ▼		Zip Code 48309 of Diagnostic Radiology 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)......

Use separate schedule(s) for each category of the

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) American Hospital Association F	PAC	
Full Name (Last, First, Middle Initial) Dr. Paul Misch Mailing Address 1618 Stony Creek Drive City Rochester FEC ID number of contributing federal political committee. Name of Employer Beaumont Hospital - Troy Receipt For: Primary General Other (specify) ▼	State MI Zip Code 48307-1783 C C Occupation C Senior Vice President and Medical Dire Aggregate Year-to-Date ▼ 375.00	Date of Receipt
Full Name (Last, First, Middle Initial) Ms. Denise Neely RN Mailing Address 11808 S 26th Street City Vicksburg FEC ID number of contributing federal political committee. Name of Employer Bronson Healthcare Group Inc Receipt For: Primary General Other (specify) ▼	State Zip Code MI 49097-8366 C Occupation Director of Pain Management Aggregate Year-to-Date ▼ Aggregate Year-to-Date 225.00	Date of Receipt
Full Name (Last, First, Middle Initial) Mr. Charles Nelson Mailing Address 205 Osceola Street City Laurium FEC ID number of contributing federal political committee. Name of Employer Aspirus Keweenaw Hospital Receipt For: Primary General Other (specify) ▼	State Zip Code MI 49913-2134 C Occupation Occupation Chief Executive Officer Aggregate Year-to-Date ▼ 250.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional)		850.00

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

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		for each category of th Detailed Summary Pag		<11a 13		1b 4	11c	12 16	17	
Any information copied from such Reports and Sta or for commercial purposes, other than using the										
American Hospital Association P	PAC									
Full Name (Last, First, Middle Initial) Dr Anthony Oliva Mailing Address 10621 Bear Lake Trail City Portage FEC ID number of contributing federal political committee. Name of Employer Borgess Health Receipt For: Primary General Other (specify) ▼	State MI Occupation Chief Medic Aggregate		.00		/ actior	23 n ID :	/ Y 1919499 eceipt th	is Period		_
Full Name (Last, First, Middle Initial) Mr. Christopher Palazzolo Mailing Address 3260 Charlwood Dr. City Rochester Hills FEC ID number of contributing federal political committee. Name of Employer Genesys Health System Receipt For: Primary General Other (specify) ▼	State MI Occupation Chief Finance Aggregate		00		/ actior	23 1 ID :	/ Y 19194994 eceipt th	is Period	y 1 0.00	-
Full Name (Last, First, Middle Initial) Mr. Steve Paulus Mailing Address 17020 Carriage Way City Northville FEC ID number of contributing federal political committee. Name of Employer St. Joseph Mercy Hospital Receipt For: Primary General Other (specify) ▼	State MI Occupation Vice Preside Aggregate		.00		action	23 n ID :	/ Y 1919499 eceipt th	is Period		_
SUBTOTAL of Receipts This Page (optional)					- 7		· · ·	750	0.00	-

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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•••			Detailed Summary Page		X 11a		11b	11c	1	12	
					13		14	15		16	17
	y information copied from such Reports and a for commercial purposes, other than using th										
\backslash	NAME OF COMMITTEE (In Full)										
	American Hospital Association	PAC									
Α.	Full Name (Last, First, Middle Initial) Ms. Michelle Serbenski Pelletier				Date	of F	Receipt				
	Mailing Address 51255 38th Street				м 06	VI	/ 2		Y 20 ²		Y
	City	State	Zip Code		Tran	sac	ction ID	: 1919499			
	Paw Paw	MI	49079-8315		Amou	nt o	of Each	Receipt th	is Pe	əriod	
	FEC ID number of contributing federal political committee.	С					7			225.	00
	Name of Employer	Occupation	1								
	Bronson Healthcare Group Inc	Vice Presid	lent								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General	33 - 3		11.							
	Other (specify)		225.00								
в.	Full Name (Last, First, Middle Initial) Ms. Annette S Phillips	·			Date	of F	Receipt				
	Mailing Address 718 North Macomb Street				06	VI	/ 2		201		Y
	City	State	Zip Code		Tran	sac		: 1919499		_	
	Monroe	MI	48162-7815		Amou	nt o	of Each	Receipt th	nis Pe	əriod	
	FEC ID number of contributing federal political committee.	С					7		_	500.0	00
	Name of Employer	Occupation	1								
	Mercy Memorial Hospital System	President a	nd Chief Executive Officer								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00								
<u>с</u> .	Full Name (Last, First, Middle Initial) Mr. John J. Polanski	I			Date	of F	Receipt				
	Mailing Address 32551 Myrna				M 06	M	/ 2	_	201		Y
	City	State	Zip Code		Trar	sac	ction ID	: 1919499			
	Livonia	MI	48154-2911		Amou	nt o	of Each	Receipt th	nis Pe	əriod	
	FEC ID number of contributing federal political committee.	С					7			250.	00
	Name of Employer	Occupation	1								
	Henry Ford Health System	Group Vice	President								
	Receipt For:		Year-to-Date ▼	\neg							
	Primary General	, .99109010									
	Other (specify)		250.00								
s	UBTOTAL of Receipts This Page (optional)			•				1.1		975.0	00

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

Use separate schedule(s)

FOR LINE NUMBER:

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TIEWIZED RECEIPTS		Detailed Summary Page		11a 13	F	11b		11c 15		12 16	Γ	17
Any information copied from such Reports an or for commercial purposes, other than using	L ay not be sold or used by any p uddress of any political committed	erson f e to so	for the	pui pui	rpose	of so s fro	oliciting		ntribu	tion tee.	าร	
NAME OF COMMITTEE (In Full) American Hospital Association	on PAC											
A. Full Name (Last, First, Middle Initial) Mailing Address 264 Chesterfield Avenue	7. 0.1		Date o		2	23	/ Y	20	ү 011	Y]	
City Birmingham	State MI	Zip Code 48009-1285	Transaction ID : 19195000 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C			Amoun	it of	, Each	n Red	ceipt th	is P	250)
Name of Employer	Occupation	l										
Henry Ford Health System	Physician/H	lospital Administration										
Receipt For: Primary General Other (specify) v	Aggregate	Year-to-Date ▼ 250.00]									
Full Name (Last, First, Middle Initial) B. Dr. Larry Rawsthorne MD				Date o	of R	eceipt						
Mailing Address 1215 East Michigan Aven	ue			M M		2	D 23	/ Y) 11	Y]
City	State	Zip Code		Trans	sact	tion ID	D:19	919500	3		_	
Lansing	MI	48912-1811		Amoun	nt of	Each	Red	ceipt th	is P	'eriod		
FEC ID number of contributing federal political committee.	С					7		7	_	375	.00	
Name of Employer Sparrow Health System	Occupation Senior Vice	President Medical Affairs										
Receipt For: Primary General Other (specify) V	Aggregate	Year-to-Date ▼ 375.00]									
Full Name (Last, First, Middle Initial) C. Ms. Sue Reinoehl				Date o	of R	eceipt						
Mailing Address 8804 Weeping Pine Ln				M M	1		23	/ Y) 11	Y	1
City Kalamazoo	State MI	Zip Code 49009-6733						919500 ceipt th		eriod		
FEC ID number of contributing federal political committee.	С					7		7	_	250).00)
Name of Employer	Occupation	1										
Bronson Healthcare Group Inc	Vice Presic	lent										
Receipt For:	Aggregate	Year-to-Date V										
Other (specify)		250.00]									
SUBTOTAL of Receipts This Page (optional)							-	_	875	.00	Π

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

Use separate schedule(s) for each category of the

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
				erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association	PAC		
A. Full Name (Last, First, Middle Initial) Ms. Donna Roach Mailing Address 2662 Innisbrook Drive				Date of Receipt
	City Portage	State MI	Zip Code 49024-7872	Transaction ID : 19195005 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		300.00
	Name of Employer Bronson Healthcare Group Inc Receipt For: Primary General Other (specify)	Occupation CIO Aggregate	Year-to-Date ▼ 300.00]
в.	Full Name (Last, First, Middle Initial) Mr. Joseph Ruth Mailing Address 6480 Kernwood			Date of Receipt
	City	State	Zip Code	06 23 2011 Transaction ID : 19195007
	East Lansing FEC ID number of contributing federal political committee.	С	48823-9432	Amount of Each Receipt this Period
	Name of Employer Sparrow Hospital Receipt For:		ice President and Chief Ope	
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00]
с.	Full Name (Last, First, Middle Initial) Mr. James J Sexton			Date of Receipt
	Mailing Address 27100 Loma Court			06 23 2011
	City Grosse lle	State MI	Zip Code 48138-2170	Transaction ID : 19195011 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Henry Ford Wyandotte Hospital	Occupation President a	nd Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]
s	SUBTOTAL of Receipts This Page (optional)			850.00

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

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FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name an		
American Hospital Association PAC		
Descript For:	48170-3099	Date of Receipt 06 23 2011 Transaction ID : 19195012 Amount of Each Receipt this Period 250.00
Popoint For:	48377-2920	Date of Receipt 06 23 2011 Transaction ID : 19195016 Amount of Each Receipt this Period 500.00
Papaint For:	49007-5295	Date of Receipt 06 / 23 / 2011 Transaction ID : 19195017 Amount of Each Receipt this Period 375.00
SUBTOTAL of Receipts This Page (optional)	•	1125.00

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•••			Detailed Summary Page		11a		11b	11c		12	
					13		14	15		16	17
	y information copied from such Reports and s for commercial purposes, other than using the										
	NAME OF COMMITTEE (In Full)										
$ \rangle$	American Hospital Association	PAC									
/	Full Name (Last, First, Middle Initial)										
Α.	Mr. Robert S. Taubman				Date o	f R	eceipt				
	Mailing Address 200 East Long Lake Road				M M	1	/ D	D / Y	Y	Y	Y
					06		23			011	
	City Bloomfield Hills	State MI	Zip Code 48304-2314					1919501	-		
		IVII	40504-2514		Amoun	t of	Each F	Receipt th	nis F	'eriod	
	FEC ID number of contributing federal political committee.	С					,		_	500	.00
	Name of Employer	Occupation		_							
	Taubman Center/William Beaumont Hospit	Trustee									
	Receipt For:	Aggregate	Year-to-Date 🔻								
	Primary General		500.00	1							
	Other (specify)		7 7 7	1							
	Full Name (Last, First, Middle Initial)										
Β.	Mr. Randall J Wagner				Date o	f R	eceipt				
	Mailing Address 4691 Old Grand River Tr				м м 06	1	23			011	Y
	City	State	Zip Code		Trans	act	tion ID :	1919502			
	Ada	MI	49301-8614	/	Amoun	t of	Each F	Receipt th	nis F	Period	
	FEC ID number of contributing federal political committee.	С					7	9	_	250	.00
	Name of Employer	Occupation									
	Saint Mary's Health Care	COO									
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		250.00								
<u>с</u> .	Full Name (Last, First, Middle Initial) Mr. Sam R. Watson				Date o	f R	eceipt				
	Mailing Address 1240 E. Mill Street				м м 06		23			011	Y
	City	State	Zip Code		Trans	sac	tion ID	: 1919502	23		
	Hastings	MI	49058-9185		Amoun	t of	Each F	Receipt th	nis F	Period	
	FEC ID number of contributing federal political committee.	С					- -	5		750	.00
	Name of Employer	Occupation	I	\neg							
	Michigan Health & Hospital Association	Associate E	Executive Director								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General		750.00	1							
	Other (specify)		730.00								
					_	-	_	_	_	_	_
s	UBTOTAL of Receipts This Page (optional)							7		1500.	00

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

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) American Hospital Association F	PAC	
Full Name (Last, First, Middle Initial) Mr. Mike Way Mailing Address 7049 Turkey Glen Trail City Kalamazoo FEC ID number of contributing federal political committee. Name of Employer Bronson Healthcare Group Inc Receipt For: Primary General Other (specify) ▼	State MI Zip Code 49009-7031 C Occupation Occupation Vice President Aggregate Year-to-Date ▼ 250.00	Date of Receipt
Full Name (Last, First, Middle Initial) Mr. Jack Weiner Mailing Address 44405 Woodward Avenue City Pontiac FEC ID number of contributing federal political committee. Name of Employer St. Joseph Mercy Oakland Receipt For: Primary General Other (specify) ▼	State Zip Code MI 48341-5023 C Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 500.00	Date of Receipt
Full Name (Last, First, Middle Initial) Dr. Michael C. Wiemann M.D. Mailing Address 5748 Heatherfield Court City West Bloomfield FEC ID number of contributing federal political committee. Name of Employer St. John Providence Health System Receipt For: Primary General Other (specify) ▼	State Zip Code MI 48322-1333 C Occupation Occupation President Aggregate Year-to-Date ▼ 250.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional)		▶ 1000.00

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

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Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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Any informa	tion copied from such Reports and S	tatements ma	av not be sold or used by any no	erson	13 for the	DUrr	14	15 soliciting	contrik		17 15				
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\	F COMMITTEE (In Full)														
Ameri	can Hospital Association F	PAC													
	e (Last, First, Middle Initial) wrence Wilhite				Date of	f Re	ceint								
	ddress 1215 East Michigan Avenue			_				/ .	- Y - Y	Y					
					06 23 2011										
City		State MI	Zip Code 48912-1811		Transaction ID : 19195028										
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Mailing A	ddress 4094 Breakwater Dr.			M M		D D	/ Y	Y Y	Y	1					
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'	mary General	Aggregate	Year-to-Date ▼												
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	ddress 5532 Lakeview Dr.				м м 06	/	23	/ Y	y y 2011	Y]				
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Bloomfie	ld	MI	48302-2728	_	Amount	t of	Each R	eceipt thi	is Peric	d					
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	ner (specify) ▼		500.00												
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117

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statem or for commercial purposes, other than using the name		
NAME OF COMMITTEE (In Full) American Hospital Association PAC	;	
Rochester M FEC ID number of contributing federal political committee. C Name of Employer Occ Southcoast Hospitals Group Press	tate Zip Code MA 02770-4012 cupation sident & CEO gregate Year-to-Date ▼ 375.00	Date of Receipt
Boston M FEC ID number of contributing federal political committee. C Name of Employer Occ Hebrew Rehabilitation Center Press Receipt For: Agg Primary General Other (specify) ▼ C	tate Zip Code IA 02131-1011 cupation sident gregate Year-to-Date ▼ 262.50	Date of Receipt
Kalamazoo M FEC ID number of contributing federal political committee. C Name of Employer Occ Bronson Healthcare Group Inc Vice	tate Zip Code MI 49009-8961 cupation e President of Nursing gregate Year-to-Date ▼ 275.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional)		912.50

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the		y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association I	PAC	
Full Name (Last, First, Middle Initial) Mr. Joseph L Woodin Mailing Address P O Box 2000 City Randolph FEC ID number of contributing federal political committee. Name of Employer Gifford Medical Center Receipt For: Primary General Other (specify) ▼	State Zip Code VT 05060-2000 C Occupation Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 350.00	Date of Receipt Date of Receipt Control of the second se
Full Name (Last, First, Middle Initial) Ms Karen Perdue Mailing Address 943 West 6th Avenue, Suite 12 City Anchorage FEC ID number of contributing federal political committee. Name of Employer Alaska State Hospital and Nursing Home Receipt For: Primary General Other (specify) ▼	20 State Zip Code AK 99501-2033 C Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 1000.00	Date of Receipt
Full Name (Last, First, Middle Initial) Mr. David Ross Mailing Address 172 Kinsley Street City Nashua FEC ID number of contributing federal political committee. Name of Employer St. Joseph Hospital Receipt For: Primary General Other (specify)	State Zip Code NH 03060-3648 C Occupation Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 500.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional)		► 1850.00

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

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	y information copied from such Reports an for commercial purposes, other than using										
$\left \right\rangle$	NAME OF COMMITTEE (In Full)										
	American Hospital Associatio	n PAC									
Α.	Full Name (Last, First, Middle Initial) Ms. Nancy A. Formella				Date o	f R	eceipt				
	Mailing Address One Medical Center Drive				M M	1	21		2011		
	City	State	Zip Code		Trans	sac	tion ID	: 1919585	0		
	Lebanon	NH	03756-1000		Amoun	t of	Each I	Receipt th	is Perio	bd	
	FEC ID number of contributing federal political committee.	С					7		3	50.0	00
	Name of Employer	Occupation	1	-							
	Dartmouth-Hitchcock Medical Center	President									
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General			11.							
	Other (specify)		350.00								
в.	Full Name (Last, First, Middle Initial) Mr. Gregory J Walker				Date o	f R	eceipt				
	Mailing Address 789 Central Avenue				M M	1	21		2011	Y	
	City	State	Zip Code		Trans	sact	tion ID :	: 1919585	1		
	Dover	NH	03820-2526		Amoun	t of	Each I	Receipt th	is Peric	bd	
	FEC ID number of contributing federal political committee.	C					7	7	35	50.0	0
	Name of Employer	Occupation	1								
	Wentworth-Douglass Hospital	Chief Execu	utive Officer								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00								
<u> </u>	Full Name (Last, First, Middle Initial) Mr. John W Bluford				Date o	f R	eceipt				
	Mailing Address 2301 Holmes Street				м м 06		22		2011	- 1	
	City	State	Zip Code		Trans	sac	tion ID	: 1919586	7		
	Kansas City	MO	64108-2640		Amoun	it of	Each I	Receipt th	is Peric	bd	
	FEC ID number of contributing federal political committee.	С					л. 1		10	00.0	00
	Name of Employer	Occupation	1								
	Truman Medical Centers	President a	and Chief Executive Officer								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General	33 - 3 - 10									
	Other (specify)		1000.00								
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Any information copied from such Reports an or for commercial purposes, other than using									
NAME OF COMMITTEE (In Full) American Hospital Association	on PAC								
A. Full Name (Last, First, Middle Initial) Mr. Ronald B Ashworth Mailing Address 14528 South Outer 40, St	uite 100		D	ate of M M M	f Re	· ·	D / Y	2011	Y
City Chesterfield	State MO	Zip Code 63017-5743					: 191958 Receipt tl	68	d
FEC ID number of contributing federal political committee.	С					,	7	25	0.00
Name of Employer Mercy Health Receipt For:	Occupation Chair								
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00							
B. Full Name (Last, First, Middle Initial) Ms. Liza Jensen Mailing Address 8109 Fredericksburg Rd			D	ate of	f Re		D / Y	Y Y	Y
City	State	Zip Code		06 Trans	acti	22		_2011 7 0	
San Antonio FEC ID number of contributing federal political committee.	ТХ	78229-3311	A	mount	t of	Each I	Receipt tl		d 0.00
Name of Employer Methodist Specialty and Transplant Hos	Occupation Executive D) Director, Department of Psyc							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00]						
Full Name (Last, First, Middle Initial) C. Dr. Stuart Buttlaire			D	ate of	f Re	ceipt			
Mailing Address 1950 Franklin Street 4th Floor City	State	Zip Code		м м 06	/	23	3	2011	Y
Oakland	CA	94612-5190					: 191958 Receipt ti		d
FEC ID number of contributing federal political committee.	С					,		35	0.00
Name of Employer Kaiser Foundation Hospitals	Occupation Regional D	ir of Inpatient Psychiatry							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00							
SUBTOTAL of Receipts This Page (optional)					7	7	950	0.00

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X 11a 11b 12 11c 14 13 15 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms. Debra A Flores Α. Date of Receipt Mailing Address 3000 Coliseum Drive M M / 2011 06 23 City Zip Code State Transaction ID: 19195908 VA Hampton 23666-5963 Amount of Each Receipt this Period FEC ID number of contributing С 350.00 federal political committee. Name of Employer Occupation Sentara CarePlex Hospital President and Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Dougal Hewitt Date of Receipt Mailing Address 8260 Atlee Road M M 06 23 2011 City State Zip Code Transaction ID: 19195910 Mechanicsville VA 23116-1844 Amount of Each Receipt this Period FEC ID number of contributing С 350.00 federal political committee. Name of Employer Occupation Memorial Regional Medical Center Vice President Receipt For: Aggregate Year-to-Date ▼ Primarv General 350.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Ms. Shirley Holland Date of Receipt Mailing Address 161 Lila Lane M = M 06 23 2011 City Zip Code State Transaction ID: 19195911 **Boones Mill** VA 24065-3749 Amount of Each Receipt this Period FEC ID number of contributing 350.00 С federal political committee. Name of Employer Occupation Vice President/Strategic Development **Carilion Clinic** Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 1050.00 SUBTOTAL of Receipts This Page (optional).....

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Use separate schedule(s) for each category of the

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
				erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association	n PAC		
Α.	Full Name (Last, First, Middle Initial) Mr. David Jenkins Mailing Address 2620 Pleasant Run Drive			Date of Receipt
	City Richmond	State VA	Zip Code 23233-2114	06 23 2011 Transaction ID : 19195912 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		200.00
	Name of Employer Virginia Hospital & Healthcare Associa	Occupation Director of	Human Services	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00]
в.	Full Name (Last, First, Middle Initial) Mr. Randall L Kelley			Date of Receipt
	Mailing Address P O Box 6000			06 23 2011
	City	State VA	Zip Code 20177-0600	Transaction ID : 19195925
	Leesburg FEC ID number of contributing federal political committee.	C	20177-0600	Amount of Each Receipt this Period
	Name of Employer Inova Loudoun Hospital	Occupation Chief Exect		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00]
с.	Full Name (Last, First, Middle Initial) Ms. Genemarie P McGee			Date of Receipt
	Mailing Address 3728 Ballahack Road			06 23 2011
	City Chesapeake	State VA	Zip Code 23322-3201	Transaction ID : 19195927 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		350.00
	Name of Employer	Occupation		
	Sentara Leigh Hospital Receipt For:	Vice Presic		
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00]
s	UBTOTAL of Receipts This Page (optional)			900.00

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11	EIMIZED RECEIPTS		for each category of the Detailed Summary Page		_		11b	11c		12	<u> </u>
	ny information copied from such Reports and										
or	for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American Hospital Association		ddress of any political committe	e to so	olicit co	ontri	butions	from suc	h co	ommitt	ee.
Α.	Full Name (Last, First, Middle Initial) Dr. Archie McPherson MD Mailing Address 1701 North George Mason	Drive			Date c		eceipt	D / Y	Y Y	Y	Y
	City	State VA	Zip Code 22205-3698	_				: 1919592	28	011	
	Arlington FEC ID number of contributing federal political committee.	C			Amour	nt of	f Each I	Receipt tl	nis F	Period 350	.00
	Name of Employer Virginia Hospital Center - Arlington Receipt For:		ent and Chief Medical Offic								
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00]							
В.	Full Name (Last, First, Middle Initial) Mr. Olas A Hubbs III Mailing Address 500 London Avenue				Date c	of R	eceipt	D / Y	Y	Ŷ	Ŷ
	City	State	Zip Code	_	06 Trans	sact	24 tion ID :	⊧ : 1919790		011	
	Marysville FEC ID number of contributing	он	43040-5512	_	Amour	nt of	f Each I	Receipt tl	nis F	Period 500.	.00
	federal political committee. Name of Employer Memorial Hospital of Union County	Occupation				Ì	7		_		
	Receipt For: Primary General Other (specify) ▼		nd Chief Executive Officer Year-to-Date ▼ 500.00]							
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Dale E Thornton				Date c	of R	eceipt				
	Mailing Address 45 St Lawrence Drive				06		/ D 24			011	Y
	City Tiffin	State OH	Zip Code 44883-8310					: 191986 : Receipt tl		Period	
	FEC ID number of contributing federal political committee.	С					7			1250	.00
	Name of Employer Mercy Tiffin Hospital	Occupation President a	nd Chief Executive Officer								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1250.00]							
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NAME OF COMMITTEE (In Full) American Hospital Association									
Full Name (Last, First, Middle Initial) Mr. R. Reed Fraley Mailing Address 257 Clouse Lane City Granville FEC ID number of contributing federal political committee. Name of Employer Ohio Hospital Association Receipt For: Primary General Other (specify) ▼	State Zip Code OH 43023-142 C Occupation Senior Vice President Aggregate Year-to-Date ▼		T		/ actic	24	1919863	2011 39 nis Period 500	
Full Name (Last, First, Middle Initial) Mr. Raymond M Chorey Mailing Address P O Box 610 City Cambridge FEC ID number of contributing federal political committee. Name of Employer Southeastern Ohio Regional Medical Cen Receipt For: Primary General Other (specify) ▼	State Zip Code OH 43725-061 C Occupation President and Chief Execut Aggregate Year-to-Date ▼		T		/ nctio	24	1919865	2011 50 nis Period 250	_
Full Name (Last, First, Middle Initial) Mr. William Annable Mailing Address 2464 Guilford RD City Cleveland Heights FEC ID number of contributing federal political committee. Name of Employer University Hospitals Receipt For: Primary General Other (specify)	State Zip Code OH 44118-410 C Occupation Chief Quality Officer Aggregate Year-to-Date ▼				/ actic	24 27	1919865	nis Period	
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	NAME OF COMMITTEE (In Full)									
\angle	American Hospital Association	PAC								
Α.	Full Name (Last, First, Middle Initial) Ms. Mary Alice Annecharico				Date o	f Re	ceipt			
	Mailing Address 234 Goodman Street				м м 06	/	24		ү ү 2011	Y
	City	State	Zip Code		Trans	sact	ion ID :	19200507		
	Cincinnati	OH	45219-2364		Amoun	t of	Each F	Receipt thi	s Period	
	FEC ID number of contributing federal political committee.	С					,		500	.00
	Name of Employer	Occupation	1							
	University Hospital	Sr. Vice Pre	esident and Chief Informati							
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General	00 0		11.						
	Other (specify)		500.00							
	Full Name (Last, First, Middle Initial) Dr. Achilles Demetriou				Date o	f Re	ceipt			
	Mailing Address 11100 Euclid Avenue				м м 06	/	24		y y 2011	Y
	City	State	Zip Code			sacti		19200509		
	Cleveland	OH	44106-1716					Receipt thi		
	FEC ID number of contributing federal political committee.	С					,		500	.00
	Name of Employer	Occupation	1							
	University Hospitals	Chief Opera	ating Officer							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]						
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Richard Hanson	I			Date o	f Re	ceipt			
	Mailing Address 12340 Bass Lake Road				м м 06		24		2011	Y
	City	State	Zip Code		Trans	sact	ion ID :	1920051		
	Chardon	OH	44024-8327		Amoun	t of	Each F	Receipt thi	s Period	
	FEC ID number of contributing federal political committee.	C					7		500	.00
	Name of Employer	Occupation	1							
	University Hospitals Extended Care Cam	President								
	Receipt For:		Year-to-Date ▼							
	Primary General	, .99, 09010		- L.						
	Other (specify)		500.00							
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FEC Schedule A (Form 3X) Rev. 02/2003

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X 11a 11b 12 11c 14 13 15 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms. Janet L Miller Α. Date of Receipt Mailing Address 11100 Euclid Avenue M M / 2011 06 24 City Zip Code State Transaction ID: 19200513 OH Cleveland 44106-5000 Amount of Each Receipt this Period FEC ID number of contributing С 500.00 federal political committee. Name of Employer Occupation Chief Legal Officer University Hospitals Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dr. Fred C Rothstein Date of Receipt Mailing Address 11100 Euclid Avenue M M 06 24 2011 City State Zip Code Transaction ID: 19200515 Cleveland OH 44106-1716 Amount of Each Receipt this Period FEC ID number of contributing С 500.00 federal political committee. Name of Employer Occupation University Hospitals Case Medical Cent President Receipt For: Aggregate Year-to-Date ▼ Primarv General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Mr. Paul Tait Date of Receipt Mailing Address 6560 Thorntree Drive M = M / 06 24 2011 City Zip Code State Transaction ID: 19200516 OH Brecksville 44141-1769 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Sr VP, Strategic Planning & Bus Develo University Hospitals Receipt For: Aggregate Year-to-Date **v** Primary General 500.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional).....

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FEC Schedule A (Form 3X) Rev. 02/2003

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			Detailed Sum	mary Page		(11a		11b	11c		12		
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	NAME OF COMMITTEE (In Full)												
$\Big)$	American Hospital Association F	PAC											
Α.	Full Name (Last, First, Middle Initial) Mr. Thomas K Prusak					Date o	of Re	eceipt					
	Mailing Address 523 North Third Street					M	/	DE	7 / Y	Y	Y	Y	
						06		27		20	011		
	City	State	Zip Code			Tran	sact	ion ID :	1920053	3			
	Brainerd	MN	56401-3098			Amour	nt of	Each F	Receipt th	is P	eriod		
	FEC ID number of contributing federal political committee.	С						7	7	_	25.	00]
	Name of Employer	Occupation											
	Essentia Health St. Joseph's Medical C	President											
	Receipt For:	Aggregate	Year-to-Date 🔻										
	Primary General	33 - 3			11.								
	Other (specify)	L	7 7	275.00									
в.	Full Name (Last, First, Middle Initial) Mr. Carl P. Vaagenes					Date o	of Re	eceipt					
	Mailing Address 111 17th Avenue East					06	/	27		_ 20)11	Y	
	City	State	Zip Code			Tran	sact	ion ID :	1920053		_		
	Alexandria	MN	56308-5273						Receipt th		eriod		
	FEC ID number of contributing federal political committee.	С						7		_	250.0	00]
	Name of Employer	Occupation											
	Douglas County Hospital	Chief Execu	tive Officer										
	Receipt For:	Aggregate	Year-to-Date 🔻										
	Primary General Other (specify) ▼		, , ,	250.00]								
с.	Full Name (Last, First, Middle Initial) Ms. Jani M Wiebolt					Date of	of Re	eceipt					
	Mailing Address 523 North Third Street					06	/	27)11	Y	
	City	State	Zip Code			Tran	sact	ion ID :	1920053	35	_		
	Brainerd	MN	56401-3098			Amour	nt of	Each F	Receipt th	nis P	eriod		
	FEC ID number of contributing federal political committee.	С						7	7		25.	00]
	Name of Employer	Occupation											
	Essentia Health St. Joseph's Medical C	President a	nd Chief Executiv	e Officer									
	Receipt For:	Agaregate	Year-to-Date 🔻										
	Primary General	33 - 3											
	Other (specify) ▼	L	5	275.00									
s	UBTOTAL of Receipts This Page (optional)				•			,	7		300.0	00]

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TOTAL This Period (last page this line number only)	 	 	 	

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Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam		
NAME OF COMMITTEE (In Full) American Hospital Association PAC	;	
Mobile Mobile FEC ID number of contributing federal political committee. Image: Contributing federal political committee. Name of Employer Oc University of South Alabama Hospitals Chi	State Zip Code AL 36617-2238 Cupation ef Executive Officer gregate Year-to-Date ▼ 1000.00	Date of Receipt
Montgomery A FEC ID number of contributing federal political committee. C Name of Employer Alabama Hospital Association Oc Pre	State Zip Code AL 36117-2214 Cupation sident and Chief Executive Officer gregate Year-to-Date ▼ 1000.00	Date of Receipt
Ashland FEC ID number of contributing federal political committee. C Name of Employer Oc Clay County Hospital Adu	State Zip Code AL 36251-1270 Cupation ministrator gregate Year-to-Date ▼ 1000.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional)	•	3000.00

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

Use separate schedule(s) for each category of the

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		Detailed Summary Page		X 11a		11b	11c	12	
				13		14	15	16	17
Any information copied from such Reports and or for commercial purposes, other than using th									
NAME OF COMMITTEE (In Full)									
American Hospital Association	PAC								
Full Name (Last, First, Middle Initial) A. Dr. Roger Leonard MD				Date of	of R	leceipt			
Mailing Address 11706 Split Tree Circle				06	Л	/ 29		2011	Y
City	State	Zip Code			sac		: 1920056		
Potomac	MD	20854-2880		Amour	nt o	f Each I	Receipt thi	is Period	
FEC ID number of contributing federal political committee.	С				Ì	7		255	.00
Name of Employer	Occupation	1							
Montgomery General Hospital	Vice Presic	lent Medical Affairs							
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General	1.99.094.0		ı İ.						
Other (specify)		255.00							
Full Name (Last, First, Middle Initial) B. Ms. Joanne E Pollak				Date o	of R	leceipt			
Mailing Address 733 North Broadway, BRB 10)4			M N 06	1	/ 29		2011	Y
City	State	Zip Code		Tran	sac	tion ID :	: 19200580		
Baltimore	MD	21205		Amour	nt o	f Each I	Receipt thi	is Period	
FEC ID number of contributing federal political committee.	С					7		510.	.00
Name of Employer	Occupation	1							
Johns Hopkins Health System	Vice Presid	ent and General Counsel							
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General Other (specify) ▼		510.00							
Full Name (Last, First, Middle Initial) C. Mr. Michael K Kerner				Date o	of R	leceipt			
Mailing Address 150 Kingsley Lane				06	Л	/ 30		20 <u>1</u> 1	Y
City	State	Zip Code		Tran	sac		: 1920990		
Norfolk	VA	23505-4602					Receipt thi		
FEC ID number of contributing federal political committee.	C			[.	Ì	7		350	.00
Name of Employer	Occupation	1							
Bon Secours-DePaul Medical Center	Chief Exec	utive Officer							
Receipt For:	Aggregate	Year-to-Date ▼							
Primary General	33 - 32.10								
Other (specify)		350.00							
SUBTOTAL of Receipts This Page (optional)				_				1115.	.00

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Use separate schedule(s) for each category of the

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117

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statements n or for commercial purposes, other than using the name and		
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Jeff King Mailing Address 925 Ditchley Rd City State Virginia Beach VA FEC ID number of contributing federal political committee. City Name of Employer Occupation Sentara Healthcare General C Receipt For: Aggregate Other (specify) ▼ C		Date of Receipt
Dessint Far	Zip Code 24002-0025 on dent, Finance e Year-to-Date ▼ 350.00	Date of Receipt
Paggint Ear:	Zip Code 22304-1594 on ident, Administration e Year-to-Date ▼ 350.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional)	•	1050.00

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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		Detailed Summary Page	11a		11b 14	11c		12 16	17
Any information copied from such Reports and S or for commercial purposes, other than using the			or the		pose o	f soliciting	g con	tributi	ons
NAME OF COMMITTEE (In Full) American Hospital Association	PAC								
Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins Mailing Address 6180 Lower Mountain Road City New Hope FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼	,	Zip Code 18938-5760 n path Economics Year-to-Date ▼ 212.93		/ sact	ion ID :		20 ⁻ 8 0		Y 42
Full Name (Last, First, Middle Initial) Ar. Michael Taylor Mailing Address 533 Kings Grant Road City Virginia Beach FEC ID number of contributing federal political committee. Name of Employer Sentara Healthcare Receipt For: Primary General Other (specify) ▼	State VA C Occupation Vice Presid Aggregate			acti	15 ion ID :				Y D0
Full Name (Last, First, Middle Initial) Mr. John T Fox Mailing Address 1440 Clifton Road NE, Suite 3 City Atlanta FEC ID number of contributing federal political committee. Name of Employer Emory Healthcare Receipt For: Primary General Other (specify) ▼	State GA C Occupation Chief Exec	Zip Code 30322-1053 utive Officer Year-to-Date ▼ 500.00		/ sact	13		201 1		Ÿ 00
SUBTOTAL of Receipts This Page (optional)								870.4	12

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Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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	EMIZED RECEIPTS		Detailed Summary Page		_		11b	,	11c	12	2					
Ar	ny information copied from such Reports and for commercial purposes, other than using t	Statements ma	ay not be sold or used by any p ddress of any political committee	Derson	13 for the plicit cor	purp purp	14 pose	e of	15 solicitin	g contr	ibuti	17 ions				
	NAME OF COMMITTEE (In Full) American Hospital Association						2.101									
Α.	Full Name (Last, First, Middle Initial) Ms. Melinda Reid Hatton Mailing Address 325 Seventh Street, NW				Date of Receipt											
	Suite 700 City	State	Zip Code		06 30 2011 - Transaction ID : PR1045726225183											
	Washington	DC	20004-2818		Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С					7				80.	00				
	Name of Employer American Hospital Association-Washingt															
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 480.00] 「	P/R Ded	uctio	on (\$	\$40.0	00 Bi-W	eekly)						
в.	Full Name (Last, First, Middle Initial) Mr. David Schulke			Date of	Re	ceip	ot									
	Mailing Address 325 Seventh Street, NW Suite 700			^M M 06	/	D	30	/ Y	2011		Y					
	City Washington	hington DC 20004-2801							PR1057			i				
	FEC ID number of contributing federal political committee.	C			Amount of Each Receipt this Period											
	Name of Employer American Hospital Association-Washingt	Occupation VP Researc	h Programs													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 480.00]	P/R Deduction (\$40.00 Bi-Weekly)											
<u> </u>	Full Name (Last, First, Middle Initial) Mr. James Wadzinski				Date of	Re	ceip	ot								
	Mailing Address One North Franklin	-			м м 06	1	D	30	/ Y	2011		Y				
	City Chicago	State IL	Zip Code 60606-3436						PR1347			3				
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 40.00													
	Name of Employer	_														
	American Hospital Association-Chicago															
	Receipt For: Primary General Other (specify) ▼]	P/R Deduction (\$20.00 Bi-Weekly)													

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

Use separate schedule(s) for each category of the

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17										
Any information copied from such Reports and Sta or for commercial purposes, other than using the												
NAME OF COMMITTEE (In Full) American Hospital Association F	PAC											
Full Name (Last, First, Middle Initial) A. Mr. Jack A. Mackay Mailing Address One North Franklin		Date of Receipt										
City	State Zip Code	Transaction ID : PR1347703625183										
Chicago	IL 60606-3436	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C	40.00										
Name of Employer	Occupation	-										
American Hospital Association-Chicago	Vice President & CIO											
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	P/R Deduction (\$20.00 Bi-Weekly)										
Full Name (Last, First, Middle Initial) B. Mr. Mark Colucci		Date of Receipt										
Mailing Address 1061 N Penny Ln		06 30 2011										
City Palatine	State Zip Code	Transaction ID : PR1475133725183										
		Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C	40.00										
Name of Employer	Occupation											
American Hospital Association-Chicago	National Director Sponsorship and Unde	-										
Receipt For:	Aggregate Year-to-Date ▼											
Other (specify) ▼	240.00	P/R Deduction (\$20.00 Bi-Weekly)										
Full Name (Last, First, Middle Initial) C. Ms. Stephanie H. Drake		Date of Receipt										
Mailing Address One North Franklin		06 30 2011										
City Chicago	State Zip Code IL 60606-3436	Transaction ID : PR1492459925183										
	IL 00000-3430	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C	81.66										
Name of Employer	Occupation]										
American Hospital Association-Chicago	Associate Executive Director - ASHHRA	-										
Receipt For:	Aggregate Year-to-Date ▼	D/D Deduction (\$40.82 Di Maskin)										
Other (specify) ▼	469.21	P/R Deduction (\$40.83 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)	•	161.66										

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

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Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS		ategory of the ummary Page	X 11a 11b 11c 12 13 14 15 16 17										
Any information copied from such Reports and or for commercial purposes, other than using			to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full) American Hospital Association	on PAC												
A. Full Name (Last, First, Middle Initial) Ms. Lisa Grabert Mailing Address 325 Seventh Street, NW		Date of Receipt											
Suite 700			06 30 2011										
City	State Zip Code		Transaction ID : PR1671258625183										
Washington	DC 20004-28	801	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		80.00										
Name of Employer	Occupation		_										
American Hospital Association-Washingt	Senior Associate Director	, Policy											
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	480.00	P/R Deduction (\$40.00 Bi-Weekly)										
Full Name (Last, First, Middle Initial) B. Mr Robert P. David			Date of Receipt										
Mailing Address One North Franklin			06 30 2011										
City	State Zip Code		Transaction ID : PR1677512425183										
Chicago	IL 60606-34	436	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		80.00										
Name of Employer	Occupation		_										
American Hospital Association-Chicago	Regional Executive												
Receipt For:	Aggregate Year-to-Date	•											
Primary General Other (specify) ▼		480.00	P/R Deduction (\$40.00 Bi-Weekly)										
Full Name (Last, First, Middle Initial) C. Mr. Erik Rasmussen	•		Date of Receipt										
Mailing Address 325 Seventh Street, NW Suite 700			06 30 / Y Y Y Y 2011										
City Washington	State Zip Code DC 20004-28		Transaction ID : PR1819487925183										
	20004-20	501	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		80.00										
Name of Employer	Occupation												
American Hospital Association-Washingt	Senior Associate Director		_										
Receipt For:	Aggregate Year-to-Date	•	P/D Deduction (#40.00 Di M/ 11-)										
Other (specify) ▼		480.00	P/R Deduction (\$40.00 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optiona)		240.00										

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Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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			Detailed Summary Page		(11a		11b	11c		12									
<u> </u>					13		14	15		16	17								
	ny information copied from such Reports and for commercial purposes, other than using the																		
\backslash	NAME OF COMMITTEE (In Full)	D 40																	
	American Hospital Association	PAC																	
_	Full Name (Last, First, Middle Initial)																		
Α.					Date o	f Re	eceipt												
	Mailing Address 325 Seventh Street, NW				M M	/	D			Y	Y								
	Suite 700	State	Zip Code		06		30			011	_								
	Washington	DC	20004-2818					: PR3270											
				_	Amoun		Each	Receipt 1	лі г	renou	_								
	FEC ID number of contributing federal political committee.	C		80.00															
	Name of Employer	Occupation																	
	American Hospital Association-Washingt																		
	Receipt For:																		
	Primary General		100.00	P/R Deduction (\$40.00 Bi-Weekly)															
	Other (specify)		480.00																
	Full Name (Last, First, Middle Initial) . Mr. Michael P. McCue						Date of Receipt												
	Mailing Address 122 N. Greenwood Avenue			м м 06	/	30		2(011	Y									
	City	State		Trans	act	ion ID :	PR3277	7162	<u>25183</u>										
	Park Ridge	IL	60068-3227		Amount of Each Receipt this Period														
	FEC ID number of contributing federal political committee.	С			40.00														
	Name of Employer American Hospital Association-Chicago	Occupation																	
		Associate D	Director																
	Receipt For: Primary General	Aggregate	Year-to-Date ▼																
	Other (specify) V		240.00	P	P/R Ded	ucti	on (\$20	.00 Bi-W	'eekl	y)									
<u>с</u> .	Full Name (Last, First, Middle Initial) Ms. Debra J. Stock				Date o	f Re	eceipt												
	Mailing Address 1022 S. Harvey Avenue				MM	/	D			Y Y	Y								
	City	State	Zip Code		06		30 ion ID 1	, : PR327		011 25102	_								
	Oak Park	IL	60304-2132					Receipt t											
	FEC ID number of contributing federal political committee.	С					7				.00								
	Name of Employer	Occupation																	
	American Hospital Association-Chicago	Vice Presid	ent, Member Relations																
	Receipt For:	Aggregate	Year-to-Date ▼																
	Primary General	00 - 01		T F	P/R Ded	lucti	ion (\$40).00 Bi-V	/eeki	iy)									
	Other (specify)		480.00]															
s	UBTOTAL of Receipts This Page (optional)			▶ '						200.	.00								

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

Use separate schedule(s) for each category of the

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and or for commercial purposes, other than using th												
NAME OF COMMITTEE (In Full) American Hospital Association	PAC											
Full Name (Last, First, Middle Initial) A. Mr. Neil J. Jesuele	. Neil J. Jesuele											
Mailing Address 1003 Kimberly Place	State	Zip Code	06 30 2011 Transaction ID : PR327801725183									
Great Falls	VA	22066-1546	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		40.00									
Name of Employer American Hospital Association-Washingt	Occupation Executive Vice	President										
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 240.00	P/R Deduction (\$20.00 Bi-Weekly)									
Full Name (Last, First, Middle Initial) B. Ms. Pamela Austin Thompson RN,	MSN		Date of Receipt									
Mailing Address 325 Seventh Street, NW Suite 700			06 30 2011									
Ms. Pamela Austin Thompson RN Mailing Address 325 Seventh Street, NW Suite 700 City Washington FEC ID number of contributing federal political committee.	State DC	Zip Code	Transaction ID : PR327812025183									
	DC	20004-2818	Amount of Each Receipt this Period									
8	С		80.00									
Name of Employer	Occupation											
American Hospital Association-Washingt	Chief Executive	e Officer, AONE & Sr. Vi										
Receipt For:	Aggregate Yes	ar-to-Date ▼										
Primary General Other (specify) ▼		480.00	P/R Deduction (\$40.00 Bi-Weekly)									
Full Name (Last, First, Middle Initial) C. Ms. Joan H. Lewis	·		Date of Receipt									
Mailing Address 6034 North 22nd Street			06 30 / Y Y Y Y 2011									
City Arlington	State VA	Zip Code 22205-3408	Transaction ID : PR327831725183									
		22205-5408	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		40.00									
Name of Employer	Occupation											
American Hospital Association-Washingt Receipt For:	Regional Exec		_									
Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 240.00	P/R Deduction (\$20.00 Bi-Weekly)									
SUBTOTAL of Receipts This Page (optional)		·····	160.00									

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

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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	11a		11b 14	11c	12	17
Any information copied from such Reports and a or for commercial purposes, other than using th						f soliciting	g contrib	utions
NAME OF COMMITTEE (In Full) American Hospital Association	PAC							
Full Name (Last, First, Middle Initial) Mr. Robert J. Donovan Mailing Address One North Franklin Street City Chicago FEC ID number of contributing federal political committee. Name of Employer American Hospital Association-Chicago Receipt For: Primary General Other (specify) ▼		Zip Code 60606 ent, Meetings & Travel Serv Year-to-Date ▼ 240.00	Amour	sact	30 ion ID Each I		iis Perioo 4	3
Full Name (Last, First, Middle Initial) Ms. Ellen A. Pryga Mailing Address 2401 Calvert Street, NW Apt. 1008 City Washington FEC ID number of contributing federal political committee. Name of Employer American Hospital Association-Washingt Receipt For: Primary General Other (specify) ▼	·	Zip Code 20008-2614 blicy Development Year-to-Date ▼ 240.00	Amour	sact nt of	30 ion ID : Each I		iis Period 4	
Full Name (Last, First, Middle Initial) Mr. Mark Seklecki Mailing Address 325 Seventh Street, NW Suite 700 City Washington FEC ID number of contributing federal political committee. Name of Employer American Hospital Association-Washingt Receipt For: Primary General Other (specify) ▼		Zip Code 20004-2818 lent, Political Affairs Year-to-Date ▼ 480.00	Amour	sact	30 ion ID Each F		iis Perioo 8	3
SUBTOTAL of Receipts This Page (optional)		•••••			7	7	16(0.00

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Use separate schedule(s) for each category of the

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	for each category of Detailed Summary Pa	
		by any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Associa	ation PAC	
Full Name (Last, First, Middle Initial) Mr. John F. Barry		Date of Receipt
Mailing Address One North Franklin	State Zip Code	06 / 30 / 2011
Millis	MA 60606-3436	Transaction ID : PR327877825183 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	80.00
Name of Employer	Occupation	
American Hospital Association-Chicago Receipt For:	Regional Executive	
Primary General Other (specify) V	Aggregate Year-to-Date ▼ 48	P/R Deduction (\$40.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) B. Mr. George F. Bergstrom		Date of Receipt
Mailing Address 130 North Garland Co #3002		06 30 2011
City Chicago	State Zip Code IL 60602-4750	Transaction ID : PR327895725183
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 80.00
Name of Employer American Hospital Association-Chicago	Occupation Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	0.00 P/R Deduction (\$40.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) C. Mr. Richard J. Umbdenstock	ζ	Date of Receipt
Mailing Address 325 Seventh Street, N Suite 700		06 / Y Y Y Y Y 2011
City Washington	State Zip Code DC 20004-2818	Transaction ID : PR328132825183
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 80.00
Name of Employer	Occupation	
American Hospital Association-Washing	pt President and Chief Executive Office	<u>۶۲</u>
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 48	P/R Deduction (\$40.00 Bi-Weekly)
SUBTOTAL of Receipts This Page (optic	Dnal)	

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Use separate schedule(s) for each category of the

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17										
Any information copied from such Reports and S or for commercial purposes, other than using the												
NAME OF COMMITTEE (In Full) American Hospital Association	PAC											
Full Name (Last, First, Middle Initial) A. Ms. Barbara Lorsbach		Date of Receipt										
Mailing Address 204 7th Ave	State Zip Code	06 30 Y Y Y Y Y 06 30 2011										
City La Grange	State Zip Code IL 60525-6406	Transaction ID : PR328136925183										
FEC ID number of contributing federal political committee.	C Amount of Each Receipt this Pe											
Name of Employer	Occupation	_										
American Hospital Association-Chicago	Sr. Vice President, Member Relations											
Receipt For:	Aggregate Year-to-Date ▼	-										
Primary General Other (specify) ▼	480.00	P/R Deduction (\$40.00 Bi-Weekly)										
Full Name (Last, First, Middle Initial) B. Ms. Donna J. Melkonian		Date of Receipt										
Mailing Address 5545 North Wayne		06 30 Y Y Y Y Y 2011										
City	State Zip Code	Transaction ID : PR328223825183										
Chicago	IL 60640-1318	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C	80.00										
Name of Employer American Hospital Association-Chicago	Occupation Vice President											
Receipt For:	Aggregate Year-to-Date ▼											
Other (specify)	480.00	P/R Deduction (\$40.00 Bi-Weekly)										
Full Name (Last, First, Middle Initial) C. Mr. Ron O. Purcell		Date of Receipt										
Mailing Address 1093 N. Faldo Way		06 30 / Y Y Y Y Y 2011										
City	State Zip Code ID 83616-5369	Transaction ID : PR328241425183										
Eagle	ID 83616-5369	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C	40.00										
Name of Employer	Occupation											
American Hospital Association-Chicago	Regional Executive	_										
Receipt For: Primary General	Aggregate Year-to-Date ▼											
Other (specify)	240.00	P/R Deduction (\$20.00 Bi-Weekly)										
SUBTOTAL of Receipts This Page (optional)	•	200.00										

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

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	Detailed Summary Page					11b	11c		12												
r		, ,		13		14	15		16		17										
Any information copied from such or for commercial purposes, other																					
NAME OF COMMITTEE (In Fi																					
American Hospital A	ssociation PAC																				
Full Name (Last, First, Middle A. Mr. Richard J. Pollack	Initial)		Date o	f Re	eceipt																
Mailing Address 3475 North Ve	enice Street			м м 06	/	30	/ Y		011	Y											
City	State	Zip Code			act		PR32826														
Arlington	VA	22207-4446					eceipt th														
FEC ID number of contributing federal political committee.	C		80.00																		
Name of Employer	Occupation	1																			
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Full Name (Last, First, Middle C. Ms. Carolyn Forcina	Initial)			Date o	f Re	eceipt															
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FEC Schedule A (Form 3X) Rev. 02/2003

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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			Detailed Summary Page		< 11a		11b	11c		12											
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	y information copied from such Reports and for commercial purposes, other than using t																				
	NAME OF COMMITTEE (In Full)																				
$\Big/$	American Hospital Association	n PAC																			
Α.	Full Name (Last, First, Middle Initial) Ms. Alicia N. Mitchell				Date o	of R	eceipt														
	Mailing Address 1501 N. Harrison Street				M		·			Y 1	Y										
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<u> </u>	Full Name (Last, First, Middle Initial) Mr. Anthony J. Burke				Date o	of R	eceipt														
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FEC Schedule A (Form 3X) Rev. 02/2003

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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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	y information copied from such Reports and S for commercial purposes, other than using the					or the		oose of	f soliciting	g contri	butic	ons	-
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в.	Full Name (Last, First, Middle Initial) Dr. John R. Combes				1	Date of	f Re	ceipt					
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	American Hospital Association	PAC											
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	Full Name (Last, First, Middle Initial) Mr. W. Thomas Deweese												
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N	Mailing Address 500 Interstate Boulevard So	uth			м м 06	1	2	0	/ Y		011	Y	
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NAME OF COMMITTEE (In Full)	_								
American Hospital Associat	ion PAC								
Full Name (Last, First, Middle Initial) A. Mr. Paul N. Muraca				Date o	f R	eceipt			
Mailing Address 4960 138th Circle West				м м 06	1	/ D D D 30		2011	Y
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Full Name (Last, First, Middle Initial) B. Mr. Gene O'Dell				Date o	f R	eceipt			
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Primary General Other (specify) ▼		, 240.00	P	/R Ded	luct	ion (\$20.	.00 Bi-We	ekly)	
Full Name (Last, First, Middle Initial) C. Ms. Eileen O'Keefe				Date o	f R	eceipt			
Mailing Address 172 Atteridge				м м 06	1	30		2011	Y
City	State	Zip Code		Trans	sac	tion ID :	PR33054	1922518	3
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	ny information copied from such Reports and for commercial purposes, other than using the											
	NAME OF COMMITTEE (In Full) American Hospital Association	PAC										
Α.	Full Name (Last, First, Middle Initial) Mr. Anthony Spohn				Date o	f Re	ecei	pt				
	Mailing Address 3219 N. Oriole	-			м м 06	J.	Ľ	30	/	2	2011	Y
	City Chicago	State IL	Zip Code 60634-3232	_					PR331			
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В.	Full Name (Last, First, Middle Initial) Ms. Darlene S. Vanderbush	1			Date o	f Re	ecei	pt				
	Mailing Address 26 West Glendale Ave.				м м 06	/	Γ	' 30	/	_ 2	011	Y
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с.	Full Name (Last, First, Middle Initial) Mr. Donald May	1			Date o	f Re	ecei	pt				
	Mailing Address 521 Great Falls St.				м м 06	/		30	/	2 2	011	Y
	City Falls Church	State VA	Zip Code 22046-2613	_					PR331			
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ITEMIZED RECEIPTS		category of the Summary Page	X 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. Elizabeth Summy			Date of Receipt
Mailing Address One North Franklin	State Zip Cod		06 30 2011
Chicago	IL 60606-3		Transaction ID : PR346168125183 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		80.00
Name of Employer American Hospital Association-Chicago	Occupation Vice President, PMG		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	480.00	P/R Deduction (\$40.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) B. Ms. Megan Cundari			Date of Receipt
Mailing Address 325 Seventh Street, NW Suite 700		1-	06 / D D / Y Y Y Y Y 30 2011
City Washington	State Zip Cod DC 20004-2		Transaction ID : PR518031925183 Amount of Each Receipt this Period
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Name of Employer American Hospital Association-Washingt	Occupation Senior Associate Directo	pr	_
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Full Name (Last, First, Middle Initial) C. Mr. Carlos Jackson			Date of Receipt
Mailing Address 325 Seventh Street, NW			06 / D D / Y Y Y Y 2011
City Washington	State Zip Cod DC 20004-2		Transaction ID : PR566280925183
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Name of Employer American Hospital Association-Washingt	Occupation Associate Director, Fede	eral Relations	
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FEC Schedule A (Form 3X) Rev. 02/2003

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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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ITEMIZED RECEIPTS	RECEIPTS for each category of the Detailed Summary Page							12	17
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NAME OF COMMITTEE (In Full) American Hospital Association									
Full Name (Last, First, Middle Initial) Ms. Ashley B. Thompson Mailing Address 606 S. Royal St. City Alexandria FEC ID number of contributing federal political committee. Name of Employer American Hospital Association-Washingt Receipt For: Primary General Other (specify) ▼	State VA C Occupation Director, Po Aggregate			Amoun	/ sact	30 ion ID Each I		nis Perioo 4	3
Full Name (Last, First, Middle Initial) Ms. Lisa Kidder Hrobsky Mailing Address 325 Seventh Street, NW Suite 700 City	State	Zip Code		Date o	1	30)	2011	_
Washington FEC ID number of contributing federal political committee. Name of Employer American Hospital Association-Washingt Receipt For: Primary General	DC C Occupation Vice Preside	20004-2818		Amoun	t of	Each I	<u>: PR8766:</u> Receipt th	nis Perioo 4(
C. City Other (specify) ▼ Cther (specify) T Ct	State	Zip Code		Date o		eceipt	D / Y	= Y = Y	Y
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ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b 11c X 12 13 14 15 16 17
			person for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Associa	tion PAC		
Full Name (Last, First, Middle Initial) Hospital and Healthsystem Assoc. o Mailing Address Post Office Box 8600 City Harrisburg FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State PA C Coo Occupation	Zip Code 17105-8600 0128082	Date of Receipt
Full Name (Last, First, Middle Initial) B. Wisconsin Hospital Association Mailing Address 5510 Research Park D PO Box 259038 City Madison FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼	rive State WI C Coo Occupation	Zip Code 53725-9038 0422881 Year-to-Date ▼ 2600.00	Date of Receipt
Full Name (Last, First, Middle Initial) Wisconsin Hospital Associati Mailing Address 5510 Research Park D PO Box 259038 City Madison FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼	rive State WI C CO Occupation	Zip Code 53725-9038 0422881	Date of Receipt
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Full Name (Last, First, Middle Initial) Citibank, F.S.B. Mailing Address 1400 G Street, NW City	State	Zip Code		Date of 06 Trans	/	eipt 30 on ID :			y y 2011
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City Washington	State DC	Zip Code 20001		Trans Amount		n ID :	1923	0812	
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. 9 General Primary Interest Earned 507.64 Other (specify) Full Name (Last, First, Middle Initial) С. Date of Receipt Mailing Address M M / D City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing С federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 261.40 SUBTOTAL of Receipts This Page (optional)..... 261.40 TOTAL This Period (last page this line number only).....

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В.	State: District: Full Name (Last, First, Middle Initial) Newtek Merchant Solutions Mailing Address 744 N 4th Street							Date o	_	D				011	Y			
		State	Zip Code				_											
	Milwaukee	WI	53203					Trans	sact	ion ID):	192308	00					
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	Mailing Address 14221 Dallas Parkway Building Two							м м 06	/	0)6	/ Y		011 011	Y			
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\backslash	NAME OF COMMITTEE (In Full)													
]	American Hospital Association PA	С												
<u>—</u> А.	Full Name (Last, First, Middle Initial) Citibank, F.S.B.						Date o	of Di	sburse	emer	t			
	Mailing Address 1400 G Street, NW						M M		D	D			Y 014	Y
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	Candidate Name		Cate	egoi ype	ry/								().27
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	Candidate Name		Cate T	egoi ype	ry/		Amoun	it of	Each	Dist	oursen	nent	t this	Period
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Δ	Full Name (Last, First, Middle Initial)						Date of	f Dieł	ourser	ment		
~ .	Cooper For Congress							/	D		Y Y	Y
	Mailing Address 236 Massachusetts Avenue NE Suite 603	_					06		07	7	2011	
	City Washington	State DC	Zip Code 20002				Trans	actio	on ID	: 191807	92	
	Purpose of Disbursement Contribution		20002							D . 1		D · · ·
	Candidate Name				11	- 1	Amount	t of E	ach I	Disburse	ment this	s Period
	Rep. Jim Cooper				egory ype	//					10	00.00
	Office Sought: House Disburser Senate President	ment For: Primary Other (spe	General		<u>, , , , , , , , , , , , , , , , , , , </u>		Contribu	ution		,		
	State: TN District: 05											
В.	Full Name (Last, First, Middle Initial) Nadler For Congress						Date of	f Disk	burser	ment		
	Mailing Address Village Station, PO Box 40						м м 06	/	07		2011	Y
	New York	State NY	Zip Code 10014				Trans	actio	on ID	: 191807	93	
	Purpose of Disbursement Contribution			0)11	٦	Amount	t of E	Each I	Disburse	ment this	s Period
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	Rep. Jerrold L. Nadler Office Sought: X House Disburser	ment For:	2012	Ту	ype				,			00.00
		Primary Other (spe	General				Contrib	ution				
	Full Name (Last, First, Middle Initial)						Date of	f Dieł	hurson	mont		
0.	John Tierney For Congress						M M	/			Y Y	Y
	Mailing Address 49 Federal Street						06		07		2011	
	City Salem	State MA	Zip Code 01970				Trans	actio	on ID	: 191807	94	
	Purpose of Disbursement Contribution			-								
	Candidate Name			0	11	_	Amount	t of E	Each I	Disburse	ment this	s Period
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	American Hospital Association PA	С												
Α.	Full Name (Last, First, Middle Initial) Bass Victory Committee						Date o	f Dis	sburse	emen	t			
	Mailing Address PO Box 3451						м м 06	/	D 0	D 3	/		011	Y
	City	State	Zip Code				Trong		ion ID	. 10	1007	05		
	Concord	NH	03302				Trails	acu		. 19	1007	90		
	Purpose of Disbursement Contribution			0	11		Amoun	t of	Each	Disb	urse	men	t this	Period
	Candidate Name Rep. Charles Bass			Cate	egor /pe	ry/							1500	0.00
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в.	Full Name (Last, First, Middle Initial) Michael Burgess For Congress						Date o	_	D	D	t / Г		Y	Y
	Mailing Address PO Box 2334						06		C)3		2	011	
	Denton	State TX	Zip Code 76202				Trans	sact	ion ID):19	1807	'96		
	Purpose of Disbursement Contribution Candidate Name Rep. Michael C. Burgess M.D.			Cate		ry/	Amoun	t of	Each	Disb	urse	men	t this 100	_
	Office Sought: House Disburser	nent For: Primary Other (spe	General		/pe		Contrib	utior	n					
C.	Full Name (Last, First, Middle Initial) Blumenauer For Congress						Date o				t			
	Mailing Address 830 Ne Holladay, #105						м м 06	/	0	3			011	Ŷ
	City Sector Sect	State OR	Zip Code 97232				Trans	sact	ion ID):19	1807	97		
	Purpose of Disbursement Contribution			0	11	٦	Amoun	t of	Each	Disb	urse	men	t this	Period
	Candidate Name Rep. Earl Blumenauer			Cate Ty	egor /pe	ry/		Ţ					1000	0.00
	Office Sought: House Disburser Senate President State: OR District: 03	nent For: Primary Other (spe	General				Contrib	utior	1					
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	y information copied from such Reports and Stater for commercial purposes, other than using the nar														
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	American Hospital Association PA	С													
	Full Name (Last, First, Middle Initial)														
Α.	Matheson For Congress							Date o	f Dis	sburse	em	nent			
	Mailing Address P.O. Box 521048							м м 06	/	0)3	/		011	Y
	City	State	Zip Code					.				40400-			
	Salt Lake City	UT	84152					Trans	acti	ion ID):	191807	'98		
	Purpose of Disbursement Contribution			0	11			Amoun	t of	Each	D	isburse	emen	t this	Period
	Candidate Name			Cate	egoi	ry/								150	0.00
	Rep. James D. Matheson			Ту	ype				-	7	-	7		150	0.00
	Office Sought: House Disburser Senate President State: UT District: 02	ment For: Primary Other (spe	General				C	Contrib	utior	ı					
	Full Name (Last, First, Middle Initial)														
Β.	Kurt Schrader For Congress						1	Date o	f Dis	sburse	em	nent			
								M M	/	D	D	/	Y Y	Y	Y
	Mailing Address PO Box 3314 Suite 240							06		C)3		2	2011	
	Oregon City	State OR	Zip Code 97045					Trans	sacti	ion ID):	191807	799		
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	Rep. Kurt Schrader			Cate	egoi /pe									100	0.00
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_	Full Name (Last, First, Middle Initial)														
C.	Simpson For Congress						1	Date o	f Dis	sburse	em	nent			
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	Mailing Address 1487 Parkway Drive							06		0)3	1.1	2	011	_
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	Blackfoot	ID	83221					Trans	sact):	191808	500		
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	Candidate Name			0	11			Amoun	t of	Each	D	isburse	emen	t this	Period
	Rep. Michael K. Simpson			Cate							1			100	0.00
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<u> </u>	Full Name (Last, First, Middle Initial)							,							
А.	Adrian Smith For Congress						_		Dis	sburse		_		Y	
	Mailing Address 3321 Avenue I Suite 6							06	ĺ)3			011	T T
	City Scottsbluff	State NE	Zip Code 69361				Tr	ans	acti	on ID):	191808	01		
	Purpose of Disbursement		09301	_		_									
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	Full Name (Last, First, Middle Initial)														
В.	Treasure State PAC							e of	Dis	burse			Y Y	Ý	Y
	Mailing Address PO Box 76187							06	Í		23			011	
	Washington	State DC	Zip Code 20013				Т	rans	acti	ion ID):	191844	16		
	Purpose of Disbursement 2011 Contribution			()11		Am	ount	of	Each	D)isburse	men	t this	Period
	Candidate Name			Cate	eaor	rv/				-				500	
	Treasure State PAC				ype				-	7				500	5.00
	Office Sought: House Disburser Senate President District:	nent For: Primary Other (spe	General cify) ▼				201	1 Co	ontri	butior	n				
	Full Name (Last, First, Middle Initial)														
C.	National Republican Senatorial Co	mmittee	;					e of	[:] Dis	burse				Y	Y
	Mailing Address 425 Second Street, NE							06	Í)3			011	
	City State S	State DC	Zip Code 20002				Т	ans	acti	on ID):	191844	36		
	Purpose of Disbursement 2011 Contribution														
	Candidate Name)11	_	Am	ount	of	Each	D	isburse	men	t this	Period
	National Republican Senatorial Co	ommittee	e	Cate T	egor ype	ry/				_				15000	0.00
	Office Sought: House Disburser	ment For:								,		7			
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	y information copied from such Reports and Stater for commercial purposes, other than using the nan														
\square	NAME OF COMMITTEE (In Full)														
	American Hospital Association PA	C													
Α.	Full Name (Last, First, Middle Initial) Democratic Congressional Campa	ign Corr	mittee				I	Date o	f Dis	sburse	eme	ent			
	Mailing Address 430 South Capitol Street							06	/	D 0	D 3	/ Y) 011	Y
	City S Washington	State DC	Zip Code 20003					Trans	acti	on ID):1	918447	72		
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	Candidate Name			Cate	one	rv/				-					
	Democratic Congressional Campai		mittee	T	ype	, , ,				7		- 7		15000	0.00
	Office Sought: House Disburser Senate President Image: Construct to the senate s	ment For: Primary Other (spe	General cify) ▼				2	2011 C	ontri	butior	ı				
	Full Name (Last, First, Middle Initial)														
В.	Rush Holt For Congress						I	Date o	f Dis	sburse	eme	ent			
	Mailing Address PO Box 782							06	/	D	D 03	/ Y		011	Y
	Pennington	State NJ	Zip Code 08534					Trans	sacti	ion ID):1	91845	10		
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	Rep. Rush D. Holt			Cate T	ego ype									100	0.00
	Office Sought: X House Disburser Senate X	nent For: Primary Other (spe	General		ype		¢	Contrib	utior	1					
с.	Full Name (Last, First, Middle Initial)						I	Date o	f Dis	sburse	eme	ent			
	Mailing Address PO Box 225							м м 06	/	D 0	D 3	/ Y) 11	Y
	City S Colonia	State NJ	Zip Code 07067					Trans	sacti	ion ID):1	91845 [.]	17		
	Purpose of Disbursement Contribution														
	Candidate Name Rep. Leonard Lance			Cate				Amoun	t of	Each	Dis	sburser	nent	this 1000	
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	American Hospital Association PA	С													
Α.	Full Name (Last, First, Middle Initial) Pascrell For Congress							Date of	of Di	sbur	sei	ment			
	Mailing Address P.O. Box 640						-	M 06	/	D	03			2011	Y
	City Totowa	State NJ	Zip Code 07511				+	Tran	sact	ion	ID	: 19184	530		
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в.	State: NJ District: 08 Full Name (Last, First, Middle Initial) Steve Rothman for Congress							Date o			sei		Y	Y Y	Y
	Mailing Address P.O. Box 714							06		L	03			2011	
	Hackensack	State NJ	Zip Code 07602					Tran	sact	tion	ID	: 19184	1538		
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C.	Full Name (Last, First, Middle Initial) Mike Kelly For Congress							Date o							
	Mailing Address PO Box 476							06	/	D	03			2011	Y
	City Lyndora	State PA	Zip Code 16045					Tran	sact	ion	ID	: 19184	1564		
	Purpose of Disbursement Contribution			C)11			Amour	nt of	Eac	:h∣	Disburs	emer	nt this	Period
	Candidate Name Rep. George Kelly			Cat T	ego ype				Ţ		Ţ				0.00
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$ \rangle$	NAME OF COMMITTEE (In Full)	_													
	American Hospital Association PA	С					_								
Α.	Full Name (Last, First, Middle Initial) Friends Of John Barrasso						[Date o	f Di	sburs	en	nent			
	Mailing Address PO Box 52008							м м 06	/	D	10			011	Y
	City Casper	State WY	Zip Code 82605					Trans	sact	ion II	D :	19187 [.]	162		
	Purpose of Disbursement Contribution			0)11	٦	Å	Amoun	t of	Each	۱Ľ	Disburse	emen	t this	Period
	Candidate Name Sen, John A. Barrasso MD			Cate	egoi ype				T		ī			100	0.00
		ment For: Primary Other (spe	General		700		c	Contrib	utior	ı					
в.	Full Name (Last, First, Middle Initial) Scott Brown For U.S. Senate Com	mittee					[Date o	_	sburs		_	YYY	/ Y	Ŷ
	Mailing Address P.O. Box 395							06			10		2	2011	
	Wrentham	State MA	Zip Code 02903					Trans	sact	ion II	D :	19187	221		
	Purpose of Disbursement Contribution Candidate Name			Cate)11 eaoi	rv/	ļ	Amoun	t of	Each	n E	Disburse	emen		_
	Sen. Scott Brown Office Sought: House Disburser	ment For:	2012		ype				-	7			-	100	0.00
	State: MA District:	Primary Other (spe	General ecify) ▼				C	Contrib	utio	า					
с.	Full Name (Last, First, Middle Initial) Bob Corker For Senate						[Date o	_			_			
	Mailing Address 518 Georgia Ave 2nd Floor							06	/	D	10			011	Y
	City Statanooga	State TN	Zip Code 37403					Trans	sact	ion II	D :	19187	234		
	Purpose of Disbursement Contribution			0)11		A	Amoun	t of	Each	۱Ľ	Disburse	emen	t this	Period
	Candidate Name Sen. Robert Corker			Cate T	egoi ype						Ì			100	0.00
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$\left[\right]$	NAME OF COMMITTEE (In Full)														
	American Hospital Association PA	С													
Α.	Hatch Election Committee Inc						C	Date of	Dis			ent			
	Mailing Address 175 South West Temple Suite 650							06		D 1	0			011	Y
	Salt Lake City	State UT	Zip Code 84101					Trans	acti	on ID	: 1	191872	74		
	Purpose of Disbursement Contribution			C)11		A	Amount	of	Each	Di	sburse	men	t this	Period
	Candidate Name Sen. Orrin G. Hatch			Cate	egoi ype									2000	0.00
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в.	Full Name (Last, First, Middle Initial)						[Date of	[:] Dis		eme	ent	/ Y	Y	Ŷ
	Mailing Address PO Box 55952							06		1	0		2	011	
	Indianapolis	State IN	Zip Code 46205					Trans	acti	ion ID):'	191873	04		
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С.	Full Name (Last, First, Middle Initial) Snowe For Senate						[Date of	Dis	burse	em	ent			
	Mailing Address PO Box 2012							м м 06	/		0	/		011	Y
	Portland	State ME	Zip Code 04104					Trans	acti	on ID): <i>'</i>	191873	20		
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	CHEDULE B (FEC Form 3X)		parate schedule(s)					JMBER	:		F	PAGE	102	OF 117
IT	EMIZED DISBURSEMENTS	for each	n category of the	(c	hec	k or 211	nly or b	ne)] 22	X	23	24		25	26
		Detailed	Summary Page		\vdash	211		28a		23 28b	28		29	30b
	y information copied from such Reports and Stater for commercial purposes, other than using the nam													
$\left \right\rangle$	NAME OF COMMITTEE (In Full)													
	American Hospital Association PA	С												
•	Full Name (Last, First, Middle Initial)							Data	د D:-					
А.	Citizens For Altmire							Date o	_					
	Mailing Address P.O. Box 1776							м м 06	/	D 1	0		2011	Y
	City	State	Zip Code					Trans	acti	ion ID	: 1918	7370		
	Freedom	PA	15042					Trans	acu		. 1910	370		
	Purpose of Disbursement Contribution			0	11			Amoun	t of	Each	Disburs	emer	nt this	Period
	Candidate Name			Cate									200	0.00
	Rep. Jason Altmire Office Sought: V House Disburser			T	ype		_		-	7		_	200	0.00
	Office Sought: X House Disburser Senate President X	ment For: Primary Other (sp	General					Contrib	ution	ı				
_	Full Name (Last, First, Middle Initial)						+							
В.	Friends Of John Barrow							Date o	f Dis	sburse	ement			
								M M	/	D	D /	Y	Y Y	Y
	Mailing Address PO Box 8166							06		1	0	2	2011	
	Savannah	State GA	Zip Code 31412					Trans	sacti	ion ID): 1918	7417		
	Purpose of Disbursement Contribution			C)11			Amoun	t of	Each	Disburs	emer	nt this	Period
	Candidate Name			Cate									150	0.00
	Rep. John Barrow Office Sought: Y House Disburser	ment For:		Ţ	ype		_		-	7		_		
		Primary Other (sp	General					Contrib	utior	า				
_	Full Name (Last, First, Middle Initial)													
С.	Courtney For Congress							Date o	f Dis	sburse	ement			
							_	M M	/	D			Y Y	Y
	Mailing Address 38 Risley Road							06		1	0	Ż	2011	_
	City Service S	State CT	Zip Code 06066					Trans	sacti	ion ID) : 1918 ⁻	7436		
	Purpose of Disbursement			-		_								
	Contribution			0	11			Amoun	t of	Each	Disburs	semer	nt this	Period
	Candidate Name			Cate									100	0.00
	Rep. Joseph D. Courtney			Ţ	ype					7		_	100	0.00
	Office Sought: House Disburser Senate President X State: CT District: 02	ment For: Primary Other (sp	General	on				Contrib	ution	ı				
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	CHEDULE B (FEC Form 3X) EMIZED DISBURSEMENTS	Use sepa	arate schedule(s)		-	LINE N k only	NUMBER:	:			PA	GE 1	03 OI	- 117
			category of the Summary Page		—	21b	22 28a	×	23 28b		24 28c		25 29	26 30b
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$\left[\right]$	NAME OF COMMITTEE (In Full)													
	American Hospital Association PA	С												
<u>А</u> .	Full Name (Last, First, Middle Initial) Wally Herger For Congress Comm	ittee					Date o	f Di	sburse	emei	nt			
	Mailing Address PO Box 1007						06	/	D 1	D 0	/ Y	201	1	
	City Sillows	State CA	Zip Code 95988				Trans	sact	ion ID):19	91874	89		
	Purpose of Disbursement Contribution		93900)11		Amoun	t of	Fach	Dis	hurser	nent t	his Pi	eriod
	Candidate Name			Cate		ry/	Amoun		Lacii	DIS	buisci	-		
	Rep. Wally Herger Office Sought: V House Disburser	nent For: 2	2012		ype			-	7	_	- 7		2500.0	0
	State: CA District: 02	Primary Other (spec	General				Contrib	utior	n					
_	Full Name (Last, First, Middle Initial)													
В.	Loebsack For Congress						Date o	_			nt			
	Mailing Address PO Box 2720						м м 06			0	/ Y	201	1	
	Cedar Rapids	State IA	Zip Code 52406				Trans	sact	ion ID	D:1	91875	04		
	Purpose of Disbursement Contribution			(011		Amoun	t of	Each	Dis	burser	nent t	his Po	eriod
	Candidate Name Rep. David Wayne Loebsack			Cate	ego ype								2000.	00
	Office Sought: X House Disburser	nent For: 2 Primary Other (spec	General		<u>, , , , , , , , , , , , , , , , , , , </u>		Contrib	utio	n		,			
с.	Full Name (Last, First, Middle Initial)						Date o	f Di	sburse	eme	nt			
	Mailing Address P.O. Box 61337						м м 06	/		0	/ Y	201	1	
	City Server	State CO	Zip Code 80206				Trans	sact	ion ID):19	91875	23		
	Purpose of Disbursement Contribution			C)11		Amoun	t of	Foob	Die	huroor	nont t	hia D	ariad
				Cate	ego		Amoun		Each	DIS	buisei		1000.0	
	Rep. Diana DeGette Office Sought: X House Disburser	ment For: 2	2012	Т	ype	•	L	1	7	_	- 7			
	State: CO District: 01	Primary Other (spec	General cify) ▼				Contrib	utior	ו					
								-	-	_			500.0	0
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S	CHEDULE B (FEC Form 3X)		ovoto esta data ()				UMBER:			PAC	GE 104	OF 117
	EMIZED DISBURSEMENTS	for each	parate schedule(s) n category of the d Summary Page	(cł	2	only c 21b 27	one) 22 28a	× 23 28	L	24 28c	25 29	26 30b
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$\left \right\rangle$	NAME OF COMMITTEE (In Full)											
$\left \right\rangle$	American Hospital Association PA	C										
<u> </u>	Full Name (Last, First, Middle Initial)											
Α.	Huizenga For Congress						Date of		rsen		Y Y	Y
	Mailing Address 441 William Court						06	1	10		2011	
	City	State	Zip Code				Trans	action	ın ·	1918754	3	
	Zeeland	MI	49464				mans	action	. טו	1010/04	5	
	Purpose of Disbursement Contribution			0	11	11	Amount	t of Ea	ch D	Disbursen	nent this	Period
	Candidate Name			Cate	gory	/					50	0.00
	Rep. William Huizenga				/pe						50	0.00
	Senate X President	ment For: Primary Other (sp	General				Contribu	ution				
В.	Full Name (Last, First, Middle Initial) Peters For Congress						Date of	Disbu	rsen	nent		
	Mailing Address PO Box 226						06	/ [10		2011	Y
	City Bloomfield Hills	State MI	Zip Code 48303				Trans	action	ID :	1918761	9	
	Purpose of Disbursement Contribution			0	11	1	Amount	t of Ea	ch D	Disbursen	nent this	Period
	Candidate Name			Cate	gory	/					200	0.00
	Rep. Gary C. Peters			Ту	/pe		_	- 7	-		200	0.00
		ment For: Primary Other (sp	General				Contribu	ution				
с.	Full Name (Last, First, Middle Initial) Cleaver For Congress						Date of	Disbu	rsen	nent		
	Mailing Address 4801 Main Street, Stuite 1000						м м 06	/ [10		ү ү 2011	Y
	City Kansas City	State MO	Zip Code 64112				Trans	action	ID :	1918763	9	
	Purpose of Disbursement Contribution			0	11		A);-h		Devied
	Candidate Name				-		Amount	t of Ea	cn L	Disbursen	nent this	Period
	Rep. Emanuel Cleaver II				egory. /pe	/	1.				150	0.00
	Office Sought: X House Disburse Senate President	ment For: Primary Other (sp	General	.,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Contribu	ution			/	
_	State: MO District: 05											
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SCHEDULE B (FEC Form 3X)		FOR LINF	NUMBER: PAGE 105 OF 117
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check on	ly one)
	Detailed Summary Page	21b	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
Any information copied from such Reports and Stater or for commercial purposes, other than using the nam		sed by any per	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
American Hospital Association PA	C		
Full Name (Last, First, Middle Initial)			
A. Searchlight Leadership Fund			Date of Disbursement
Mailing Address 700 Thirteenth Street, NW Suite 600			06 14 2011
5	State Zip Code		Transaction ID : 19187659
Washington	DC 20005		
Purpose of Disbursement 2011 Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2500.00
Searchlight Leadership Fund		Туре	
Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify) ▼		2011 Contribution
Full Name (Last, First, Middle Initial)			
B. Friends Of Sherrod Brown			Date of Disbursement
			M = M / D = D / Y = Y = Y
Mailing Address PO Box 76187			06 14 2011
Washington	State Zip Code DC 20013		Transaction ID : 19187685
Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
Sen. Sherrod Brown		Туре	1000.00
Office Sought: House Disburser Senate President State: OH District:	ment For: 2012 Primary X General Other (specify) ▼		Contribution
Full Name (Last, First, Middle Initial)			
C. Jaime Herrera Beutler For Congres	SS		Date of Disbursement
Mailing Address PO Box 1614			06 / 14 / 2011
5	State Zip Code		Transaction ID : 19187723
Ridgefield Purpose of Disbursement	WA 98642		-
Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
Rep. Jaime Herrera Beutler		Type	1000.00
Senate President	ment For: 2012 Primary General Other (specify) ▼		Contribution
State: WA District: 03			
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	CHEDULE B (FEC Form 3X)	Llee eer	parate schedule(s)					JMBER	:			PA	GE	106	OF 117
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	y information copied from such Reports and Stater for commercial purposes, other than using the nan														
\setminus	NAME OF COMMITTEE (In Full)														
	American Hospital Association PA	С													
	Full Name (Last, First, Middle Initial)							_							
Α.	Friends Of Jim Clyburn							Date o	f Dis	sburse	em	nent			
	Mailing Address PO Box 12567							06	/	D 1	4			011	Y
	City	State	Zip Code					Turne				404070	40		
	Columbia	SC	29211					Trans	sact		:	191878	19		
	Purpose of Disbursement Contribution			0	11			Amoun	t of	Each	D	isburse	men	t this	Period
	Candidate Name			Cate	egoi	ry/								150	0.00
	Rep. James E. Clyburn			Ty	ype				-	7	-	- 7	-	150	0.00
	Office Sought: House Disburser Senate President State: SC District: 06	ment For: Primary Other (spe	General					Contrib	utior	١					
_	Full Name (Last, First, Middle Initial)														
В.	Nancy Pelosi For Congress							Date o		sburse			/	Y	V
	Mailing Address 700 Thirteeth Street, NW Suite 600							06	<i>'</i>		14			011	
	Washington	State DC	Zip Code 20005					Trans	sact	ion ID):	191878	35		
	Purpose of Disbursement Contribution)11			Amoun	t of	Each		isburse	mon	t thio	Pariod
	Candidate Name			1.00	-			Amoun		Lacii		isbui se	men	t tins	Fellou
	Rep. Nancy Pelosi			Cate	egoi ype			L						200	0.00
	Office Sought: House Disburser	ment For: Primary Other (spe	General		ype			Contrib	utior	n					
_	Full Name (Last, First, Middle Initial)														
C.	Ben Chandler For Congress							Date o	f Dis	sburse	em	nent			
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	Mailing Address P. O. Box 12678							06		1	4	1	2	011	
	City	State	Zip Code					Trans	sact	ion ID) ·	191878	55		
	Lexington	KY	40508				_	man	Juon			101010			
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	Candidate Name					,		Amoun	t of	Each	D	isburse	men	t this	Period
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	y information copied from such Reports and State for commercial purposes, other than using the nar														
$\left \right\rangle$	NAME OF COMMITTEE (In Full)														
	American Hospital Association PA	С													
<u> </u>	Full Name (Last, First, Middle Initial)							D .	(D.						
А.	Quigley For Congress							Date o	_					Y	N.
	Mailing Address PO Box 13040							06	/	D	14			011	Ŷ
	,	State	Zip Code					Trans	sacti	ion IE):	191878	77		
	Chicago Purpose of Disbursement	IL	60613		_	_	-								
	Contribution			0	11			Amoun	t of	Each	D	isburse	ment	this	Period
	Candidate Name			Cate							7			1000	0.00
	Rep. Michael Quigley Office Sought: V House Disburse	ment For:	2012	Ту	ype		-			7		7			
	Senate X President	Primary Other (sp	General					Contrib	utior	า					
_	State: IL District: 05						+-								
В.	Full Name (Last, First, Middle Initial) Allyson Schwartz For Congress							Date o	_						
	Mailing Address P.O. Box 2232							06	/	D	р 14			011	Y
	Jenkintown	State PA	Zip Code 19046					Trans	sact	ion II) :	191879	00		
	Purpose of Disbursement Contribution			0)11			Amoun	t of	Each	D	isburse	nent	this	Period
	Candidate Name Rep. Allyson Y. Schwartz			Cate				_			1			100	0.00
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	Senate X President	Primary Other (spe	General					Contrib	utio	n					
_	State: PA District: 13 Full Name (Last, First, Middle Initial)						-								
C.	Carper For Senate							Date o	_	sburs				Y	V
	Mailing Address 19 East Commons Blvd Second F	loor						06	<i>'</i>		21			011	Y
	City New Castle	State DE	Zip Code 19720					Trans	sact	ion IE	D :	192078	96		
	Purpose of Disbursement Contribution			0	11						_				
	Candidate Name							Amoun	t of	Each	i D)isburse	ment	this	Period
	Sen. Thomas R. Carper			Cate Ty	egor ype									2500	0.00
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	y information copied from such Reports and Stater for commercial purposes, other than using the nan					/ pers	on for th	e pu	rpose		solicitin	g con	tributi	ons
	NAME OF COMMITTEE (In Full)													
	American Hospital Association PA	C												
<u> </u>	Full Name (Last, First, Middle Initial)							()						
А.	Tiberi For Congress								isburs	em	_	Y	V	<i>x</i> = 1
	Mailing Address 2931 E Dublin Granville Road Suite 190						0			21		201		T
	5	State	Zip Code				Tra	nsact	tion ID):	192079	79		
	Columbus Purpose of Disbursement	OH	43231											
	Contribution			0	011		Amou	int of	Each	n D	isburse	ment t	this P	eriod
	Candidate Name			Cate	egor	ry/							1000.	00
	Rep. Patrick J. Tiberi	nant Fari	0010	T	ype				7	-	7	-	1000.	00
	Office Sought: House Disburser Senate President State: OH District: 12	nent For: Primary Other (spe	General				Contr	ibutio	n					
—	Full Name (Last, First, Middle Initial)													
В.	Friends Of Dennis Cardoza						Date	of D	isburs	em	ient			
							M	M /	D	D	/ Y	Y	Y	Y
	Mailing Address PO Box 2749						0	6		21		20	11	
	Merced	State CA	Zip Code 95340				Tra	nsac	tion II	D :	192082	25		
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	Rep. Dennis A. Cardoza Office Sought: Y House Disburser	nent For:	2040	Ţ	ype			-	7	-	7	_		
	Senate	Primary Other (spe	General				Contr	ibutio	'n					
	Full Name (Last, First, Middle Initial)													
С.	John Carney For Congress						Date	of D	isburs	em	lent			
	Mailing Address PO Box 2162						м Об			D 21	/ Y	201	11 1	Y
	City	State	Zip Code						_					
	Wilmington	DE	19899				Tra	nsac	tion IE):	192082	94		
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	Candidate Name)11	_	Amo	int of	Each	۱D	isburse	ment 1	this P	eriod
	Rep. John Carney			Cate T	egor ype								1000.	00
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	Senate President	Primary Other (spe	General ecify) ▼				Contr	ibutio	n					
	State: DE District: 01													
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			Summary Page			21b 27		22 28a	×	23 28b	\mid	24 28c		25 29	26 30b
	y information copied from such Reports and Stater for commercial purposes, other than using the nam					/ pers		or the		oose		solicitir		ntribu	itions
$\left[\right]$	NAME OF COMMITTEE (In Full)														
	American Hospital Association PA	С													
Α.	Full Name (Last, First, Middle Initial) Kind For Congress Committee							Date of	f Dis	sburse	em	ent			
								M M	/	D	D	/	/ Y	Y	Y
	Mailing Address 205 5th Avenue South Suite 428							06		2	21		2	011	
	5	State	Zip Code					Trans	acti	on ID):	192084	58		
	La Crosse Purpose of Disbursement	WI	54601				-								
	Contribution			0)11			Amoun	t of	Each	D	isburse	men	t this	Period
	Candidate Name Rep. Ron Kind			Cate	egoi ype									100	0.00
	•	ment For:	2012	13	ype		1 '		-	· · · ·					
	Senate X President	Primary Other (sp	General				0	Contribu	ution	1					
_	State: WI District: 03 Full Name (Last, First, Middle Initial)														
в.	LoBiondo For Congress						1	Date of	f Dis	sburse	em	ent			
								M M	/	D	D	7/	/ – Y	Y	Y
	Mailing Address P.O. Box 550							06		2	21		2	011	
	Vineland	State NJ	Zip Code 08362					Trans	sacti	ion ID):	192112	48		
	Purpose of Disbursement Contribution			C)11			Amoun	t of	Each	D	isburse	men	t this	Period
	Candidate Name			Cate										100	0.00
	Rep. Frank A. LoBiondo			Ty	ype				-	7	-			100	0.00
		ment For: Primary Other (sp	General				(Contrib	utior	١					
_	Full Name (Last, First, Middle Initial)														
C.	America Works PAC							Date of	_	sburse		ent	()) () () () () () () () () (Y	
	Mailing Address PO BOX 76187							06	1		21			011	
	City Standard Stand	State DC	Zip Code 20013					Trans	sacti	ion ID):	192113	15		
	Purpose of Disbursement 2011 Contribution		20010)11		-	_			_				
	Candidate Name						'	Amoun	t of	Each	D	isburse	men	t this	Period
	America Works PAC			Cate Ty	egoi ype				_	_				250	0.00
	Office Sought: House Disburser	ment For:	I		-		1			7		7			
	Senate	Primary	General				2	2011 Co	ontri	butior	n				
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S	CHEDULE B (FEC Form 3X)			OR I	LINE NU	JMBER:			F	AGE	110 (OF 117
IT	EMIZED DISBURSEMENTS	Use separate schedule(s for each category of the Detailed Summary Page) (c	heck	conly or 21b 27	ne) 22 28a	×	23 28b	24	. –	25 29	26 30b
	y information copied from such Reports and Staten for commercial purposes, other than using the name											
	NAME OF COMMITTEE (In Full) American Hospital Association PAC	C										
Α.	Full Name (Last, First, Middle Initial) BRIDGE PAC: Building Relationships In Diverse	e Geographic Environmer	nts PAC)		Date of	f Dis	burse		Y	YY	Y
	Mailing Address 499 South Capitol St., SW Suite 422					06		21		_ 2	2011	
	City S Washington Purpose of Disbursement	StateZip CodeDC20003	1			Trans	actio	on ID	: 19211	662		
	2011 Contribution Candidate Name			011		Amount	t of I	Each	Disburs	emen	t this	Period
	BRIDGE PAC: Building Relationships In Diverse Geograph			egor ype	y/	L		, .			5000	0.00
	Senate	Primary General Other (specify)				2011 Co	ontrik	oution				
в.	Full Name (Last, First, Middle Initial)	ucial PAC				Date of	f Dis	burse	_	Y	YY	Y
	Mailing Address 209 Pennsylvania Avenue SE					06		2	1	2	2011	
	Washington	StateZip CodeDC20003				Trans	acti	on ID	: 19211	722		
	Purpose of Disbursement 2011 Contribution Candidate Name			011 egor	v/	Amount	t of I	Each	Disburs	emen		_
				ype		2011 Co	ontrik	oution	7		150	5.00
C.	Full Name (Last, First, Middle Initial)	ection PAC				Date of	f Dis		_			
	Mailing Address 700 Thirteenth Street, NW Suite 600					06	/	21			2011	Y
	,	StateZip CodeDC20005				Trans	acti	on ID	: 19211	830		
	2011 Contribution Candidate Name		1	011 egor	y/	Amount	t of I	Each	Disburs	emen	nt this	_
			<u> </u>	ÿpe		2011 Co	ontrik	oution			4000	
s	UBTOTAL of Disbursements This Page (optional)				•						10500	0.00
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	CHEDULE B (FEC Form 3X)	Use ser	parate schedule(s)					MBER:	:			PA	AGE	111	OF 117
IT	EMIZED DISBURSEMENTS	for each	category of the	(c	nec	k only 21b	on	ie) ∏ 22	X	23	Г	24		25	26
		Detailed	Summary Page		\vdash	27	\vdash	28a	\vdash	28b	┝	28c	┢	29	30b
	y information copied from such Reports and Stater for commercial purposes, other than using the nan														
$\left \right\rangle$	NAME OF COMMITTEE (In Full)														
	American Hospital Association PA	С													
_	Full Name (Last, First, Middle Initial)														
А.	Daniel Webster for Congress							Date of							
	Mailing Address 3400 Old Winter Garden Road							06	/	D	21	/		011	Ŷ
	City	State	Zip Code					Trans	acti	ion IF	. .	192121	12		
	Orlando	FL	32805					Trans	act			19212	43		
	Purpose of Disbursement Contribution			0	11			Amoun	t of	Each	D	isburse	emen	t this	Period
	Candidate Name			Cate	egoi	ry/					1			250	0.00
	Rep. Daniel Webster			T	ype			_	-	1	-	- 7	-	230	5.00
	Office Sought: House Disburser Senate President State: FL District: 08	nent For: Primary Other (spe	General				C	Contrib	utior	ı					
—	Full Name (Last, First, Middle Initial)														
В.		ivis					I	Date of	_						
	Mailing Address 5956 W. Race Avenue							06	/	D	21	/		2011	Y
	Chicago	State IL	Zip Code 60644					Trans	sact	ion II	D :	192122	206		
	Purpose of Disbursement Contribution			C)11			Amoun	t of	Each	D	isburse	men	t this	Period
	Candidate Name			Cate		rv/									_
	Rep. Danny K. Davis				ype					7				100	0.00
		nent For: Primary Other (spe	General				C	Contrib	utior	٦					
_	Full Name (Last, First, Middle Initial)														
C.	Jesse Jackson Jr For Congress						I	Date of	f Dis	sburs	em	ent			
	Mailing Address P.O. Box 490286							м м 06	/		21	/		011	Y
	City	State	Zip Code					Trans	act	ion IF	۰ د	192122	284		
	Chicago	IL	60649					mana	aci			192122	204		
	Purpose of Disbursement Contribution				11						_				.
	Candidate Name					_		Amoun	t of	Each	I D	isburse	emen	t this	Period
	Rep. Jesse L. Jackson Jr.			Cate T	egoi ype				_	_			_	100	0.00
	Office Sought: House Disburser Senate President	ment For: Primary Other (spe	General				c	Contribu	utior	1					
	State: IL District: 02										_				
s	UBTOTAL of Disbursements This Page (optional)									9		,		4500	0.00
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S	CHEDULE B (FEC Form 3X)	11		F	OR I	LINE N	IUME	BER:	:			PA	GE	112	OF 117
	EMIZED DISBURSEMENTS	for each	parate schedule(s) n category of the I Summary Page	(c	heck	k only 21b 27		2 8a	×	23 28b		24 28c		25 29	26 30b
	y information copied from such Reports and States for commercial purposes, other than using the nar														
$\left \right $	NAME OF COMMITTEE (In Full)														
	American Hospital Association PA	С													
Α.	Full Name (Last, First, Middle Initial) Friends Of Nan Hayworth						Da	te o	f Dis	sburse	eme	ent			
	Mailing Address 51 Gleneida Avenue							м 06	/		D 21	/ 1		011	Y
	City	State	Zip Code				_	_		_					
	Carmel	NY	10512				T	rans	acti	ion ID) :1	192123	49		
	Purpose of Disbursement Contribution			0)11		Am	oun	t of	Each	Di	sburse	ment	t this	Period
	Candidate Name			Cate	agor	×/	100				-		-		_
	Rep. Nan Hayworth			ype	y/								1000	0.00	
		ment For: Primary Other (sp	General				Cor	ntrib	utior	1					
_	Full Name (Last, First, Middle Initial)														
В.	Pete King For Congress Committe	e						te o	_	sburse		_		Y	V
	Mailing Address Post Office Box 1428						IVI	06	<i>'</i>		21			011	T
	Seaford	State NY	Zip Code 11783				т	rans	sact	ion IE	D :1	192124	42		
	Purpose of Disbursement Contribution			C)11		Am	oun	t of	Each	Di	sburse	ment	t this	Period
	Candidate Name			Cate		у/								100	0.00
	Rep. Peter T. King Office Sought: Y House Disburse	mant Far		L.	ype					7		7			
		ment For: Primary Other (sp	General				Со	ntrib	utior	ו					
с.	Full Name (Last, First, Middle Initial) Scott Rigell For Congress						Da	te o	f Dis	sburse	eme	ent			
	Mailing Address 915 First Colonial Road Suite 100							06	/	2	21	/ Y		011 011	Y
		State VA	Zip Code 23454				т	rans	sact	ion IE	D :1	192124	99		
	Purpose of Disbursement Contribution			0)11		٨٣	0110	t of	Fach		sburse	mont	thic	Poriod
	Candidate Name					n / 1	AII	oun		Each		spuisei	ment	. uns	renou
	Rep. Edward Scott Rigell			Cate T	egor ype	y/								1000	0.00
	Office Sought: House Disburse Senate President	ment For: Primary Other (sp	General				Cor	ntrib	utior	1					
_	State: VA District: 02														
s	UBTOTAL of Disbursements This Page (optional)									,		. ,		3000	0.00
Т	OTAL This Period (last page this line number only)								,					

S	CHEDULE B (FEC Form 3X)			FOR LINE N			PA	GE 113	OF 117
	EMIZED DISBURSEMENTS	Use separate sched for each category of		(check only	one)				
-		Detailed Summary F		21b 27	22 > 28a	< 23 28b	24 28c	25	26 30b
	y information copied from such Reports and Stater for commercial purposes, other than using the nar			by any perso	n for the pu	irpose of :	soliciting	g contrib	utions
\setminus	NAME OF COMMITTEE (In Full)								
	American Hospital Association PA	С							
^	Full Name (Last, First, Middle Initial)				Data of D	hich. we ame	- mt		
А.	Friends Of Joe Heck				Date of D			YY	Y
	Mailing Address PO Box 750114				06	27		2011	
	City Las Vegas	State Zip Code NV 89136			Transac	tion ID : 1	921282	28	
	Purpose of Disbursement Contribution			011	Amount o	f Each Di	oburoor	nont this	Doriod
	Candidate Name				Amount o		spuisei		Fellou
	Rep. Joe Heck			Category/ Type				100	0.00
		ment For: 2012 Primary Gen Other (specify) v	eral		Contributio	on	,		
	State: NV District: 03	· · · · ·							
	Full Name (Last, First, Middle Initial)								
В.	Blaine Luetkemeyer for Congress	2012			Date of D		ent		
	Mailing Address P.O. BOX 25				06	27	/ Y	2011	Y
	Holts Summit	State Zip Code MO 65043			Transac	tion ID : 1	1921292	29	
	Purpose of Disbursement Contribution		10	011	Amount o	f Each Di	sburser	nent this	Period
	Candidate Name			Category/				100	00.00
	Rep. Blaine Luetkemeyer			Туре		7	7	100	0.00
		ment For: 2012 Primary Gene Other (specify) ▼	eral		Contributio	วท			
C.	Full Name (Last, First, Middle Initial) Pat Meehan For Congress				Date of D		_		
	Mailing Address 50 S. Providence Road PO Box 308				06	27	/ Y	2011	Y
	City Media	State Zip Code PA 19063			Transac	tion ID : 1	1921357	79	
	Purpose of Disbursement Contribution		1	011	Amount o	f Each Di	oburoor	nont this	Doriod
	Candidate Name			Category/	Amount o		spuisei		Fellou
	Rep. Patrick Meehan			Type				100	0.00
	Office Sought: House Disburse Senate President State: PA District: 07	ment For: 2012 Primary Gen Other (specify) ▼	eral		Contributio	on	,		
					_				
s	UBTOTAL of Disbursements This Page (optional)			····· ►		7		300	0.00
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	CHEDULE B (FEC Form 3X)		oroto cohodula(-)				IUMBER:	:		PA	GE 114	OF 117
	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(C	heck	c only o 21b 27	one) 22 28a	×	23 28b	24 28c	25 29	26 30b
	ny information copied from such Reports and State for commercial purposes, other than using the nar											
	NAME OF COMMITTEE (In Full)											
	American Hospital Association PA	С										
~	Full Name (Last, First, Middle Initial)						Date o	f Dio	buroo	mont		
А.	Pat Roberts for Senate							i Dis	Durse		Y Y	Y
	Mailing Address PO Box 433						06		27		2011	
	City Great Bend	State KS	Zip Code 67530				Trans	actio	on ID	: 192136	39	
	Purpose of Disbursement	1.0	67550									
	Contribution			0	011		Amoun	t of I	Each	Disburse	ment this	Period
	Candidate Name Sen. Pat Roberts			Cate		y/					100	00.00
		ment For:	2014	13	ype				,			
	X Senate	Primary	General				Contrib	ution				
	State: KS District:	Other (spe	ecify) 🔻									
_	Full Name (Last, First, Middle Initial)											
В.	AMERIPAC: The Fund for a Great	ter Amei	rica				Date of	f Dis	burse	ment		
	Mailing Address 700 Thirteenth Street, NW Suite 600						06	/	D 2		2011	Y
	City Washington	State DC	Zip Code 20005				Trans	sacti	on ID	: 192138	59	
	Purpose of Disbursement 2011 Contribution			C)11		Amoun	t of I	Each	Disburse	ment this	Period
	Candidate Name AMERIPAC: The Fund for a Great	or Amor	rico	Cate		y/					25	00.00
		ment For:	ILa	- 13	ype				,	7		
	Senate	Primary	General				2011 C	ontrik	oution			
	State: District:	Other (spe	ecify) 🔻									
_	Full Name (Last, First, Middle Initial)											
C.	Freedom Fund						Date o	f Dis				
	Mailing Address 128 N. Columbus Street						м м 06	/	27		2011	Ŷ
	2	State	Zip Code				Trans	acti	on ID	: 192139	76	
	Alexandria Purpose of Disbursement	VA	22314	_	_							
	2011 Contribution			0)11		Amoun	t of I	Each	Disburse	ment this	Period
	Candidate Name Freedom Fund			Cate	egor ype	y/					100	00.00
		ment For:			700				,	7		
	Senate	Primary	General				2011 C	ontrik	oution			
	State: District:	Other (spe	ecify) 🔻									
Г							_	-	_			_
s	UBTOTAL of Disbursements This Page (optional)						Ŀ	_	,	7	450	00.00
т	OTAL This Period (last page this line number only	r)							,			

	HEDULE B (FEC Form 3X)	Use sep	arate schedule(s)			LINE N		ER:				P	AGE	115	OF 117
-	EMIZED DISBURSEMENTS	for each	category of the Summary Page			21b 27	22 28		X	23 28b	F	24 280		25 29	26 30b
	y information copied from such Reports and Stater for commercial purposes, other than using the nan														
$\left \right\rangle$	NAME OF COMMITTEE (In Full)														
	American Hospital Association PA	С													
	Full Name (Last, First, Middle Initial) Victory Now!						Date	e of	Dis	burs	em	nent			
	Mailing Address 10605 Concord Street Suite 202						M Q	м 6	/	D 2	27			011	Y
		State MD	Zip Code 20895				Tra	ansa	icti	on IC):	19214	089		
	Purpose of Disbursement 2011 Contribution			0	11		Amo	ount	of	Each	D	Disburse	emen	t this	Period
	Candidate Name Victory Now!			Cate Ty	egoi ype					, .	2			100	0.00
	Office Sought: House Disburser Senate President State: District:	ment For: Primary Other (spe	General ccify) ▼				2011	Coi	ntril	butior	n				
В.	Full Name (Last, First, Middle Initial) Doyle For Congress Committee						М	М	Dis /	burse	D) /		Ŷ	Y
	Mailing Address 205 Hawthorne Court	<u></u>	7:0				C)6		2	27		2	2011	
	Pittsburgh	State PA	Zip Code 15221				Tra	ansa	acti	on IE) :	19214	118		
	Purpose of Disbursement Contribution Candidate Name)11		Amo	ount	of	Each	D	Disburse	emen	t this	Period
	Rep. Michael F. Doyle Office Sought: Y House Disburser	ment For:	2012	Cate Ty	egoi ype		L	_		7				100	0.00
		Primary Other (spe	General				Cont	tribut	tion	1					
	Full Name (Last, First, Middle Initial) Latta For Congress						Date	e of	Dis	burs	em	nent			
	Mailing Address P.O. Box 106							6 6	/	2	27			011	Y
	Bowling Green	State OH	Zip Code 43402				Tra	ansa	acti	on IE):	19214	244		
	Purpose of Disbursement Contribution			0	11		Amo	ount	of	Each	n D	Disburse	emen	t this	Period
	Candidate Name Rep. Robert Latta			Cate Ty	egoi ype						2			100	0.00
	Office Sought: X House Disburser Senate President State: OH District: 05	nent For: Primary Other (spe	General				Cont	ribut	tion						
s	JBTOTAL of Disbursements This Page (optional)					• •				7	1	. ,		3000	0.00
т	OTAL This Period (last page this line number only))				. 🕨				,					

S	CHEDULE B (FEC Form 3X)			F	OR	LINE N	UMBER	:			PA	GE	116 (DF 117
IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(c	hec	k only 21b 27	one) 22 28a	×	23 28b		24 28c		25 29	26 30b
	y information copied from such Reports and Stater for commercial purposes, other than using the nar													
	NAME OF COMMITTEE (In Full) American Hospital Association PA	С												
Α.	Full Name (Last, First, Middle Initial) Betty Sutton For Congress						Date o	_	sburse			Y Y	Y	Y
	Mailing Address 1700 W Market St #155						06		2	27		_20	011	
	Akron	State OH	Zip Code 44313				Trans	sacti	ion ID):	192143	86		
	Purpose of Disbursement Contribution			C)11		Amoun	t of	Each	D	isburse	ment	this	Period
	Candidate Name Rep. Betty S. Sutton			Cate T	egoi ype				7		,		1000	0.00
	Office Sought: House Disburser Senate President Image: Senate State: OH District: 13	ment For: ; Primary Other (spe	General				Contrib	utior	ì					
в.	Full Name (Last, First, Middle Initial) Chris Gibson For Congress						Date o			em		Y Y	Y	Y
	Mailing Address PO Box 247						06		3	30		20	011	
	Kinderhook	State NY	Zip Code 12106				Trans	sact	ion ID):	192309	926		
	Purpose of Disbursement Contribution Candidate Name Rep. Chris Gibson			Cate)11 egoi ype		Amoun	t of	Each	D	isburse	ment	this 2000	_
	Office Sought: X House Disburser	ment For: Primary Other (spe	General		ype		Contrib	utior	ו					
с.	Full Name (Last, First, Middle Initial) McKinley For Congress						Date o			em			Y	V
	Mailing Address 32 20th Street						06	Í		30			011	
	City Wheeling Purpose of Disbursement	State WV	Zip Code 26003				Trans	sact	ion ID):	192309	927		
	Contribution Candidate Name Rep. David McKinley			Cate	911 egoi ype		Amoun	t of	Each	D	isburse	ment	this 1000	
	Office Sought: House Disburser Senate President State: WV District: 01	ment For: ; Primary Other (spe	General				Contrib	utior	ı		,			
s	UBTOTAL of Disbursements This Page (optional)										1.40		4000	.00
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 117 OF 117							
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check or 211 27		•••	23 28b	24 28c	25 29	26 30b	
Any information copied from such Reports and Stater or for commercial purposes, other than using the name									
NAME OF COMMITTEE (In Full)									
American Hospital Association PA	C								
Full Name (Last, First, Middle Initial) A. Wicker For Senate			Date o	f Disb	urser	ment			
Mailing Address PO Box 64			06	06 / D D / Y Y Y Y Y 06 10 2011					
City Jackson	State Zip Code MS 39205		Trans	action	n ID :	192309	29		
Purpose of Disbursement Contribution		011	 Amoun	t of Fa	ach [Disburse	ment this	Period	
Candidate Name		Category/							
Sen. Roger Wicker		Туре			_	- 7	50	0.00	
X Senate President	nent For: 2012 Primary General Other (specify) ▼		Contrib	ution					
State: MS District: Full Name (Last, First, Middle Initial)									
В.			Date o					_	
Mailing Address			M	/	D	D / Y	Y Y	Y	
City	State Zip Code								
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Candidate Name	1	Category/ Type		. ,					
Office Sought: House Disburser Senate President	nent For: Primary General Other (specify) v								
State: District:									
Full Name (Last, First, Middle Initial) C.				Date of Disbursement					
Mailing Address					D = 1		- Y - Y	- Y	
City	State Zip Code								
Purpose of Disbursement				t of E	oob [Dieburger	ment this	Deried	
Candidate Name Category/ Type			Anoun	Amount of Each Disbursement this Period					
Office Sought: House Disburser Senate President	nent For: Primary General Other (specify) v								
State: District:					_				
SUBTOTAL of Disbursements This Page (optional)		····· ►		,	_			0.00	
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