FEC FORM 3X

01/28/2020 11 : 00

PAGE 1 / 118

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

						Office Use Only	
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼		ple: If typin he lines.	ig, type	12FE4M	5	
USACS PAC							1
ADDRESS (number and street)	4535 Dressler RD NW						
Check if different than previously reported. (ACC)	Canton				OH	44718	
2. FEC IDENTIFICATION NU		CITY A		S		ZIP CO	DDE 🔺
C C00544957		3. IS THIS REPORT	~	IEW N) OR	(A)	IENDED	
4. TYPE OF REPORT (Choose One)	(b) Monthly Report	Feb 20 (M2)	Ν	/lay 20 (M5)	Aug	20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due On:	Mar 20 (M3)	J	lun 20 (M6)	Sep	20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15		Apr 20 (M4)	J	lul 20 (M7)	Oct	20 (M10)	Jan 31 (YE)
Quarterly Report (C	(c) 12-Day	Pr	rimary (12P)	General	(12G)	Runoff (12R)
July 15 Quarterly Report (C	(2) PRE-Election Report for th		onvention (*	12C)	Special (125)	
October 15 Quarterly Report (C				(20)		120)	
January 31 Year-End Report (Y		lection on	M M /	D D /	Y Y Y Y Y	in the State	
July 31 Mid-Year Report (Non-electio Year Only) (MY)	n (d) 30-Day POST-Election Report for the		eneral (30G	i)	Runoff (3	30R)	Special (30S)
Termination Report (TER)			M M /	D D /	Y Y Y Y Y	in the State	
5. Covering Period 07)19	through	M M 12	/ D D / 31_	Y Y Y Y 2019]
I certify that I have examined th		st of my knowle	edge and b	elief it is true	e, correct and	d complete.	
Type or Print Name of Treasure	Panitch, Orlee, , , , r						
Signature of Treasurer	ch, Orlee, , ,	[E	Electronically	Filed] Da	ate 01	1 / D D / 28	2020
NOTE: Submission of false, erron	eous, or incomplete inform	nation may subje	ect the pers	on signing thi	s Report to th	ne penalties of 5	2 U.S.C. § 30109
Office Use Only						FEC FOI Rev. 05/	

X

Γ	- FEC Form 3X (Rev. 05/2016)	SUMMARY PAGE RECEIPTS AND DISBURSEMENTS	Page 2
W	Vrite or Type Committee Name		
ι	USACS PAC		
R	Report Covering the Period: From:	/ D D / Y Y Y Y 01 2019 To:	12 31 / Y Y Y Y 2019
	_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2019		105141.76
	(b) Cash on Hand at Beginning of Reporting Period	129483.92	
	(c) Total Receipts (from Line 19)	147718.39	263060.55
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	277202.31	368202.31
7.	Total Disbursements (from Line 31)	145700.53	236700.53
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	131501.78	131501.78
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

USACS PAC

Report Covering the Period: From: 07	/ D D / Y Y Y Y 01 2019	To: 12 31 2019				
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
. Contributions (other than loans) From:						
(a) Individuals/Persons Other						
Than Political Committees						
(i) Itemized (use Schedule A)	143915.83	240750.14				
(ii) Unitemized	3802.56	18310.41				
(iii) TOTAL (add						
Lines 11(a)(i) and (ii)▶	147718.39	259060.55				
		0.00				
(b) Political Party Committees	0.00	0.00				
(c) Other Political Committees	0.00	0.00				
(such as PACs)	0.00	0.00				
(d) Total Contributions (add Lines						
11(a)(iii), (b), and (c)) (Carry	147718.39	259060.55				
Totals to Line 33, page 5)►	147710.00					
2. Transfers From Affiliated/Other	0.00	0.00				
Party Committees	0.00					
3. All Loans Received	0.00	0.00				
	0.00	0.00				
I. Loan Repayments Received	0.00					
5. Offsets To Operating Expenditures						
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00				
6. Refunds of Contributions Made						
to Federal Candidates and Other						
Political Committees	0.00	1000.00				
7. Other Federal Receipts						
(Dividends, Interest, etc.)	0.00	3000.00				
3. Transfers from Non-Federal and Levin Funds						
(a) Non-Federal Account						
(from Schedule H3)	0.00	0.00				
(b) Levin Funds (from Schedule H5)	0.00	0.00				
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00				
). Total Receipts (add Lines 11(d),						
12, 13, 14, 15, 16, 17, and 18(c))▶	147718.39	263060.55				
. Total Federal Receipts						
(subtract Line 18(c) from Line 19)►	147718.39	263060.55				

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016) Page 4 COLUMN A COLUMN B **II. Disbursements Total This Period Calendar Year-to-Date** 21. Operating Expenditures: Allocated Federal/Non-Federal (a) Activity (from Schedule H4) 0.00 0.00 Federal Share (i) 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 200.53 Expenditures 200.53 (c) Total Operating Expenditures 200.53 (add 21(a)(i), (a)(ii), and (b)) 200.53 22. Transfers to Affiliated/Other Party Committees..... 0.00 0.00 23 Contributions to Federal Candidates/Committees 189500.00 and Other Political Committees... 117500.00 24. Independent Expenditures (use Schedule E)..... Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).... 0.00 0.00 25. 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 Loans Made.... Refunds of Contributions To: (a) Individuals/Persons Other 0.00 27. 28. 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees 0.00 0.00 Other Political Committees (C) (such as PACs)..... 0.00 0.00 Total Contribution Refunds (d) (add Lines 28(a), (b), and (c))...... 0.00 0.00 29. Other Disbursements (Including Non-Federal Donations)..... 47000.00 28000.00 30. Federal Election Activity (52 U.S.C. § 30101(20)) (a) Allocated Federal Election Activity (from Schedule H6) (i) Federal Share 0.00 0.00 (ii) "Levin" Share..... 0.00 0.00 (b) Federal Election Activity Paid Entirely With Federal Funds 0.00 0.00 Total Federal Election Activity (add (C) Lines 30(a)(i), 30(a)(ii) and 30(b)) 0.00 0.00 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 145700.53 236700.53 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... 145700.53 236700.53

DETAILED SUMMARY PAGE

of Disbursements

COLUMN A

Total This Period

FEC Form	3X	(Rev.	05/2016))
----------	----	-------	----------	---

III. Net Contributions/ Operating Expenditures

33.	Total Contributions (other than loans)
	(from Line 11(d), page 3)
34.	Total Contribution Refunds
	(from Line 28(d))
35.	Net Contributions (other than loans)
	(subtract Line 34 from Line 33)
36.	Total Federal Operating Expenditures
	(add Line 21(a)(i) and Line 21(b))
37.	Offsets to Operating Expenditures
	(from Line 15, page 3)
38.	Net Operating Expenditures
	(subtract Line 37 from Line 36)

					-	147718.39
						0.00
		-			-	0.00
			1			147718.39
	÷	-	÷	÷	-	
		-			_	200.53
—	÷		÷	÷	-	
		-7			-7	0.00
	1		1			200.53
1		-7-			-7-	

1.1						259060.55
		-7			7	259060.55
						0.00
	-	-	1	1	-7	0.00
						259060.55
		7			- 7	20000.00
						200.53
		-7			-7	200.00
						0.00
		-7			-,-	0.00
E	-	_			_	

COLUMN B

Calendar Year-to-Date

Page 5

Use separate schedule(s)

FOR LINE NUMBER:

PAGE

6 OF

		Use separate schedule(s)	(check or	(check only one)										
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a]11b	11c	12	<u> </u>						
Any information copied from such Reports and or for commercial purposes, other than using the														
NAME OF COMMITTEE (In Full) USACS PAC		, ₁ , , , , , , , , , , , , , , , , , , ,												
Full Name of Individual (Last, First, Middle I A. Aboutalib, Angela, , ,	nitial) or Full O	rganization Name	Date of	of Re	eceipt									
Mailing Address 2 East Erie St Apt 3306			12	И /	31) / Y	2019	Y						
City Chicago	State IL	Zip Code 60611-3169				SA11AI.								
FEC ID number of contributing federal political committee.	C			Amount of Each Receipt this Period										
Name of Employer (for Individual) Virtual Locations		upation (for Individual) ior Director of Quality and Educat			o Item Iy									
Receipt For: 2019 Primary General X Other (specify) V Other	Aggregate	Year-to-Date ▼ 1200.00												
Full Name of Individual (Last, First, Middle I Adler, Aaron, , ,	nitial) or Full O	rganization Name	Date of	of Re	eceipt									
Mailing Address 7 Midsummer Court	State	Zip Code	12											
Gaithersburg	MD	20878-5228		Transaction ID : SA11AI.10192 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С			120.00										
Name of Employer (for Individual) MEP Health, LLC		upation (for Individual) P Lead		Memo Item \$20/monthly										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00]											
Full Name of Individual (Last, First, Middle I C. Adolph, Randall, , ,	nitial) or Full O	rganization Name	Date of	of Re	eceipt									
Mailing Address 4858 River Oaks Rd			12		31) / Y	2019	Y						
City Clover	State SC	Zip Code 29710				SA11AI.	10180 is Period	-						
FEC ID number of contributing federal political committee.	С				y .	. y	250.0	00						
Name of Employer (for Individual) USACS Medical Group, LTD	Fire	upation (for Individual) fighter	\$250/or		o Item ne									
Receipt For: 2019 Primary General X Other (specify) Other	Year-to-Date ▼ 250.00]												
SUBTOTAL of Receipts This Page (optional)					, .	. ,	970.0	00						
TOTAL This Period (last page this line number	r only)					-								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 7 OF

118

ITEMIZED RECEIPTS				Use separate schedule(s) for each category of the				(check only one)							
				ach category of the iled Summary Page		X 11a 13		11b 14	11c 15	12	17				
	y information copied from such Reports and S for commercial purposes, other than using the					for the		oose of	soliciting	g contribu	utions				
	NAME OF COMMITTEE (In Full)														
<u>А.</u>	Full Name of Individual (Last, First, Middle In Albaugh, Chad, , ,	itial) or Full O	rganiza	ion Name		Date of	f Re	ceipt							
	Mailing Address 1602 River Bluff Rd					12 31 2019									
	City Morehead City	State NC		Code 8557					SA11AI. eceipt th	10044 his Period	1				
	FEC ID number of contributing federal political committee.	С								900	.00				
	Name of Employer (for Individual) USACS Medical Group, LTD		upation lical Dire	(for Individual) ector		M \$150/mc		ltem y							
	Receipt For: 2019 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to	Date ▼ 1500.00											
в.	Full Name of Individual (Last, First, Middle In Aldeen, Amer, , , Mailing Address 17327 Ladera Estates Blvd	itial) or Full O	rganiza	ion Name	_	Date of	f Re	D D	/ Y	Y Y	Y				
	City	State FL		Code 3548-4817		12 31 2019 Transaction ID : SA11AI.10027									
	Lutz FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period											
	Name of Employer (for Individual) Virtual Locations		Occupation (for Individual) Chief Medical Officer					Memo Item \$150/monthly							
	Receipt For: 2019 Primary General Conter (specify) The other of the other other of the other other of the other	Aggregate	Year-to	Date											
с.	Full Name of Individual (Last, First, Middle In Aldred, Brian, , ,	itial) or Full O	rganiza	ion Name		Date of	f Re	ceipt							
	Mailing Address 6300 La Calma Drive, Suite 2	200				^M 12	/	D D D 31	/ Y	ү ү 2019	Y				
	City Leander	State TX		Code 3641-3628					SA11AI. eceipt th	. 10039 his Period	d				
	FEC ID number of contributing federal political committee.	С				Ľ.		5	. <u>,</u>	900	.00				
	Name of Employer (for Individual) Emergency Service Partners, LLC Receipt For: 2019	Syst	Occupation (for Individual) System Medical Director					y Item							
	Primary General Conter (specify) Other	Aggregate													
s	UBTOTAL of Receipts This Page (optional)						_	9	9	2700	.00				

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

Use separate schedule(s)

FOR LINE NUMBER:

PAGE

8 OF

IT.			Use separate schedule(s)	(cł	(check only one)								
	EMIZED RECEIPTS		for each category of the Detailed Summary Page		X 11a 13		11b	11c 12 15 16			17		
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	I ay not be sold or used by any p address of any political committe	person	for the	pur ntrib	pose of	soliciting	g cont	tributio	ons		
	NAME OF COMMITTEE (In Full) USACS PAC												
<u> </u>	Full Name of Individual (Last, First, Middle Ini Altmin, Stephen, , ,	tial) or Full O	organization Name		Date of	f Re	eceipt						
	Mailing Address 2641 4th Street				12 31 2019								
	City Boulder	State CO	Zip Code 80304-3201					SA11AI. eceipt th					
	FEC ID number of contributing federal political committee.	С			<u> </u>				;	300.00)		
	Name of Employer (for Individual) Colorado Emergency Service Physicians,		upation (for Individual) actor Of Operations		M \$50/mor) Item						
	Receipt For: 2019 Primary General Vother (specify) V Other	Aggregate	Year-to-Date ▼ 450.00										
в.	Full Name of Individual (Last, First, Middle Ini Ammon, Stefen, , , Mailing Address 2 Mountain High Ct.	tial) or Full O	rganization Name		Date o	f Re	D D	/ Y			r		
	City Littleton	State CO	Zip Code 80127		12 31 2019 Transaction ID : SA11AL.10107								
	FEC ID number of contributing federal political committee.	C			Amount of Each Receipt this Period								
	Name of Employer (for Individual) Colorado Emergency Service Physicians,	Occi Mec		Memo Item \$50/monthly									
	Receipt For: 2019 Primary General ★ Other (specify) ★ Other	Aggregate	Year-to-Date ▼ 500.00										
<u>с</u> .	Full Name of Individual (Last, First, Middle Ini Anderson, Britney, , ,	tial) or Full O	organization Name		Date of	f Re	eceipt						
	Mailing Address 637 Ruby Trust Way				12 31 2019						ŕ		
	City Castle Rock	State CO	Zip Code 80108					SA11AI. eceipt th					
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .	· •	e	600.00)		
	Name of Employer (for Individual) Virtual Locations		upation (for Individual) ional Vice President		\$100/monthly								
	Receipt For: 2019 Primary General V Other (specify) Other	Aggregate	Year-to-Date ▼ 1000.00										
⊢	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			▶ ►			9 1 7 1	· · ·	12	200.00)		

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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

(check only one)

PAGE 9 OF

		Detailed Summary Page	×	_		11b	11c	12							
Any information copied from such Reports a	nd Statements m	l av not be sold or used by any n	erson	13 for the	nur	14 nose of	15 soliciting	16 a contribu	17 Itions						
or for commercial purposes, other than using															
NAME OF COMMITTEE (In Full)															
Full Name of Individual (Last, First, Middl A. Arwindekar, Amit, , ,	e Initial) or Full C	rganization Name		Date of	f Re	eceipt									
Mailing Address 2043 W. McLean Ave				31	D D / Y Y Y Y Y										
City	State	Zip Code		Trans	sact	ion ID :	SA11AI	.10013							
Chicago	IL	60647		Amoun	t of	Each F	Receipt th	nis Perioc	l						
FEC ID number of contributing federal political committee.	C							249	99						
Name of Employer (for Individual)	Occ	upation (for Individual)		M	Memo Item										
USACS Medical Group, LTD	Eme	ergency Physician	\$	8333/m	ontl	hly									
Receipt For: 2019 Primary General	Aggregate	Year-to-Date ▼													
Cther (specify) ▼ Other		583.31													
Full Name of Individual (Last, First, Middl Atez, Francisco, , ,															
Mailing Address 17376 Emerald Chase Dr								12 31 / Y Y Y Y Y 12 31							
City	State	Zip Code					SA11AI								
Tampa	FL	33647	- 1	Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	C								.00						
Name of Employer (for Individual) Tampa Bay Emergency Physicians, LLC		Occupation (for Individual) Regional Director of Risk Management					Memo Item \$100/monthly								
Receipt For: 2019 Primary General	Aggregate														
✓ Other (specify) ▼ Other		1200.00													
Full Name of Individual (Last, First, Middl C. Augustine, James, , ,	e Initial) or Full C	rganization Name		Date of	f Re	eceipt									
Mailing Address 7868 Classics Dr.				^M 12	/	31		2019	Ŷ						
City Naples	State FL	Zip Code 34113-3063					SA11AI								
	I ' ' '	J J T T J J J J J J J J J J J J J J J J		Amoun	t of	Each F	Receipt th	nis Perioc	I						
FEC ID number of contributing federal political committee.	C			<u> </u>		y		900	00						
Name of Employer (for Individual) Virtual Locations		upation (for Individual) irman, National Clinical Governar	scel \$	M 150/mc		o Item Iv									
Receipt For: 2019		Year-to-Date ▼				.,									
Primary General	Aggregate														
Cther (specify) Other		1800.00	4												
SUBTOTAL of Receipts This Page (optiona	l)					, .	,	1749.	99						
TOTAL This Period (last page this line num	ber only)		•			-	-								

Γ.,

FOR LINE NUMBER: PAGE 10 OF 118

T	EMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)								
			Detailed Summary Page	× 11a	111		11c	12				
	y information copied from such Reports and Stat for commercial purposes, other than using the na											
	NAME OF COMMITTEE (In Full)		address of any political committee t	.0 3011010 00		113 110	in Suci	r comm				
	USACS PAC											
A.	Full Name of Individual (Last, First, Middle Initial Autry, John, , ,) or Full O	Drganization Name	Date o	f Receip	ot						
	Mailing Address 2524 North Willetts Court Apt 3N			12 / D D / Y Y Y Y Y 12 31 2019								
	City Chicago	State IL	Zip Code 60647		Transaction ID : SA11AI.10178 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period								
	Name of Employer (for Individual)	Occ	cupation (for Individual)	м	lemo Ite	m						
	USACS Medical Group, Ltd.	Fire	efighter	\$250/on	e-time							
	Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 250.00									
	Full Name of Individual (Last, First, Middle Initial) or Full O	Drganization Name									
Β.	Bagnoli, Dominic, , ,			-	f Receip							
	Mailing Address 50 East Drive			12 ^M	/ D	31	/ Y	2019	Y			
	City	State	Zip Code	Trans	action	ID : S/	A11AL.	9908				
	Hartville	OH	44632	Amoun	t of Eac	h Red	ceipt th	is Perio	bd			
	FEC ID number of contributing federal political committee.	С		2499.78								
	Name of Employer (for Individual) USACS Management Group		cupation (for Individual) ecutive Chairman	Memo Item \$416.63/monthly								
		Aggregate	Year-to-Date V									
	Primary General X Other (specify) V Other		4999.56									
с.	Full Name of Individual (Last, First, Middle Initial Baker, Brian, , ,) or Full O	Drganization Name	Date o	f Receip	ot						
	Mailing Address 1209 E Cumberland Ave Unit #1	404		12 ^M	/ D	31	/ Y	2019	Y			
	City Tampa	State FL	Zip Code 33602		saction				- -			
	FEC ID number of contributing			Amoun	t of Eac	n Red	ceipt th	is Perio	d			
	federal political committee.	С			y .		y	90	0.00			
	Name of Employer (for Individual)		cupation (for Individual)	\$150/mo	lemo Ite	m						
	Tampa Bay Emergency Physicians, LLC Receipt For: 2019		gional Vice President • Year-to-Date ▼	- \$150/IIK	Jinniy							
	Primary General	Aggregate										
	Conter (specify) Other		1500.00									
S	UBTOTAL of Receipts This Page (optional)		•		9		9	364	9.78			
т	OTAL This Period (last page this line number on	y)	•				-		-			

SCHEDULE A (FEC Form 3X)

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 11 OF

		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17									
Any information copied from such Reports and a or for commercial purposes, other than using the			erson for the purpose of soliciting contributions									
NAME OF COMMITTEE (In Full)												
Full Name of Individual (Last, First, Middle Ir A. Baker, Mark, , ,	nitial) or Full C	Organization Name	Date of Receipt									
Mailing Address 34 Puukani Place			12 31 Y Y Y Y Y 12 12 12 12 12 12 12 12 12 12 12 12 12 1									
City Kailua	State HI	Zip Code 96734	Transaction ID : SA11AI.10083 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		0.00									
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) ergency Physician	Memo Item \$0/monthly									
Receipt For: 2019 Primary General Vother (specify) Vother	Aggregate	Year-to-Date ▼ 500.00]									
Full Name of Individual (Last, First, Middle Ir B. Balewick, Donna, , , Mailing Address 626 Phillips Rd	hitial) or Full C	Organization Name	Date of Receipt									
City Blairsville	State PA	Zip Code 15717-4233	Transaction ID : SA11AI.10056 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C		900.00 Memo Item \$150/monthly									
Name of Employer (for Individual) AHN Medical Group, LLC		upation (for Individual) dical Director of Integrated Acute										
Receipt For: 2019 Primary General Cher (specify) Other	Aggregate	Year-to-Date ▼ 1500.00]									
Full Name of Individual (Last, First, Middle Ir Barquin, Jose , , ,	nitial) or Full C	Organization Name	Date of Receipt									
Mailing Address 1011 charles st	1		12 / D D / Y Y Y Y Y 12 31 2019									
City clearwater	State FL	Zip Code 33755	Transaction ID : SA11AI.10127 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		300.00									
Name of Employer (for Individual) Tampa Bay Emergency Physicians, LLC Receipt For: 2019	Ass	upation (for Individual) ociate Medical Director	Memo Item \$50/monthly									
Primary General Viter (specify) Other	Aggregate	Year-to-Date ▼ 450.00]									
SUBTOTAL of Receipts This Page (optional)			1200.00									
TOTAL This Period (last page this line number	only)											

Lise senarate schedule(s)

FOR LINE NUMBER:

PAGE 12 OF

	Detailed Summary Page	★ 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
NAME OF COMMITTEE (In Full)		
Full Name of Individual (Last, First, Middle In Bedolla, John, , , Mailing Address 1000 San Marcos Street Unit 324 City Austin FEC ID number of contributing federal political committee. Name of Employer (for Individual) Emergency Service Partners, LLC Receipt For: 2019 Primary General Other (specify) Other	itial) or Full Organization Name State Zip Code TX 78702-2667 C Occupation (for Individual) Emergency Physician Aggregate Year-to-Date ▼ 1900.00 1900.00	Date of Receipt 12 31 2019 Transaction ID : SA11AI.10126 Amount of Each Receipt this Period 1600.00 Memo Item \$100/monthly
Full Name of Individual (Last, First, Middle In B. Bender, Sean, , , Mailing Address 520 Elm Street	itial) or Full Organization Name	Date of Receipt
City Denver FEC ID number of contributing federal political committee. Name of Employer (for Individual) Virtual Locations Receipt For: 2019 ↓ Primary General Other (specify) ♥ Other	State CO Zip Code 80220 C 0ccupation (for Individual) Regional Vice President Aggregate Year-to-Date ▼ 1500.00	Transaction ID : SA11AI.10104 Amount of Each Receipt this Period 900.00 Memo Item \$150/monthly
Full Name of Individual (Last, First, Middle In Bescherer, Rudolph, , , Mailing Address 32 Fieldcrest Dr City Westampton FEC ID number of contributing federal political committee. Name of Employer (for Individual) Virtual Locations	itial) or Full Organization Name State Zip Code NJ 08060-5656 C Occupation (for Individual) Firefighter	Date of Receipt 12 ' 31 ' 2019 Transaction ID : SA11AI.9984 Amount of Each Receipt this Period 0.00 Memo Item \$0/monthly
Receipt For: 2019 Primary General Other (specify) Other SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		2500.00

Image# 202001289167406270

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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

(check only one)

PAGE 13 OF

			Detailed Summary Page	×	-		11b	11c		12	<u> </u>					
			y not be sold or used by any p						con							
NAME OF COMM	IITTEE (In Full)	the name and a	ddress of any political committe	e to so	licit cor	ntrib	outions f	rom such	ı cor	nmitte	96.					
Full Name of Indiv A. Biersbach, Ray	vidual (Last, First, Middle vmond, , ,	Initial) or Full O	rganization Name		Date of	Re	eceipt									
Mailing Address 2	234 Lakeshore Dr			12 / D D / Y Y Y Y 12 31 2019												
City Mooresville		State NC	Zip Code 28117-7535		Transaction ID : SA11AI.9978 Amount of Each Receipt this Period											
FEC ID number of federal political co	•	C		600.00												
Name of Employe USACS Medical G Receipt For: 2019	iroup, LTD	Qua	upation (for Individual) lity Director	\$	Memo Item \$100/monthly											
Primary Content Content Conte	General	Aggregate	Year-to-Date ▼ 1200.00]												
B. Billington, Jor		Initial) or Full O	rganization Name		Date of	Re	eceipt									
Mailing Address 9	185 Brushboro Ct				^M 12	/	D D D 31	/ Y	20 ²	ү 19	Y					
City Brentwood		State TN	Zip Code 37027					SA11AI.1 eceipt thi								
FEC ID number of federal political co	•	C	C					900.00								
Name of Employe Virtual Locations	er (for Individual)		Occupation (for Individual) Chief Financial Officer					Memo Item \$150/monthly								
Receipt For: 2019 Primary X Other (speci	General	Aggregate	Year-to-Date ▼ 1500.00]												
Full Name of Indiv C. Bishop, Sara	vidual (Last, First, Middle a, , ,	Initial) or Full O	rganization Name		Date of	Re	eceipt									
	1105 Pinnacle Court				^M 12	1	D 31	/ Y	20 ⁻	19 [°]	Y					
City Morehead City		State NC	Zip Code 28557					SA11AI.								
FEC ID number of federal political co	•	C								450.0	0					
Name of Employe USACS Medical G	Group, LTD		Occupation (for Individual) APP Lead					Memo Item \$75/monthly								
Receipt For: 2019 Primary X Other (speci	General	Aggregate	Year-to-Date ▼ 750.00	750.00												
SUBTOTAL of Rece	eipts This Page (optional)						7		1	950.0	0					
TOTAL This Period	(last page this line numb	per only)					-									

SCHEDULE A (FEC Form 3X) _ _ _ _ _ _ _ _

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 14 OF

T	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)							
			for each category of the Detailed Summary Page	X 11a 11b 11c 12							
	y information copied from such Reports and Sta for commercial purposes, other than using the n										
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) USACS PAC										
A.	Full Name of Individual (Last, First, Middle Initia Bissell, Brad, , ,	l) or Full Or	rganization Name	Date of Receipt							
	Mailing Address 3535 Selwyn Farms Ln.			12 31 2019							
	City Charlotte	State NC	Zip Code 28209-4082	Transaction ID : SA11AI.10037 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		900.00							
	Name of Employer (for Individual) USACS Medical Group, LTD		ipation (for Individual) ical Director	Memo Item \$150/monthly							
	Receipt For: 2019 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 1500.00								
в.	Full Name of Individual (Last, First, Middle Initia Blankenship, Robert, , ,	l) or Full Or	rganization Name	Date of Receipt							
	Mailing Address 7058 Ravens Run			12 31 2019							
	City Cincinnati	State OH	Zip Code 45244-3591	Transaction ID : SA11AI.10100 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		900.00							
	Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) lical Director	Memo Item \$150/monthly							
	Receipt For: 2019 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 1500.00								
<u>с.</u>	Full Name of Individual (Last, First, Middle Initia Blaum, Justin, , ,	l) or Full Or	rganization Name	Date of Receipt							
	Mailing Address 312 Biddle Ave FI 2			12 31 2019							
	City Pittsburgh	State PA	Zip Code 15221-3436	Transaction ID : SA11AI.9941 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		120.00							
	Name of Employer (for Individual) AHN Medical Group, LLC Receipt For: 2019 Primary General	ED C	pation (for Individual) Operations Director Year-to-Date ▼	\$20/monthly							
	Conter (specify) Other		240.00								
S	UBTOTAL of Receipts This Page (optional)		••••••	1920.00							
т	OTAL This Period (last page this line number or	ıly)	••••••								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 15 OF

ITEMIZED RECEIPTS		se separate schedule(s)	(cneck o	(check only one)							
		or each category of the etailed Summary Page	X 11a 13	11b	11c	12 16	17				
Any information copied from such Reports and or for commercial purposes, other than using th					of soliciting	g contributi	ions				
NAME OF COMMITTEE (In Full)											
Full Name of Individual (Last, First, Middle Ir A. Bolden, Jason, , ,	ndividual (Last, First, Middle Initial) or Full Organization Name										
Mailing Address 3011 Rock Springs Road			M 12		31 / Y	2019	Y				
City Charlotte	State NC	Zip Code 28226-7357		Transaction ID : SA11AI.9927 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С					100.0	2				
Name of Employer (for Individual) USACS Medical Group, LTD Receipt For: 2019 Primary General ✔ Other (specify) ♥ Other	Occupati Medical Aggregate Year			Vemo Iten /monthly	n						
Full Name of Individual (Last, First, Middle Ir Bown, Nicholas, , , Mailing Address 532 College Blvd							Y				
City San Antonio	State TX	Zip Code 78209		saction II	31 D : SA11AI n Receipt tl						
FEC ID number of contributing federal political committee.	С		900.00								
Name of Employer (for Individual) Emergency Service Partners, LLC	Occupati Medical	on (for Individual) Director	Memo Item \$150/monthly								
Receipt For: 2019 Primary General ✔ Other (specify) ♥ Other	Aggregate Year	-to-Date ▼ 1500.00									
Full Name of Individual (Last, First, Middle Ir C. Bracey, Jefferson, , ,	nitial) or Full Organ	ization Name	Date	of Receipt	:						
Mailing Address 1351 Manorwood St.			M 12		31 / Y	2019 [°]	Y				
City Las Vegas	State NV	Zip Code 89135			D : SA11AI						
FEC ID number of contributing federal political committee.	С			, ,	, , , , , , , , , , , , , , , , , , ,	500.0	0				
Name of Employer (for Individual) USACS Medical Group, Ltd. Receipt For: 2019 Primary General Other (specify) Other		on (for Individual) cy Physician -to-Date ▼ 500.00		Memo Iten ne-time	n						
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number						1500.0	2				

Image# 202001289167406273

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 16 OF

118

				Detailed Summary Page	×	-		11b	11c			<u> </u>			
An	y information copied from such Reports and S	tatements ma	av no	ot be sold or used by any n	erson f	13 for the	pur	14 15 16 1 nurpose of soliciting contributions from such committee. 1 Receipt / 2019 / 31 2019 action ID : SA11AI.9930 of Each Receipt this Period 300.00 300.00 mo Item 1 thly 2019 ction ID : SA11AI.9930 300.00 mo Item 1 thly 2019 ction ID : SA11AI.9893 1 of Each Receipt this Period 110.00 mo Item 110.00	17 ions						
	for commercial purposes, other than using the														
\backslash	NAME OF COMMITTEE (In Full)														
	USACS PAC														
Α.	Full Name of Individual (Last, First, Middle Ini Bradstreet, Jennifer, , ,	tial) or Full C	Drgar	ization Name		Date of	f Re	eceipt							
	Mailing Address 8026 Vanity Hill														
	City	State		Zip Code	-	Transaction ID : SA11AI.9930									
	San Antonio	ТХ		78256-2509											
	FEC ID number of contributing federal political committee.	С									300.0	0			
	Name of Employer (for Individual) Virtual Locations		•	ion (for Individual) I Vice President	\$	M 150/mc									
	Receipt For: 2019	Aggregate	Yea	r-to-Date ▼				-							
	Primary General			1000.00	11.										
	Other Other		-1		1.										
в.	Full Name of Individual (Last, First, Middle Ini Brandon, Christopher, , ,	tial) or Full C	Drgar	ization Name		Date of	f Re	eceipt							
	Mailing Address 18834 Preston Road														
	City	State		Zip Code		Trans	act	ion ID :	SA11AL	989:	3				
	Hagerstown	MD		21742	/	Amoun	t of	Each F	Receipt th	ceipt this Period					
	FEC ID number of contributing federal political committee.	С				-y 1			110.0	0					
	Name of Employer (for Individual) MEP Health, LLC		cupat P Lea	ion (for Individual) ad	\$2	Memo Item \$20.00/monthly									
	Receipt For: 2019	Aggregate													
	Primary General		230.00	11											
	Other			11											
<u>с.</u>	Full Name of Individual (Last, First, Middle Ini Brice, Matthew, , ,	tial) or Full C	Drgar	ization Name		Date of	f Re	eceipt							
	Mailing Address 2801 Franciscan St					^M 12	1					Y			
	City	State TX		Zip Code		Trans	sact	ion ID :	SA11AI.	100	86				
	College Station			77845		Amoun	t of	Each F	Receipt th	is F	Period				
	FEC ID number of contributing federal political committee.	С	_					y		_	600.0	00			
	Name of Employer (for Individual)	Occ	upati	ion (for Individual)				o Item							
	Emergency Service Partners, LLC Receipt For: 2019	Med	dical	Director	\$	100/mc	onth	ly							
	Primary General	Aggregate	Yea	r-to-Date ▼											
	Cther (specify)		-	1000.00											
	Other														
s	UBTOTAL of Receipts This Page (optional)							,	, ,		1010.0	0			
т	OTAL This Period (last page this line number	only)							-						

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 17 OF

118

IT.	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)							
			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16	17						
	y information copied from such Reports and Stat for commercial purposes, other than using the n			erson for the purpose of soliciting contribut	tions						
$\left \right\rangle$	NAME OF COMMITTEE (In Full) USACS PAC										
A.	Full Name of Individual (Last, First, Middle Initia Brill, April, , ,	l) or Full Or	rganization Name	Date of Receipt							
	Mailing Address 25537 Prairiewood Ln			M M / D D / Y Y Y Y 12 31 2019							
	City Shorewood	State IL	Zip Code 60404-2526	Transaction ID : SA11AI.10033 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		300.0	00						
	Name of Employer (for Individual) USACS Medical Group, LTD Receipt For: 2019	Site	upation (for Individual) Education Director	Memo Item \$50/monthly							
	Primary General Vother (specify) Cother	Aggregate	Year-to-Date ▼ 500.00								
в.	Full Name of Individual (Last, First, Middle Initia Brougham, Matthew, , ,	Date of Receipt									
	Mailing Address 1525 S St Paul St			12 / D D / Y Y Y Y 12 / 31 / 2019							
	City Denver	State CO	Zip Code 80210-2924	Transaction ID : SA11AI.10129 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		300.00							
	Name of Employer (for Individual) Colorado Emergency Service Physicians,		upation (for Individual) lical Director	Memo Item \$50/monthly							
	Receipt For: 2019 Primary General X Other (specify) Other	Aggregate	Year-to-Date ▼ 450.00								
<u>с.</u>	Full Name of Individual (Last, First, Middle Initia Brown, Lisa, , ,	l) or Full Or	rganization Name	Date of Receipt							
	Mailing Address 2020 Wade Hampton Circle			12 31 2019	Y						
	City Belmont	State NC	Zip Code 28012-8689	Transaction ID : SA11AI.10082 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		150.0	00						
	Name of Employer (for Individual) USACS Medical Group, LTD		ipation (for Individual) Lead	Memo Item \$25/monthly							
	Receipt For: 2019 Primary General X Other (specify) Other	Aggregate	Year-to-Date ▼ 250.00								
s	UBTOTAL of Receipts This Page (optional)			750.0	00						
т	OTAL This Period (last page this line number on	ly)	••••••								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 18 OF

		Use separate schedule(s)	(check on	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	× 11a		11b	11c	12					
Any information copied from such Rep												
or for commercial purposes, other than	n using the name and a	ddress of any political committe	e to solicit co	ontrib	utions f	rom such	n committe	e.				
NAME OF COMMITTEE (In Full)												
Full Name of Individual (Last, First, Burke, Thomas, , ,	Middle Initial) or Full O	rganization Name	Date c	of Re	ceipt							
Mailing Address 1010 Gapter Road			M N 12	12 31 Y Y Y Y Y 12 31 2019								
City Boulder	State CO	Zip Code 80303				SA11AI.						
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period									
Name of Employer (for Individual) Colorado Emergency Service Physic		upation (for Individual) ergency Physician	\$50/mol		ltem							
Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 500.00]									
Full Name of Individual (Last, First, B. Burrell, Herman, , ,	Middle Initial) or Full O	rganization Name	Date c	of Re	ceipt							
Mailing Address 802 Hills Creek Dr			12 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y									
City	State	Zip Code 75072			-	SA11AL.						
McKinney FEC ID number of contributing federal political committee.	C	13072	Amount of Each Receipt this Period									
Name of Employer (for Individual) USACS Management Group		Occupation (for Individual) Chief Human Resource Officer				Memo Item \$150/monthly						
Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 1625.00]									
Full Name of Individual (Last, First, C. Caceres, Camilo, , ,	Middle Initial) or Full O	rganization Name	Date c	of Re	ceipt							
Mailing Address 2419 Smallman St Unit 401			12									
City Pittsburgh	State PA	Zip Code 15222-5643				SA11AI. Receipt th	10043 is Period					
FEC ID number of contributing federal political committee.	C				,	, y	900.0	0				
Name of Employer (for Individual) AHN Medical Group, LLC		upation (for Individual) lity Director	\$150/m		o Item ly							
Receipt For: 2019 Primary General X Other (specify) Other	Aggregate	Year-to-Date ▼ 1500.00]									
SUBTOTAL of Receipts This Page (c	pptional)				,	. ,	2225.0	0				
TOTAL This Period (last page this lin	e number only)				_	. .						

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 19 OF

118

ITEMIZED RECEIPTS		Use separate sched	(check only one)									
	217 1 3		for each category of Detailed Summary F		X 11a		11b	11c	12	<u> </u>		
	from such Reports and Stores, other than using the											
NAME OF COMMIT												
Full Name of Individ A. Callaway, Katie,	ual (Last, First, Middle Init	ial) or Full O	organization Name		Date of	f Re	ceipt					
Mailing Address 136	605 Diamond Head Dr				M M / D D / Y Y Y Y 12 31 2019							
City Tampa		State FL	Zip Code 33624-2528					SA11AI.				
FEC ID number of c federal political com	0	С					, ,		300.0	00		
Tampa Bay Emerger	a Bay Emergency Physicians, LLC P		upation (for Individual) Compliance and Regulat	tions Coordi	M \$50/mor		ltem					
Receipt For: 2019 Primary X Other (specify)	General ▼ Other	Aggregate	Year-to-Date ▼ 52	5.00								
Full Name of Individ B. Carney, Bryan, Mailing Address 240		ial) or Full O	rganization Name		Date of		D I) / Y	2010	Ŷ		
City Morehead City		State NC	Zip Code 28557-4772					SA11AI.				
FEC ID number of c federal political com	0							900.0	00			
Name of Employer (USACS Medical Grou			Occupation (for Individual) Assistant Medical Director			emo onthly	ltem /					
Receipt For: 2019 Primary X Other (specify)	General ▼ Other	Aggregate	Year-to-Date ▼ 150	0.00								
Full Name of Individ Carter, Stephe Mailing Address 167		ial) or Full O	organization Name		Date of		ceipt		YY	Y		
City Cibolo		State TX	Zip Code 78108-3343		12 Trans	sacti	31 on ID :		2019 1 0108			
FEC ID number of c federal political com	0	С					J		300.0	00		
Name of Employer (Emergency Service I Receipt For: 2019		upation (for Individual) ergency Physician										
Primary Other (specify)	General Other	Aggregate Year-to-Date ▼ 500.00										
SUBTOTAL of Receip	ts This Page (optional)			····· ►			,	,	1500.0	0		
TOTAL This Period (la	ast page this line number of	only)		····· Þ		-	,					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

(check only one)

PAGE 20 OF

ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16	17							
or for commercial purposes, other than usi			person for the purpose of soliciting contribution te to solicit contributions from such committee.	าร							
NAME OF COMMITTEE (In Full)											
Full Name of Individual (Last, First, Mide Casey, John, , , Mailing Address 5156 Baker Ridge Dr.	dle Initial) or Full C	organization Name	Date of Receipt	_							
			12 31 2019								
City Columbus	State OH	Zip Code 43228	Transaction ID : SA11AI.9937								
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period								
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) ional Director of Scholars	Memo Item \$150/monthly								
Receipt For: 2019 Primary General X Other (specify) ▼ Other]										
Full Name of Individual (Last, First, Mide Cetta, Michael, , ,	Date of Receipt										
Mailing Address 16 Piney Glen Court											
City Potomac	State MD	Zip Code 20854	Transaction ID : SA11AI.9964 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	2900.00]									
Name of Employer (for Individual) USACS Management Group		upation (for Individual) ef of Integrated Acute Care	Memo Item \$400/monthly								
Receipt For: 2019 Primary General X Other (specify) Other	Aggregate	Year-to-Date ▼ 4700.00]								
Full Name of Individual (Last, First, Mide C. Cirillo, Louis, , ,	dle Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 91 Woodridge Drive			12 31 2019								
City Saunderstown	State RI	Zip Code 02874-1943	Transaction ID : SA11AI.9955								
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period	_							
Name of Employer (for Individual) Virtual Locations		upation (for Individual) ctor of Government Affairs	Memo Item \$150/monthly								
Receipt For: 2019 Primary General Conter (specify) Other	Aggregate	Year-to-Date ▼ 2800.00]								
SUBTOTAL of Receipts This Page (option	nal)		5700.00								
TOTAL This Period (last page this line nu	,										

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 21 OF

118

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	× 11a 11b 11c 12						
			13 14 15 16 17 person for the purpose of soliciting contributions ee to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
Full Name of Individual (Last, First, Middl A. Cline, Gretchann, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 8506 Queen Heights			12 31 Y Y Y Y Y 12 31 2019						
City San Antonio	State TX	Zip Code 78254-2329	Transaction ID : SA11AI.10018 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	ě		300.00						
Name of Employer (for Individual) Emergency Service Partners, LLC		upation (for Individual) tem APP Lead	Memo Item \$50/monthly						
Receipt For: 2019 Primary General X Other (specify) V Other	Aggregate	Year-to-Date ▼ 525.00							
Full Name of Individual (Last, First, Middl B. Colfer, Orion, , ,	Date of Receipt								
Mailing Address 2523 Hanover Ave			12 31 2019						
City Richmond	State VA	Zip Code 23220	Transaction ID : SA11AI.9973 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		900.00						
Name of Employer (for Individual) Virtual Locations		upation (for Individual) ional Director of Patient Experier	Memo Item nc \$150/monthly						
Receipt For: 2019 Primary General Cother (specify) Tother	Aggregate	Year-to-Date ▼ , 1600.00							
Full Name of Individual (Last, First, Middl C. Conley, Amy, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 6419 Renwick Circle	State	Zip Code	12 31 2019 Transaction ID : SA11AI.9872						
Tampa	FL	33647	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	FEC ID number of contributing federal political committee.								
Name of Employer (for Individual) Tampa Bay Emergency Physicians, LLC Receipt For: 2019		upation (for Individual) ional Transfer Center Director	\$100/monthly						
Primary General Constraints of 2019 Primary General Constraints of 2019 Other (specify) Other	Aggregate	Year-to-Date ▼ 1200.00							
SUBTOTAL of Receipts This Page (optional	l)		▶ 1800.00						
TOTAL This Period (last page this line nun	ber only)								

Image# 202001289167406279

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 22 OF

118

		Detailed Summary Page	×	_		11b	11c	12	_		
Any information copied from such Reports	and Statements ma	Ay not be sold or used by any p	erson	13 for the	pur	14 pose of	15 soliciting	16 g contribu	17 Itions		
or for commercial purposes, other than usi											
NAME OF COMMITTEE (In Full)											
Full Name of Individual (Last, First, Mid A. Cook, Alexander, , ,	dle Initial) or Full O	rganization Name		Date of	f Re	ceipt					
Mailing Address 8780 Surrey Place				12 31 2019							
City	State	Zip Code		Transaction ID : SA11AI.9869							
Maineville	OH	45039-9519		Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C			480.00							
Name of Employer (for Individual)	Осси	upation (for Individual)	\neg	M	emo	o Item					
USACS Medical Group, LTD	Dire	ector of APPs	\$	80/mon	nthly	1					
Receipt For: 2019	Aggregate	Year-to-Date ▼									
Primary General ★ Other (specify) ▼		900.00	1								
Other Other											
Full Name of Individual (Last, First, Mide Coomes, Justin, , ,	dle Initial) or Full O	rganization Name		Date of	f Re	€eipt					
Mailing Address 7762 Westwind Lane	,			12 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
City	State	Zip Code					SA11AI.				
Montgomery	OH	45242-5008		Amount	t of	Each R	Receipt th	nis Period	1		
FEC ID number of contributing federal political committee.	C		<u> </u>		-	- 7	900.	.00			
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) dical Director	\$	Memo Item \$150/monthly							
Receipt For: 2019	Aggregate	Year-to-Date ▼									
Primary General ★ Other (specify) ▼		1400.01									
Other (specify) V Other		, , , , , , , , , , , , , , , , , , , ,									
Full Name of Individual (Last, First, Mide C. Correll, Bodie, , ,	dle Initial) or Full O	rganization Name		Date of	f Re	ceipt					
Mailing Address 782 Archie Lane				^M 12	J.	31	J L	2019	Y		
City	State TX	Zip Code					SA11AI				
Belton	TX	76513		Amount	t of	Each R	Receipt th	nis Period			
FEC ID number of contributing federal political committee.	C			Ľ.	_	9		900.	.00		
Name of Employer (for Individual)	Осси	upation (for Individual)				o Item					
Emergency Service Partners, LLC		lical Director	\$	\$150/mc	onth	ly					
Receipt For: 2019	Aggregate	Year-to-Date ▼									
Conter (specify)		1650.00	1								
Other		Agr									
SUBTOTAL of Receipts This Page (option	nal)		► _		- +	5		2280.	00		
TOTAL This Period (last page this line nu	mber only)		•	L		-					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 23 OF

118

TEMIZED RECEIFTS				Detailed Summary Page	×			11	- F	11c		12	
An	y information copied from such Reports and Sta	tements ma	av no	ot be sold or used by any pe		13 or the		14 005		15 soliciti	na c	16 Intribut	17 ions
	for commercial purposes, other than using the r												
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) USACS PAC												
A.	Full Name of Individual (Last, First, Middle Initia Corrigan, Kevin, , ,	al) or Full O	rgan	ization Name		Date of Receipt							
	Mailing Address 9338 Standerwick Ln		,		12 / D D / Y Y Y Y 12 31 2019								
	City	State NC		Zip Code		Trans							
	Huntersville			28078	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С						-				900.0	00
	Name of Employer (for Individual) USACS Medical Group, LTD		•	on (for Individual) Aedical Director	\$	Me 150/mo	emo nthl		əm				
	Receipt For: 2019	r-to-Date ▼											
	Primary General ✔ Other (specify) ♥ Other												
в.	Full Name of Individual (Last, First, Middle Initia Dabkowski, Tabitha, , ,	al) or Full O	Drgan	ization Name		Date of	Re	ecei	pt				
	Mailing Address 12728 Westmoreland Rd							Γ	31	1		019	Y
	City	State		Zip Code		Trans	acti	ion	ID : \$	SA11A	1.10 ⁻	111	
	Huntersville	NC		28078-5962	/	Amount	of	Ea	ch Re	eceipt	this	Period	
	FEC ID number of contributing federal political committee.							-		,		150.0	00
	Name of Employer (for Individual) USACS Medical Group, LTD	•	ion (for Individual) of APPs	\$2	Me 25/mon	əmo thly		əm					
	Receipt For: 2019 Primary General Other (specify) There	Aggregate	Year	r-to-Date ▼ 250.00									
С.	Full Name of Individual (Last, First, Middle Initia Darnell, Mark, , ,	al) or Full O	Drgan	ization Name		Date of	Re	ecei	pt				
	Mailing Address 5125 Duffy Rd. SE	1				^M 12	/		31	1		2019	Y
	City	State		Zip Code		Trans	acti	ion	ID :	SA11/	AI.10	084	
	Lancaster	ОН		43130-9451	/	Amount	of	Ea	ch Re	eceipt	this	Period	
	FEC ID number of contributing federal political committee.	С						y		,		900.0	00
	Name of Employer (for Individual)	Осси	upati	on (for Individual)	\neg		emo		əm				
	USACS Medical Group, LTD	Med	dical I	Director	\$	150/mo	nthl	ly					
	Receipt For: 2019												
	Primary General Conter (specify)			1500.00									
	Other Other		-										
s	UBTOTAL of Receipts This Page (optional)			····· •				,		,		1950.0	00
Т	OTAL This Period (last page this line number or	nly)		•				-		. ,			

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 24 OF

ıт.	EMIZED RECEIPTS		Use separate schedule(s)	(ch	neck onl	y on	e)			-				
11			for each category of the Detailed Summary Page		¥ 11a 13		11b 14	11c 15	12	Г	17			
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	y not be sold or used by any p ddress of any political committe	person	for the	purp ntrib	ose of	soliciting	g contri	ibutic	ons			
	NAME OF COMMITTEE (In Full) USACS PAC													
<u>к</u>	Full Name of Individual (Last, First, Middle Initiation Davis, Jaclyn, , ,	tial) or Full O		Date of Receipt										
	Mailing Address 10611 Moss Mill Lane				M M / D D / Y Y Y Y 12 31 2019									
	City Charlotte	State NC	Zip Code 28277-1674					SA11AI. eceipt th						
	FEC ID number of contributing federal political committee.	C				100.02								
	Name of Employer (for Individual) USACS Medical Group, LTD	Occi Eme		M \$16.67/r		ltem hly								
	Receipt For: 2019 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 200.04	1										
в.	Full Name of Individual (Last, First, Middle Ini Dayton, John, , , Mailing Address 1914 E Gray Fox Drive	tial) or Full O	rganization Name	_	Date of	f Re	ceipt	/ Y	2019		7			
	City Draper	State UT		Trans		on ID :	SA11AL	10137		_				
	FEC ID number of contributing federal political committee.	С		600.00										
	Name of Employer (for Individual) Virtual Locations		upation (for Individual) fighter		Memo Item \$100/monthly									
	Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 800.00]										
с.	Full Name of Individual (Last, First, Middle Init De Angelis, Sydney, , ,	tial) or Full O	rganization Name		Date o	f Re	ceipt							
	Mailing Address 114 E Church St				^M 12		D 31	JL	y 2019					
	City Frederick	State MD	Zip Code 21701					SA11AI. eceipt th		iod				
	FEC ID number of contributing federal political committee.	С			Ľ.		,	- y	60	00.00)			
	Name of Employer (for Individual) MEP Health, LLC Receipt For: 2019	Occupation (for Individual) Emergency Physician Aggregate Year-to-Date ▼				Memo Item \$100/monthly								
	Primary General Conter (specify) Other	1												
s	UBTOTAL of Receipts This Page (optional)			<u> </u>			,	,	130	00.02	2			
Т	OTAL This Period (last page this line number	only)					,			-				

Image# 202001289167406282

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 25 OF

118

	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
	y information copied from such Reports and Sta for commercial purposes, other than using the										
	NAME OF COMMITTEE (In Full)										
Α.	Full Name of Individual (Last, First, Middle Initi DeMartino, Wendy, , ,	al) or Full O	ganization Name	Date of Receipt							
	Mailing Address 9 Amberwood Dr			12 31 Y Y Y Y 2019							
	City Exeter	State NH	Zip Code 03833-4723	Transaction ID : SA11AI.10004 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		100.02							
	Name of Employer (for Individual) USACS Medical Group, LTD		pation (for Individual) cal Director	\$16.67/monthly							
	Receipt For: 2019 Primary General ✓ Other (specify) ▼ Other										
в.	Full Name of Individual (Last, First, Middle Initi Denmark, Thomas, , ,	ganization Name	Date of Receipt								
	Mailing Address 13122 S Yorktown Ave	12 31 2019									
	City Bixby	State OK	Zip Code 74008-7665	Transaction ID : SA11AI.9998 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		300.00							
	Name of Employer (for Individual) USACS Medical Group, LTD		pation (for Individual) rman	Memo Item \$50/monthly							
	Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 600.00								
C.	Full Name of Individual (Last, First, Middle Initi DiRando, Jesse, , ,	al) or Full O	ganization Name	Date of Receipt							
	Mailing Address 33531 Royal Saint George Driv	/e		12 31 2019							
	City Avon	State OH	Zip Code 44011	Transaction ID : SA11AI.9934 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		900.00							
	Name of Employer (for Individual) Virtual Locations		pation (for Individual) President, Clinical Resource Grou	Memo Item \$150/monthly							
	Receipt For: 2019 Primary General Vother (specify) Other	Aggregate	Year-to-Date ▼ 1540.00								
s	UBTOTAL of Receipts This Page (optional)			1300.02							
т	OTAL This Period (last page this line number o	only)									

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 26 OF

118

				Detailed Summary Page	×		Ш	11			11c	12		
						13		14			15	16	17	
	y information copied from such Reports and Stat for commercial purposes, other than using the n													
$\left. \right\rangle$	NAME OF COMMITTEE (In Full)						_							
Α.	Full Name of Individual (Last, First, Middle Initial Dorai, Suprina, , ,	l) or Full O	rgar	nization Name		Date of	Re	ecei	pt					
	Mailing Address 7911 El Dorado Drive				12 31 2019									
	City	State		Zip Code		Trans	acti	ion	ID : \$	SA	11AI.1	10110		
	Austin	ТХ		78737-3010	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			200.00									
	Name of Employer (for Individual)			ion (for Individual) Director		Me 50/mont	emo		əm					
	Emergency Service Partners, LLC Receipt For: 2019						ully							
	Primary General	Aggregate	rea	r-to-Date ▼										
	✓ Other (specify) ▼ Other		7	400.00										
B.	Full Name of Individual (Last, First, Middle Initia Doss, Belinda, , ,	nization Name		Date of	Re	ecei	pt							
	Mailing Address 1344 County Road 3552]	12 31 Y Y Y Y Y 12 31 2019										
	City	State		Zip Code		Transa	acti	ion	ID : \$	SA	11AI.1	0035		
	Queen City	ТХ	_	75572	A	\mount	of	Ea	ch Re	ec	eipt thi	s Period		
	FEC ID number of contributing federal political committee.			_		7			-	450.	00			
	Name of Employer (for Individual) Emergency Service Partners, LLC	Occupation (for Individual) APP Lead				Memo Item \$75/monthly								
		Aggregate												
	Primary General Conter (specify) Conter		,	750.00										
с.	Full Name of Individual (Last, First, Middle Initia Doucette, Marc, , ,	l) or Full O	rgar	nization Name		Date of	Re	ecei	pt					
	Mailing Address 16692 W. 55th PI.][^M 12	1		31]	/ Y	2019	Y	
	City	State		Zip Code							A11AI.9			
	Golden	CO	_	80403-1269	A	Amount	of	Ea	ch Re	ec	eipt thi	s Period		
	FEC ID number of contributing federal political committee.	С	_				_	,			9	120.	00	
	Name of Employer (for Individual)	Осси	upati	ion (for Individual)			emo		em					
	Colorado Emergency Service Physicians,	Med	lical	Director	\$2	20/mon	thly	,						
	Receipt For: 2019	Aggregate	Yea	r-to-Date ▼										
	X Other (specify)			240.00										
	Other													
S	UBTOTAL of Receipts This Page (optional)			······ •		_	_	,			9	770.	00	
Т	OTAL This Period (last page this line number on	ıly)			. [,			-			

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 27 OF

118

IT.	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)						
			for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
	y information copied from such Reports and Sta for commercial purposes, other than using the n			erson for the purpose of soliciting contributions						
$\left\rangle$	NAME OF COMMITTEE (In Full)									
A.	Full Name of Individual (Last, First, Middle Initia Dschaak, Tyler, , ,	l) or Full Oi	rganization Name	Date of Receipt						
	Mailing Address 8400 Brownsboro Pl			12 31 2019						
	City Anderson	State OH	Zip Code 45255-4737	Transaction ID : SA11AI.10115 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		900.00						
	Name of Employer (for Individual) USACS Medical Group, LTD Receipt For: 2019		upation (for Individual) istant Medical Director	Memo Item \$150/monthly						
	Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 1500.00							
в.	Full Name of Individual (Last, First, Middle Initia Eakin, Paul, , ,	l) or Full Oi	rganization Name	Date of Receipt						
	Mailing Address 1455 Hunakai St. Apt. 1			12 / D D / Y Y Y Y 12 31 2019						
	City Honolulu	State HI	Zip Code 96816-5526	Transaction ID : SA11AI.9975 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		300.00						
	Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) ociate Medical Director	S50/monthly						
	Receipt For: 2019 Primary General Other (specify) There	Aggregate	Year-to-Date ▼ 600.00							
<u>с.</u>	Full Name of Individual (Last, First, Middle Initia Edginton, Simon, , ,	l) or Full Oi	rganization Name	Date of Receipt						
	Mailing Address 28671 Corbara Place			12 31 2019						
	City Wesley Chapel	State FL	Zip Code 33543	Transaction ID : SA11AI.10106 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		900.00						
	Name of Employer (for Individual) Tampa Bay Emergency Physicians, LLC		upation (for Individual) ional Chief Medical Officer	Memo Item \$150/monthly						
	Receipt For: 2019 Primary General Conter (specify) Other	Aggregate	Year-to-Date ▼ 1500.00							
s	UBTOTAL of Receipts This Page (optional)			2100.00						
т	OTAL This Period (last page this line number or	lly)								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 28 OF

118

ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
			13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)											
Full Name of Individual (Last, Firs A. Eisenberg, Steven, , ,	t, Middle Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 35590 Michael D	ive		12 31 Y Y Y Y 12 31 2019								
City Solon	State OH	Zip Code 44139	Transaction ID : SA11AI.9989 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		925.00								
Name of Employer (for Individual) USACS Management Group		upation (for Individual) eral Counsel	Memo Item \$150/monthly								
Receipt For: 2019 Primary General Conter (specify) Conter Other	Aggregate	Year-to-Date ▼ 1750.00]								
B. Full Name of Individual (Last, First Falcone, Angelo, , , Mailing Address 2606 Tridelphia L		rganization Name	Date of Receipt								
City Brookeville	State MD	Zip Code 20833	12 31 2019 Transaction ID : SA11AI.9879 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		900.00								
Name of Employer (for Individual) USACS Management Group		upation (for Individual) sident	Memo Item \$150/monthly								
Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 1800.00]								
Full Name of Individual (Last, First C. Faulk, Michael, , , Mailing Address 3951 Fluvanna-T		rganization Name	Date of Receipt								
City Jamestown	State	Zip Code 14701-9032	12 31 2019 Transaction ID : SA11AI.10089								
FEC ID number of contributing federal political committee.	C	14701-3032	Amount of Each Receipt this Period								
Name of Employer (for Individual) AHN Medical Group, LLC		upation (for Individual) ical Director of Integrated Acute (Memo Item \$50/monthly								
Receipt For: 2019 Primary General X Other (specify) Other	Aggregate	Year-to-Date ▼ 500.00]								
SUBTOTAL of Receipts This Page	(optional)		2125.00								
TOTAL This Period (last page this	ine number only)										

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 29 OF

118

		for each category of the Detailed Summary Page	★ 11a 11b 11c 12 13 14 15 16 17
		Statements may not be sold or used by any pe he name and address of any political committee	rson for the purpose of soliciting contributions
$\left\rangle$	NAME OF COMMITTEE (In Full)		
Α.	Full Name of Individual (Last, First, Middle I Fearheiley, Corey, , ,	Initial) or Full Organization Name	Date of Receipt
	Mailing Address 2604 Rain Song		12 / D D / Y Y Y Y 12 31 2019
	City	State Zip Code TX 78641	Transaction ID : SA11AI.10048
	Leander	TX 78641	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	300.00
	Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
	Emergency Service Partners, LLC	Medical Director	\$50/monthly
	Receipt For: 2019	Aggregate Year-to-Date ▼	
	Primary General		
	X Other (specify) ▼ Other	500.00	
	Full Name of Individual (Last, First, Middle I Feigenbaum, Sarah, , ,	Initial) or Full Organization Name	Date of Receipt
	Mailing Address 8 N Edsall Ave		12 31 2019
	City	State Zip Code	Transaction ID : SA11AI.10132
	Nanuet	NY 10954-2503	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	125.00
	Name of Employer (for Individual) USACS Medical Group, LTD	Occupation (for Individual) APP Lead	Memo Item \$25/monthly
	Receipt For: 2019	Aggregate Year-to-Date ▼	
	Primary General		
	✗ Other (specify) ▼ Other	350.00	
	Full Name of Individual (Last, First, Middle I Ferrand, David, , ,	Initial) or Full Organization Name	Date of Receipt
	Mailing Address 193 Bryna Lane		12 31 2019
	City	State Zip Code	Transaction ID : SA11AI.9905
	Carnegie	PA 15106-1473	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	700.00
	Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
	Virtual Locations	Firefighter	\$100/monthly
	Receipt For: 2019	Aggregate Year-to-Date ▼	
	Primary General Cher (specify) Other	1300.00	
S		▶	1125.00

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:

(check only one)

PAGE 30 OF

118

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
or for commercial purposes, other th			e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
Full Name of Individual (Last, Firs A. Fisher, Jay, , ,		rganization Name	Date of Receipt							
Mailing Address 416 Pinnacle Hg	s Ln		12 31 2019							
City Las Vegas	State NV	Zip Code 89144	Transaction ID : SA11AI.9928 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		100.02							
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) lical Director	Memo Item \$16.67/monthly							
Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 200.04]							
Full Name of Individual (Last, Firs B. Flanigan, Alan, , ,	st, Middle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 195 McGregor St Apt 405	reet		12 31 2019							
City Manchester	State NH	Zip Code 03102-3777	Transaction ID : SA11AI.10140 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		600.00							
Name of Employer (for Individual USACS Medical Group, Ltd.		upation (for Individual) dical Director	Memo Item \$150/monthly							
Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 600.00]							
Full Name of Individual (Last, First Fileming, Sean, , ,	st, Middle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 2300 Shoreham	Circle		12 31 2019							
City Lewisville	State TX	Zip Code 75056	Transaction ID : SA11AI.10105 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		900.00							
Name of Employer (for Individual) Emergency Service Partners, LLC		upation (for Individual) ical Director	\$150/monthly							
Receipt For: 2019 Primary General X Other (specify) Other	Aggregate	Year-to-Date ▼ 1500.00]							
SUBTOTAL of Receipts This Page	(optional)		1600.02							
TOTAL This Period (last page this	line number only)									

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 31 OF

118

ITEMIZED RECEIPTS	-	(check only one)								
		for each category of the Detailed Summary Page	X 11a 11b 11c 12							
			13 14 15 16 1 person for the purpose of soliciting contributions te to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full) USACS PAC										
Full Name of Individual (Last, First, Mic A. Flores, Anna, , ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 2608 Del Curto Rd, Uni	t 3		12 31 2019							
City Austin	State TX	Zip Code 78704-6014	Transaction ID : SA11AI.10030 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		300.00							
Name of Employer (for Individual) Emergency Service Partners, LLC		upation (for Individual) 9 Lead	Memo Item \$50/monthly							
Receipt For: 2019 Primary General Other (specify) V Other	Aggregate	Year-to-Date ▼ 500.00]							
Full Name of Individual (Last, First, Mic B. Forcada-Lowrie, Raymundo, ,		rganization Name	Date of Receipt							
Mailing Address 775 Potters Ave			12 31 2019							
City Providence	State RI	Zip Code 02907-3075	Transaction ID : SA11AI.9979 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		600.00							
Name of Employer (for Individual) Virtual Locations		upation (for Individual) fighter	Memo Item \$100/monthly							
Receipt For: 2019 Primary General ★ Other (specify) ★ Other	Aggregate	Year-to-Date ▼ 1100.00]							
Full Name of Individual (Last, First, Mic Foss, David, , ,	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 915 Tschoepe Rd	State	Zip Code	12 31 2019 Transaction ID : SA11AI.10123							
Seguin	ТХ	78155	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		900.00							
Name of Employer (for Individual) Emergency Service Partners, LLC		upation (for Individual) ical Director	\$150/monthly							
Receipt For: 2019 Primary General Conter (specify) Other	Aggregate	Year-to-Date ▼ 1350.00]							
SUBTOTAL of Receipts This Page (option	nal)		1800.00							
TOTAL This Period (last page this line nu	Imber only)									

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

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 32 OF

IT.	EMIZED RECEIPTS		Use separate schedule(s) for each category of the			(check only one)						
11				immary Page		¥ 11a 13		11b	11c 15	12	Г	17
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	Ay not be sold ddress of any	or used by any p political committe	erson e to s	for the	pur ntrib	pose of	soliciting	g contrib	outio	ns
	NAME OF COMMITTEE (In Full) USACS PAC			·								
<u>к</u> .	Full Name of Individual (Last, First, Middle Init Frary, James, , ,	tial) or Full O	rganization Na	me		Date o	f Re	eceipt				
	Mailing Address 3845 Greenbrier Drive					12 ^M	/	D D D 31	/ Y	y y 2019		
	City Dallas	State TX	Zip Code 75225						SA11AI. eceipt th		od	
	FEC ID number of contributing federal political committee.	С				<u> </u>			 	90	0.00	
	Name of Employer (for Individual) USACS Management Group Receipt For: 2019	Chie	upation (for Inc of Executive Of	ficer		M \$150/mc) Item y				
	Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date	1350.00	1							
в.	Full Name of Individual (Last, First, Middle Init Freedman, Scott, , , Mailing Address 12814 Doe Lane	tial) or Full O	rganization Na	me		Date o	f Re	D D	/ Y	Y Y	Ý	1
	City N. Potomac	State MD	Zip Code 20878						SA11AL		od	
	FEC ID number of contributing federal political committee.	С									0.00	
	Name of Employer (for Individual) MEP Health, LLC		upation (for Ind liatric Medical E	,		M \$150/mc) Item y				
	Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date	1350.00								
С.	Full Name of Individual (Last, First, Middle Init Gamma, Brett, , ,	tial) or Full O	rganization Na	me		Date o	f Re	eceipt				
	Mailing Address 14930 Finegan Farm Drive					^M 12		D D D 31	JL	2019	Y	
	City Darnestown	State MD	Zip Code 20874					-	SA11AI. eceipt th		bd	
	FEC ID number of contributing federal political committee.	С				Ľ.		,	9	30	0.00	
	Name of Employer (for Individual) MEP Health, LLC Receipt For: 2019	Med	upation (for Inc ical Director	,	:	M \$50/mor) Item				
	Primary General Conter (specify) Other	Aggregate	Year-to-Date	600.00	1							
s	UBTOTAL of Receipts This Page (optional)				•			,	9	210	0.00	
т	OTAL This Period (last page this line number	only)			•			-			-	

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 33 OF

ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)						
			for each category of the Detailed Summary Page	X 1	1a 3		11b 14	11c	12	17
	y information copied from such Reports and Sta for commercial purposes, other than using the r			erson for	the p	ourpo	ose of	soliciting	g contribu	tions
\rangle	NAME OF COMMITTEE (In Full) USACS PAC									
	Full Name of Individual (Last, First, Middle Initia Garber, Suzanne, , ,	l) or Full Oi	rganization Name	Da	te of	Rec	eipt			
	Mailing Address 7700 Overlook Hills Lane			M	12 ^M	/	D D 31	/ Y	2019	Y
	City Cincinnati	State OH	Zip Code 45244-3289					SA11AI. eceipt th	9992 nis Period	
	FEC ID number of contributing federal political committee.	С					p		600.	00
	Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) ional Quality Director	\$10	Me D/mor		Item			
	Receipt For: 2019 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 1040.00							
В.	Full Name of Individual (Last, First, Middle Initia Garcia-Gonzalez, Alexander, , , Mailing Address 19916 Bluff Oak Blvd	l) or Full Oi	rganization Name	_	te of 12	Rec	eipt 31	/ Y	2019	Ŷ
	City Tampa	State FL	Zip Code 33647-2973		ransa		n ID : S	SA11AI. eceipt_th	_	
-	FEC ID number of contributing federal political committee.	С							300.	_
	Name of Employer (for Individual) Tampa Bay Emergency Physicians, LLC		upation (for Individual) dical Director	\$50/	Me montl		Item			
	Receipt For: 2019 Primary General ✔ Other (specify) ♥ Other	Aggregate	Year-to-Date ▼ 500.00							
	Full Name of Individual (Last, First, Middle Initia Garfinkel, Michael, , ,	l) or Full Oi	rganization Name	Da	te of	Rec	eipt			
	Mailing Address 2235 Evening Star Ln			M	12 ^M	/	D D D 31	/ Y	2019	Y
-	City Lafayette	State CO	Zip Code 80026					SA11AI	. 9965 nis Period	
	FEC ID number of contributing federal political committee.	С			_	,		, y	100.	02
	Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) Irgency Physician	\$16	Me .67/m		ltem Ily			
	Receipt For: 2019 Primary General Vother (specify) Other	Aggregate	Year-to-Date ▼ 200.04							
sı	JBTOTAL of Receipts This Page (optional)					,		. ,	1000.	02
т	OTAL This Period (last page this line number or	ıly)								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 34 OF

IT.	EMIZED RECEIPTS	Use separate schedule(s)				(check only one)					
11			for each category of the Detailed Summary Page		× 11a		11b	11c	12	Г	
	y information copied from such Reports and S for commercial purposes, other than using the										
	NAME OF COMMITTEE (In Full) USACS PAC										
A.	Full Name of Individual (Last, First, Middle Init Geary, Daniel, , ,	tial) or Full O	Organization Name		Date of	f Re	eceipt				
	Mailing Address 21910 Helen Lane				12 ^M	/	D 31		ү ү 2019	Y	1
	City Leonardtown	State MD	Zip Code 20650-2220	_				: SA11AI. Receipt th		bd	
	FEC ID number of contributing federal political committee.	С					-		49	9.98	
	Name of Employer (for Individual) MEP Health, LLC		upation (for Individual) dical Director		M \$83.33/n		b Item thly				
	Receipt For: 2019 Primary General X Other (specify) V Other	Aggregate	Year-to-Date ▼ 999.96]							
в.	Full Name of Individual (Last, First, Middle Ini Geers, Gregory, , , Mailing Address 624 James Alexander Way	tial) or Full O	rganization Name	_	Date of	f Re	D		YY	Y	1
	City	State	Zip Code		12 Trans	act	31 ion ID :	SA11AI.	2019 9920		
	Davidson FEC ID number of contributing federal political committee.	NC C	28036-7070		Amoun	t of	Each F	Receipt th		od 0.00	
	Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) dical Director		M \$20/mon		tem				
	Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 240.00]							
С.	Full Name of Individual (Last, First, Middle Ini Gerhart, Caleb, , ,	tial) or Full O	Organization Name		Date of	f Re	eceipt				
	Mailing Address 1111 Lancashire Drive				^M 12	1	D 31		2019	Y]
	City Indian Land	State SC	Zip Code 29707					SA11AI Receipt th		bd	
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .	9	30	0.00	
	Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) lity Director	:	M \$50/mor		o Item				
	Receipt For: 2019 Primary General X Other (specify) Other	Aggregate	Year-to-Date ▼ 450.00]							
⊢	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			• -			, , , ,		919	9.98	-

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 35 OF

118

ITE	MIZED RECEIPTS	Use separate schedule(s)				one	e)					
110			for each category of the Detailed Summary Page		11a 13		11b	11c 15	12 16	17		
	information copied from such Reports and Sir commercial purposes, other than using the							soliciting	g contribu	utions		
	AME OF COMMITTEE (In Full) JSACS PAC											
	ull Name of Individual (Last, First, Middle Init Gindlesperger, Krisi, , ,	ial) or Full O	rganization Name	Da	ate of	Rec	eipt					
_	ailing Address 6203 Renninger Road				12	1	D D D 31	/ Y	2019	Y		
	ity Iew Franklin	State OH	Zip Code 44319-4741					SA11AI. eceipt th	. 9947 nis Period	1		
	EC ID number of contributing deral political committee.	С							600.	.00		
U	ame of Employer (for Individual) SACS Management Group eceipt For: 2019	Vice	upation (for Individual) President - National Director of Year-to-Date ▼	\$10	Me 0/mor	emo l hthly	ltem					
	Primary General Conter (specify) V Other		1200.00	1								
в	ull Name of Individual (Last, First, Middle Init Glotfelty, Danielle, , ,	ial) or Full O	rganization Name	Da	ate of	Rec	eipt					
	ailing Address 409 Shady Lane	Ototo	Zie Oode		12	1	D D 31	/ Y	2019	Y		
	ity erlin	State PA	Zip Code 15530					SA11AL	10051 nis Period	4		
FE	EC ID number of contributing deral political committee.	С							150.	_		
	ame of Employer (for Individual) EP Health, LLC		upation (for Individual) P Lead	\$25	Me /mont	emo l hly	ltem					
	eceipt For: 2019 Primary General ★ Other (specify) ★ Other	Aggregate	Year-to-Date ▼ 250.00]								
	ull Name of Individual (Last, First, Middle Init Goen, Paul, , ,	ial) or Full O	rganization Name	Da	ate of	Rec	eipt					
M	ailing Address 4417 Leonard Road			ľ	12 ^M	1	D D D 31	/ Y	2019	Y		
	ity Bryan	State TX	Zip Code 77807					SA11AI. eceipt th	. 10097 nis Period	1		
	EC ID number of contributing deral political committee.	С				,		9	600.	.00		
E	ame of Employer (for Individual) mergency Service Partners, LLC		upation (for Individual) em Medical Director	\$10	Me 00/mor	emo nthly	ltem					
[eceipt For: 2019 Primary General X Other (specify) Other	Aggregate	Year-to-Date ▼ 1000.00									
SUE	STOTAL of Receipts This Page (optional)								1350.	.00		
тот	TAL This Period (last page this line number of	only)										

Image# 202001289167406293

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 36 OF

118

					140	- I - I									
					13		14	15	16	17					
	nformation copied from such Reports and St commercial purposes, other than using the														
\ \	ME OF COMMITTEE (In Full)														
	ll Name of Individual (Last, First, Middle Init conzalez, Javier, , ,	ial) or Full C	rganization Name												
Ма	iling Address 4527 Scarlet Loop			Date of Receipt											
City	-	State	Zip Code	Transaction ID : SA11AI.10066											
We	esley Chapel	FL	33544	Amount of Each Receipt this Period											
	C ID number of contributing leral political committee.	С					,	-	900.						
Na	me of Employer (for Individual)	Occ	upation (for Individual)		М	emo	Item								
	mpa Bay Emergency Physicians, LLC	Med	lical Director	\$	150/mc	onthly	/								
Re	ceipt For: 2019	Aggregate	Year-to-Date ▼												
×	Primary General ✔ Other (specify) ♥ Other		1500.00]											
	II Name of Individual (Last, First, Middle Init Frant, Randall, , ,	ial) or Full C	rganization Name		Date o	f Red	ceipt								
Ма	iling Address 1536 Forest Ave				^M 12	/	D D D 31	/ Y	y y 2019	Ŷ					
City	У	State	Zip Code		Trans	actio	on ID : S	SA11ALS	9977						
Riv	ver Forest	IL	60305-1004	- '	Amoun	t of E	Each R	eceipt th	is Period						
	C ID number of contributing deral political committee.	С			<u> </u>		,	-	150.	00					
Na US	ame of Employer (for Individual) ACS Medical Group, LTD		upation (for Individual) dical Director	\$2	M 25/mon		Item								
Re	Primary General Vereint For: 2019 General General	Aggregate	egate Year-to-Date ▼ 300.00												
	Other	L	4	<u> </u>											
). <u> </u>	II Name of Individual (Last, First, Middle Init Groomes, Roderick, , ,	ial) or Full C	rganization Name		Date o	f Red	ceipt								
Ма	iling Address 417 Edgewood Drive				^M 12	/	D 31	/ Y	2019 [°]	Y					
City	-	State	Zip Code		Trans	saction	on ID :	SA11AI.	9982						
_Sa	arver	PA	16055-9266		Amoun	t of E	Each R	eceipt th	is Period						
	C ID number of contributing leral political committee.	С					,		300.	00					
Na	me of Employer (for Individual)	Occ	upation (for Individual)		100 C		Item								
	IN Medical Group, LLC	Med	ical Director	\$	50/mor	nthly									
Re	ceipt For: 2019 Primary General	Aggregate	Year-to-Date V												
>	Other (specify) Other	600.00]												
SUB	TOTAL of Receipts This Page (optional)			•			,	. ,	1350.	00					

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 37 OF

		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions					
Full Name of Individual (Last, First, Middle 4. Guyton, Steven, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 111 Stillwater Lane			12 31 2019					
City Pittsburgh	State PA	Zip Code 15143-8899	Transaction ID : SA11AI.9990 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		900.00					
Name of Employer (for Individual) AHN Medical Group, LLC Receipt For: 2019 Primary General	Med	upation (for Individual) dical Director Year-to-Date ▼ 1800.00	Memo Item \$150/monthly					
✔ Other (specify) ♥ Other Full Name of Individual (Last, First, Middle	Initial) or Full O		1					
Hagen, Anne, , , Mailing Address 3700 Bonnie Road			Date of Receipt					
City Austin	State TX	Zip Code 78703	Transaction ID : SA11AI.10031 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		150.00					
Name of Employer (for Individual) Emergency Service Partners, LLC		upation (for Individual) P Lead	Memo Item \$25/monthly					
Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 250.00]					
Full Name of Individual (Last, First, Middle C. Hall, Timothy, , ,	Initial) or Full C	rganization Name	Date of Receipt					
Mailing Address 1380 Woodhurst Drive			M M / D D / Y Y Y Y 12 31 2019					
City Rock Hill	State SC	Zip Code 29732-2082	Transaction ID : SA11AI.9999 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		900.00					
USACS Medical Group, LTD E		upation (for Individual) ergency Physician	Memo Item \$150/monthly					
Primary General Conter (specify) Other	Aggregate	Year-to-Date ▼ 1533.34]					
SUBTOTAL of Receipts This Page (optional).			1950.00					
TOTAL This Period (last page this line number	er only)							

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 38 OF

		Use separate schedule(s)	(check only one)					
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
Any information copied from such Reports and a or for commercial purposes, other than using the			erson for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)								
Full Name of Individual (Last, First, Middle Ir A. Hall, Wyatt, , ,	nitial) or Full C	Organization Name	Date of Receipt					
Mailing Address 2310B Old Trail Rd.			12 31 / Y Y Y Y 12 31 2019					
City Avon	State CO	Zip Code 81620	Transaction ID : SA11AI.10139 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		300.00					
Name of Employer (for Individual) Colorado Emergency Service Physicians,		upation (for Individual) dical Director	Memo Item \$50/monthly					
Receipt For: 2019 Primary General Vother (specify) Vother	Aggregate	Year-to-Date ▼ 400.00]					
Full Name of Individual (Last, First, Middle Ir B. Hallock, Robert, , , Mailing Address 2124 Bay Front Terrace	hitial) or Full C	rganization Name	Date of Receipt					
City State Annapolis MD		Zip Code 21409	Transaction ID : SA11AI.9981 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		120.00					
Name of Employer (for Individual) MEP Health, LLC		upation (for Individual) ergency Physician - Regional Tra	ve \$20/monthly					
Receipt For: 2019 Primary General X Other (specify) V Other	Aggregate	Year-to-Date ▼ 240.00]					
Full Name of Individual (Last, First, Middle Ir C. Hanlon, Dennis, , ,	nitial) or Full C	organization Name	Date of Receipt					
Mailing Address 200 Windermere Ct.			12 / D D / Y Y Y Y 12 31 2019					
City McMurray	State PA	Zip Code 15317	Transaction ID : SA11AI.10153 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		300.00					
USACS Medical Group, Ltd.		upation (for Individual) lical Director	\$100/monthly					
Receipt For: 2019 Primary General X Other (specify) Other	Aggregate	Year-to-Date ▼ 300.00						
SUBTOTAL of Receipts This Page (optional)			720.00					
TOTAL This Period (last page this line number	only)							

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 39 OF

ITEMIZED RECEIPTS		Use separate schedule(s)	(check o	(check only one)						
II EIVIIZED KEGEIPIS		for each category of the Detailed Summary Page	X 11a		11b	11c	12	<u> </u>		
Any information copied from such Reports a or for commercial purposes, other than usir										
NAME OF COMMITTEE (In Full)										
Full Name of Individual (Last, First, Mido A. Hanson, Kim, , ,	lle Initial) or Full O	rganization Name	Date	of Re	eceipt					
Mailing Address 2503 Whispering Oaks C	Circle		M 12		31	D / Y	2019	Y		
City Bryan	State TX	Zip Code 77802-2024				SA11AI. Receipt th	10080 iis Period	_		
FEC ID number of contributing federal political committee.	С			_	-yr - 1		300.0	00		
Name of Employer (for Individual) Emergency Service Partners, LLC		upation (for Individual) 9 Lead	\$50/m		o Item /					
Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 500.00								
Full Name of Individual (Last, First, Mide B. Harper, Benjamin, , ,	lle Initial) or Full O	rganization Name	Date	of Re	eceipt					
Mailing Address 680 Rim Rock Road			12		31		2019	Y		
City Kerrville	State TX				Transaction ID : SA11AI.10120 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.				_			150.0	00		
Name of Employer (for Individual) Emergency Service Partners, LLC		Occupation (for Individual) Emergency Physician			o Item					
Receipt For: 2019 Primary General X Other (specify) ▼ Other	Year-to-Date ▼ 225.00]								
Full Name of Individual (Last, First, Mido C. Harris, John, , ,	lle Initial) or Full O	rganization Name	Date	of Re	eceipt					
Mailing Address 785 Joe Tyl Road			M 12		31		2019 [°]	Y		
City Texarkana	State TX	Zip Code 75501-5105				SA11AI. Receipt th	10146 iis Period			
Travis County Emergency Physicians, PA					y .	, y	600.0	00		
		upation (for Individual) ical Director	\$150/n		o Item Ily					
Receipt For: 2019 Primary General X Other (specify) Other	Year-to-Date ▼ 600.00]								
SUBTOTAL of Receipts This Page (option	al)				,	. ,	1050.0	00		
TOTAL This Period (last page this line nut	mber only)			_	-					

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 40 OF

118

ITEMIZED RECEIPTS		category of the Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17			
Any information copied from such Reports ar or for commercial purposes, other than using			son for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full)						
Full Name of Individual (Last, First, Middle A. Harris, Robert, , ,	Initial) or Full Organization N	lame	Date of Receipt			
Mailing Address 474 Rosina Vista Street	Mailing Address 474 Rosina Vista Street					
City Las Vegas	State Zip Cod NV 89138		Transaction ID : SA11AI.10099			
	140 09130		Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		375.00			
Name of Employer (for Individual)	Occupation (for I	ndividual)	Memo Item			
Virtual Locations	Vice President, C	Derations Southeast a	a \$150/monthly			
Receipt For: 2019	Aggregate Year-to-Date					
Primary General		075.00				
X Other (specify) ▼ Other		975.00				
Full Name of Individual (Last, First, Middle B. Hart, Alicia, , ,	Initial) or Full Organization N	lame	Date of Receipt			
Mailing Address 8005 Villefranche			12 31 2019			
City	State Zip Cod	e	Transaction ID : SA11AI.10026			
Corpus Christi	TX 78414-	6024	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		300.00			
Name of Employer (for Individual) Emergency Service Partners, LLC	Occupation (for I Assistant Medica	,	Memo Item \$50/monthly			
Receipt For: 2019	Aggregate Year-to-Date	•	_			
Primary General						
✓ Other (specify) ▼ Other		500.00				
Full Name of Individual (Last, First, Middle C. Henry, Androni, , ,	Initial) or Full Organization N	lame	Date of Receipt			
Mailing Address 241 Sweet Gum Road			12 31 2019			
City	State Zip Cod	e	Transaction ID : SA11AI.10028			
Pittsburgh	PA 15238-	1353	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		900.00			
Name of Employer (for Individual) AHN Medical Group, LLC	Occupation (for I	,	Memo Item \$150/monthly			
Receipt For: 2019		of Integrated Acute C				
Primary General	Aggregate Year-to-Date	1500.00				
Other		y				
SUBTOTAL of Receipts This Page (optional		····· •	1575.00			

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

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 41 OF

ITEMIZED RECEIPTS			Use separate schedule(s)		(check only one)						
			for each category of the Detailed Summary Page	×	11a 13		11b	11c	12	17	
	y information copied from such Reports and Sta for commercial purposes, other than using the r				or the		pose of	soliciting	g contrib	utions	
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full)										
A.	Full Name of Individual (Last, First, Middle Initia Herndon, Yalonda, , ,	al) or Full Or	ganization Name	C	ate o	f Re	eceipt				
	Mailing Address 2509 Mill Wright Rd				^M 12	/	D D D 31	/ Y	ү ү 2019	Ý	
	City Concord	State NC	Zip Code 28027				ion ID : Each R		. 10119 his Period	d	
	FEC ID number of contributing federal political committee.	С					-		300).00	
	Name of Employer (for Individual) USACS Medical Group, LTD		pation (for Individual) ity Director	\$5	M 0/mor		o Item				
	Receipt For: 2019 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 500.00]							
в.	Full Name of Individual (Last, First, Middle Initia Hibbs, Nathaniel, , ,	al) or Full Or	ganization Name	C)ate o	f Re	eceipt				
	Mailing Address 6634 S. Prescott Way				12 / D D / Y Y Y Y 2019						
	2		State Zip Code CO 80120			Transaction ID : SA11AI.9968 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С					-).00	
	Name of Employer (for Individual) Colorado Emergency Service Physicians,		Occupation (for Individual) Emergency Physician			lemo onthl	o Item y				
	Receipt For: 2019 Primary General Other (specify)	Aggregate \	Year-to-Date ▼ 1200.00								
	Full Name of Individual (Last, First, Middle Initia Hicken, Wesley, , ,	al) or Full Or	ganization Name		Date o	f Bc	ceint				
0.	Mailing Address 1029 Wintergreen Terrace				12		31	/ Y	2019	Y	
	City Rockville	State MD	Zip Code 20850				ion ID :		.10118 his Perio	d	
	FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Occupat MEP Health, LLC Regional				inoun		J	,		0.00	
			pation (for Individual) onal APP Lead	\$2	M 5/mor		o Item				
	Receipt For: 2019 Aggregate Year-to-Date ▼ Primary General X Other (specify) Other 250.00]							
s	UBTOTAL of Receipts This Page (optional)						,	. ,	1050	0.00	
т	OTAL This Period (last page this line number or	וy)					-			-	

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 42 OF

			Use separate schedule(s)		(C	(check only one)						
11	EMIZED RECEIPTS			r each category of the etailed Summary Page		× 11a 13		11b 14	11c		2 6	17
	y information copied from such Reports and S for commercial purposes, other than using the					for the		pose of	soliciting	g cont	ributio	ons
	NAME OF COMMITTEE (In Full) USACS PAC											
A.	Full Name of Individual (Last, First, Middle Init Higginbotham, Eric, , ,	ial) or Full O	Organ	zation Name		Date o	of Re	eceipt				
	Mailing Address 1701B South 2nd Street Unit E	3				12	/	31	D / Y	y 201	19	
	City Austin	State TX		Zip Code 78704					SA11AI. Receipt th			
	FEC ID number of contributing federal political committee.	С				<u> </u>			-	ç	900.00)
	Name of Employer (for Individual) Emergency Service Partners, LLC		•	on (for Individual) Director		M \$150/mo		o Item Iy				
	Receipt For: 2019 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year	-to-Date ▼ 1500.00	1							
в.	Full Name of Individual (Last, First, Middle Init Hodson, Benjamin, , , Mailing Address 1878 Shaker Rd	ial) or Full O	Organ	zation Name		Date o		eceipt		Ŷ	Y	
	City	State Zip Code			12 31 2019 Transaction ID : SA11AL9885							
	Franklin	ОН		45005-9611					Receipt th		riod	
	FEC ID number of contributing federal political committee.	C				[.			-7	1	120.00)
	Name of Employer (for Individual) USACS Medical Group, LTD		•	on (for Individual) ncy Physician		M \$20.00/r		o Item thly				
Dessint Forum			Year	-to-Date ▼ 240.00								
с.	Full Name of Individual (Last, First, Middle Init Holt, Douglas, , ,	ial) or Full O	Organ	zation Name		Date o	of Re	eceipt				
	Mailing Address 207 Cabbage Inlet Lane	1-				12		D 31		201	9	
	City Wilmington	State NC		Zip Code 28409-3004					Receipt th			
	FEC ID number of contributing federal political committee.	С				Ē		y .	9	3	300.00)
USACS Medical Group, Ltd.			upatio fighte	on (for Individual) r		N \$100/m		o Item Ily				
	Receipt For: 2019 Primary General X Other (specify) Other	Aggregate	Year	-to-Date ▼ 300.00]							
	UBTOTAL of Receipts This Page (optional)				•			, .		13	320.00	

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 43 OF

118

		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1						
Any information copied from such Reports and a or for commercial purposes, other than using the			erson for the purpose of soliciting contributions						
Full Name of Individual (Last, First, Middle Ir A. Hummel, Laura, , ,	itial) or Full C	Organization Name	Date of Receipt						
Mailing Address 807 S. Roxmere Road			M M / D D / Y Y Y Y 12 31 2019						
City Tampa	State FL	Zip Code 33609-4235	Transaction ID : SA11AI.9951 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		600.00						
Name of Employer (for Individual) Tampa Bay Emergency Physicians, LLC Receipt For: 2019	Reg	upation (for Individual) jional Education Director	\$100/monthly						
Primary General Cother (specify) The other	Aggregate	Year-to-Date ▼ 1000.00]						
Full Name of Individual (Last, First, Middle Ir Hydari, Irfan, , ,	itial) or Full C	organization Name	Date of Receipt						
Mailing Address 3203 Walnut Ave	State	Zip Code	12 / D D / Y Y Y Y 12 31 2019						
Austin	TX	78722-1635	Transaction ID : SA11AI.10063 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		900.00						
Name of Employer (for Individual) Virtual Locations		upation (for Individual) gional Vice President	Memo Item \$150/monthly						
Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 1500.00]						
Full Name of Individual (Last, First, Middle Ir c. lyer, Sujit , , ,	itial) or Full C	organization Name	Date of Receipt						
Mailing Address 1204 Kinney Avenue			12 / D D / Y Y Y Y 12 31 2019						
City Austin	State TX	Zip Code 78704	Transaction ID : SA11AI.10109 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		600.00						
Name of Employer (for Individual) Emergency Service Partners, LLC		upation (for Individual) ergency Physician	\$100/monthly						
Receipt For: 2019 Primary General Conter (specify) Other	Aggregate	Year-to-Date ▼ 1000.00]						
SUBTOTAL of Receipts This Page (optional)			2100.00						
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:

(check only one)

PAGE 44 OF

118

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
or for commercial purposes, other than using		y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)							
Full Name of Individual (Last, First, Middle Janikas, John, , ,	e Initial) or Full Organization Name	Date of Receipt					
Mailing Address 748 Carlton Road		12 31 2019					
Clifton Park	StateZip CodeNY12065-1023	Transaction ID : SA11AI.9938 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	499.98					
Name of Employer (for Individual) USACS Medical Group, LTD	Occupation (for Individual) Medical Director	Memo Item \$83.33/monthly					
Receipt For: 2019 Primary General X Other (specify) V Other	X Other (specify) ▼ 999.96						
Full Name of Individual (Last, First, Middle B. Jeffrey, Douglas, , ,	Date of Receipt						
Mailing Address 1109 Bluebonnet Lane	12 31 2019						
City Austin	StateZip CodeTX78704-2005	Transaction ID : SA11AI.10009 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	1000.00					
Name of Employer (for Individual) Emergency Service Partners, LLC	Occupation (for Individual) Emergency Physician	Memo Item \$150/monthly					
Receipt For: 2019 Primary General ★ Other (specify) ▼ Other	Aggregate Year-to-Date ▼ 1750.00						
Full Name of Individual (Last, First, Middle Jenis, Andrew, , ,		Date of Receipt					
Mailing Address 115 Cayuga Heights Road		12 31 2019					
City Ithaca	StateZip CodeNY14850	Transaction ID : SA11AI.9873 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С	900.00					
Name of Employer (for Individual) Virtual Locations	Occupation (for Individual) Regional Vice President	\$150/monthly					
Receipt For: 2019 Primary General Conter (specify) Other	Aggregate Year-to-Date ▼ 1600.00						
SUBTOTAL of Receipts This Page (optional))						
	per only)						

Image# 202001289167406302

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 45 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17		
	y information copied from such Reports and Sta for commercial purposes, other than using the r			erson for the purpose of soliciting contributions		
	NAME OF COMMITTEE (In Full)					
Α.	Full Name of Individual (Last, First, Middle Initia Johnston, Christopher, , , Mailing Address 1459 Milwaukee St.	al) or Full O	rganization Name	Date of Receipt		
	City	State	Zip Code	12 31 2019 Transaction ID : SA11AI.10045		
	Denver	CO	80206	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		300.00		
	Name of Employer (for Individual) Colorado Emergency Service Physicians,		upation (for Individual) lical Director	Memo Item \$50/monthly		
	Receipt For: 2019 Primary General X Other (specify) ▼ Other]				
В.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Jones, Bruce, , ,					
	Mailing Address 4187 Colister Drive		12 31 2019			
	City	State	Zip Code	Transaction ID : SA11AI.9889		
	Dublin	OH	43016-6162	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.			900.00		
	Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) dical Director	Memo Item \$150/monthly		
	Receipt For: 2019	Aggregate	Year-to-Date ▼	1		
	Conter (specify) ▼ Other		1700.00]		
C.	Full Name of Individual (Last, First, Middle Initia Jones, Wayne, , ,	al) or Full O	rganization Name	Date of Receipt		
	Mailing Address 6063 Deerfield Drive			12 / D D / Y Y Y Y 12 31 2019		
	City Fairview	State PA	Zip Code 16415	Transaction ID : SA11AI.10117		
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period		
	Name of Employer (for Individual) AHN Medical Group, LLC		upation (for Individual) ical Director	Memo Item \$50/monthly		
	Receipt For: 2019		Year-to-Date ▼			
	Primary General Vother (specify) Other		500.00	1		
s	UBTOTAL of Receipts This Page (optional)			1500.00		
Т	OTAL This Period (last page this line number or	ייייין)				

Image# 202001289167406303

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 46 OF

118

TTEMIZED RECEIPTS			for each category of the Detailed Summary Page		4 1	1a 3		-	1b 4		11c	F	12 16	17					
	y information copied from such Reports and Sta for commercial purposes, other than using the					for	the		rpc	se c		solicitin		ntribu	tions				
	NAME OF COMMITTEE (In Full)																		
Α.	Jouriles, Nicholas, , ,										Date of Receipt								
	Mailing Address 398 Bentleyville Road			12 31 Y Y Y Y 2019															
5			StateZip CodeOH44022-2433							Transaction ID : SA11AI.10094 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C							-,			- 7-	_	300.	00				
	Name of Employer (for Individual) USACS Medical Group, LTD Receipt For: 2019	ation (for Individual) hair of Faculty Development	Memo Item \$50/monthly																
	Primary General Vother (specify) V Other	Aggregate Year-to-Date ▼ 500.00																	
в.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kalaria, Amit, , ,								Date of Receipt										
	Mailing Address 17804 Cricket Hill Drive							12 31 2019											
	City Germantown	StateZip CodeMD20874										A11AI			_				
	FEC ID number of contributing federal political committee.			Ē			,			- 7	_	120.	00						
	Name of Employer (for Individual) MEP Health, LLC	C N		\$20.00/monthly															
	Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggrega																	
с.	Full Name of Individual (Last, First, Middle Initia Kapadia, Homi, , ,	al) or Ful	l Orga	anization Name		Date of Receipt													
	Mailing Address 31281 Island Dr								12 31 2019										
	City Evergreen	State CO		Zip Code 80439-8966	_							SA11AI							
	FEC ID number of contributing federal political committee.	С				900.00													
	Name of Employer (for Individual) Virtual Locations Receipt For: 2019	Occupation (for Individual) Regional Vice President						Memo Item \$150/monthly											
	Primary General Conter (specify) Other	Aggrega	ate Ye	ar-to-Date ▼ 1540.00															
s	UBTOTAL of Receipts This Page (optional)			•••••										1320.(00				
F	OTAL This Period (last page this line number o					Γ			,			-							

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 47 OF

118

				or each category of the Detailed Summary Page		× 11a 13		11b 14	11c	12	17				
	y information copied from such Reports and Sta for commercial purposes, other than using the r					for the	purp	ose of	soliciting	g contrib	outions				
	NAME OF COMMITTEE (In Full)														
Α.	Kella, Vipul, , ,	e of Individual (Last, First, Middle Initial) or Full Organization Name /ipul, , ,							Date of Receipt						
	Mailing Address 11808 Woodthrush Lane					12 31 2019					Y				
	City Potomac	State MD		Zip Code 20854					SA11AI. Receipt th		od				
	FEC ID number of contributing federal political committee.	C						<u></u>	-7	25	0.00				
	MEP Health, LLC			tion (for Individual) ncy Physician		M \$50/mor	emo nthly	Item							
	Receipt For: 2019 Primary General ✓ Other (specify) ▼ Other	Aggregate	ar-to-Date ▼ 550.00												
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Keller, Noah, , ,							f Rec	ceipt							
	Mailing Address 10119 Easterday Court			M m / D D / Y Y Y Y 12 31 2019 Transaction ID : SA11Al.9972 Amount of Each Receipt this Period											
	City Hagerstown	State MD	_												
	FEC ID number of contributing federal political committee.					<u> </u>	1.3	,		90	0.00				
	Name of Employer (for Individual) Virtual Locations	Occ Reg		Memo Item \$150/monthly											
	Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Yea	ur-to-Date ▼ 1600.00											
C.	Full Name of Individual (Last, First, Middle Initia Kendall, Jayne, , ,	al) or Full O)rgai	nization Name		Date of	f Rec	ceipt							
	Mailing Address 21710 Parsons Green Row					^M 12	/	31) / Y	2019	Y				
	City Cornelius	State NC		Zip Code 28031				-	SA11AL		od				
	FEC ID number of contributing federal political committee.	С				<u> </u>		9	. ,	60	0.00				
	Name of Employer (for Individual) Virtual Locations		Occupation (for Individual) Regional Vice President					Memo Item \$100/monthly							
	Receipt For: 2019 Primary General Conter (specify) Other	Aggregate	Yea	ar-to-Date ▼ 1200.00											
s	UBTOTAL of Receipts This Page (optional)			•				,	. ,	175	0.00				
т	OTAL This Period (last page this line number or	וy)		•••••	-			,			40.				

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 48 OF

118

ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)				
IILIVIIZED RECEIFIJ		for each category of the Detailed Summary Page	▲ 11a 11b 11c 12 13 14 15 16 1				
			person for the purpose of soliciting contributions tee to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) USACS PAC	g						
Full Name of Individual (Last, First, Midd A. Kenter, Jeremy, , ,	le Initial) or Full C	Organization Name	Date of Receipt				
Mailing Address 3428 Ranch Park Trail			12 31 2019				
City Round Rock	State TX	Zip Code 78681	Transaction ID : SA11AI.10125 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		300.00				
Name of Employer (for Individual) Emergency Service Partners, LLC		upation (for Individual) ergency Physician	\$50/monthly				
Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 450.00					
Full Name of Individual (Last, First, Midd B. Kile, Tamara, , ,	le Initial) or Full C	Organization Name	Date of Receipt				
Mailing Address 10021 Fire Tower Rd			12 / D D / Y Y Y Y 12 31 2019				
City Ijamsville	State MD	Zip Code 21754-8756	Transaction ID : SA11AI.9996 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		120.00				
Name of Employer (for Individual) MEP Health, LLC		cupation (for Individual) dical Director	Memo Item \$20/monthly				
Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 240.00					
Full Name of Individual (Last, First, Midd C. Kim, Edward, , ,		Organization Name	Date of Receipt				
Mailing Address 1513 Morning Moon Circ	le		12 / D D / Y Y Y Y Y 12 31 2019				
City Austin	State TX	Zip Code 78732	Transaction ID : SA11AI.10058 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		900.00				
Name of Employer (for Individual) Emergency Service Partners, LLC Receipt For: 2019	Asso	upation (for Individual) ociate Medical Director	Memo Item \$150/monthly				
Primary General Conter (specify) Other	Aggregate	Year-to-Date ▼ 1500.00					
SUBTOTAL of Receipts This Page (optiona	' al)		▶ 1320.00				

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

100

Image# 202001289167406306

SCHEDULE A	(FEC Fo	orm 3X)
ITEMIZED REC	EIPTS	

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 49 OF

			for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17					
or	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) USACS PAC								
Α.	Full Name of Individual (Last, First, Middle Init Kirkpatrick, Kyle, , , Mailing Address 16360 Hawkstone Place	tial) or Full O	Date of Receipt						
	City	State	Zip Code	12 31 2019 Transaction ID : SA11AI.9949					
	Parker	со	80134	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		120.00					
	Name of Employer (for Individual) Colorado Emergency Service Physicians,	Memo Item \$20/monthly							
	Receipt For: 2019 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 240.00						
	Full Name of Individual (Last, First, Middle Init Kirtz, Jeremy, , ,	Date of Receipt							
	Mailing Address 906 S Fremont Ave	12 31 / Y Y Y Y Y							
	City Tampa	State FL	Zip Code 33606	Transaction ID : SA11AI.10016 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		300.00					
	Name of Employer (for Individual) Tampa Bay Emergency Physicians, LLC		upation (for Individual) dical Director	Memo Item \$50/monthly					
	Receipt For: 2019 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 600.00						
	Full Name of Individual (Last, First, Middle Init Klein, David, , ,	tial) or Full O	rganization Name	Date of Receipt					
	Mailing Address 11736 Gainsborough Road			M M / D D / Y Y Y Y 12 31 2019					
	City Potomac	State MD	Zip Code 20854	Transaction ID : SA11AI.9902 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		600.00					
	Name of Employer (for Individual) USACS Management Group		upation (for Individual) onal Director of Quality	Memo Item \$100/monthly					
	Receipt For: 2019 Primary General Vother (specify) Other	Aggregate	Year-to-Date ▼ 1000.00						
s	JBTOTAL of Receipts This Page (optional)		••••••	1020.00					
т	OTAL This Period (last page this line number	only)	•						

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 50 OF

ITEMIZED RECEIPTS			Use separate schedule(s)			(check only one)										
			for each category of the Detailed Summary Page				11b	11c 15	12	Г	17					
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	I ay not be sold or used by any p uddress of any political committe	person e to s	for the olicit co	pur ntrit	pose of	soliciting	g contri	ributic	ons					
	NAME OF COMMITTEE (In Full)															
A .	Full Name of Individual (Last, First, Middle Init	Name of Individual (Last, First, Middle Initial) or Full Organization Name inman, Jacob, , ,							Date of Receipt							
	Mailing Address 6014 Bryant Street		Zip Code		^M 12	1	D D D 31	/ Y	2019							
	City Pittsburgh	State PA					SA11AI. eceipt th		iod							
AHN Medical Group, LLC					800.00)					
			upation (for Individual) dical Director		M \$50/mor		o Item									
	Receipt For: 2019 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 1040.00]												
в.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Kolodzik, Joan, , , Mailing Address 1108 Paxon Court					f Re	eceipt	/ Y	Ý	Y						
	City Bellbrook	State Zip Code OH 45305-8959				12 31 2019 Transaction ID : SA11AI.9935 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C			900.00											
	Name of Employer (for Individual) Virtual Locations	Occupation (for Individual) National Director of Continuing Medica				Memo Item \$150/monthly										
	Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 1540.00]												
С.	Full Name of Individual (Last, First, Middle Inite Kornas, Rebecca, , ,	tial) or Full O	organization Name		Date o	f Re	eceipt									
	Mailing Address 4338 Wyandot St				12 31 2019											
	City Denver	State CO	Zip Code 80211-1761					SA11AI. eceipt th								
	FEC ID number of contributing federal political committee.	С			<u> </u>		y 1	, ,	3(00.00)					
	Name of Employer (for Individual) Colorado Emergency Service Physicians, Receipt For: 2019			M \$50/mor		o Item /										
	Primary General Conter (specify) Other		Year-to-Date ▼ 400.00]												
s	UBTOTAL of Receipts This Page (optional)						y	, y	200	00.00)					
Т	OTAL This Period (last page this line number	only)								-						

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 51 OF

ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)					
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
			person for the purpose of soliciting contributions te to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)								
Full Name of Individual (Last, First, Middle A. Kramer, Olga, , ,	e Initial) or Full O	organization Name	Date of Receipt					
Mailing Address 5836 Kinglet Lane			12 31 2019					
City Charlotte	State NC	Zip Code 28269-7115	Transaction ID : SA11AI.10095 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		300.00					
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) P Lead	Memo Item \$50/monthly					
Receipt For: 2019 Primary General X Other (specify) V Other	Aggregate	Year-to-Date ▼ 500.00]					
Full Name of Individual (Last, First, Middle Kuchinski, Joseph , , , Mailing Address 5869 Heaven View Drive	e Initial) or Full O	Date of Receipt						
City Las Vegas	State NV	Zip Code 89135-1296	Transaction ID : SA11AI.9939 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		1500.00					
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) dical Director	Memo Item \$250/monthly					
Receipt For: 2019 Primary General ★ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 2950.00]					
Full Name of Individual (Last, First, Middle Laberge, Anne-Marie, , ,	e Initial) or Full O	organization Name	Date of Receipt					
Mailing Address 114 Nazarene Ct			12 31 Y Y Y Y 2019					
City Fombell	State PA	Zip Code 16123-2420	Transaction ID : SA11AI.9880 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		240.00					
Name of Employer (for Individual) AHN Medical Group, LLC		upation (for Individual) lity Director	\$50/monthly					
Receipt For: 2019 Primary General Conter (specify) Other	Aggregate	Year-to-Date ▼ 360.00]					
SUBTOTAL of Receipts This Page (optional)		2040.00					
TOTAL This Period (last page this line num	ber only)							

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 52 OF

				each category of the tailed Summary Page		X 11a 13		11b	11c	12	17		
or fo	nformation copied from such Reports and Sta r commercial purposes, other than using the n					for the	purpo	ose of	soliciting	contribu	itions		
\ \	AME OF COMMITTEE (In Full) ISACS PAC												
A	III Name of Individual (Last, First, Middle Initia ancaster, David, , , ailing Address 6633 Silver Fox Road	l) or Full C		Date of Receipt									
Ci		State	Z	Zip Code		12 31 2019 Transaction ID : SA11AI.9907							
С	harlotte	NC		28270-0683		Amount	of E	ach Re	eceipt th	is Period	1		
	EC ID number of contributing deral political committee.	С				100.02							
	ame of Employer (for Individual) SACS Medical Group, LTD		•	n (for Individual) Medical Director	Memo Item \$16.67/monthly								
	Receipt For: 2019 Aggregate Year-to-Date ▼ Primary General ✓ Other (specify) ▼ Other Other												
	III Name of Individual (Last, First, Middle Initia and, Larry, , ,	l) or Full C	Organiz	ation Name		Date of	Rece	eipt					
M	ailing Address 10014 Hazelnut Court					M M 12	/	D D 31	/ Y	y y 2019	Ŷ		
Ci Ti	ty ampa	State FL	Z	Zip Code 33647	_				SA11AI.9 eceipt th	9950 is Perioc	1		
	EC ID number of contributing deral political committee.							900	.00				
	ame of Employer (for Individual) mpa Bay Emergency Physicians, LLC	Occupation (for Individual) Medical Director				Memo Item \$150/monthly							
	eceipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Year-	to-Date ▼ 1500.00									
	II Name of Individual (Last, First, Middle Initia _atouf, Kathleen, , ,	l) or Full C	Drganiz	ration Name		Date of	Rece	eipt					
_	ailing Address 6 Old Farm Rd	-				^M 12	1	D D 31	/ Y	ү ү 2019	Y		
Ci C	ty arnegie	State PA		lip Code 15106	_				SA11AI. eceipt th	9942 is Perioc	1		
	EC ID number of contributing deral political committee.	С				<u> </u>	, j		, <u>,</u>	120	.00		
A	Ame of Employer (for Individual) HN Medical Group, LLC	•	n (for Individual) irector		Memo Item \$20/monthly								
	eceipt For: 2019 Primary General X Other (specify) Other	Aggregate	Year-	to-Date ▼ 240.00									
SUE	BTOTAL of Receipts This Page (optional)			•••••						1120	.02		
тот	AL This Period (last page this line number on	ly)		•	-								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 53 OF

	-	Use separate schedule(s)	(check only one)						
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 a or for commercial purposes, other than usin	nd Statements ma g the name and a	ay not be sold or used by any ddress of any political committe	person for the purpose of soliciting contributions ee to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)									
Full Name of Individual (Last, First, Midd A. Lavina, Jay, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 11651 Renaissance View	/ Ct.		12 31 2019						
City Tampa	State FL	Zip Code 33626	Transaction ID : SA11AI.10067 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		150.00						
Name of Employer (for Individual) Tampa Bay Emergency Physicians, LLC Receipt For: 2019	Dire	upation (for Individual) ctor of APPs Year-to-Date ▼	Memo Item \$25/monthly						
Primary General Conter (specify) Conter		250.00							
Full Name of Individual (Last, First, Middl B. Lawrence, Linda, , , Mailing Address 4670 Armandale Avenue									
City Canton	State OH	Zip Code 44718	12 31 2019 Transaction ID : SA11AI.9953 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		1000.00						
Name of Employer (for Individual) USACS Management Group		upation (for Individual) sident	Memo Item \$150/monthly						
Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ , 1800.00							
Full Name of Individual (Last, First, Middl C. LeBlanc, Louis, , ,	e Initial) or Full O	rganization Name	Date of Receipt						
Mailing Address 1428 Lacy Lane		I	12 / D D / Y Y Y Y 12 31 2019						
City Rock Hill	State SC	Zip Code 29732-7723	Transaction ID : SA11AI.9956 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		400.00						
Name of Employer (for Individual) Virtual Locations		upation (for Individual) ïghter	Memo Item \$50/monthly						
Receipt For: 2019 Primary General X Other (specify) Other	Aggregate	Year-to-Date ▼ 700.00							
SUBTOTAL of Receipts This Page (optional	al)		1550.00						
TOTAL This Period (last page this line nun	nber only)								

Les congrate schodule(s)

FOR LINE NUMBER:

PAGE 54 OF

ITE	MIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any or fo	information copied from such Reports and Star r commercial purposes, other than using the n	tements ma ame and a	ay not be sold or used by any p address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
	AME OF COMMITTEE (In Full) JSACS PAC			
A. L M C F f f f f f U R	ull Name of Individual (Last, First, Middle Initia Lee, Sidney, , , aliling Address 1200 Queen Emma Street Apt 2001 ity Honolulu EC ID number of contributing deral political committee. ame of Employer (for Individual) SACS Medical Group, LTD eccipt For: 2019 Primary General A Other (cocify)	State HI Occu Med	Drganization Name Zip Code 96813-6311 upation (for Individual) dical Director Year-to-Date ▼ 600.00	Date of Receipt 12 31 2019 Transaction ID : SA11AI.9987 Amount of Each Receipt this Period 300.00 Memo Item \$50/monthly
F	★ Other (specify) Other ull Name of Individual (Last, First, Middle Initia Leineweber, Felicia, , ,	I) or Full O	-192 - 192 -	Date of Receipt
M C M F fe N M R	ailing Address 2110 Huntington Terrace ity Mount Airy EC ID number of contributing ideral political committee. ame of Employer (for Individual) EP Health, LLC ecceipt For: 2019 Primary General X Other (specify) ▼ Other	APF	Zip Code 21771-5876 cupation (for Individual) P Lead Year-to-Date ▼ 250.00	Date of Heceipt 12 31 2019 Transaction ID : SA11AI.10060 Amount of Each Receipt this Period 150.00 Memo Item \$25/monthly
с. <u>I</u> м м	ull Name of Individual (Last, First, Middle Initia Lewis, Brandon, , , ailing Address 3648 Calusa Springs Dr ity College Station	I) or Full Or State TX	Zip Code 77845-4545	Date of Receipt
fe N V	EC ID number of contributing deral political committee. ame of Employer (for Individual) irtual Locations eccipt For: 2019 Primary General X Other (specify) Other	Regi	upation (for Individual) ional Vice President Year-to-Date ▼ 1500.00	900.00 Memo Item \$150/monthly
SU	BTOTAL of Receipts This Page (optional)			1350.00
тот	TAL This Period (last page this line number on	ıly)	••••••	

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 55 OF

		Use separate schedule(s)	(check only one)					
II LIVIIZED KEVEIF 13		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 t			person for the purpose of soliciting contributions					
Full Name of Individual (Last, First, Middle A. Lewis, Kelli, , ,	Initial) or Full C	Prganization Name	Date of Receipt					
Mailing Address 137 Harrison Street			12 31 2019					
City Denver	State CO	Zip Code 80206-5538	Transaction ID : SA11AI.10079 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		450.00					
Name of Employer (for Individual) Colorado Emergency Service Physicians,		upation (for Individual) dical Director	Memo Item \$150/monthly					
Receipt For: 2019 Primary General ✓ Other (specify) ▼ Other		Year-to-Date ▼ 1050.00]					
Full Name of Individual (Last, First, Middle B. Lim, Andrew, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 81 Fieldstone Run			12 31 2019					
City Farmington	State CT	Zip Code 06032-2741	Transaction ID : SA11AI.9875 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		120.00					
Name of Employer (for Individual) MEP Health, LLC		upation (for Individual) dical Director	Memo Item \$20.00/monthly					
Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 240,00]					
Full Name of Individual (Last, First, Middle C. Little, Andrew, , ,	Initial) or Full C	organization Name	Date of Receipt					
Mailing Address 5514 Aryshire Dr			12 31 2019					
City Dublin	State OH	Zip Code 43017-9428	Transaction ID : SA11AI.9874 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		600.00					
USACS Medical Group, LTD		upation (for Individual) ergency Physician	Memo Item \$100/monthly					
Receipt For: 2019 Primary General X Other (specify) Other	Aggregate	Year-to-Date ▼ 1200.00]					
SUBTOTAL of Receipts This Page (optional).			1170.00					
TOTAL This Period (last page this line number	er only)							

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 56 OF

118

		Use separate schedule(s)	(check only one)						
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and s or for commercial purposes, other than using th			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
Full Name of Individual (Last, First, Middle In A. Loar, Jesse, , ,	itial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2554 E. Maplewood Ave.			12 31 2019						
City Centennial	State CO	Zip Code 80121	Transaction ID : SA11AI.10072 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		900.00						
Name of Employer (for Individual) Colorado Emergency Service Physicians, Receipt For: 2019	Co-	upation (for Individual) Medical Director Year-to-Date ▼	\$150/monthly						
Primary General ✔ Other (specify) ♥ Other		1500.00]						
Full Name of Individual (Last, First, Middle In Lojewski, Stephen, , , Mailing Address 23453 Country Club Lane	itial) or Full O	rganization Name	Date of Receipt						
City Grosse lle	State MI	Zip Code 48138-2246	Transaction ID : SA11AI.9988 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		120.00						
Name of Employer (for Individual) Virtual Locations		upation (for Individual) fighter	\$20/monthly						
Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 240.00]						
Full Name of Individual (Last, First, Middle In C. Love, Lisa, , ,	itial) or Full O	rganization Name	Date of Receipt						
Mailing Address 2548 Franciscan Street NE			12 D D / Y Y Y Y 12 31 2019						
City Canton	State OH	Zip Code 44705	Transaction ID : SA11AI.10081 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		300.00						
Name of Employer (for Individual) USACS Management Group Receipt For: 2019	Clini	upation (for Individual) cal Director, Risk Management	\$50/monthly						
Primary General Conter (specify) Other	Aggregate	Year-to-Date ▼ 500.00]						
SUBTOTAL of Receipts This Page (optional)			1320.00						
TOTAL This Period (last page this line number	only)								

to schodula(s) 1100

FOR LINE NUMBER:

PAGE 57 OF

IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) ▼ 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Si for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)			
Α.	Full Name of Individual (Last, First, Middle Init Lubinsky, William, , , Mailing Address 3500 Rockmont Dr	ial) or Full Or	ganization Name	Date of Receipt
	Apt 13204			12 31 2019
	City Denver	State CO	Zip Code 80202-2170	Transaction ID : SA11AI.10167
			00202 2170	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1200.00
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
	USACS Medical Group, Ltd.	Firef	ighter	\$1200/one-time
	Receipt For: 2019	Aggregate `	Year-to-Date 🔻	
	Primary General		1000.00	1
	X Other (specify) ▼ Other		1200.00	1
в.	Full Name of Individual (Last, First, Middle Init Lynch, Patrick, , ,	ial) or Full Or	ganization Name	Date of Receipt
	Mailing Address 229 N Church Street Unit 204			M M / D D / Y Y Y Y 12 31 2019
	City	State	Zip Code	Transaction ID : SA11AI.10096
	Charlotte	NC	28202-2259	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		0.00
	Name of Employer (for Individual) USACS Medical Group, LTD		ipation (for Individual) ical Director	\$0/monthly
	Receipt For: 2019	Aggregate `	Year-to-Date 🔻	
	Primary General			1
	✓ Other (specify) ▼ Other		, 1200.00	1
с.	Full Name of Individual (Last, First, Middle Init MacLean, Craig, , ,	ial) or Full Or	ganization Name	Date of Receipt
	Mailing Address 64 Newfields Road			M M / D D / Y Y Y Y 12 31 2019
	City	State	Zip Code	Transaction ID : SA11AI.9896
	Exeter	NH	03833-4542	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		900.00
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
	USACS Medical Group, LTD	Direc	tor of Quality	\$150/monthly
	Receipt For: 2019	Aggregate `	Year-to-Date ▼	
	Primary General			1
	Conter (specify) Other		1700.00	1
s	UBTOTAL of Receipts This Page (optional)			2100.00
т	OTAL This Period (last page this line number of	only)		

Image# 202001289167406315

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 58 OF

118

			Detailed Summary Page	×	11a	Ш	11b	11c	12	
					13		14	15	16	17
	y information copied from such Reports and for commercial purposes, other than using th									
\rangle	NAME OF COMMITTEE (In Full) USACS PAC									
١.	Full Name of Individual (Last, First, Middle Ir MacLeod, Bruce, , ,	nitial) or Full O	rganization Name		Date of	f Red	ceipt			
	Mailing Address 30 Isabella Street				^M 12	/	D D D 31	/ Y	y 2019	Ŷ
	City	State	Zip Code		Trans	actio	on ID : S	SA11AI.	9888	
	Pittsburgh	PA	15228-1615		Amoun	t of E	Each R	eceipt th	is Period	
	FEC ID number of contributing federal political committee.	С					,	-	900.	
	Name of Employer (for Individual)	Occi	upation (for Individual)	_	Μ	emo	Item			
	Virtual Locations	Reg	ional Vice President	\$	150/mc	onthly	/			
	Receipt For: 2019	Aggregate	Year-to-Date 🔻							
	Primary General X Other (specify) ▼ Other		1502.00	1						
	Full Name of Individual (Last, First, Middle Ir Madar, Merci, , ,	nitial) or Full O		Date of	f Red	ceipt				
	Mailing Address 7805 Valderrama Way			12 31 2019						
	City	State	Zip Code		Trans	actio	on ID : S	SA11ALS	962	
	Bradenton	FL	34202-5651	'	Amoun	t of E	Each R	eceipt th	is Period	
	FEC ID number of contributing federal political committee.	С		_		,	- 7	100.	02	
	Name of Employer (for Individual) Tampa Bay Emergency Physicians, LLC	Occupation (for Individual) Emergency Physician			M 16.67/n		ltem Ily			
	Receipt For: 2019 Primary General	Aggregate								
	▼ Other (specify) ▼ Other		, 200.04							
).	Full Name of Individual (Last, First, Middle Ir Mann, Rubeal, , ,	ull Name of Individual (Last, First, Middle Initial) or Full Organization Name Mann, Rubeal, , ,								
	Mailing Address 10122 Concord Road				^M 12	/	D D D 31	/ Y	2019	Y
	City Dublin	State OH	Zip Code 43017-9434					SA11AI.		
			43017-9434		Amoun	t of E	Each R	eceipt th	is Period	
	FEC ID number of contributing federal political committee.	C				_	y	, <u>,</u>	600.	00
	Name of Employer (for Individual)	Occupation (for Individual)					Item			
	USACS Medical Group, LTD	Med	ical Director	\$	100/mc	onthly	/			
	Receipt For: 2019	Aggregate	Year-to-Date 🔻							
	Primary General Conter (specify) Other		1200.00							
	UBTOTAL of Receipts This Page (optional)								1600.	02

Image# 202001289167406316

SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS		

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

(check only one)

PAGE 59 OF

		Detailed Summary Page	×	11a		11b		11c	12	
				13		14		15	16	17
Any information copied from such Reports and or for commercial purposes, other than using t										
NAME OF COMMITTEE (In Full)										
Full Name of Individual (Last, First, Middle Markowski, Kevin, , ,	rganization Name	0	Date of Receipt							
Mailing Address 572 White Tail Ridge Drive				м м 12	/	3	D 31	/ Y	y y 2019	Y
City	State	Zip Code		Trans	act	ion ID) : SA	11AI.9	9945	
Fairlawn	OH	44333	A	moun	t of	Each	Rec	eipt thi	is Period	
FEC ID number of contributing federal political committee.	С					- J -		-	100.	02
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) lity Director		M 6.67/n		ltem	ı			
Receipt For: 2019		Year-to-Date ▼		0.01/1		y				
Primary General	Ayyreyale									
✓ Other (specify) ▼ Other		200.04								
Full Name of Individual (Last, First, Middle Martinez, Anthony, , ,	Initial) or Full O	rganization Name		Date of	f Re	eceipt				
Mailing Address 7897 Broadway St. Unit 100		12 31 2019								
City	State	Zip Code 78209		Trans	acti	on ID) : SA	11AI.1	0032	
San Antonio	TX	A	moun	t of	Each	Rec	eipt thi	is Period		
FEC ID number of contributing federal political committee.	C			_		-		7	900.	00
Name of Employer (for Individual) Emergency Service Partners, LLC		Occupation (for Individual) System Medical Director			Memo Item \$150/monthly					
Receipt For: 2019	Aggregate	Aggregate Year-to-Date ▼								
Primary General		1500.00								
Conter (specify) ▼ Other		1								
Full Name of Individual (Last, First, Middle Maruska, Michael, , ,	Initial) or Full O	rganization Name		Date of	f Re	ceipt	_		_	
Mailing Address 580 Park Ave				^M 12	1	D 3	^D 31	/ Y	2019	Y
City	State	Zip Code						A11AI.9		
Laguna Beach	CA	92651-2339	A	moun	t of	Each	Rec	eipt thi	is Period	
FEC ID number of contributing federal political committee.	С					y		<u>y</u>	120.	00
Name of Employer (for Individual)					Memo Item \$20/monthly					
Colorado Emergency Service Physicians, Receipt For: 2019		rgency Physician		20/1101	itiny					
Primary General	Aggregate	Year-to-Date V								
Conter (specify)		240.00								
SUBTOTAL of Receipts This Page (optional).						,		1	1120.)2
TOTAL This Period (last page this line number	er only)					- -		-		

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 60 OF

118

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17				
or for commercial purposes, other than us	and Statements may not be sold or used by any pe ing the name and address of any political committee	erson for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full)						
Full Name of Individual (Last, First, Mic Mattke, Angela, , ,	· -	Date of Receipt				
Mailing Address 1080 Pebblebrook Rd.	SE Zip Code	12 31 2019				
Mableton	GA 30126-5612	Transaction ID : SA11AI.9877 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	510.00				
Name of Employer (for Individual) Virtual Locations	Occupation (for Individual) Firefighter	Memo Item \$150/monthly				
Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate Year-to-Date ▼ 630.00					
Full Name of Individual (Last, First, Mic B. Mayz, Kurtis, , ,	Idle Initial) or Full Organization Name	Date of Receipt				
Mailing Address 1 E Main St Ste 404		12 / D D / Y Y Y Y 12 31 2019				
City Champaign	StateZip CodeIL61820-1313	Transaction ID : SA11AI.9948 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	1000.00				
Name of Employer (for Individual) Virtual Locations	Occupation (for Individual) Firefighter	Memo Item \$150/monthly				
Receipt For: 2019 Primary General ★ Other (specify) ★ Other	Aggregate Year-to-Date ▼ 1900.00					
Full Name of Individual (Last, First, Mic C. McAtee, Jill, , ,	Idle Initial) or Full Organization Name	Date of Receipt				
Mailing Address 8112 Sweet Dreams C		12 31 Y Y Y Y Y 2019				
City Las Vegas	StateZip CodeNV89131-1537	Transaction ID : SA11AI.10012 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	450.00				
Name of Employer (for Individual) USACS Medical Group, LTD	Occupation (for Individual) Advanced Practice Provider	Memo Item \$75/monthly				
Receipt For: 2019 Primary General X Other (specify) Other	Aggregate Year-to-Date ▼ 770.00					
SUBTOTAL of Receipts This Page (optio	nal) 🕨	1960.00				
TOTAL This Period (last page this line no	umber only)	· · · · · · · · · · · ·				

ta schadula(s)

FOR LINE NUMBER:

PAGE 61 OF

ITI	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)
	y information copied from such Reports and State for commercial purposes, other than using the na			erson for the purpose of soliciting contributions
\rangle	NAME OF COMMITTEE (In Full)			
A.	Full Name of Individual (Last, First, Middle Initial) McCourt, J.D., , , Mailing Address 9436 Steeplehill Dr	or Full Or	rganization Name	Date of Receipt
	City	State	Zip Code	12 31 2019
	Las Vegas	NV	89117	Transaction ID : SA11AI.9924 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
	USACS Medical Group, LTD	Med	ical Director	\$16.67/monthly
	Receipt For: 2019 µ Primary General µ ✔ Other (specify) ♥ Other	Aggregate	Year-to-Date ▼ 200.04]
_	Full Name of Individual (Last, First, Middle Initial)	or Full Or	rganization Name	
	McCutcheon, Edward, , , Mailing Address 605 McDonald Ave		Date of Receipt	
	City	State	Zip Code	
	Charlotte	NC	28203	Transaction ID : SA11AI.9912 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1100.00
	Name of Employer (for Individual) USACS Medical Group, LTD	Occupation (for Individual) Medical Director		Memo Item \$150/monthly
		Aggregate	Year-to-Date 🔻	
	Primary General x Other (specify) ▼ Other		1733.34]
с.	Full Name of Individual (Last, First, Middle Initial)	or Full Or	rganization Name	Date of Receipt
	Mailing Address PO Box 3484			12 / D D / Y Y Y Y Y 12 31 2019
	City	State CO	Zip Code 81302-3484	Transaction ID : SA11AI.10074
			01302-3404	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		600.00
	Name of Employer (for Individual) Occ		pation (for Individual)	Memo Item
Boosint For: 0040			cal Director	\$100/monthly
	Primary General	Aggregate	Year-to-Date V	
	Conter (specify) Other		1000.00	
s	UBTOTAL of Receipts This Page (optional)			1800.02
т	OTAL This Period (last page this line number only	y)	•	

Image# 202001289167406319

SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS		

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 62 OF

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)		
A. Full Name of Individual (Last, First, Middle In Meers, Holley, , , Mailing Address 24 Quincy Street City Chevy Chase FEC ID number of contributing federal political committee.	State Zip Code 20815-4227	Date of Receipt 12 31 2019 Transaction ID : SA11AI.10062 Amount of Each Receipt this Period 600.00
Name of Employer (for Individual) MEP Health, LLC Receipt For: 2019 Primary General Other (specify) V Other	Occupation (for Individual) Medical Director Aggregate Year-to-Date ▼ 1000.00	Memo Item \$100/monthly
Full Name of Individual (Last, First, Middle In B. Mendenhall, Matthew, , , Mailing Address 3257 S Steele St City	Date of Receipt	
Denver FEC ID number of contributing federal political committee. Name of Employer (for Individual) Colorado Emergency Service Physicians, Receipt For: 2019 Primary General	State CO Zip Code 80210-6957 C Occupation (for Individual) Director Of Operations Aggregate Year-to-Date ▼ 240,00	Transaction ID : SA11AI.9960 Amount of Each Receipt this Period 120.00 Memo Item \$20/monthly
★ Other (specify) ▼ Other Other Full Name of Individual (Last, First, Middle In C. Meyer, Kendra, , , Mailing Address 85 Beatty Lane City Scenery Hill FEC ID number of contributing federal political committee. Name of Employer (for Individual) AHN Medical Group, LLC Receipt For: 2019 Primary General Other (specify)		Date of Receipt 12 ' 31 ' 2019 Transaction ID : SA11AI.9943 Amount of Each Receipt this Period 300.00 Memo Item \$50/monthly
Other SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		1020.00

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 63 OF

		Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17						
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
Full Name of Individual (Last, First, Middle I A. Miner, D., , ,	nitial) or Full C	Organization Name	Date of Receipt						
Mailing Address 2398 S. Garfield St.			12 31 2019						
City Denver	State CO	Zip Code 80210	Transaction ID : SA11AI.10050 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		300.00						
Name of Employer (for Individual) Colorado Emergency Service Physicians,		upation (for Individual) dical Director	\$50/monthly						
Receipt For: 2019 Primary General X Other (specify) V Other	Aggregate	Year-to-Date ▼ 500.00]						
Full Name of Individual (Last, First, Middle I Mirhadi, Michael, , , Mailing Address 1984 Caversham Way		- 	Date of Receipt						
City Folsom	State CA	Zip Code 95630	Transaction ID : SA11AI.10087 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		300.00						
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) dical Director	Memo Item \$50/monthly						
Receipt For: 2019 Primary General ★ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 500.00]						
Full Name of Individual (Last, First, Middle I Misra, Swarup, , ,	nitial) or Full C	Organization Name	Date of Receipt						
Mailing Address 9667 Ashley Green Ct NW			12 / D D / Y Y Y Y Y 12 31 2019						
City Concord	State NC	Zip Code 28027	Transaction ID : SA11AI.9994 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		950.00						
Name of Employer (for Individual) USACS Medical Group, LTD Receipt For: 2019	Qua	upation (for Individual) lity Director	\$150/monthly						
Primary General Conter (specify) Other	Aggregate	Year-to-Date ▼ 1583.34							
SUBTOTAL of Receipts This Page (optional)			1550.00						
TOTAL This Period (last page this line number	er only)								

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

(check only one)

PAGE 64 OF

				Detailed Summary Page	×	11a 13		-	11b	11c		12 16	4 →			
	y information copied from such Reports and St for commercial purposes, other than using the					or the		rpc	ose of s			ontribut				
$\left\rangle$	NAME OF COMMITTEE (In Full) USACS PAC															
A.	Full Name of Individual (Last, First, Middle Initi Mittleman, Craig, , ,	ial) or Full O	Orga	nization Name		Date o	f Re	ec	eipt							
	Mailing Address 25 Equestrian Ridge								12 / D D / Y Y Y Y Y 12 31 2019							
	City Newtown	State CT		Zip Code 06470		Transaction ID : SA11AI.9897 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		ouri		-				100.0						
	Name of Employer (for Individual) MEP Health, LLC	Occi	ta: \$!	M 50/mor			Item									
	Receipt For: 2019 Primary General ✓ Other (specify) ▼ Other	Aggregate	Yea	ar-to-Date ▼ 350.00												
B.	Full Name of Individual (Last, First, Middle Initi Myers, Troy, , ,	nization Name		Date o	f Re	ec	eipt									
	Mailing Address 301 B.J. Taylor Rd						12 / D D / Y Y Y Y 12 31 2019									
	City Newport	State NC	Zip Code 28570-5133					n ID : S Each Re								
	FEC ID number of contributing federal political committee.						900.00									
	Name of Employer (for Individual) USACS Medical Group, LTD		•	tion (for Individual) ency Physician	\$1	Memo Item \$150/monthly										
	Receipt For: 2019 Primary General ✔ Other (specify) ♥ Other	Aggregate														
C.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Natali, David, , ,						Date of Receipt									
	Mailing Address 115 Pheasant Drive					12 31 2019										
	City Blawnox	State PA		Zip Code 15238-2207					on ID : S Each Re				_			
	FEC ID number of contributing federal political committee.	С						,		j.		900.0	00			
	Name of Employer (for Individual) AHN Medical Group, LLC	Occupation (for Individual) Emergency Physician						o nly	ltem							
	Receipt For: 2019 Primary General Other (specify) Other	Aggregate														
s	UBTOTAL of Receipts This Page (optional)				.							1900.0	00			
	OTAL This Period (last page this line number of							-		,						

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 65 OF

118

	-	Use separate schedule(s)	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12								
			13 14 15 16 1' person for the purpose of soliciting contributions et to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full) USACS PAC											
Full Name of Individual (Last, First, Midd A. Natapraya, Kent, , ,	le Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 6433 Empty Song Road			12 31 2019								
City Columbia	State MD	Zip Code 21044	Transaction ID : SA11AI.9944 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		120.00								
Name of Employer (for Individual) MEP Health, LLC		upation (for Individual) anced Practice Provider	Memo Item \$20/monthly								
Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 240.00]								
Full Name of Individual (Last, First, Midd B. <u>Nelson, Jeremy</u> , , , <u>Mailing Address</u> 2001 Cross Draw Trail	le Initial) or Full O	rganization Name	Date of Receipt								
City	State	Zip Code	12 31 2019 Transaction ID : SA11AI.10070								
Leander	ТХ	78641	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	ů l										
Name of Employer (for Individual) Emergency Service Partners, LLC		upation (for Individual) P Lead	Memo Item \$25/monthly								
Receipt For: 2019 Primary General Conter (specify) The other	Aggregate]									
Full Name of Individual (Last, First, Midd C. Nguyen, Vicky, , ,	le Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 336 E 1st Ave Apt 203 City	State	Zip Code	12 31 2019								
Denver	CO	80203-4379	Transaction ID : SA11AI.10116 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		300.00								
Name of Employer (for Individual) Colorado Emergency Service Physicians,		upation (for Individual) ical Director	\$50/monthly								
Receipt For: 2019 Primary General X Other (specify) Other	Aggregate	Year-to-Date ▼ 500.00]								
SUBTOTAL of Receipts This Page (optional	al)		570.00								
TOTAL This Period (last page this line nur	nber only)										

SCHEDULE A (FEC Form 3X) DEAEIDTA

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 66 OF

118

IТ			Use separate schedule(s)			(check only one)						
ITEMIZED RECEIPTS			for each category of the Detailed Summary Page				11b 14	11c 15	12		17	
	y information copied from such Reports and St for commercial purposes, other than using the						pose of	soliciting	g contril	butior	าร	
	NAME OF COMMITTEE (In Full)											
Α.	Full Name of Individual (Last, First, Middle Initi Norris, Donald, , ,	al) or Full O	Drganization Name		Date of Receipt							
	Mailing Address 1201 E Market St Suite 619				м м 12	/	31	/ Y	2019			
	City Akron	State OH	Zip Code 44305-4062	A				SA11AI. eceipt th		od		
	FEC ID number of contributing federal political committee.	С							10	0.02		
	Name of Employer (for Individual) USACS Medical Group, LTD Receipt For: 2019	ACS Medical Group, LTD Core Faculty for Summa Health System				lemo non	o Item thly					
	Primary General Cother (specify) V Other	Aggregate	2 Year-to-Date ▼ 200.04									
в.	Full Name of Individual (Last, First, Middle Initi Ogden, Herbert, , , Mailing Address 797 Niwot Ridge Lane	al) or Full O	Drganization Name		Date o		eceipt	/ Y	2019	Y	1	
	City Lafayette	State CO		Transaction ID : SA11AI.10010 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.											
	Name of Employer (for Individual) Colorado Emergency Service Physicians,	cupation (for Individual)	\$2	M 0/mor		o Item						
	Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	e Year-to-Date ▼ 240.00]								
С.	Full Name of Individual (Last, First, Middle Initi Osmundson, Michael, , ,	al) or Full O	Drganization Name		Date o	of Re	eceipt					
	Mailing Address 62 East Dr.				12 31 2019							
	City Hartville	State OH	Zip Code 44632-8890	A	Transaction ID : SA11AI.9963 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		ļ	_		,	, <u>,</u>	90	0.00		
	Name of Employer (for Individual) USACS Management Group	Occupation (for Individual) President					o Item Iy					
	Receipt For: 2019 Primary General X Other (specify) Other	Aggregate Year-to-Date ▼ 1800.00										
s	UBTOTAL of Receipts This Page (optional))		_	_	,	. ,	112	0.02	Ц	
Т	OTAL This Period (last page this line number of	only)	••••••	. [-10-	_	

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 67 OF

ITEMIZED RECEIPTS			Use separate schedule(s)		(check only one)					
11			for each category of the Detailed Summary Page	X 11a 13	11b	11c	12 16	17		
	y information copied from such Reports and S for commercial purposes, other than using the			son for the	purpose	of solicitin	g contribu	tions		
	NAME OF COMMITTEE (In Full) USACS PAC									
Α.	Full Name of Individual (Last, First, Middle Init Otwell, Justin, , ,	ial) or Full O	rganization Name	Date of Receipt						
	Mailing Address 1736 Oakview Rd	12 31 2019								
	City Decatur	State GA	Zip Code 30030		saction ID It of Each		. 10014 his Period			
	FEC ID number of contributing federal political committee.	С					450.	00		
	Name of Employer (for Individual)	Occi	upation (for Individual)	N	lemo Item					
	USACS Management Group	Vice	President of Claims and Risk Man	\$50/moi	nthly					
	Receipt For: 2019 Primary General	Aggregate	Year-to-Date ▼							
	▼ Other (specify) ▼ Other	L	720.00							
в.	Full Name of Individual (Last, First, Middle Init Pacitti, Andrew, , ,	Date o	of Receipt							
	Mailing Address 80 Windom Ln			12 / D D / Y Y Y Y 12 31 2019						
	City	State	Zip Code	Transaction ID : SA11AI.9876						
	Nicholasville	KY	40356-8112	Amoun						
	FEC ID number of contributing federal political committee.	С					120.	00		
	Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) dical Director	N \$20.00/r	lemo Item nonthly					
	Receipt For: 2019 Primary General	Aggregate	Year-to-Date ▼							
	X Other (specify) ▼ Other		, 240.00							
с.	Full Name of Individual (Last, First, Middle Init Panitch, Orlee, , ,	ial) or Full O	rganization Name	Date o	of Receipt					
	Mailing Address 11753 Gainsborough Road			12 31 2019						
	City Potomac	State MD	Zip Code 20854	Transaction ID : SA11AI Amount of Each Receipt th						
	FEC ID number of contributing	С		Amoun	It of Each	Receipt t	900.	_		
	federal political committee.					y .	000.			
	Name of Employer (for Individual) USACS Management Group		upation (for Individual) ional Chief Administrative Officer	\$150/m	1emo Item onthly					
	Receipt For: 2019	1 -	Year-to-Date V	-	0.1.1.1.j					
	Primary General	Ayyreyale								
	Conter (specify) Other	L	1800.00							
s	UBTOTAL of Receipts This Page (optional)		•				1470.	00		
т	OTAL This Period (last page this line number of	only)	•							

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 68 OF

			Use separate schedule(s)	(check only one)							
11	EMIZED RECEIPTS		for each category of the 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			erson for the purpose of soliciting contributions							
	NAME OF COMMITTEE (In Full)										
<u>к</u> А.	Full Name of Individual (Last, First, Middle Ini Parks, Shaina, , ,	tial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 619 Fairway Drive	12 31 2019									
	City Royal Oak	State MI	Zip Code 48073-3611	Transaction ID : SA11AI.10166 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		750.00							
	Name of Employer (for Individual) USACS Medical Group, Ltd.		upation (for Individual) fighter	\$750/one-time							
	Receipt For: 2019 Primary General ✔ Other (specify) ♥ Other		Year-to-Date ▼ 750.00								
в.	Full Name of Individual (Last, First, Middle Ini Parks, Thomas, , , Mailing Address 11533 Sand Stone Rock Dr	tial) or Full O	rganization Name	Date of Receipt							
	City Riverview	State FL	Zip Code 33569-8709	Transaction ID : SA11AI.10112 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		450.00							
	Name of Employer (for Individual) Tampa Bay Emergency Physicians, LLC		upation (for Individual) ranced Practice Provider	Memo Item \$75/monthly							
	Receipt For: 2019 Primary General X Other (specify) ▼ Other]									
<u>с</u> .	Full Name of Individual (Last, First, Middle Ini Patlovany, Matthew, , ,	tial) or Full O	rganization Name	Date of Receipt							
	Mailing Address 19938 Terra Canyon			12 31 2019							
	City San Antonio	State TX	Zip Code 78255-2344	Transaction ID : SA11AI.10085 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		1900.00							
	Name of Employer (for Individual) Virtual Locations		upation (for Individual) sident	Memo Item \$150/monthly							
	Receipt For: 2019 Primary General X Other (specify) Other	Aggregate	Year-to-Date ▼ 2500.00]							
⊢	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			3100.00							

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 69 OF

118

ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)							
II LIVIIZLU NEGEIFIƏ		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 1							
			person for the purpose of soliciting contributions from such committee.							
NAME OF COMMITTEE (In Full)										
Full Name of Individual (Last, First, A. Percy, Carmella, , ,	Middle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 6875 Stonebridge L	Mailing Address 6875 Stonebridge Lane									
City Clover	State SC	Zip Code 29710-9372	Transaction ID : SA11AI.9891 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		300.00							
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) lical Director	Memo Item \$50/monthly							
Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 600.00	1							
B. Full Name of Individual (Last, First, Phillips, Donald, , , Mailing Address 1315 Woodglen Ct	Middle Initial) or Full O	rganization Name	Date of Receipt							
City	State	Zip Code	12 31 2019 Transaction ID : SA11AI.10154							
Aledo	ТХ	76008	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		450.00							
Name of Employer (for Individual) USACS Medical Group, Ltd.		upation (for Individual) fighter	Memo Item \$150/monthly							
Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 450.00								
Full Name of Individual (Last, First, Phillips, Miranda, , ,		rganization Name	Date of Receipt							
Mailing Address 7122 S. Sheridan R Ste. 2-335	1		M M / D D / Y Y Y Y 12 31 2019							
City Tulsa	State OK	Zip Code 74133-2748	Transaction ID : SA11AI.9967 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		300.00							
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) em Medical Director	\$50/monthly							
Receipt For: 2019 Primary General X Other (specify) Other	Aggregate	Year-to-Date ▼ 600.00]							
SUBTOTAL of Receipts This Page (o	ptional)		1050.00							
TOTAL This Period (last page this line	e number only)									

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 70 OF

ITEMIZED RECEIPTS			Use separate schedule(s)		(check only one)							
11			for each category of the Detailed Summary Page		4 11a 13		11b	11c 15		2	17	
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	statements may	I ay not be sold or used by any p address of any political committe	person e to s	for the	purp ntrib	pose of	soliciting	g contr	ributio	ons	
	NAME OF COMMITTEE (In Full) USACS PAC											
Α.	Full Name of Individual (Last, First, Middle Ini Phillips, Todd, , ,	tial) or Full C	Organization Name		Date of	f Re	ceipt					
	Mailing Address 2407 Motif Ct				12 ^M	/	D D D	/ Y	y 201		Ŷ	
	City Henderson	State NV	Zip Code 89052-5531					SA11AI. eceipt th				
	FEC ID number of contributing federal political committee.	С			<u> </u>				3	300.00	0	
	Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) P Lead		M \$50/mor		tem					
	Receipt For: 2019 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 525.00									
в.	Full Name of Individual (Last, First, Middle Ini Pines, Jesse, , , Mailing Address 2424 N Potomac St	tial) or Full C	Organization Name	_	Date of	f Re	ceipt	/ Y	201§		Ý	
	City Arlington	State Zip Code VA 22207				Transaction ID : SA11AI.10071 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.					-			500.00	0		
	Name of Employer (for Individual) Virtual Locations		cupation (for Individual) tional Director of Clinical Innovati		Memo Item \$100/monthly							
	Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 1000.00]								
С.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Pollack, Henry, , ,					f Re	ceipt					
	Mailing Address 42348 John Muir Drive				12 31 2019							
	City Coarsegold	State CA	Zip Code 93614-9619					SA11AI. eceipt th		riod		
	FEC ID number of contributing federal political committee.	С			<u> </u>		,	,	1	100.02	2	
	Name of Employer (for Individual) USACS Medical Group, LTD Receipt For: 2019	Occupation (for Individual) Quality Director					Memo Item \$16.67/monthly					
	Primary General Vother (specify) Other	Aggregate]									
s	UBTOTAL of Receipts This Page (optional)						,	, ,	10	000.02	2	
Т	OTAL This Period (last page this line number	only)		•			-			-		

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 71 OF

	-	Use separate schedule(s)	(check only one)							
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12							
			13 14 15 16 17 berson for the purpose of soliciting contributions e to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
Full Name of Individual (Last, First, Midd A. Posin, Shawn, , ,	le Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 229 Washington Ave.			12 31 2019							
City Wheeling	State WV	Zip Code 26003	Transaction ID : SA11AI.10134 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		400.00							
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) istant Medical Director	Memo Item \$100/monthly							
Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 700.00	1							
Full Name of Individual (Last, First, Midd Pruitt, Benjamin , , , Mailing Address 826 Lincoln Ave.	· · · ·									
City	State	Zip Code	12 31 2019 Transaction ID : SA11AL10036							
Lancaster	OH	43130	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.		150.00								
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) P Lead	Memo Item \$25/monthly							
Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 250.00]							
Full Name of Individual (Last, First, Midd C. Pyle, Moira, , ,	le Initial) or Full C	rganization Name	Date of Receipt							
Mailing Address 2220 Valley Oaks Cove			12 / D D / Y Y Y Y 12 31 2019							
City Leander	State TX	Zip Code 78641	Transaction ID : SA11AI.10023 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		450.00							
Name of Employer (for Individual) Emergency Service Partners, LLC		upation (for Individual) ional APP Lead	\$75/monthly							
Receipt For: 2019 Primary General X Other (specify) Other	Aggregate	Year-to-Date ▼ 787.50]							
SUBTOTAL of Receipts This Page (optiona	al)		1000.00							
TOTAL This Period (last page this line num	nber only)									

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 72 OF

118

T	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)						
11			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
	y information copied from such Reports and Sta for commercial purposes, other than using the			erson for the purpose of soliciting contributions						
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) USACS PAC									
A.	Full Name of Individual (Last, First, Middle Initia Rader, Nancy, , ,	al) or Full O	rganization Name	Date of Receipt						
	Mailing Address 107 Jeremy Drive			12 31 2019						
	City Kings Mountain	State NC	Zip Code 28086-9102	Transaction ID : SA11AI.10091 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		150.00						
	Name of Employer (for Individual) USACS Medical Group, LTD Receipt For: 2019	APP	upation (for Individual) P Lead	Memo Item \$25/monthly						
	Primary General Conter (specify) Conter	Aggregate	Year-to-Date ▼ 250.00]						
в.	Full Name of Individual (Last, First, Middle Initia Radford, Shawn, , ,	al) or Full O	rganization Name	Date of Receipt						
	Mailing Address 210 N Wells St Apt 4101	State	Zin Code	12 / D D / Y Y Y Y 12						
	City Chicago	State IL	Zip Code 60606-1352	Transaction ID : SA11AI.9986 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.		900.00							
	Name of Employer (for Individual) Virtual Locations		upation (for Individual) ector of Firefighters	Memo Item \$150/monthly						
	Receipt For: 2019 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 1700.00							
С.	Full Name of Individual (Last, First, Middle Initia Reed, Rhett, , ,	al) or Full O	rganization Name	Date of Receipt						
	Mailing Address 12509 Red Mesa Hollow			12 31 2019						
	City Austin	State TX	Zip Code 78739	Transaction ID : SA11AI.10098 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		600.00						
	Name of Employer (for Individual) Emergency Service Partners, LLC		upation (for Individual) ical Director	\$100/monthly						
	Receipt For: 2019 Primary General Conter (specify) Other	Aggregate	Year-to-Date ▼ 1000.00							
s	UBTOTAL of Receipts This Page (optional)			1650.00						
т	OTAL This Period (last page this line number or	nly)								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 73 OF

118

ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)					
			for each category of the Detailed Summary Page	X 11a		11b	11c 15	12 16	17
	y information copied from such Reports and Sta for commercial purposes, other than using the r						soliciting	contribut	ions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full)								
Α.	Full Name of Individual (Last, First, Middle Initia Repine, Kamie, , ,	al) or Full O	rganization Name	Date	of R	leceipt			
	Mailing Address 456 Chapman Dam Road			м 1		/ D D 31	/ Y	ү ү 2019	Y
	City Clarendon	State PA	Zip Code 16313-3804			tion ID : S			
	FEC ID number of contributing federal political committee.	С				-		150.0	0
	Name of Employer (for Individual) AHN Medical Group, LLC Receipt For: 2019	upation (for Individual) 2 Lead Salary Year-to-Date ▼	\$25/m		no Item y				
	Primary General Conter (specify) Conter	250.00							
В.	Full Name of Individual (Last, First, Middle Initia Roberts, Matthew, , ,	rganization Name	Date	of R	leceipt				
	Mailing Address 7826 Eglington Ct		[™]	^M 2	/ D D 31	/ Y	2019	Y	
	City Cincinnati	State OH	Zip Code 45255-2413			tion ID : S f Each Re			
	FEC ID number of contributing federal political committee.	С				-	-	120.0	0
	Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) cation Director-Mercy Cincinnati E	 Memo Item \$20/monthly 					
	Receipt For: 2019 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 240.00						
С.	Full Name of Individual (Last, First, Middle Initia Roberts, Sam, , ,	al) or Full O	rganization Name	Date	of P	leceipt			
	Mailing Address 3806 Bonnell Drive				2	/ D D 31	/ Y	2019	Y
	City Austin	State TX	Zip Code 78731			tion ID: f Each Re			
	FEC ID number of contributing federal political committee.					9	,	900.0	0
	Name of Employer (for Individual) Virtual Locations	upation (for Individual) f Medical Officer	\$150/		no Item hly				
Receipt For: 2019 Aggregate Year-to-Date ▼ Primary General Y Other (specify) Other 1500.00									
s	UBTOTAL of Receipts This Page (optional)		•			,	,	1170.0	0
т	OTAL This Period (last page this line number or	וy)	••••••				-		

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 74 OF

17	EMIZED RECEIPTS		Use separate schedule(s)	(cł	neck onl	у о	ne)	L				
11			for each category of the Detailed Summary Page		× 11a		11b	11c	12			
	y information copied from such Reports and S for commercial purposes, other than using the											
5	NAME OF COMMITTEE (In Full) USACS PAC			0 10 5			2010115	Nom Such				
<u> </u>	Full Name of Individual (Last, First, Middle Ini Rodriguez, Jennifer, , ,	itial) or Full O	rganization Name		Date of	f Re	eceipt					
	Mailing Address 230 Skinner				12 31 2019							
	City Kyle	State TX	Zip Code 78640		Transaction ID : SA11AI.10069 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C					-yr- 1		150.0	00		
	Name of Employer (for Individual) Emergency Service Partners, LLC		upation (for Individual) P Lead		M \$25/mor		o Item					
	Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 250.00	1								
в.	Full Name of Individual (Last, First, Middle Ini Romano, Frederick, , ,	rganization Name		Date of	f Re	eceipt						
	Mailing Address 4516 Tuscana Drive	State	Zip Code		12 ^M	1	31		2019	Y		
	City Sarasota	FL	34241-4201					SA11AL Beceint th				
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period								
	Name of Employer (for Individual) Virtual Locations	Occi Fire		Memo Item \$150/monthly								
	Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 2350.00	1								
с.	Full Name of Individual (Last, First, Middle Ini Rooks, James, , ,	itial) or Full O	rganization Name		Date of	f Re	eceipt					
	Mailing Address 1663 Parkdale Circle S.				^M 12	1	31		2019 ^Y	Y		
	City Erie	State CO	Zip Code 80516					: SA11AI. Receipt th				
	FEC ID number of contributing federal political committee.	С			Ľ.		y	5	600.0	00		
	Name of Employer (for Individual) Colorado Emergency Service Physicians,		upation (for Individual) ical Director		Memo Item \$100/monthly							
	Receipt For: 2019 Primary General V Other (specify) Other	Aggregate	Year-to-Date ▼ 1000.00	1								
⊢	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			 Image: A start of the start of the	[. [.	-	y .	· · ·	2500.0	00		

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 75 OF

118

ITEMIZED RECEIPTS			Use separate schedule(s)	(ch	eck only	one	e)	L						
	IT 13		for each category of the Detailed Summary Page	X	1 1a		11b	11c	12					
			y not be sold or used by any ddress of any political commit			purpo								
NAME OF COMMITTE									TCOMMIL					
Full Name of Individua A. Rosen, Nicholas, ,	I (Last, First, Middle Initia	al) or Full Or	rganization Name		Date of	Rec	eipt							
Mailing Address 1089	S. Williams St.				12 31 2019									
City Denver		State CO	Zip Code 80209		Transaction ID : SA11AI.9971 Amount of Each Receipt this Period									
FEC ID number of cor federal political commi	•	С					300.00							
Name of Employer (fo Colorado Emergency S	,		ipation (for Individual) ical Director	\$	Me 50/mont	emo thly	Item							
Receipt For: 2019 Primary X Other (specify)	General Other	Aggregate Y	Year-to-Date ▼ 540.00											
B. Ross, Sanford, ,		al) or Full Or	rganization Name		Date of	Rec	eipt							
Mailing Address 5318	Wyndam Ln.				12 ^M	/	D D 31	/ Y	2019	Y				
City Brighton		StateZip CodeMI48116						SA11AL	9985 nis Period					
FEC ID number of con federal political commi	•	С		120.00										
Name of Employer (fo USACS Medical Group		Occupation (for Individual) Assistant Medical Director			Memo Item \$20/monthly									
Receipt For: 2019 Primary X Other (specify)	General Other	Aggregate	Year-to-Date ▼ , 240.00											
c. Roy, Neil, , ,	I (Last, First, Middle Initia	al) or Full Or	rganization Name		Date of	Rec	eipt							
Mailing Address 6700	Applewood Place	State	Zip Code		12 Trans	/ actio	31	/ Y SA11AI.	2019 9970	Y				
Rockville		MD	20855						nis Period					
FEC ID number of cor federal political commi	•	С			<u> </u>			9	290.0	0				
Name of Employer (for Individual) MEP Health, LLC			Occupation (for Individual) Medical Director				ltem							
Receipt For: 2019 Primary Other (specify)	General Other	Aggregate	Year-to-Date ▼ 410.00											
SUBTOTAL of Receipts	This Page (optional)			•		,		,	710.0	0				
TOTAL This Period (last	page this line number or	וy)		•				-						

SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS		

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 76 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the		person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
A. Full Name of Individual (Last, First, Middle Ini Rutherford, David, , , Mailing Address 3502 Quitman St. City Denver	itial) or Full Organization Name State Zip Code CO 80212	Date of Receipt 12 Transaction ID : SA11AI.10052 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer (for Individual)	Occupation (for Individual)	1100.00 Memo Item
Virtual Locations Receipt For: 2019 ☐ Primary ☐ General ✔ Other (specify) ♥ Other	Senior Director of Quality Aggregate Year-to-Date ▼ 1500.00	\$100/monthly
Full Name of Individual (Last, First, Middle Ini B. Saad, Michael, , , Mailing Address 415 North Church Street Unit	Date of Receipt	
City Charlotte FEC ID number of contributing federal political committee. Name of Employer (for Individual)	State Zip Code NC 28202 C Occupation (for Individual)	Transaction ID : SA11AI.10088 Amount of Each Receipt this Period 0.00 Memo Item
USACS Medical Group, LTD Receipt For: 2019 Primary General Cother (specify) The other	Medical Director Aggregate Year-to-Date ▼ 1200.00	\$0/monthly
Full Name of Individual (Last, First, Middle Ini C. Sampson, Arianna, , , Mailing Address 605 Bee St	itial) or Full Organization Name	Date of Receipt
City Placerville FEC ID number of contributing	State Zip Code CA 95667-4308	Transaction ID : SA11AI.10034 Amount of Each Receipt this Period 150.00
federal political committee. Name of Employer (for Individual) USACS Medical Group, LTD Receipt For: 2019 Primary General	Occupation (for Individual) APP Lead Aggregate Year-to-Date ▼	Memo Item \$25/monthly
Other (specify) Other SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		

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

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

(check only one)

PAGE 77 OF

		Detailed Summary Page	×	11a		11b	11c	12			
y information copied from such Reports and Statements may not be sold or used by any p			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)											
Full Name of Individual (Last, First, Middle I Sanders, Crystal, , ,	nitial) or Full O	rganization Name	D	ate of	Rec	eipt					
Mailing Address 25 Lawrence St.				12 31 2019							
City	State	Zip Code		Trans	actio	n ID : S	SA11AI.	10049			
Concord	NH	03301-5323	A	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С							150.	00		
Name of Employer (for Individual)	Осси	pation (for Individual)	- [Me	emo	ltem					
USACS Medical Group, LTD	Adva	anced Practice Provider	\$2	5/mon	thly						
Receipt For: 2019	Aggregate	Year-to-Date 🔻									
Primary General		250.00	1								
X Other (specify) ▼ Other		250.00									
Full Name of Individual (Last, First, Middle I Satkowiak, Lawrence, , ,	D	ate of	Rec	eipt							
Mailing Address 5175 Raintree Dr				^M ^M 12	/	D D 31	/ Y	үүү 2019	Y		
City	State	Zip Code		Trans	actio	n ID : S	SA11AL	9952			
Parker	CO	80134-5233	A	mount	t of E	ach Re	eceipt th	is Period			
FEC ID number of contributing federal political committee.	ů l						- 7	120.	00		
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) ergency Physician	\$2	Memo Item \$20/monthly							
Receipt For: 2019 Primary General	Aggregate	Year-to-Date ▼									
✓ Other (specify) ▼ Other		240.00									
Full Name of Individual (Last, First, Middle I . Savitch, Benjamin, , ,	nitial) or Full O	rganization Name		ate of	Rec	eipt					
Mailing Address 134 8th Ave				^M 12	1	31	/ Y	ү ү 2019	Y		
City	State	Zip Code		Trans	actio	on ID :	SA11AI.	9884			
Kirkland	WA	98033-5528	A	mount	t of E	ach Re	eceipt th	is Period			
FEC ID number of contributing federal political committee.	C				. ,		9	200.	00		
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) stant Medical Director	\$1	\$100/monthly							
Receipt For: 2019				00/1110	, nuny						
Primary General	Aggregate	Year-to-Date ▼									
X Other (specify) Other	800.00										
SUBTOTAL of Receipts This Page (optional)								470.0	00		
TOTAL This Period (last page this line numbe	er only)		Ī				-				

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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

(check only one)

PAGE 78 OF

		Detailed Summary Page	×			11b	11c	12					
Any information conied from such Denset	d Ototomort-			13	<u> </u>	14	15	16	17				
Any information copied from such Reports and or for commercial purposes, other than using													
NAME OF COMMITTEE (In Full)													
Full Name of Individual (Last, First, Middle Scheer, Ronald, , ,	Initial) or Full C	organization Name		Date of	Re	ceipt							
Mailing Address 285 Elder View Drive				12 31 2019									
City	State	Zip Code		Trans	acti	on ID : S	A11AI.	10101					
Las Vegas	NV	89138	A	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.				.		300							
Name of Employer (for Individual)	Occ	upation (for Individual)		M	emo	Item							
USACS Medical Group, LTD	ergency Physician	\$5	50/mon	thly									
Receipt For: 2019	Year-to-Date 🔻												
Primary General													
X Other (specify) ▼ Other													
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Scherer, Nathan, , ,													
Mailing Address 6286 E Long Circle N		м м 12	1	D D D 31	/ Y	y y 2019	Y						
City	Zip Code		Trans	acti	on ID : S	A11AL	10092						
Centennial	Centennial CO 80112							is Period					
FEC ID number of contributing federal political committee.	ů.					600.00							
Name of Employer (for Individual) Colorado Emergency Service Physicians,		upation (for Individual) ergency Physician	\$1	Memo Item \$100/monthly									
Receipt For: 2019 Primary General	Aggregate	Year-to-Date ▼											
✓ Other (specify) ▼ Other		1000.00											
Full Name of Individual (Last, First, Middle C. Scott, David, , ,	Initial) or Full C	organization Name		Date of	- Po	coint							
Mailing Address 4733 North Ridge Drive				M M	_	31	/ Y	2019	Y				
City	State	Zip Code		Trans	acti	ion ID : S	SA11AI.	9903					
Akron	OH	44333	A	Amount	tof	Each Re	ceipt th	is Period					
FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period					00				
Name of Employer (for Individual)	Name of Employer (for Individual) Occu					Item							
USACS Management Group	\$	150/ma	onthl	У									
Receipt For: 2019													
Primary General	1												
Other		800.01											
SUBTOTAL of Receipts This Page (optional).						,		1200.	00				
TOTAL This Period (last page this line numb	er only)		. [,	-						

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 79 OF

ITEMIZED RECEIPTS			Use separate schedule(s)	(check of	(check only one)						
			for each category of the Detailed Summary Page	× 11a		11b	11c	12			
	y information copied from such Reports and Sta for commercial purposes, other than using the										
	NAME OF COMMITTEE (In Full)		duress of any pointcar commute		Ontric			T COMINI	lee.		
\rangle	USACS PAC										
A.	Full Name of Individual (Last, First, Middle Initia Scott, John, , ,	Organization Name	Date	of Re	eceipt						
	Mailing Address 1384 Leslie NE Ln.				12 31 Y Y Y Y 2019						
	City Lancaster	State OH	Zip Code 43130			ion ID : S Each Re		9936 iis Period			
	FEC ID number of contributing federal political committee.	C				-		100.	02		
	Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) istant Medical Director	\$16.67		o Item					
	Receipt For: 2019		Year-to-Date V	\$10.07	/11011	uny					
	Primary General X Other (specify) V Other	Aggregate	200.04]							
	Full Name of Individual (Last, First, Middle Initia	al) or Full O	Irganization Name								
B.	Seaberg, David, , ,			Date	of Re	eceipt					
	Mailing Address 21 Furnace Street #705		M 12		D D 31	/ Y	ү ү 2019	Ŷ			
	City Akron	State OH	Zip Code 44308			ion ID : S					
	FEC ID number of contributing federal political committee.	C		Amou	Amount of Each Receipt this Period						
	Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) ecutive Vice President	Memo Item \$150/monthly							
	Receipt For: 2019		Year-to-Date ▼								
	Primary General ★ Other (specify) ▼ Other		1500,00]							
с.	Full Name of Individual (Last, First, Middle Initia Sesi, Jason, , ,	al) or Full O	Organization Name	Date	of Re	eceipt					
	Mailing Address 2855 W Pebble Road Unit 329			M 12		D D 31	/ Y	2019	Y		
	City Las Vegas	State NV	Zip Code 89123-6527			Eion ID : S	-				
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period					_		
			upation (for Individual) PEducation Coordinator	Memo Item \$25/monthly							
Receipt For: 2019 Aggregate Year-to-Date ▼ Primary General Y Other (specify)											
	Conter (specify) Other		1								
S	UBTOTAL of Receipts This Page (optional)					y	9	1150.	02		
т	OTAL This Period (last page this line number o	nly)				-	-				

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 80 OF

118

IT.	EMIZED RECEIPTS			e separate schedule(s)	(cł	neck on	ly o	ne)								
11	I EMIZED RECEIPTS			each category of the tailed Summary Page		× 11a 13		11b 14	11c	12	17					
	y information copied from such Reports and S for commercial purposes, other than using the					for the		pose o	f soliciting	contribut	ions					
	NAME OF COMMITTEE (In Full)															
Α.	Full Name of Individual (Last, First, Middle Init	tial) or Full O	Full Organization Name					Date of Receipt								
	Mailing Address 2144 Grant Farm Court					12 31 Y Y Y Y 12 31 2019										
	City Marriottsville	State MD	Z	ip Code 21104		Transaction ID : SA11AI.10141 Amount of Each Receipt this Period										
USACS Medical Group, Ltd.										600.0	00					
				n (for Individual) Medical Director		N \$150/m		o Item Iy								
	Receipt For: 2019 Primary General Vother (specify) V Other	Aggregate	Year-1	to-Date ▼ 600.00												
в.	Full Name of Individual (Last, First, Middle Ini Shellenbarger, David, , ,	ation Name		Date o	of Re	eceipt										
	Mailing Address 912 Camelot Dr.					12		31		2019	Y					
	City Hermitage	State PA	′ip Code 16148-9100					SA11AL								
	FEC ID number of contributing federal political committee.	С				Amount of Each Receipt this Period										
	Name of Employer (for Individual) USACS Medical Group, LTD	Occupation (for Individual) Medical Director of Integrated Acute C				Memo Item C \$150/monthly										
	Receipt For: 2019 Primary General ✓ Other (specify) ▼ Other	Aggregate	gregate Year-to-Date ▼ 1400.01													
<u>с.</u>	Full Name of Individual (Last, First, Middle Init Shrader, Sydney, , ,	tial) or Full O	rganiz	ation Name		Date o	of Re	eceipt								
	Mailing Address 114E Churches Street					12 ^M	/	31		y y 2019	Y					
	City Frederick	State MD		íip Code 21701	_				: SA11AI. Receipt th							
	FEC ID number of contributing federal political committee.	С						,	,	250.0	00					
USACS Medical Group, LTD En				Occupation (for Individual) Emergency Physician												
	Receipt For: 2019 Primary General X Other (specify) Other	Year-1	to-Date ▼ 250.00	1												
s	UBTOTAL of Receipts This Page (optional)			•	•			,	,	1750.0	00					
т	OTAL 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 Detailed Summary Page FOR LINE NUMBER:

(check only one)

PAGE 81 OF

			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														
\rangle	NAME OF COMMITTEE (In Full) USACS PAC														
<u> </u>	Full Name of Individual (Last, First, Middle Ini Shukovsky, Suzy, , ,	itial) or Full O	rganization Name	Date of Receipt											
	Mailing Address 705 Rosemary Circle				12 31 2019										
	City	State	Zip Code		Transaction ID : SA11AI.9993										
	Bradenton	FL	34212-5015	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С					-	-	100	.02					
	Name of Employer (for Individual)		upation (for Individual)		M	emc	b Item								
	Tampa Bay Emergency Physicians, LLC	Eme	ergency Physician	\$16.67/monthly											
	Receipt For: 2019	Aggregate	Year-to-Date 🔻												
	Conter (specify) ▼ Other (specify) ▼ Other		200.04												
В.	Full Name of Individual (Last, First, Middle Ini Siegel, John, , ,	itial) or Full O	rganization Name		Date of	Re	eceipt								
	Mailing Address 1437 Ivey Dr			12 / D D / Y Y Y Y 12 31 2019											
	City	State	Zip Code				ion ID : S								
	Charlotte	NC	28205-5316	A	mount	t of	Each Re	eceipt th	is Perio	b					
	FEC ID number of contributing federal political committee.	С					-	-	150	.00					
	Name of Employer (for Individual) USACS Medical Group, LTD	Occi APF	\$2	Mo 5/mon		o Item									
	Receipt For: 2019	Aggregate	Year-to-Date 🔻												
	Primary General Conter (specify) V Other		250.00												
с.	Full Name of Individual (Last, First, Middle Ini Sinnott, Annie, , ,	itial) or Full O	rganization Name		Date of	Re	eceipt								
	Mailing Address 1335 N. Bosworth Ave. #3				^M 12	1	D D 31		2019	Y					
	City	State IL	Zip Code 60642-2341				ion ID : \$	-							
	Chicago		00042-2341	A	mount	t of	Each Re	eceipt th	is Perio	d					
	FEC ID number of contributing federal political committee.	С				_		9	750	.00					
	Name of Employer (for Individual)		upation (for Individual) ical Director	¢1	Memo Item \$150/monthly										
	USACS Medical Group, LTD Receipt For: 2019			اتو ا	50/110		'y								
	Primary General	Aggregate	Year-to-Date ▼												
	Cther (specify) Other		1383.34												
s	UBTOTAL of Receipts This Page (optional)		•				y	,	1000	.02					
т	OTAL This Period (last page this line number	only)					-								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 82 OF

ıт.	EMIZED RECEIPTS		Use separate schedule(s)	(ch	neck onl	y on	e)	L											
11			for each category of the Detailed Summary Page		¥ 11a 13		11b	11c 15	12	Г	17								
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	I ay not be sold or used by any p address of any political committe	person ee to s	for the	purp	ose of	soliciting	g contril	butio	ns								
	NAME OF COMMITTEE (In Full)																		
Α.	Full Name of Individual (Last, First, Middle Init Slabinski, Mark, , ,	me of Individual (Last, First, Middle Initial) or Full Organization Name nski, Mark, , ,							Date of Receipt										
	Mailing Address 3004 Edison St. NW				12 / D D / Y Y Y Y 12 31 2019														
	City Uniontown	State OH	Zip Code 44685-7212		Transaction ID : SA11AI.9958 Amount of Each Receipt this Period														
	FEC ID number of contributing federal political committee.	С			900.00														
	Name of Employer (for Individual) USACS Management Group		upation (for Individual) gional Vice President		M \$150/mc		ltem												
Receipt For: 2019 Aggre Primary General ✗ Other (specify) ♥ Other Other			Year-to-Date ▼ 1666.66																
в.	Full Name of Individual (Last, First, Middle Init Smitek, Rachel, , , Mailing Address 234 Lakeshore Dr	Organization Name		Date of	f Red	ceipt	/ Y	Y Y											
	City Mooresville	State NC					SA11AL												
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period															
	Name of Employer (for Individual) USACS Medical Group, LTD	Occi Ass		Memo Item \$20/monthly															
	Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 240.00																
С.	Full Name of Individual (Last, First, Middle Init Snyder, Aaron, , ,	ial) or Full O	Organization Name		Date of	f Red	ceipt												
	Mailing Address 9925 Silver Brook Drive				12 ^M	/	D D D 31	/ Y	2019										
	City Rockville	State MD	Zip Code 20850					SA11AI. eceipt th		od									
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .	. y	90	00.00									
	Name of Employer (for Individual) Virtual Locations Receipt For: 2019	Regi	upation (for Individual) jional Vice President		\$150/monthly														
	Primary General Conter (specify) Other	Aggregate	Year-to-Date ▼ 1600.00																
s	UBTOTAL of Receipts This Page (optional)						,	9	192	20.00									
Т	OTAL This Period (last page this line number of	only)					,			-									

... bodulo(o) FOR LINE NUMBER:

PAGE 83 OF

IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)							
				person for the purpose of soliciting contributions ee to solicit contributions from such committee.							
$\left\rangle$	NAME OF COMMITTEE (In Full) USACS PAC										
A.	Full Name of Individual (Last, First, Middle Ini Snyder, Eric, , ,	tial) or Full Oi	ganization Name	Date of Receipt							
	Mailing Address 311 East Carroll Street PO Box 384			12 / D D / Y Y Y Y 12 31 2019							
	City Carrolltown	State PA	Zip Code 15722-0384	Transaction ID : SA11AI.9913 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.			120.00							
	Name of Employer (for Individual)		pation (for Individual)	Memo Item							
	AHN Medical Group, LLC Receipt For: 2019		Lead	\$20/monthly							
	Primary General Vother (specify) Vother	Aggregate	Year-to-Date ▼ 240.00								
R	Full Name of Individual (Last, First, Middle Ini Snyder, Mary Jo, , ,	tial) or Full O	ganization Name	Date of Receipt							
υ.	Mailing Address 1800 Gulf Drive N Unit # 111			12 31 2019							
	City	State FL	Zip Code	Transaction ID : SA11AI.10022							
	Bradenton Beach		34217	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		850.00							
	Name of Employer (for Individual) Virtual Locations		ipation (for Individual) sident Echo Consulting Group	Memo Item \$100/monthly							
	Receipt For: 2019 Primary General X Other (specify) V Other	Aggregate	Year-to-Date ▼ 1300.00								
_	Full Name of Individual (Last, First, Middle Ini Somers, Michael, , ,	tial) or Full O	ganization Name	Date of Receipt							
0.	Mailing Address 503 Neuse Harbour Blvd			12 31 2019							
	City New Bern	State NC	Zip Code 28560-8958	Transaction ID : SA11AI.10130 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		900.00							
	Name of Employer (for Individual) USACS Medical Group, LTD		pation (for Individual) cal Director	Memo Item \$150/monthly							
	Receipt For: 2019 Primary General X Other (specify) Other		Year-to-Date ▼ 1350.00								
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			► 1870.00							

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

(check only one)

PAGE 84 OF

		Detailed Summary Page	×	-		11b	11c	12					
Any information copied from such Reports	and Statements ma	Iv not be sold or used by only a	erson f	13 or the		14 nose of	15 soliciting	16	17 tions				
or for commercial purposes, other than us													
NAME OF COMMITTEE (In Full)	<u>12</u>												
 Full Name of Individual (Last, First, Mic A. Spohn, Michael, , , 	Idle Initial) or Full O	rganization Name	Date of Receipt										
Mailing Address 6901 River Place Ct				M M / D D / Y Y Y Y Y									
City	State	Zin Codo	4 L	12 T rana		31		2019					
College Station	TX	Zip Code 77845	A	Transaction ID : SA11AI.10190 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С			400.00									
Name of Employer (for Individual) Travis County Emergency Physic		upation (for Individual) ergency Physician	\$4	Me 100/one		o Item ne							
Receipt For: 2019		Year-to-Date ▼											
Primary General ★ Other (specify) ▼ Other		400.00]										
Full Name of Individual (Last, First, Mic 3. Srivastava, Geetanjali, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Srivastava, Geetanjali, , ,												
Mailing Address 5447 N Sequoia Ave][Date of	_	31) / Y	y y 2019	Y				
City	State	Zip Code		Trans	acti	ion ID :	SA11ALS	9919					
Fresno	CA	93711-2849						nis Period					
FEC ID number of contributing federal political committee.	С			_	_	- 7 -		150.	00				
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) dical Director	\$2	Me 5/mon		o Item							
Receipt For: 2019 Primary General X Other (specify) V Other	Aggregate	Year-to-Date ▼ 300.00]										
Full Name of Individual (Last, First, Mic	ldle Initial) or Full O	rganization Name) et -									
Sullivan, Richard, , , Mailing Address 117 James Place				Date of		eceipt 31		2019	Y				
City	State	Zip Code	──└└	-	act	- i-	SA11AI.	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -					
Pittsburgh	PA	15228-1021	A	mount	t of	Each F	Receipt th	nis Period					
FEC ID number of contributing federal political committee.	С			_	_	9	. ,	400.	00				
Name of Employer (for Individual) USACS Medical Group, Ltd.		upation (for Individual) ical Director	\$1	M 100/mc		o Item Iy							
Receipt For: 2019		Year-to-Date ▼		-									
Primary General X Other (specify) Other	Primary General X Other (specify)												
SUBTOTAL of Receipts This Page (optio	nal)			-	-	<u>, .</u>	5	950.0	00				
TOTAL This Period (last page this line no	umber only)				_	-							

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 85 OF

118

				Detailed Summary Page		1 1a		11		11c		12				
Δr	y information copied from such Reports and	Statements m	 av n	ot be sold or used by any p	erson	13 for the		14 14		15 oliciting		16 ntribut	17 ions			
	for commercial purposes, other than using the															
	NAME OF COMMITTEE (In Full)															
<u>к</u>	Full Name of Individual (Last, First, Middle In Thomas, Frank, , ,	itial) or Full C	Orgai	nization Name		Date c	of Re	ecei	ipt							
	Mailing Address 7432 S. 107 E. Avenue					12 31 2019										
	City Tulsa	State OK		Zip Code 74133						A11AI.						
			-	74135	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С				Ŀ		-1	_	-9		120.0				
	Name of Employer (for Individual)		•	ion (for Individual)				o Ite	em							
	USACS Medical Group, LTD	Adv	/anc	ed Practice Provider	\$	\$20/moi	nthly	у								
	Receipt For: 2019	Aggregate	Yea	r-to-Date ▼												
	✓ Other (specify) ▼ Other		-	240.00												
В.	Full Name of Individual (Last, First, Middle In Thompson, Donovan, , ,		Date c	of Re	ecei	ipt										
	Mailing Address 4408 Lake Shore Road North	I		12	/	/	31	/ Y		19	Y					
	City	State		Zip Code		Trans	sact	tion	ID : S	A11AI. [,]	1005	57				
	Denver	NC		28037-9198		Amour	it of	f Ea	ich Re	ceipt th	is P	eriod				
	FEC ID number of contributing federal political committee.	С		<u> </u>		-		-9-		600.0	00					
	Name of Employer (for Individual) USACS Medical Group, LTD		•	tion (for Individual) Director		N 5100/ma		o Ite Ily	em							
	Receipt For: 2019	Aggregate	Yea	r-to-Date ▼												
	✓ Other (specify) ▼ Other		,	, 1000.00												
<u> </u>	Full Name of Individual (Last, First, Middle In Tirheimer, Wenzel, , ,	itial) or Full C	Drgai	nization Name		Date c	of Re	ecei	ipt							
	Mailing Address 13404 Golf Crest Way					12 31 2019										
	City	State FL		Zip Code						A11AI.						
	Tampa			33618	_	Amour	it of	Ea	ich Re	ceipt th	is P	eriod				
	FEC ID number of contributing federal political committee.	С				900.00										
	Name of Employer (for Individual)		•	ion (for Individual)		Memo Item \$150/monthly										
	Tampa Bay Emergency Physicians, LLC Receipt For: 2019		-	ncy Physician	- `	¢130/III	onun	пу								
	Primary General	Aggregate	rea	r-to-Date ▼	11											
	Cther (specify) Other	L	-9-	1800.00												
s	UBTOTAL of Receipts This Page (optional)			••••••	•							1620.0	0			
⊢	OTAL This Period (last page this line number				•	Γ.		-		-						

SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS		

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 86 OF

118

	EMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17										
	y information copied from such Reports and St for commercial purposes, other than using the													
	NAME OF COMMITTEE (In Full) USACS PAC													
A.	Full Name of Individual (Last, First, Middle Initi Toole, Timothy, , , Mailing Address 2547 E 26th Pl	al) or Full O	rganization Name	Date of Receipt										
	City Tulsa	State OK	Zip Code 74114-4303	Transaction ID : SA11AI.10000 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		120.00										
	Name of Employer (for Individual) USACS Medical Group, LTD Receipt For: 2019 Primary General Other (specify) Other	Eme	upation (for Individual) ergency Physician Year-to-Date ▼ 240.00	\$20/monthly										
в.	Full Name of Individual (Last, First, Middle Initi Townsend, Martha, , , Mailing Address 16220 W 84th Drive	al) or Full O	rganization Name	Date of Receipt										
	City Arvada FEC ID number of contributing federal political committee. Name of Employer (for Individual) Colorado Emergency Service Physicians, Receipt For: 2019 Primary General ↓ Other (specify) ♥ Other	APF	Zip Code 80007	12 31 2019 Transaction ID : SA11AL10128 Amount of Each Receipt this Period 300.00 Memo Item \$50/monthly										
C.	Full Name of Individual (Last, First, Middle Initi Treichler, Don, , , Mailing Address 325 Pecan Grove Road	al) or Full O	rganization Name	Date of Receipt										
	City Ennis FEC ID number of contributing federal political committee. Name of Employer (for Individual) Emergency Service Partners, LLC Receipt For: 2019 Primary General Vother (specify) Other	Med	Zip Code 75119 upation (for Individual) ical Director Year-to-Date ▼ 750.00	12 31 2019 Transaction ID : SA11AI.10055 Amount of Each Receipt this Period 150.00 Memo Item \$150.00/monthly										
s	UBTOTAL of Receipts This Page (optional)		····· •	570.00										
Т	OTAL This Period (last page this line number o	only)	••••••											

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 87 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11											
Any information copied from such Reports an or for commercial purposes, other than using				iting contributions										
NAME OF COMMITTEE (In Full)														
Full Name of Individual (Last, First, Middle A. Trotter, David, , ,	e Initial) or Full C	rganization Name	Date of Receipt											
Mailing Address 5401 South Ingleside Aver	nue		12 31 2019											
City Chicago	State IL	Zip Code 60615-5013	Transaction ID : SA1 Amount of Each Receip											
FEC ID number of contributing federal political committee.	С		900.00											
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) dical Director	Memo Item \$150/monthly											
Receipt For: 2019 Primary General Conter (specify) Conter	Aggregate	Year-to-Date ▼ 1533.34												
Full Name of Individual (Last, First, Middle B. Tucker, Jeremy, , , Mailing Address 23959 Meredith Court														
City Hollywood	State MD	Zip Code 20636	12 31 Transaction ID : SA1 ² Amount of Each Receip											
FEC ID number of contributing federal political committee.	С		920.00											
Name of Employer (for Individual) Virtual Locations		upation (for Individual) ional Director of Patient Safety	Memo Item \$150/monthly											
Receipt For: 2019 Primary General Cher (specify) Other	Aggregate	Year-to-Date ▼ 1720.00												
Full Name of Individual (Last, First, Middle C. Tucker, William, , ,	Initial) or Full C	rganization Name	Date of Receipt											
Mailing Address 111 Mitchell Blvd			12 31 /	Y Y Y Y 2019										
City Harrison	State OH	Zip Code 45030-2197	Transaction ID : SA1 Amount of Each Receip											
FEC ID number of contributing federal political committee.	С		,	600.00										
Name of Employer (for Individual) USACS Medical Group, LTD Receipt For: 2019	Eme	upation (for Individual) ergency Physician Year-to-Date ▼	\$100/monthly											
Primary General Conter (specify) Other														
SUBTOTAL of Receipts This Page (optional))		,	2420.00										
TOTAL This Period (last page this line num	per only)			y- 1 1 4- 1										

SCHEDULE A (FEC Form 3X)

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 88 OF

ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)										
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1										
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions to solicit contributions from such committee.										
NAME OF COMMITTEE (In Full)													
Full Name of Individual (Last, First, Middle A. Tully, John, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 8345 Rolling Acres Trail			12 / D D / Y Y Y Y 12 31 2019										
City Fair Oaks Ranch	State TX	Zip Code 78015	Transaction ID : SA11AI.10075 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		600.00										
Name of Employer (for Individual) Emergency Service Partners, LLC		upation (for Individual) dical Director	Memo Item \$100/monthly										
Receipt For: 2019 Primary General ★ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 1000.00]										
Full Name of Individual (Last, First, Middle Ulmer, Travis, , , Mailing Address 1240 Broadview Ave	Initial) or Full C	rganization Name	Date of Receipt										
City Columbus	State OH	Zip Code 43212-3344	Transaction ID : SA11AI.10002 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С		900.00										
Name of Employer (for Individual) USACS Management Group		upation (for Individual) e President of Marketing and Recr	Memo Item i \$150/monthly										
Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 1533.34											
Full Name of Individual (Last, First, Middle Venkat, Arvind, , ,	Initial) or Full C	rganization Name	Date of Receipt										
Mailing Address 105 Breckenridge Dr.			12 / D D / Y Y Y Y 12 31 2019										
City Wexford	State PA	Zip Code 15090-9400	Transaction ID : SA11AI.9882 Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	C		1400.00										
Name of Employer (for Individual) AHN Medical Group, LLC Receipt For: 2019	Nati	upation (for Individual) onal Director of Research Year-to-Date ▼	\$150/monthly										
Primary General Conter (specify) Other													
SUBTOTAL of Receipts This Page (optional)		•	2900.00										
TOTAL This Period (last page this line numb	er only)												

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 89 OF

118

	EMIZED RECEIPTS			Or each category of the Detailed Summary Page	×	11a		11	1b		11c	12			
						13		14	4		15	16	17		
	y information copied from such Reports and State for commercial purposes, other than using the na														
\rangle	NAME OF COMMITTEE (In Full)														
A.	Full Name of Individual (Last, First, Middle Initial Vock, Tracie, , ,) or Full O	Orgar	nization Name		Date of Receipt									
	Mailing Address 1826 Free Terrace														
	City	State		Zip Code		Trans	sacti	ior	ו ID :	S/	A11AI.1	0001			
	Frederick	MD		21702	Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С			300.00										
	Name of Employer (for Individual) MEP Health, LLC		•	tion (for Individual) r of APPs, Observation and Ho	si \$	M 50/mor	emo nthly		em						
	Receipt For: 2019 Primary General ✓ Other (specify) ▼ Other	Aggregate	Yea	ur-to-Date ▼ 600.00											
B.	Full Name of Individual (Last, First, Middle Initial Warwick-Heckman, Kelley, , ,) or Full O	Orgar	nization Name		Date o	f Re	ece	ipt						
	Mailing Address 303 Four T Ranch Rd			12 / ¹ 2019											
	City Georgetown	State TX		Zip Code 78633						-	11AI.1 eipt thi	0078 s Perio	d d		
	FEC ID number of contributing federal political committee.	C					600.00								
	Name of Employer (for Individual) Emergency Service Partners, LLC	Occ Em	\$	Memo Item \$100/monthly											
	Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Yea	ur-to-Date ▼ 1000.00											
с.	Full Name of Individual (Last, First, Middle Initial, Watkins, Angela, , ,) or Full O	Orgar	nization Name		Date o	f Re	ece	ipt						
	Mailing Address 3128 Persimmon Tree Ct					^M 12	/		31		/ Y	2019	Y		
	City Woodstock	State MD		Zip Code 21163-1150							A11AI. [.]	10029 s Perio			
	FEC ID number of contributing federal political committee.	С						y			9	900	.00		
	Name of Employer (for Individual) MEP Health, LLC		•	tion (for Individual) Director	\$	Memo Item \$150/monthly									
Receipt For: 2019 Aggregate Primary General Aggregate X Other (specify) Other			Yea	ar-to-Date ▼ 1500.00											
s	UBTOTAL of Receipts This Page (optional)			••••••				,		l	9	1800	.00		
Т	OTAL This Period (last page this line number onl	ly)		•••••				-			7				

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 90 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
	and Statements may not be sold or used by any ng the name and address of any political committe	person for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
Full Name of Individual (Last, First, Mide A. Watling, Bradley, , , Mailing Address 101 E. W.T. Harris Blvd Suite 3109 City Mooresville FEC ID number of contributing federal political committee. Name of Employer (for Individual) Virtual Locations Receipt For: 2019 Primary General Other (specify) ♥ Other		Date of Receipt MIM / J1 2019 Transaction ID : SA11AI.9886 Amount of Each Receipt this Period 900.00 Memo Item \$150/monthly
Full Name of Individual (Last, First, Mide B. Watson, James, , , Mailing Address 2158 W 5th Street Up Unit City	dle Initial) or Full Organization Name	Date of Receipt
Cleveland FEC ID number of contributing federal political committee. Name of Employer (for Individual) USACS Management Group Receipt For: 2019 Primary General X Other (specify) V Other	OH 44113 C Occupation (for Individual) Chief Development Officer Aggregate Year-to-Date ▼ 1675.00	Amount of Each Receipt this Period 1000.00 Memo Item \$150/monthly
Full Name of Individual (Last, First, Midd C. Watt, Christopher, , , Mailing Address 3909 Fox Glen Drive City Irving FEC ID number of contributing federal political committee. Name of Employer (for Individual) USACS Management Group Receipt For: 2019 Primary General Other (specify) Other	dle Initial) or Full Organization Name State Zip Code TX 75062 C Occupation (for Individual) Chief Accounting Officer Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 12 31 2019 Transaction ID : SA11AI.10047 Amount of Each Receipt this Period 600.00 Memo Item \$100/monthly
	mal)	▶ 2500.00

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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

(check only one)

PAGE 91 OF

		Detailed Summary Page	×	-		111		11c	12			
Any information partial from such Day	and Ototomersta	w not be cold as we down as		13		14		15	16	17 tiono		
Any information copied from such Reports a or for commercial purposes, other than usin												
NAME OF COMMITTEE (In Full) USACS PAC												
Full Name of Individual (Last, First, Midd A. Wellock, Austin, , ,	le Initial) or Full O	rganization Name	[Date of	Re	ecei	pt					
Mailing Address 2439 Clydesdale St NW				M M 12	/		31	/ Y	ү ү 2019	Y		
City	State	Zip Code		Trans	acti	ion	ID : \$	SA11AI.	9883			
North Canton	OH	44720-9818	/	Amount	of	Ead	ch Re	eceipt th	nis Period			
FEC ID number of contributing federal political committee.	C					-			233.	34		
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) lical Director		Me 50/mon		b Ite	em					
Receipt For: 2019	Aggregate	Year-to-Date ▼										
Primary General X Other (specify) V Other		333.36]									
Full Name of Individual (Last, First, Midd B. Wellock, Kathleen, , ,	le Initial) or Full O	rganization Name		Date of	Re	eceip	pt					
Mailing Address 3430 Ashton Drive		State Zip Code					12 31 2019					
City	State		Transaction ID : SA11AI.10020 Amount of Each Receipt this Period									
Uniontown	OH	/										
FEC ID number of contributing federal political committee.		300.00					00					
Name of Employer (for Individual) USACS Management Group		Occupation (for Individual) Vice President, Account Management						Memo Item \$50/monthly				
Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	1										
Full Name of Individual (Last, First, Midd C. Welsh, Ian, , ,	le Initial) or Full O	rganization Name		Date of	Re	eceir	nt					
Mailing Address 1027 Gardenia Street				M M 12	1		31	/ Y	2019	Y		
City	State	Zip Code		Trans	act	ion	ID : 3	SA11AI.	9923			
Fort Mill	SC	29708	/	Amount	of	Ead	ch Re	eceipt th	nis Period			
FEC ID number of contributing federal political committee.	FEC ID number of contributing federal political committee.							9	1100.	00		
Name of Employer (for Individual) Virtual Locations		upation (for Individual) stant Medical Director of Firefigh	\$	Memo Item \$150/monthly								
Receipt For: 2019	Aggregate	Year-to-Date ▼										
Primary General X Other (specify) Other Other]										
SUBTOTAL of Receipts This Page (optional	al)		•			,		,	1633.	34		
TOTAL This Period (last page this line nur	nber only)					-						

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 92 OF

118

ITEMIZED RECEIPTS		each category of the tailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17				
or for commercial purposes, other than usir			erson for the purpose of soliciting contributions e to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)							
Full Name of Individual (Last, First, Mide West, Brian, , ,	le Initial) or Full Organiz	ation Name	Date of Receipt				
Mailing Address 441 Carnoustie	Ctata 7	in Code	12 / D D / Y Y Y Y 12 31 2019				
City Highland	State Z	ip Code 48357-4754	Transaction ID : SA11AI.10121 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C						
Name of Employer (for Individual) USACS Medical Group, LTD Receipt For: 2019	Quality Dir		\$50/monthly				
Primary General Conter (specify) Conter	Aggregate Year-t	o-Date ▼ 450.00	1				
Full Name of Individual (Last, First, Mido B. White, Jeremy, , ,	le Initial) or Full Organiz	ation Name	Date of Receipt				
Mailing Address 4844 Jewell Terrace			M M / D D / Y Y Y Y Y 12 31 2019				
City Palm Harbor		ip Code 34685	Transaction ID : SA11AI.9932 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	120.00						
Name of Employer (for Individual) Tampa Bay Emergency Physicians, LLC	Occupation Medical D	n (for Individual) irector	Memo Item \$20/monthly				
Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate Year-t	o-Date ▼ 240.00]				
Full Name of Individual (Last, First, Midc C. Willis, Jennifer, , ,	le Initial) or Full Organiz	ation Name	Date of Receipt				
Mailing Address 40 Knightsboro Road			12 31 / Y Y Y Y 12 31 2019				
City Henderson		ip Code 89074-6315	Transaction ID : SA11AI.10068 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	°						
Name of Employer (for Individual) USACS Medical Group, LTD	Occupation APP Lead	n (for Individual)	Memo Item \$25/monthly				
Receipt For: 2019 Primary General X Other (specify) Other	Aggregate Year-t	o-Date ▼ 237.50	1				
SUBTOTAL of Receipts This Page (option	al)		570.00				
TOTAL This Period (last page this line nu	nber only)	·····					

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 93 OF

118

	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17					
	y information copied from such Reports and Sta for commercial purposes, other than using the			erson for the purpose of soliciting contributions					
\rangle	NAME OF COMMITTEE (In Full)								
Α.	Full Name of Individual (Last, First, Middle Initi Wirtz, David, , ,	al) or Full C	Organization Name	Date of Receipt					
	Mailing Address 1 Highgate NE			12 / D D / Y Y Y Y 12 31 2019					
	City Ithaca	State NY	Zip Code 14850	Transaction ID : SA11AI.9901 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		900.00					
	Name of Employer (for Individual) USACS Medical Group, LTD Receipt For: 2019	Me	upation (for Individual) dical Director	Memo Item \$150/monthly					
	Primary General Cother (specify) V Other	Aggregate	Year-to-Date ▼ 1400.01						
В.	Full Name of Individual (Last, First, Middle Initi Wisniewski, Michael, , ,	al) or Full C	Organization Name	Date of Receipt					
	Mailing Address 2813 Elmira St.			12 31 2019					
	City Denver	State CO	Zip Code 80238	Transaction ID : SA11AI.10008 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	s l							
	Name of Employer (for Individual) Colorado Emergency Service Physicians,		upation (for Individual) ergency Physician	Memo Item \$100/monthly					
	Receipt For: 2019 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 1300.00						
c.	Full Name of Individual (Last, First, Middle Initi Wong, Michelle, , ,	al) or Full C	Organization Name	Date of Receipt					
	Mailing Address 3823 Silkwood Place			M M / D D / Y Y Y Y 12 31 2019					
	City El Dorado Hills	State CA	Zip Code 95762-7830	Transaction ID : SA11AI.10090 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		112.50					
	Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) anced Practice Provider	Memo Item \$12.5/monthly					
	Receipt For: 2019 Primary General X Other (specify) Other	Aggregate	Year-to-Date ▼ 212.50						
s	UBTOTAL of Receipts This Page (optional)			1712.50					
	OTAL This Period (last page this line number o								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 94 OF

ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)								
11	LIVIZED RECEIFIS		for each category of the Detailed Summary Page				11b	11c	12	<u> </u>		
	y information copied from such Reports and Sta for commercial purposes, other than using the r			erson for								
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) USACS PAC											
A.	Full Name of Individual (Last, First, Middle Initia Wright, David, , ,	l) or Full Or	rganization Name	Da	te of	Re	ceipt					
	Mailing Address 1 Old Spring Road			N	12 [™]	/	D D 31	/ Y	y y 2019	Y		
	City Barboursville	State WV	Zip Code 25504					SA11AI. eceipt th	10174 his Period			
	FEC ID number of contributing federal political committee.	С					,		1000.	00		
	Name of Employer (for Individual) USACS Medical Group, Ltd.		upation (for Individual) fighter	\$10	Me 00/on		ltem me					
	Receipt For: 2019 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 1000.00									
в.	Full Name of Individual (Last, First, Middle Initia Wyatt, Cheryl, , ,	l) or Full Or	rganization Name	Da	te of	Re	ceipt					
Mailing Address 48252 Leachburg Road					12 31 Y Y Y Y 12 31 2019							
	City Lexington Park	State MD	Transaction ID : SA11AI.9892 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C			300.00					00		
	Name of Employer (for Individual) MEP Health, LLC	Occu Dire	\$50,	Me mont		Item						
	Receipt For: 2019 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 600.00									
с.	Full Name of Individual (Last, First, Middle Initia Yonteck, Frederick, , ,	ll) or Full Or	rganization Name	Da	te of	Re	ceipt					
	Mailing Address 27518 Pine Point Drive			IV	12 ^M	/	D D D 31	/ Y	2019	Y		
	City Wesley Chapel	State FL	Zip Code 33544-8756					SA11AI. eceipt th	. 9918 his Period			
	FEC ID number of contributing federal political committee.			_		y	9	120.	00			
Tampa Bay Emergency Physicians, LLC			upation (for Individual) ergency Physician Year-to-Date ▼	\$20	Me /moni		ltem					
	Primary General Conter (specify) Other		240.00									
s	UBTOTAL of Receipts This Page (optional)		•				,	,	1420.	00		
т	OTAL This Period (last page this line number or	וy)	•				7	-				

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 95 OF

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	✗ 11a ☐ 11b ☐ 11c ☐ 12								
		13 14 15 16 17								
or for commercial purposes, other than using the		person for the purpose of soliciting contributions tee to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)										
Full Name of Individual (Last, First, Middle Ini Zayac, Carl, , ,	itial) or Full Organization Name	Date of Receipt								
Mailing Address 5901 Velasco Ave		12 / D D / Y Y Y Y 12 31 2019								
City Dallas	State Zip Code TX 75206	Transaction ID : SA11AI.9890								
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 600.00								
Name of Employer (for Individual) Virtual Locations	Occupation (for Individual) Firefighter	Memo Item \$100/monthly								
Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate Year-to-Date ▼ 800.00									
Full Name of Individual (Last, First, Middle Ini B. Ziebell, Christopher, , ,	itial) or Full Organization Name	Date of Receipt								
Mailing Address 4014 Greystone Drive		12 31 2019								
City Austin	StateZip CodeTX78731	Transaction ID : SA11AI.10046 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С	600.00								
Name of Employer (for Individual) Emergency Service Partners, LLC	Occupation (for Individual) Medical Director	Memo Item \$100/monthly								
Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate Year-to-Date ▼ 1000.00									
Full Name of Individual (Last, First, Middle Ini C. Zimmerman, Michael, , ,	itial) or Full Organization Name	Date of Receipt								
Mailing Address 1913 Buffalo Speedway		M M / D D / Y Y Y Y 12 31 2019								
City Leander	StateZip CodeTX78641	Transaction ID : SA11AI.10131 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C	600.00								
Name of Employer (for Individual) Emergency Service Partners, LLC	Occupation (for Individual) Emergency Physician	Memo Item \$100/monthly								
Receipt For: 2019 Primary General X Other (specify)	Aggregate Year-to-Date ▼ 900.00									
Other SUBTOTAL of Receipts This Page (optional)		1800.00								
TOTAL This Period (last page this line number										

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

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

(check only one)

PAGE 96 OF

			Detailed Sur)	11a 13		11b 14	11c		12 16	17	
	ny information copied from such Reports and Sta for commercial purposes, other than using the n					for the		pose of	soliciting		ntribut	ions	
	NAME OF COMMITTEE (In Full) USACS PAC	and and a	aarooo or arry p						ioni auci				
A.	Full Name of Individual (Last, First, Middle Initia Zyniewicz, Thomas, , ,	l) or Full O	rganization Nam	e		Date of	f Re	eceipt					
	Mailing Address 717 Thistle Fairway St					^M 12	/	D D 31	/ Y) 19	Ŷ	
	City Las Vegas	State NV	Zip Code 89138-624	45				-	SA11AI.				
	FEC ID number of contributing federal political committee.	С				<u> </u>					0.0		
	Name of Employer (for Individual) Virtual Locations	Vice		ridual) erations, Las Ve	ga \$	M 60/montl		tem					
	Receipt For: 2019 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼	466.67]								
B.	Full Name of Individual (Last, First, Middle Initia	l) or Full O	rganization Nam	e		Date of	f Re	eceipt					
	Mailing Address					MM	1	DDD	/ Y	Y	Y	Y	
	City	State	Zip Code			Amount	t of	Each R	eceipt th	is P	eriod		
	FEC ID number of contributing federal political committee.	С											
	Name of Employer (for Individual)	Occ	upation (for Indiv	/idual)		M	emo	o Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼]								
с.	Full Name of Individual (Last, First, Middle Initia	l) or Full O	rganization Nam	e		Date of	f Re	eceipt					
	Mailing Address					MM	/	DDD	/ Y	Y	Y	Y	
	City	State	Zip Code			Amount	t of	Each R	eceipt th	is P	eriod		
FEC ID number of contributing federal political committee.						Amount of Each Receipt this Period							
	Name of Employer (for Individual)	Осси	upation (for Indiv	vidual)		М	emo	o Item					
	Receipt For: Primary General Other (specify)		Year-to-Date ▼]								
s	UBTOTAL of Receipts This Page (optional)				I			,	,	_	0.0	0	
Т	OTAL This Period (last page this line number or	nly)			•	L.,		-		14:	3915.8	3	

SCHEDULE B (FEC Form 3X)			FOR LIN	NE NUMBER: PAGE 97 OF 11						
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check c	only one)						
		Summary Page		21b 22 23 26 27 28a 28b 28c 29 30b						
Any information copied from such Reports and or for commercial purposes, other than using the				e to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)										
Full Name (Last, First, Middle Initial) A. PayPal				Date of Disbursement						
Mailing Address 2211 North First Street				09 / D D / Y Y Y Y 2019						
City San Jose	State CA	Zip Code 95131		FEC Identification Number						
Purpose of Disbursement Processing Fee				C Transaction ID : SB21B.10200						
Candidate Name			Category/ Type	Amount of Each Disbursement this Period						
Office Sought: House Dis Senate President	sbursement For: Primary Other (spe	General cify) ▼		200.53						
State: District: Full Name (Last, First, Middle Initial)										
B.				Date of Disbursement						
	Mailing Address									
City	State	Zip Code		FEC Identification Number						
Purpose of Disbursement										
Candidate Name			Category/ Type	Amount of Each Disbursement this Period						
Senate	bursement For:	General								
State: District:	Other (spe	city)		Memo Item						
Full Name (Last, First, Middle Initial) C.				Date of Disbursement						
Mailing Address										
City	State	Zip Code		FEC Identification Number						
Purpose of Disbursement Candidate Name				C						
Office Sought: House Dis	Category/ Type	Amount of Each Disbursement this Period								
Senate President	Primary Other (spe	General cify) ▼		Memo Item						
State: District:										
SUBTOTAL of Disbursements This Page (opti	onal)		••••••	200.53						
TOTAL This Period (last page this line number	er only)		••••••	200.53						

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the Detailed Summary Page	21b 28a	one) 22 X 23 26 27 28b 28c 29 30b					
Any information copied from such Reports and Stater or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) USACS PAC								
Full Name (Last, First, Middle Initial) A. ANDY HARRIS FOR CONGRESS Mailing Address PO BOX 426	Date of Disbursement							
STEVENSVILLE Purpose of Disbursement Contributions	State Zip Code MD 21666	011	FEC Identification Number C C00435974 Transaction ID : SB23.9757					
	ment For: 2020 Primary General Other (specify) ▼	Category/ Type	Amount of Each Disbursement this Period 2500.00 Memo Item					
Full Name (Last, First, Middle Initial) BERA FOR CONGRESS Mailing Address POST OFFICE BOX 582496		Date of Disbursement						
City ELK GROVE Purpose of Disbursement Contribution Candidate Name BERA, AMERISH, , ,	State Zip Code CA 95758	011 Category/ Type	FEC Identification Number C C00461061 Transaction ID : SB23.9761 Amount of Each Disbursement this Period					
Office Sought: 🖌 House Disburser	ment For: 2020 Primary General Other (specify)		2500.00 Memo Item					
Full Name (Last, First, Middle Initial) BLUEGRASS COMMITTEE Mailing Address 228 S Washington St Suite 115		Date of Disbursement						
City Alexandria Purpose of Disbursement Contribution Candidate Name	State Zip Code VA 22314	011 Category/	FEC Identification Number C C00235655 Transaction ID : SB23.9724 Amount of Each Disbursement this Period					
BLUEGRASS COMMITTEE Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify) ▼	Туре	5000.00 Memo Item					
SUBTOTAL of Disbursements This Page (optional)			10000.00					

S	CHEDULE B (FEC Form 3X)	11	arate schedule(s)	FOR LIN	E NUM	NUMBER: PAGE 99 OF 118									
IT	EMIZED DISBURSEMENTS	for each	(check or		/ one) □ 22 🕱 23 □ 26 □ 27										
		Detailed	Summary Page	288		22 28b	^	23 28c		29	-	30b			
	ny information copied from such Reports and State for commercial purposes, other than using the na														
\setminus	NAME OF COMMITTEE (In Full)														
	USACS PAC														
Α.	Full Name (Last, First, Middle Initial) BUCSHON FOR CONGRESS	D	Date of Disbursement												
	Mailing Address PO Box 40323				10	07 08 2019									
	City Washington	State DC	Zip Code 20016		F	EC Ide	entif	icatio	n١	Numbe	r				
	Purpose of Disbursement Contribution			011	(C C00468256									
	Candidate Name BUCSHON, LARRY D., , ,			Category/ Type	A	Transaction ID : SB23.9716 Amount of Each Disbursement this Period									
		ement For: 2 Primary	2020 General	1			y				5000.00	0			
	State: IN District: 08	Other (spe	cify) ▼			Memo Item									
_	Full Name (Last, First, Middle Initial)														
В.	COLLINS FOR SENATOR				Date of Disbursement										
	Mailing Address PO BOX 1096														
	City BANGOR	State ME	Zip Code 04402		F	FEC Identification Number									
	Purpose of Disbursement Contribution			0	C C00314575 Transaction ID : SB23.9740										
			A	Amount of Each Disbursement this Period							eriod				
	COLLINS, SUSAN M., , , Office Sought: House Disburse	ement For:	5000.00							0					
		Primary					<u> </u>								
	State: ME District: 00	Other (spe	cify)		Memo Item										
C.	Full Name (Last, First, Middle Initial) CORY GARDNER FOR SENATE				D	Date of Disbursement									
	Mailing Address 9227 E. LINCOLN AVE., #200-23	4			10	м м 09	/	D 0	D)9	/		019	Y		
	City LONE TREE	State CO	Zip Code 80124		F	EC Ide	entif	icatio	n١	Numbe	r				
	Purpose of Disbursement Contribution			011	0		_	4924	-		2 07				
	Candidate Name GARDNER, CORY, , ,		Category/ Type	A	Transaction ID : SB23.9741 Amount of Each Disbursement this Period										
		ement For: 2 Primary	nent For: 2020					5000.00							
_	State: CO District: 04	Other (spe			Memo Item										
s	UBTOTAL of Disbursements This Page (optional).			••••••							1	5000.0	0		
Т	OTAL This Period (last page this line number only	/)						, .		. ,					

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(for each category of the	s) (check only							
-	Detailed Summary Page		22 X 23 26 27 28b 28c 29 30b						
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam									
NAME OF COMMITTEE (In Full)									
A. CORY GARDNER FOR SENATE			Date of Disbursement						
Mailing Address 9227 E. LINCOLN AVE., #200-234			09 09 2019						
LONE TREE	State Zip Code CO 80124		FEC Identification Number						
Purpose of Disbursement Contribution Candidate Name		011 Category/	C C00492454 Transaction ID : SB23.9742 Amount of Each Disbursement this Period						
Senate	nent For: 2020 Primary 🛛 🗶 General	Туре	5000.00						
State: CO District: 04	Other (specify) ▼		Memo Item						
Full Name (Last, First, Middle Initial) B. DONNA SHALALA FOR CONGRE	SS		Date of Disbursement						
Mailing Address 219 PENNSYLVANIA AVE SE 3RD FLOOR			10 07 2019						
	StateZip CodeDC20003		FEC Identification Number						
Purpose of Disbursement Contribution		011	C C00672311 Transaction ID : SB23.9756						
SHALALA, DONNA, , ,		Category/ Type	Amount of Each Disbursement this Period						
Senate x	nent For: 2020 Primary General Other (specify)		5000.00						
Full Name (Last, First, Middle Initial) C. DONNA SHALALA FOR CONGRE	SS		Date of Disbursement						
Mailing Address 219 PENNSYLVANIA AVE SE 3RD FLOOR			11 26 2019						
WASHINGTON	StateZip CodeDC20003		FEC Identification Number						
Purpose of Disbursement Contribution Candidate Name		011	C C00672311 Transaction ID : SB23.9801 Amount of Each Disbursement this Period						
	nent For: 2020 Primary 🛛 🗶 General	Category/ Type	5000.00						
State: FL District: 27	Other (specify) ▼		Memo Item						
SUBTOTAL of Disbursements This Page (optional)		••••••	15000.00						
TOTAL This Period (last page this line number only)		••••••	, ,						

SCHEDULE B (FEC Form 3X)		arate schedule(s)	-	E NUMBER: PAGE 101 OF 118									
ITEMIZED DISBURSEMENTS	for each	category of the Summary Page	(check only 21b 28a	22 X 23 26 27 28b 28c 29 30b									
Any information copied from such Reports and Sta or for commercial purposes, other than using the r													
NAME OF COMMITTEE (In Full)													
Full Name (Last, First, Middle Initial) A. DOUG JONES FOR SENATE CO	OMMITTE	E		Date of Disbursement									
Mailing Address PO BOX 131025				09 27 2019 FEC Identification Number									
City BIRMINGHAM	State AL	Zip Code 35213											
Purpose of Disbursement Contribution	_		011	C C00640623									
Candidate Name JONES, DOUG, , ,			Category/ Type	Amount of Each Disbursement this Period									
Office Sought: House Disburg	sement For: Primary Other (spe	General		5000.00									
State: AL District: 00		city) V		Memo Item									
Full Name (Last, First, Middle Initial) B. DR. CAMERON WEBB FOR CO Mailing Address PO BOX 679	NGRESS			Date of Disbursement									
City CHARLOTTESVILLE	State VA	Zip Code 22902		FEC Identification Number									
Purpose of Disbursement Contribution Candidate Name			011	C C00714964 Transaction ID : SB23.9807									
WEBB, BRYANT CAMERON, , ,			Category/ Type	Amount of Each Disbursement this Period									
	sement For: x Primary	2020 General		500.00									
State: VA District: 05	Other (spe	cify)		Memo Item									
Full Name (Last, First, Middle Initial) C. FRIENDS OF SCHUMER				Date of Disbursement									
Mailing Address 600 Pennsylvania Ave SE Suite 201				07 08 2019									
City Washington	State DC	Zip Code 20003		FEC Identification Number									
Purpose of Disbursement Contribution Candidate Name			011 Category/	C C00346312 Transaction ID : SB23.9717 Amount of Each Disbursement this Period									
SCHUMER, CHARLES E, , , Office Sought: House Disburs	sement For:	2020	Туре	5000.00									
State: NY District: 00	Yrimary Other (spe	General cify) ▼		Memo Item									
SUBTOTAL of Disbursements This Page (optional	l)			10500.00									
TOTAL This Period (last page this line number or	וy)		····· •										

SCHEDULE B (FEC Form 3X)			FOR LINE	FOR LINE NUMBER: PAGE 102 OF 118								
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the	(check only 21b									
	Detailed	Summary Page	28a	28b 28c 29 30b								
Any information copied from such Reports and State or for commercial purposes, other than using the na												
Full Name (Last, First, Middle Initial)				Date of Disbursement								
A. GUTHRIE FOR CONGRESS												
Mailing Address 499 South Capitol Street SW Suite 420				07 08 2019								
City Washington	State DC	Zip Code 20003		FEC Identification Number								
Purpose of Disbursement	DC	20003		C C00445023								
Contribution			011	Transaction ID : SB23.9719								
Candidate Name Guthrie, Brett, , ,			Category/	Amount of Each Disbursement this Period								
	ement For:	2020	Туре	4000.00								
Senate x		General										
State: KY District: 02	Other (spe	cify) 🔻		Memo Item								
Full Name (Last, First, Middle Initial)												
B. HORSFORD FOR CONGRESS				Date of Disbursement								
Mailing Address 900 S PAVILION CENTER DR.				10 24 2019								
SUITE 160												
City LAS VEGAS	State NV	Zip Code 89144		FEC Identification Number								
Purpose of Disbursement	140	09144		C C00504613								
Contribution			011	Transaction ID : SB23.9763								
Candidate Name HORSFORD, STEVEN ALEXZAN	IDFR		Category/ Type	Amount of Each Disbursement this Period								
	ement For:	2020	1390									
	Primary	General										
State: NV District: 04	Other (spe	city)		Memo Item								
Full Name (Last, First, Middle Initial)												
C. HORSFORD FOR CONGRESS				Date of Disbursement								
Mailing Address 900 S PAVILION CENTER DR. SUITE 160				10 / D D / Y Y Y Y 24 2019								
City	State	Zip Code		FEC Identification Number								
LAS VEGAS Purpose of Disbursement	NV	89144		C C00504613								
Contribution			011	Transaction ID : SB23.9766								
Candidate Name HORSFORD, STEVEN ALEXZAN			Category/ Type	Amount of Each Disbursement this Period								
	ement For:		туре	1500.00								
Senate	Primary	X General										
State: NV District: 04	Other (spe	сіту) 🔻		Memo Item								
SUBTOTAL of Disbursements This Page (optional).			••••••	7000.00								
TOTAL This Period (last page this line number only	/)		••••••									

SCHEDULE B (FEC Form 3X)	Use sepa	arate schedule(s)	FOR LINE (check only	E NUMBER: PAGE 103 OF 1						
TEMIZED DISBURSEMENTS	for each	category of the Summary Page	21b 28a	22 X 23 26 27 28b 28c 29 30b						
Any information copied from such Reports and State or for commercial purposes, other than using the na										
NAME OF COMMITTEE (In Full)										
Full Name (Last, First, Middle Initial)				Date of Disbursement						
Mailing Address 499 S Capitol Street SW Ste. 406				07 10 2019						
City	State	Zip Code		FEC Identification Number						
WASHINGTON Purpose of Disbursement	DC	20003		C H2MD05155						
Contribution			011	C H2MD05155 Transaction ID : SB23.9722						
			Category/	Amount of Each Disbursement this Period						
HOYER, STENY, , , Office Sought: x House Disburse	ement For:		Туре	2500.00						
Senate	Primary	General								
State: MD District: 05	Other (spe	cify) ▼		Memo Item						
Full Name (Last, First, Middle Initial)										
³ KANSANS FOR MARSHALL				Date of Disbursement						
Mailing Address PO BOX 1588				M M / D D / Y Y Y Y 10 24 2019						
City GREAT BEND	State KS	Zip Code 67530		FEC Identification Number						
Purpose of Disbursement Contribution		07550	011	C C00576173						
Candidate Name			Category/	Amount of Each Disbursement this Period						
MARSHALL, ROGER W, , , Office Sought: House Disburse	mont Fam		Туре							
	ement For: Primary	2020 General		1000.00						
State: KS District: 00	Other (spe			Memo Item						
Full Name (Last, First, Middle Initial)				Date of Disbursement						
C KEVIN MCCARTHY FOR CONGR	1599									
Mailing Address PO BOX 12667				09 09 2019						
City BAKERSFIELD	State CA	Zip Code 93389		FEC Identification Number						
Purpose of Disbursement Contribution	1		011	C C00420935 Transaction ID : SB23.9743						
			Category/	Amount of Each Disbursement this Period						
MCCARTHY, KEVIN, , , Office Sought:	ement For:	2020	Туре	5000.00						
Senate President	During a m	General								
State: CA District: 23		y) ▼		Memo Item						
SUBTOTAL of Disbursements This Page (optional).			••••••	8500.00						
TOTAL This Period (last page this line number only	y)									

S	CHEDULE B (FEC Form 3X)	11		FOR LINE I	LINE NUMBER: PAGE 104 OF 118							
IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a	one) 22 X 23 26 27 28b 28c 29 30b							
	y information copied from such Reports and States for commercial purposes, other than using the nar											
	NAME OF COMMITTEE (In Full)											
Α.	Full Name (Last, First, Middle Initial)	TEE			Date of Disbursement							
	Mailing Address PO BOX 1496				07 15 2019							
	LOUISVILLE	State KY	Zip Code 40201		FEC Identification Number							
	Purpose of Disbursement Contribution			011	C C00193342 Transaction ID : SB23.9726							
	Candidate Name MCCONNELL, MITCH, , ,			Category/ Type	Amount of Each Disbursement this Period							
	Office Sought: House Disburse	ment For: 2 Primary Other (spec	General		5000.00							
	State: KY District: 00											
В.	Full Name (Last, First, Middle Initial) MICHAEL BURGESS FOR CONG Mailing Address PO Box 15239	RESS			Date of Disbursement 07 / D D / Y Y Y Y 07 15 2019							
	City Washington	State DC	Zip Code 20003		FEC Identification Number							
	Purpose of Disbursement Contribution			011	C C00372532 Transaction ID : SB23.9725							
	Burgess, Michael, , ,	ment For: 2 Primary Other (spec	General	Category/ Type	Amount of Each Disbursement this Period 1000.00 Memo Item							
C.	Full Name (Last, First, Middle Initial) MIKE THOMPSON FOR CONGRE	ESS			Date of Disbursement							
	Mailing Address 5429 MADISON AVENUE				10 22 2019							
	SACRAMENTO	State CA	Zip Code 95841		FEC Identification Number							
	Purpose of Disbursement Candidate Name THOMPSON, MIKE MR., , ,			011 Category/ Type	C C00326363 Transaction ID : SB23.9758 Amount of Each Disbursement this Period 5000.00 Memo Item							
	Office Sought: Senate President State: CA District: 05	ment For: 2 Primary Other (spec	General									
⊢	UBTOTAL of Disbursements This Page (optional)				11000.00							

SCHEDULE B (FEC Form 3X)							NUMBER: PAGE 105 OF 118										
ITEMIZED DISBURSEMENTS		Use separate schedule(s)			nly one)												
-		for each category of the Detailed Summary Page			2	22 X 23 26											
				288		28b		28c		29		30b					
Any information copied from such Reports and State or for commercial purposes, other than using the na																	
NAME OF COMMITTEE (In Full)				-			-										
Full Name (Last, First, Middle Initial) A. NANCY PELOSI FOR CONGRES	20			Date of Disbursement													
" INAINGT FELOOI FOR CONGRES	00																
Mailing Address 700 13TH STREET, NW					7	10 22 2019											
SUITE 600	01-1				_												
City WASHINGTON	State DC	Zip Code 20005				FEC Ic	lenti	ficatio	n Nu	umbe	r						
Purpose of Disbursement				_	-	С	C00	02135	12								
Contribution			01 ⁻	1			1 m	action		SB2	3.97	59					
			Categ			Amoun							eriod				
PELOSI, NANCY, , , Office Sought: x House Disburse	ement For: 2	2020	Тур	be	_						F	5000.00)				
Office Sought: 🗶 House Disburse	- -	2020 General						,	-	-9-							
President						Memo Item											
State: CA District: 12	-						0	nom									
Full Name (Last, First, Middle Initial)						D :											
B. NEVADANS FOR STEVEN HOR	SFORD	FORD						Date of Disbursement									
Mailing Address PO BOX 336664					-	08 27 2019											
City	State	Zip Code			FEC Identification Number												
NORTH LAS VEGAS Purpose of Disbursement	NV	89033			_	C C00668228											
Contributions		011					1 m	1. A	-	0.55	= -						
Candidate Name			Categ	orv/	Transaction ID : SB23.9732 Amount of Each Disbursement this F								eriod				
HORSFORD, STEVEN ALEXZAN		ER,,,, Type															
	ement For: 2				3500.00							J					
President	Primary Other (spec	cifv) General															
State: NV District: 04		- 31				Me	emo	Item									
Full Name (Last, First, Middle Initial)					1												
C. STEPHANIE MURPHY FOR CON	IGRESS					Date o	of Dis	sburse	emer	nt							
Mailing Address DO DOX 205					_	M M	/	D		/		Y 10	Y				
Mailing Address PO BOX 205						10	1)7		20	019					
City	State	Zip Code			+	FEC lo	lentit	ficatio	n Ni	imhe	r						
WINTER PARK	FL	32790							-			-					
Purpose of Disbursement Contribution			01	1		С	1.1.1	06204									
Candidate Name						Tr: Amoun		Each					ariad				
MURPHY, STEPHANIE, , ,			Categ Typ			Anoul		Laui	015	Juise	ent		unou				
	ement For: 2				1			,	_	-9-	Ę	5000.0	0				
Senate x	Primary Other (spec	General															
						Memo Item											
					1	_	_	_	_	_	_	_	_				
SUBTOTAL of Disbursements This Page (optional)				🕨							1	3500.0	0				
,						F		,		<i>y</i>							
TOTAL This Period (last page this line number only	/)			🕨				,	_	,							

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 106 OF 118							
ITEMIZED DISBURSEMENTS		category of the	(check only	ly one)							
		I Summary Page	21b	22 X 23 26 27 28b 28c 29 30b							
Any information copied from such Reports and Stat or for commercial purposes, other than using the n											
NAME OF COMMITTEE (In Full)											
Full Name (Last, First, Middle Initial) A. SUSIE LEE FOR CONGRESS				Date of Disbursement							
Mailing Address 5130 S FORT APACHE RD STE. 215-382				08 / 27 / 2019							
City LAS VEGAS	State NV	Zip Code 89148		FEC Identification Number							
Purpose of Disbursement Contribution		00140	011	C C00655613							
Candidate Name			Category/	Transaction ID : SB23.9735 Amount of Each Disbursement this Period							
LEE, SUSIE, , , Office Sought: x House Disburs	amant Fam		Туре	3000.00							
Senate	Primary	General									
State: NV District: 03	Other (sp	ecity) 🔻		Memo Item							
Full Name (Last, First, Middle Initial)				+							
B. THOM TILLIS COMMITTEE				Date of Disbursement							
Mailing Address PO BOX 97396				08 27 2019							
City	State NC	Zip Code		FEC Identification Number							
RALEIGH Purpose of Disbursement	INC.	27624		C C00545772							
Contribution			011	Transaction ID : SB23.9738							
Candidate Name TILLIS, THOM R. SEN., , ,			Category/ Type	Amount of Each Disbursement this Period							
	ement For:	2020	Type	4500.00							
× Senate	Primary	General									
State: NC District: 00	Other (sp	ecity)		Memo Item							
Full Name (Last, First, Middle Initial) C. THOM TILLIS COMMITTEE				Date of Disbursement							
Mailing Address PO BOX 97396				M M / D D / Y							
City RALEIGH	State NC	Zip Code 27624		FEC Identification Number							
Purpose of Disbursement Contribution	_		011	C C00545772							
Candidate Name TILLIS, THOM R. SEN., , ,			Category/ Type	Transaction ID : SB23.9739 Amount of Each Disbursement this Period							
	ement For:	2020 General		4500.00							
State: NC District: 00	Other (sp			Memo Item							
SUBTOTAL of Disbursements This Page (optional)		•••••••	12000.00							
TOTAL This Period (last page this line number on	ly)		••••••	, ,							

SCHEDULE B (FEC Form 3X)		parate schedule(s)	FOR LINE I								
ITEMIZED DISBURSEMENTS	for each	category of the Summary Page	(check only 21b 28a	one) 22 X 23 26 27 28b 28c 29 30b							
Any information copied from such Reports and Sta or for commercial purposes, other than using the n											
NAME OF COMMITTEE (In Full)											
Full Name (Last, First, Middle Initial) A. TINA SMITH FOR MINNESOTA											
Mailing Address P.O. BOX 14362	1			09 27 2019							
City SAINT PAUL	State MN	Zip Code 55114		FEC Identification Number							
Purpose of Disbursement Contribution			011	C C00663781 Transaction ID : SB23.9752							
Candidate Name SMITH, TINA, , ,			Category/ Type	Amount of Each Disbursement this Period							
	sement For: Primary Other (spe	General		5000.00							
State: MN District: 00 Full Name (Last, First, Middle Initial)				Menio Item							
A Address 3410 Alabama Avenue				Date of Disbursement 07 08 2019							
City	State	Zip Code									
Alexandria Purpose of Disbursement	VA	22305		FEC Identification Number							
Contribution Candidate Name			011 Category/	C C00200584 Transaction ID : SB23.9720 Amount of Each Disbursement this Period							
° A	N,,,, sement For: ✔ Primary	2020 General	Туре	5000.00							
State: MI District: 06	Other (spe	ecify)		Memo Item							
Full Name (Last, First, Middle Initial) C. VOTE DONNA US CONGRESS				Date of Disbursement							
Mailing Address PO BOX 2321				12 18 / Y Y Y Y 12 18 2019							
City CEDAR PARK	State TX	Zip Code 78630		FEC Identification Number							
Purpose of Disbursement Contributions Candidate Name			011	C C00710475 Transaction ID : SB23.9804							
IMAM, DONNA, , ,			Category/ Type	Amount of Each Disbursement this Period							
Senate President	ement For: Primary Other (spe	General		1000.00 Memo Item							
State: TX District: 31	ate: TX District: 31										
SUBTOTAL of Disbursements This Page (optional)		····· ►	11000.00							
TOTAL This Period (last page this line number or	ly)		••••••								

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 108 OF 118								
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only	/ one)								
	Detailed	Summary Page	21b 28a	22 X 23 26 27 28b 28c 29 30b								
Any information copied from such Reports and State or for commercial purposes, other than using the na			d by any pers	on for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)												
Full Name (Last, First, Middle Initial) A. WALDEN FOR CONGRESS				Date of Disbursement								
Mailing Address 439 New Jersey Ave SE				FEC Identification Number								
City Washington	State DC	Zip Code 20003										
Purpose of Disbursement Contribution			011	C C00333427 Transaction ID : SB23.9721								
Candidate Name Walden, Greg, , ,			Category/ Type	Amount of Each Disbursement this Period								
Office Sought: X House Disburs Senate Y President	ement For: Primary Other (spe	General		4000.00								
State: OR District: 02		oury) ▼		Memo Item								
Full Name (Last, First, Middle Initial) B.		Date of Disbursement										
Mailing Address	Mailing Address											
City	State	Zip Code		FEC Identification Number								
Purpose of Disbursement				C								
Candidate Name			Category/ Type	Amount of Each Disbursement this Period								
Senate	ement For: Primary	General										
State: District:	Other (spe	City)		Memo Item								
Full Name (Last, First, Middle Initial)				Date of Disbursement								
Mailing Address												
City	State	Zip Code		FEC Identification Number								
Purpose of Disbursement	1	·		С								
Candidate Name			Category/ Type	Amount of Each Disbursement this Period								
Office Sought: House Disburs Senate	ement For: Primary	General										
State: District:												
SUBTOTAL of Disbursements This Page (optional)			······ ►	4000.00								
TOTAL This Period (last page this line number on	y)		••••••	117500.00								

S	CHEDULE B (FEC Form 3X)		FC	DR L	NE I	NUMBER: PAGE 109 OF 118										
IT	EMIZED DISBURSEMENTS	Use sepa for each	(cl		-	/ one) 22 23 26 27										
			Summary Page		21b		22 28b		23 28c		26 29		27 30b			
٨٣	y information copied from such Reports and State	monte may	not be cold or use	d by				DUI								
	for commercial purposes, other than using the na															
\setminus	NAME OF COMMITTEE (In Full)															
$ \rangle$	USACS PAC															
/	Full Name (Last, First, Middle Initial)					_										
Α.	Benninghoff for Representative Co	ommittee	2				Date of Disbursement									
							MN	/	D	D /	Y	Y	YY			
	Mailing Address 225 State St 2nd Flr						11 12 2019									
	City	State	Zip Code				FEC lo	denti	ficatio	n Nun	nber					
	Harrisburg	PA	17101										-			
	Purpose of Disbursement Contribution			0	11	11	С									
	Candidate Name			_					Each		-	-				
	Benninghoff, Kerry, , ,				egory. /pe		Amount of Each Disbursement this Period									
		ment For:	2020		-						-	1	000.00			
	Senate x	-	General						/		,					
	State: District:	Other (spe	Other (specify) ▼													
	Full Name (Last, First, Middle Initial)															
В.	Boscola, Lisa, , ,		Date o	of Dis	sburse	ment										
									M M / D D / Y Y Y Y							
	Mailing Address PO Box 1294									7	L)19			
	City	State							ficatio	n Nun	nber					
	Bethlehem PA 18016												_			
	Purpose of Disbursement Contribution 011															
	Candidate Name	Category/							action	-	-		6 this Period			
	Boscola, Lisa, , ,	Type					Amour		Lacii	DISDU	ii Seli	ient	unis renou			
		ment For: 2022									-	1	000.00			
	Senate x															
	State: District:	Other (spe	city)				M	emo	Item							
_	Full Name (Last, First, Middle Initial)					-										
C.	Citizens for Browne						Date o	of Dis	sburse	ement						
							MN	/	D	D /	Y	Y	YY			
	Mailing Address PO Box 792						11		1	2	L	20	19			
	City	State	Zip Code				FEC lo	lenti	ficatio	n Nun	iher					
	Harrisburg	PA	17108									-	_			
	Purpose of Disbursement Contribution			0	11	11	С						_			
	Candidate Name					44	Transaction ID : SB29.9772									
	Browne, Pat, , , Type								Amount of Each Disbursement this Period							
		ment For:	2020		,						-	1	000.00			
	Senate x						7		<i>y</i>							
	President	Other (spe	cify) 🔻				Memo Item									
_	State: District:															
	IIRTOTAL of Disburgements This Page (entioned)											;	3000.00			
L_,	UBTOTAL of Disbursements This Page (optional).					•	+	÷	7	-	7	÷				
т	OTAL This Period (last page this line number only	/)				•			,		,					

	HEDULE B (FEC Form 3X)					NUMBER: PAGE 110 OF 118										
	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(C	heck only 21b 28a	y one) 22 23 26 27 28b 28c x 29 30b										
	y information copied from such Reports and State for commercial purposes, other than using the na															
	NAME OF COMMITTEE (In Full) USACS PAC															
-	Full Name (Last, First, Middle Initial) Citizens for Jordan Harris					Date of Disbursement										
	Mailing Address PO Box 32097	08 27 2019														
	City Philadelphia	State PA	Zip Code 19146			FEC Identification Number										
	Purpose of Disbursement Contribution Candidate Name			0	11	C Transaction ID : SB29.9730										
	Harris, Jordan, , ,	ement For: 2	2020		egory/ /pe	Amount of Each Disbursement this Period 1000.00										
	Senate X President			Memo Item												
	State: District: Full Name (Last, First, Middle Initial) Citizens for Obhof					Date of Disbursement										
	Mailing Address 5206 Crown Pointe Drive	09 23 2019														
	City Medina Purpose of Disbursement Contribution		FEC Identification Number													
	Candidate Name Obhof, Larry, , ,	011 Category/ Type				Transaction ID : SB29.9744 Amount of Each Disbursement this Period										
		Primary	ment For: 2020			2000.00										
	State: District:					Memo Item										
	Full Name (Last, First, Middle Initial) Citizens for Schuring					Date of Disbursement										
	Mailing Address 330 Third St NW					09 18 2019										
	City Canton Purpose of Disbursement Contribution	State OH	Zip Code 44702	0	11	FEC Identification Number										
	Candidate Name Schuring, Kirk, , ,	Transaction ID : SB29.9745 Amount of Each Disbursement this Period														
	Senate x President	ement For: 2 Primary Other (spec	General			1000.00 Memo Item										
	State: District:															
\vdash	JBTOTAL of Disbursements This Page (optional)					4000.00										
T	OTAL This Period (last page this line number only	/)			····· 🕨											

SCHEDULE B (FEC Form 3X)			FC	DR LIN	NE NUMBER: PAGE 111 OF 118				
ITEMIZED DISBURSEMENTS	Use sepa for each		heck o	/ one)					
		Summary Page		21					
Any information copied from such Reports and State or for commercial purposes, other than using the nar				any pe	erson for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full)									
Full Name (Last, First, Middle Initial) A. Citizens for Stan Saylor					Date of Disbursement				
Mailing Address PO Box 624					11 D D / Y Y Y Y 11 12 2019				
City Harrisburg	State PA	Zip Code			FEC Identification Number				
Purpose of Disbursement Contributions		17100	0	11	С				
Candidate Name				egory/	Transaction ID : SB29.9773 Amount of Each Disbursement this Period				
Saylor, Stan, , ,				/pe	1000.00				
Office Sought: House Disburse Senate X President	ment For: 2 Primary Other (spec	General							
State: District:		<i></i>			Memo Item				
Full Name (Last, First, Middle Initial) B. FRIENDS FOR DONNA OBERLA	NDER				Date of Disbursement				
Mailing Address 44 W. MAIN STREET	Mailing Address 44 W. MAIN STREET								
CLARION	State PA	Zip Code 16214			FEC Identification Number				
Purpose of Disbursement Contributions Candidate Name									
Oberlander, Donna, , ,				egory/ /pe	Amount of Each Disbursement this Period				
	ment For:	2020	(י	100	1000.00				
	Primary	General							
State: PA District: 63	Other (spec	Сіту)			Memo Item				
Full Name (Last, First, Middle Initial) C. Friends of Beth Liston					Date of Disbursement				
Mailing Address 2193 Stratingham Dr	Mailing Address 2193 Stratingham Dr								
City Dublin									
Purpose of Disbursement Contribution									
Candidate Name Liston, Beth, , ,	egory/ /pe	Transaction ID : SB29.9753 Amount of Each Disbursement this Period							
Office Sought: House Disburse		•	500.00						
State: District:	Primary Other (spec	Cify) ▼			Memo Item				
SUBTOTAL of Disbursements This Page (optional).				····· ►					
TOTAL This Period (last page this line number only)			►					

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 112 OF 118				
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a	7 one) 22 23 26 27 28b 28c x 29 30b				
Any information copied from such Reports and State or for commercial purposes, other than using the na								
NAME OF COMMITTEE (In Full)								
Full Name (Last, First, Middle Initial) A. Friends of Bryan Cutler	Date of Disbursement							
Mailing Address PO Box 412				11 05 2019				
City Harrisburg	State PA	Zip Code 17101		FEC Identification Number				
Purpose of Disbursement Contribution Candidate Name			011	C Transaction ID : SB29.9770				
Cutler, Bryan, , ,			Category/ Type	Amount of Each Disbursement this Period 1000.00				
Senate x President	Office Sought: X House Disbursement For: 2020 Senate X Primary General							
State: PA District: Full Name (Last, First, Middle Initial) B. Friends of Joanna McClinton Mailing Address PO Box 16668		Date of Disbursement						
City Philadelphia Purpose of Disbursement Contribution Candidate Name McClinton, Joanna, , ,	State PA	Zip Code 19139	011 Category/ Type	FEC Identification Number C Transaction ID : SB29.9728 Amount of Each Disbursement this Period				
Office Sought: House Disburse	ement For: Primary Other (spe	General		1000.00 Memo Item				
Full Name (Last, First, Middle Initial) C. Friends of Joe Scarnati				Date of Disbursement				
Mailing Address PO Box 177				11 12 2019				
City Brockway Purpose of Disbursement Contributions	State PA	Zip Code 15824	011	FEC Identification Number				
Candidate Name Scarnati, Joe, , , Office Sought: House Disburse	ement For:	2020	Category/ Type	Transaction ID : SB29.9781 Amount of Each Disbursement this Period 2000.00				
State: District:	Primary Other (spe	General ecify) ▼		Memo Item				
SUBTOTAL of Disbursements This Page (optional).			F	4000.00				

SCHEDULE B (FEC Form 3X)		rate ashedula(s)			E NUMBER: PAGE 113 OF 118				
EMIZED DISBURSEMENTS Use separate schedule(s) for each category of the Detailed Summary Page			(cł	neck or 21 28					
Any information copied from such Reports and Stater or for commercial purposes, other than using the nam					rson for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full)									
Full Name (Last, First, Middle Initial) A. Friends of John Gordner	Date of Disbursement								
Mailing Address PO Box 12103					11 12 2019				
City Harrisburg Purpose of Disbursement	State PA	Zip Code 17108			FEC Identification Number				
Contributions Candidate Name				11	C Transaction ID : SB29.9775				
Gordner, John, , ,	nent For: 2	2020		egory/ /pe	Amount of Each Disbursement this Period				
State: District:	Senate ▼ Primary General President Other (specify) ▼								
Full Name (Last, First, Middle Initial) B. Friends of Kim Ward	Date of Disbursement								
	Mailing Address PO Box 792 City State Zip Code								
Harrisburg Purpose of Disbursement Contributions	Harrisburg PA 17108 Purpose of Disbursement								
	nent For: 2 Primary Other (spec	General		egory/ /pe	Transaction ID : SB29.9794 Amount of Each Disbursement this Period 500.00 Memo Item				
Full Name (Last, First, Middle Initial) C. Friends of Kristin Phillips-Hill					Date of Disbursement				
Mailing Address 225 State St 2nd Floor					09 / 23 / Y Y Y Y 2019				
City Harrisburg Purpose of Disbursement Contribution	State PA	Zip Code 17101			FEC Identification Number				
Candidate Name Phillips-Hill, Kristin, , ,		Cate	11 egory/ /pe	Transaction ID : SB29.9747 Amount of Each Disbursement this Period					
Senate X President	nent For: 2 Primary Other (spec	General			Memo Item				
State: District: SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)				-	2000.00				

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS		Use sepa				NUMBER: PAGE 114 OF 118							
		for each	for each category of the Detailed Summary Page			only 21b 28a	one) 22 28b		23 28c		26 x 29		27 30b
	y information copied from such Reports and State for commercial purposes, other than using the na				any	perso			pose	of	soliciti		ntributions
	NAME OF COMMITTEE (In Full)												
Full Name (Last, First, Middle Initial) A. Friends of Larry Householder									Date of Disbursement				
	Mailing Address 207 N. Market St		1				09 23 2019						
	City Somerset	State OH	Zip Code 43783				FEC I	denti	ficatic	on l	Numbe	er	-
	Purpose of Disbursement Contribution			0	11		C Transaction ID : SB29.9746						46
	Candidate Name Householder, Larry, , , Office Sought: House Disburse	ement For: 2	2020	Cate Ty	egory /pe	<i>y</i> /	Amour	nt of	Each	ı Di	isburse		t this Period 2000.00
	Senate X President	1	General				м	emo	, Item		<u> </u>		
State: District: Full Name (Last, First, Middle Initial) B. Friends of Mercy Toepel Mailing Address 307 Hamptom Circle								of Di		em 12			019
	CityStateZip CodeGilbertsvillePA19525						FEC Identification Number						
	Purpose of Disbursement Contribution Candidate Name Toepel, Mercy, , ,					<i>,</i> //	C Transaction ID : SB29.9790 Amount of Each Disbursement this Period			t this Period			
	Office Sought: House Disburse Senate President State: District:	ement For: 2 Primary Other (spec	General				M	emo	ltem				1000.00
Full Name (Last, First, Middle Initial) C. Friends of Mike Reese								_	sburs	em	ent	V	Y Y
	Mailing Address 1222 Village Rd						M 11			12			019
	City Mt Pleasant Purpose of Disbursement	State PA	Zip Code 15666	_		_	FEC I	denti	ficatic	on I	Numbe	er	-
	Contributions Candidate Name Reese, Mike, , ,		Cate	11 egory	y/	Transaction ID : SB29.9777 Amount of Each Disbursement this Period							
	Office Sought: House Disburse Senate President	ement For: 2 Primary Other (spec	General				м	emo	, Item				1000.00
Г	State: District:						-	_	_	_		_	
⊢	UBTOTAL of Disbursements This Page (optional).							-	-y		,		4000.00

SCHEDULE B (FEC Form 3X)			FOR LINE			
ITEMIZED DISBURSEMENTS	for each Detailed	arate schedule(s) category of the Summary Page	(check only 21b 28a	22 23 26 27 28b 28c x 29 30b		
Any information copied from such Reports and State or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full)						
Full Name (Last, First, Middle Initial) A. FRIENDS OF MIKE TURZAI				Date of Disbursement		
Mailing Address 11676 PERRY HIGHWAY SUITE 2106	09 09 2019					
City WEXFORD	State PA	Zip Code 15090		FEC Identification Number		
Purpose of Disbursement Refund of State Contribution			011	C H8PA04066 Transaction ID : SB29.9813		
Candidate Name TURZAI, MICHAEL C, , ,			Category/ Type	Amount of Each Disbursement this Period		
Office Sought: X House Disburse Senate Y President	ement For: Primary Other (spe	General		- 1000.00		
State: PA District: 04 Full Name (Last, First, Middle Initial) B Friends of Shorif Street				Date of Disbursement		
Mailing Address 1421 W Susquehanna Ave	Friends of Sharif Street Mailing Address 1421 W Susquehanna Ave					
City Philadelphia	State PA	Zip Code 19121		FEC Identification Number		
Contribution						
	ement For:	2020 General	Category/ Type	Amount of Each Disbursement this Period		
Senate X President State: District:	Other (spe			Memo Item		
Full Name (Last, First, Middle Initial) C. House Republican Campaign Cor	nmittee			Date of Disbursement		
Mailing Address 4679 Winterset Drive				09 23 YYYYY 2019		
City Columbus	State OH	Zip Code 43220		FEC Identification Number		
Purpose of Disbursement Contribution Candidate Name	011	C Transaction ID : SB29.9748 Amount of Each Disbursement this Period				
Householder, Larry, , , Office Sought: House Disburse	Category/ Type	500.00				
State: District:	Primary Other (spe	General ecify) ▼		Memo Item		
				500.00		
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only						

S	CHEDULE B (FEC Form 3X)			FOR LINE	NUMBER PAGE 116 OF 118				
ITEMIZED DISBURSEMENTS			arate schedule(s) category of the	(check only	ly one)				
			Summary Page	21b 28a	22 23 26 27 28b 28c x 29 30b				
	y information copied from such Reports and State for commercial purposes, other than using the na				on for the purpose of soliciting contributions				
$\left \right\rangle$									
/	USACS PAC								
<u>د</u>	Full Name (Last, First, Middle Initial) Jay Costa Jr. for State Senate				Date of Disbursement				
	Mailing Address 314 Newport Road				M M / D D / Y Y Y Y 11 12 2019				
	01	01-1-	Zin Onda						
	City Pittsburgh	State PA	Zip Code 15221		FEC Identification Number				
	Purpose of Disbursement Contributions			011	С				
	Candidate Name			Category/	Transaction ID : SB29.9774 Amount of Each Disbursement this Period				
	Costa, Jay, , , Jr.			Туре					
	Office Sought: House Disburse Senate X	ment For: Primary	2020 General		2000.00				
	State: District:	Other (spe	ecify) ▼		Memo Item				
_	Full Name (Last, First, Middle Initial)								
В.	Killion for State Senate				Date of Disbursement				
	Mailing Address Senate Box 203009		08 / D D / Y Y Y Y 2019						
	City Harrisburg	State PA	Zip Code 17120		FEC Identification Number				
	Purpose of Disbursement Contribution		17120	011	С				
	Candidate Name			Category/	Transaction ID : SB29.9729 Amount of Each Disbursement this Period				
	Killion, Tom, , ,			Туре					
		ment For:			500.00				
	President X	Primary Other (spe	cify)						
	State: District:		.,		Memo Item				
C.	Full Name (Last, First, Middle Initial) Mike Sturla for State Representati	ve			Date of Disbursement				
					M M / D D / Y Y Y Y				
	Mailing Address PO Box 206				11 12 2019				
	City Lancaster	State PA	Zip Code 17608		FEC Identification Number				
	Purpose of Disbursement Contributions	011	С						
	Candidate Name	Transaction ID : SB29.9797 Amount of Each Disbursement this Period							
	Sturla, Mike, , ,			Category/ Type					
	Office Sought: House Disburse		1000.00						
	Senate x	Primary Other (spe	General cifv) ▼						
	State: PA District:		(only)		Memo Item				
s	UBTOTAL of Disbursements This Page (optional).			····· ►	3500.00				
т	OTAL This Period (last page this line number only	/)		••••••					

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 117 OF 118				
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a	22 23 26 27 28b 28c x 29 30b				
Any information copied from such Reports and State or for commercial purposes, other than using the na								
NAME OF COMMITTEE (In Full)								
Full Name (Last, First, Middle Initial) A. Oelslager for Ohio				Date of Disbursement				
Mailing Address 6706 Lake Cable Ave NW				08 27 2019				
City North Canton	State OH	Zip Code 44720		FEC Identification Number				
Purpose of Disbursement Contribution			011	C Transaction ID : SB29.9733				
Candidate Name Oelslager, Scott, , ,			Category/ Type	Amount of Each Disbursement this Period				
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General		1000.00 Memo Item				
Full Name (Last, First, Middle Initial) B. Paul Renner for State Representa Mailing Address 70 Riverview Bend South #713		Date of Disbursement						
City Palm Coast Purpose of Disbursement Contribution	State FL	Zip Code 32137	011	FEC Identification Number				
Candidate Name Renner, Paul, , , Office Sought: House Disburse Senate President	ment For: Primary Other (spe	2020 X General cify)	Category/ Type	Amount of Each Disbursement this Period				
Full Name (Last, First, Middle Initial) C. Republican Senate Campaign Cor	mmittee			Date of Disbursement				
Mailing Address 88 E Broad Street Suite 1650				09 / D D / Y Y Y Y 23 / 2019				
City Columbus Purpose of Disbursement Contribution	State OH	Zip Code 43215	011	FEC Identification Number				
Candidate Name			Category/ Type	Transaction ID : SB29.9750 Amount of Each Disbursement this Period				
Senate	ment For: Primary	General	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	500.00				
State: District:	Other (spe	ciiy) ▼		Memo Item				
SUBTOTAL of Disbursements This Page (optional). TOTAL This Period (last page this line number only				2500.00				

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	FOR LINE 1 (check only 21b	y one)				
	Detailed	Summary Page	28a	28b 28c x 29 30b				
Any information copied from such Reports and State or for commercial purposes, other than using the na								
NAME OF COMMITTEE (In Full)								
Full Name (Last, First, Middle Initial) A. STEVE HUFFMAN FOR OHIO		Date of Disbursement						
Mailing Address P.O. BOX 739			10 / D D / Y Y Y Y 10 01 / 2019					
City TROY	State OH	Zip Code 45372		FEC Identification Number				
Purpose of Disbursement Contribution Candidate Name			011	C Transaction ID : SB29.9754				
Huffman, Steve, , ,	ement For: 2	2020	Category/ Type	Amount of Each Disbursement this Period				
× Senate President	Primary Other (spec	General cify) ▼		Memo Item				
State: OH District: 05 Full Name (Last, First, Middle Initial) B. Volunteers for Argall				Date of Disbursement				
Mailing Address PO Box 241				11 / 12 2019				
	State PA	Zip Code 18252		FEC Identification Number				
Purpose of Disbursement Contributions		1.0202	011	C Transaction ID : SB29.9800				
Candidate Name Argall, Dave, , ,			Category/ Type	Amount of Each Disbursement this Period				
Office Sought: House Disburse Senate President	ement For: 2 Primary Other (spec	General		1000.00				
State: District: Full Name (Last, First, Middle Initial)								
C. Mailing Address				Date of Disbursement				
City	State	Zip Code		FEC Identification Number				
Purpose of Disbursement				C				
Candidate Name	Category/ Type	Amount of Each Disbursement this Period						
Office Sought: House Disburse Senate	ement For: Primary	General						
State: District:	Other (spec	cify) ▼		Memo Item				
SUBTOTAL of Disbursements This Page (optional)			····· ►	2000.00				
TOTAL This Period (last page this line number only	y)		····· •	28000.00				