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# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	For Other Than An Auth	ionzea Committee	Offic	ce Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
HealthTexas Medical	Group Federal PAC			
ADDRESS (number and street)	6243 IH 10 West Suite 480			
Check if different than previously reported. (ACC)	San Antonio		TX 7.	8201
2. FEC IDENTIFICATION N	NUMBER ▼ CITY	Y <b>A</b>	STATE ▲	ZIP CODE ▲
C C00505495	3. IS	THIS EPORT X NEW (N) OF	AMEND (A)	ED
4. TYPE OF REPORT (Choose One)	Report Due On:	20 (M2) May 20 (M:		Year Only)
(a) Quarterly Reports:		20 (M3) Jun 20 (M6		Year Only)
April 15 Quarterly Report	(Q1)	20 (M4) Jul 20 (M7)		
July 15 Quarterly Report	PRF-Election	Primary (12P)  Convention (12C)	General (12G)  Special (12S)	Runoff (12R)
October 15 Quarterly Report	·			
X January 31 Year-End Report	(YE) Election	n on	Y Y Y Y Y	in the State of
July 31 Mid-Year Report (Non-elect Year Only) (MY)	POST-Election Report for the:	General (30G)	Runoff (30R)	Special (30S)
Termination Repo	rt Election	n on	Y Y Y Y Y	in the State of
5. Covering Period	11 17 2011	through 12	M / D D / Y	2011
I certify that I have examined	this Report and to the best of	my knowledge and belief it is	true, correct and con	nplete.
Type or Print Name of Treasur	rer Mrs. Jeannine Baeten Ruffne	er		
Signature of Treasurer Mr.	s. Jeannine Baeten Ruffner	[Electronically Filed]	Date 02	07 / 2012
NOTE: Submission of false, erro	oneous, or incomplete information	may subject the person signing	this Report to the pe	nalties of 2 U.S.C. §437g.
Office Use			F	EC FORM 3X Rev. 12/2004

FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE F RECEIPTS AND DISBURSEMENTS	Page <b>2</b>
Write or Type Committee Name		
HealthTexas Medical Group Federa	al PAC	
Report Covering the Period: From:	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	12 / 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand  January 1,  2011		0.00
(b) Cash on Hand at  Beginning of Reporting Period	0.00	
(c) Total Receipts (from Line 19)	14550.00	14550.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	14550.00	14550.00
7. Total Disbursements (from Line 31)	0.00	0.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	14550.00	14550.00
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
Debts and Obligations Owed BY     the Committee (Itemize all on     Schedule C and/or Schedule D)	0.00	
This committee has qualified as a multican	ndidate committee. (see FEC FORM 1M)	
F	For further information contact:	
	Federal Election Commission 999 E Street, NW Washington, DC 20463	

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

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

# HealthTexas Medical Group Federal PAC

tributions (other than loans) From: Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	13250.00 7 1300.00 14550.00	1300.00
Than Political Committees  (i) Itemized (use Schedule A)	1300.00	13250.00 1300.00
(ii) Itemized (use Schedule A)	1300.00	1300.00
(ii) Unitemized	1300.00	1300.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	14550.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii)		14550 00
Political Party Committees		14550.00
		1.000.00
	0.00	0.00
Other Political Committees	7	
(such as PACs)	0.00	0.00
	14550.00	14550.00
nsfers From Affiliated/Other		
ty Committees	0.00	0.00
Loans Received	0.00	0.00
n Repayments Received	0.00	0.00
sets To Operating Expenditures		
funds, Rebates, etc.)		
rry Totals to Line 37, page 5)	0.00	0.00
unds of Contributions Made	· · · · · · · · · · · · · · · · · · ·	,
ederal Candidates and Other		
	0.00	0.00
·		
	0.00	0.00
	0.00	
(rrom Schedule H3)	0.00	0.00
Lovin Fundo (from Cobadula 115)	0.00	0.00
Levili Furius (Irom Scriedule H5)	5.55	0.00
Total Transfers (add 18(a) and 18(b))	0.00	0.00
	Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)

#### **DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

II. Disbursements		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
	Operating Expenditures: a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calcination Total to Buto	
	(i) Federal Share	0.00	0.00	
	(ii) Non-Federal Share	0.00	0.00	
(	b) Other Federal Operating			
	Expenditures	0.00	0.00	
(	c) Total Operating Expenditures	000	0.00	
ר מנ	(add 21(a)(i), (a)(ii), and (b))▶  Fransfers to Affiliated/Other Party	0.00	0.00	
	Committees	0.00	0.00	
23. (	Contributions to Federal Candidates/Committees	7		
8	and Other Political Committees	0.00	0.00	
	ndependent Expenditures	0.00	0.00	
<u> 2</u> 5. (	use Schedule E) Coordinated Party Expenditures	0.00	0.00	
(	2 U.S.C. §441a(d)) use Schedule F)	0.00	0.00	
`	,			
26. L	oan Repayments Made	0.00	0.00	
	and Made	0.00	0.00	
28. F	_oans MadeRefunds of Contributions_To:	0.00	0.00	
(	Individuals/Persons Other     Than Political Committees	0.00	0.00	
`	b) Political Party Committees	0.00	0.00	
(	c) Other Political Committees (such as PACs)	0.00	0.00	
	(3001 43 1 703)	0.00	7 7	
(	d) Total Contribution Refunds			
	(add Lines 28(a), (b), and (c))▶	0.00	0.00	
00 (	Oth an Dialamana and	0.00	0.00	
29. (	Other Disbursements	0.00	0.00	
80. F	Federal Election Activity (2 U.S.C. §431(20))			
(	a) Allocated Federal Election Activity			
	(from Schedule H6)	0.00	0.00	
	(i) Federal Share	0.00	0.00	
	(ii) "Levin" Share	0.00	0.00	
(	b) Federal Election Activity Paid Entirely			
	With Federal Funds	0.00	0.00	
(	c) Total Federal Election Activity (add	0.00	0.00	
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00	
1. 7	Fotal Disbursements (add Lines 21(c), 22,			
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	0.00	0.00	
	Fotal Federal Disbursements			
	subtract Line 21(a)(ii) and Line 30(a)(ii) rom Line 31)	0.00	0.00	
'	IOIII EIIIG 01)	0.00	3.00	

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	14550.00	14550.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	14550.00	14550.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

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

FC	R LINE	NUMBER	: PAGE	E 6 OF	7
(ch	eck only	one)			
>	<b>1</b> 1a	11b	11c	12	
	13	14	15	16	17

NAME OF COMMITTEE (In Full) HealthTexas Medical Group Ferman Full Name (Last, First, Middle Initial) Prof. Ramon Colen Mailing Address 13818 SHAVANO MIST	deral PAC	Date of Receipt
Prof. Ramon Colen		Date of Receipt
		M = M / D = D / Y = Y = Y
City	State Zip Code	12 27 2011
San Antonio	TX 78230	Transaction ID : SA11AI.4119  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2500.00
Name of Employer  HealthTexas Medical Group	Occupation Physician	PAC Contribution
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  2500.00	
Full Name (Last, First, Middle Initial)  Dr. Juan Gonzalez  Mailing Address 10 LAKE BRIDGE DRIVE		Date of Receipt
City San Antonio	State Zip Code TX 78248	12 27 2011  Transaction ID : SA11AI.4109  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2500.0
Name of Employer HealthTexas Medical Group	Occupation Physician	PAC Contribution
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  2500.00	
Full Name (Last, First, Middle Initial)  Dr. Robert Jakubowski		Date of Receipt
Mailing Address 17 CRESCENT PARK		12 27 2011
City San Antonio	State Zip Code TX 78257	Transaction ID : SA11AI.4121  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	PAC Contribution
HealthTexas Medical Group	Physician	
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼  250.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	5250.00

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

FOR LINE NUMBER: PAGE 7 OF Use separate sched for each category of Detailed Summary F

dule(s)	_	only one)	III. ITAC		/ /
f the Page	X 118	a 11b	11c	12	
9	13	14	15	16	17

NAME OF COMMITTEE (In Full) HealthTexas Medical Group F	the name and address of any political committee	
Full Name (Last, First, Middle Initial) Dr. Aris Nikas  Mailing Address 322 RIDGEHAVEN PLACE  City	State Zip Code	Date of Receipt  12 27 2011  Transaction ID : SA11AI.4114
San Antonio	TX 78204	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	PAC Contribution
HealthTxeas Medical Group	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	
Full Name (Last, First, Middle Initial)  3. Dr. Robert Tavera  Mailing Address 2509 HUNTERS CATE		Date of Receipt
Mailing Address 3508 HUNTERS GATE  City	State Zip Code	12 27 2011 Transportion ID : \$A11A14115
San Antonio	TX 78230	Transaction ID : SA11AI.4116  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2500.00
Name of Employer HealthTexas Medical Group	Occupation Physician	PAC Contribution
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  2500.00	
Full Name (Last, First, Middle Initial)  Dr. Luis Torres		Date of Receipt
Mailing Address 303 CANDERLARIA		12 27 2011
City Helotes	State Zip Code TX 78023	Transaction ID : SA11AI.4101  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	3000.00
Name of Employer	Occupation	PAC Contribution
HealthTexas Medicak Group	Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	3000.00	
SUBTOTAL of Receipts This Page (optional)		8000.00
TOTAL This Period (last page this line numb	<u>.</u>	13250.00