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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines FRIENDS OF MOUNT SINAI MEDICAL CENTER PAC 1400 NW 107th AVENUE ADDRESS (number and street) 4TH FLOOR Check if different than previously MIAMI FL 33172 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE A CITY A IS THIS NEW **AMENDED** C00411561 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Oct 20 (M10) Jul 20 (M7) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 Χ PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12S) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 04 0 1 2010 06 30 2010 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. STANLEY TATE Type or Print Name of Treasurer Electronically Filed by STANLEY TATE 0 1 11 2011 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004)

FE6AN026

Only

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

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FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name FRIENDS OF MOUNT SINAI MEDICAL CENTER PAC

D D [®]D 0 4 0 1 2010 0.6 3 0 2010 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2010° 5369.57 January 1 (b) Cash on Hand at 822.74 Begining of Reporting Period 26500.00 26500.00 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 27322.74 31869.57 6(a) and 6(c) for Column B) 9043.35 13590.18 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 18279.39 18279.39 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D)

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

For further information contact:

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

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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 17

Write or Type Committee Name

FRIENDS OF MOUNT SINAI MEDICAL CENTER PAC

Report Covering the Period:

From: 0 4

D D 0

2010

To:

м м 0 6 D D D

Y Y Y Y 2 0 1 0

	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)	26500.00	26500.00
	(ii) Unitemized	0.00	0.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	26500.00	26500.00
(i	b) Political Party Committees	0.00	0.00
,	c) Other Political Committees (such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	26500.00	26500.00
	ransfers From Affiliated/Other arty Committees	0.00	0.00
3. A	III Loans Received	0.00	0.00
	oan Repayments Received	0.00	0.00
(0	Refunds, Rebates, etc.) Carry Totals to Line 37, page 5)	0.00	0.00
to	o Federal candidates and Other Political Committees	0.00	0.00
	Other Federal Receipts Dividends, Interest, etc.)	0.00	0.00
	ransfers from Non-Federal and Levin Funds		
(8	a) Non-Federal Account (from Schedule H3)	0.00	0.00
(i	b) Levin Funds (from Schedule H5)	0.00	0.00
(0	c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
	otal Receipts (add Lines 11(d), 2, 13, 14, 15, 16, 17, and 18(c))	26500.00	26500.00
	otal Federal Receipts subtract Line 18(c) from Line 19)	26500.00	26500.00

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 17

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	43.35	90.18
	Expenditures(c) Total Operating Expenditures		
	(add 21(a)(i), (a)(ii) and (b))	43.35	90.18
22.	Transfers to Affiliated/Other Party	0.00	0.00
23.	Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	9000.00	13500.00
24.	Independent Expenditure (use Schedule E)	0.00	0.00
25.	Coordinated Expenditures Made by Party		
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
27.	Loans Made	0.00	0.00
28.	Refunds of Contributions To: (a) Individuals/Persons Other		
	Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees	0.00	0.00
	(such as PACs)(d) Total Contribution Refunds	0.00	0.00
	(add Lines 28(a), (b), and (c))	0.00	0.00
29.	Other Disbursements	0.00	0.00
	_		
30.	Federal Election Activity (2 U.S.C 431(20)) (a) Shared 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	0.00	0.00
	With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	9043.35	13590.18
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	2040.05	10500 10
	from Line 31)	9043.35	13590.18

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 17

III. Net Contributions/Operating Expenditures		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
	Contributions (other than loans) Line 11(d), page 3)	26500.00	26500.00	
	Contribution Refunds Line 28(d))	0.00	0.00	
	Contributions (other than loans) tract Line 34 from Line 33)	26500.00	26500.00	
	Federal Operating Expenditures Line 21(a)(i) and Line 21(b))	43.35	90.18	
	ets to Operating Expenditures Line 15, page 3)	0.00	0.00	
	Operating Expenditures tract Line 37 from Line 36)	43.35	90.18	

FE6AN026

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS Any information copied from such Reports	for each category of the Detailed Summary Page and Statements may not be sold or used by any perso	FOR LINE NUMBER: PAGE 6 / 17 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) FRIENDS OF MOUNT SINAI MEI	ng the name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) LEONARD ABESS Mailing Address 25 W FLAGLER S	ST	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MIAMI FEC ID number of contributing	State Zip Code FL 33130	Transaction ID: SA11AI.4438 Amount of Each Receipt this Period
federal political committee. Name of Employer CITY NATIONAL BANK	Occupation BANKER	2500.00 Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	
Full Name (Last, First, Middle Initial) BERNYCE ADLER Mailing Address 10101 COLLINS / #16E	AVE	Date of Receipt 0 4 2 2 2 2 0 1 0
City BAL HARBOUR FEC ID number of contributing federal political committee.	State Zip Code FL 33154	Transaction ID: SA11AI.4447 Amount of Each Receipt this Period 1000.00
Name of Employer RETIRED	Occupation RETIRED	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) MORRIS BROAD		Date of Receipt
Mailing Address 1030 HARDEE RI City	State Zip Code	0 4 2 2 2 0 1 0 Transaction ID: SA11AI.4446
CORAL GABLES	FL 33146	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer American Savings & Loan	Occupation President	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (option	nal)	4500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 17 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) FRIENDS OF MOUNT SINAI MEDIC		son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Linda Brown Zilber Mailing Address 1231 95th Street City Bay Harbour FEC ID number of contributing federal political committee. Name of Employer Retires Receipt For: Primary General Other (specify)	State Zip Code FL 33154 C Occupation Retired Aggregate Year-to-Date 1000.00	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Arlene Chaplin Mailing Address 54 La Gorce Circle City Miami Beach FEC ID number of contributing federal political committee. Name of Employer Unemployed Receipt For: Primary General Other (specify)	State Zip Code FL 33141 C Occupation Home Maker Aggregate Year-to-Date 1000.00	Date of Receipt M M M / 22 / 2010 Transaction ID: SA11AI.4443 Amount of Each Receipt this Period 1000.00 Contribution
Full Name (Last, First, Middle Initial) HARVEY CHAPLIN Mailing Address 1600 NW 163 ST. City MIAMI FEC ID number of contributing federal political committee. Name of Employer Southern Wines Receipt For: Primary General Other (specify)	State Zip Code FL 33169 C Occupation Sales Aggregate Year-to-Date 1000.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		3000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Κ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8/17 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions oslicit contributions from such committee.
NAME OF COMMITTEE (In Full) FRIENDS OF MOUNT SINAI MED	ICAL CENTER	PAC	
Full Name (Last, First, Middle Initial) PAUL CHAPLIN			Date of Receipt
Mailing Address 108 BAL BAY DR			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City BAL HARBOUR	State FL	Zip Code	Transaction ID: SA11AI.4475
FEC ID number of contributing federal political committee.	C	33154	Amount of Each Receipt this Period 1000.00
Name of Employer DENTIST	Occupation DENTIS		Contribution
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) WAYNE CHAPLIN			Date of Receipt
Mailing Address 54 LA GORCE CIR	CLE		0 4 2 2 2 2 1 0 1 0
City MIAMI BEACH	State FL	Zip Code 33141	Transaction ID: SA11AI.4445
FEC ID number of contributing federal political committee.	C	33141	Amount of Each Receipt this Period 1000.00
Name of Employer PRESIDENT/CEO	Occupation SALES	n	Contribution
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) STANLEY COHEN			Date of Receipt
Mailing Address 4842 FISHER ISLA	ND DR		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City FISHER ISLAND	State FL	Zip Code 33109	Transaction ID: SA11AI.4441
FEC ID number of contributing federal political committee.	C	33109	Amount of Each Receipt this Period
Name of Employer N/A	Occupation Retired T	n oy Manufactuer	Contribution
Receipt For: Primary General Other (specify) ▼	'	Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional	al)		3000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 17 (check only one) 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) FRIENDS OF MOUNT SINAI MEDICA	name and addi	ress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mrs. JEANETTE FINE Mailing Address 12805 BISCAYNE BAY City NORTH MIAMI FEC ID number of contributing federal political committee. Name of Employer HOUSEWIFE Receipt For: Primary General Other (specify)	State FL C Occupation HOUSEW		Date of Receipt M M M / D D / Y Y Y Y Y O 4 2 2 2 2 0 1 0 Transaction ID: SA11AI.4448 Amount of Each Receipt this Period 1000.00 Contribution
Full Name (Last, First, Middle Initial) JOEL FRIEDLAND Mailing Address 9999 COLLINS AVE #19B City BAL HARBOUR FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify)	State FL C Occupation Private In		Date of Receipt M M / D D / Y Y Y Y Y O 4 16 2010 Transaction ID: SA11AI.4442 Amount of Each Receipt this Period 1000.00 Contribution
Full Name (Last, First, Middle Initial) Mr. GARY R GERSON Mailing Address 666 71ST STREET City MIAMI BEACH FEC ID number of contributing federal political committee. Name of Employer CPA Receipt For: Primary General Other (specify)	State FL C Occupation CPA Aggregate	Zip Code 33141 Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)			3000.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 17 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or fo	information copied from such Reports and S or commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	FRIENDS OF MOUNT SINAI MEDICA	AL CENTER	PAC	
A . <u>s</u>	full Name (Last, First, Middle Initial) Samuel Jacobson			Date of Receipt
N -	Mailing Address 31 Star Island			04 23 4 2010
	Dity	State	Zip Code	Transaction ID: SA11AI.4457
-	Miami Beach	FL	33139	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		1000.00
<u>,</u>	lame of Employer acobson 5th Street, LLC	Occupatio Manager		Contribution
F	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.00	
	rull Name (Last, First, Middle Initial) Mrs. Amy K Knapp	1		Date of Receipt
N -	Mailing Address 101 W 79th Street Apt 18B			05 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Dity	State	Zip Code	Transaction ID: SA11Al.4469
-	New York	NY	33172	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		1000.00
	lame of Employer Jnited Health Care of New fork	Occupatio Presiden		Contribution
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.00	
	rull Name (Last, First, Middle Initial) RA LAMPERT	1		Date of Receipt
_	Mailing Address 4000 HOLLYWOOD E SUITE 650N			05 27 2010
	City HOLLYWOOD	State FL	Zip Code 33021	Transaction ID: SA11AI.4476
F	EC ID number of contributing ederal political committee.	C	33021	Amount of Each Receipt this Period 1000.00
<u> </u>	lame of Employer Self-Employed	Occupatio Develope	n er, Designer, Manuf. Camera	Contribution
F	Receipt For: Primary General Other (specify) ▼	, ' 	e Year-to-Date ▼ 1000.00	
SU	BTOTAL of Receipts This Page (optional)	1		3000.00
	TAL This Period (last page this line number		·	

Palmetto Bay FEC ID number of contributing federal political committee. Name of Employer Lauderdale Productions, LLC Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) ISABEL MAY Mailing Address 9999 COLLINS AVE #15A City St BAL HARBOUR FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) CANDACE RUSKIN Mailing Address 5500 COLLINS AVE	ate Zip Code upation ncipal Owner gregate Year-to-Date 1000.00	Date of Receipt Date of Receipt
Full Name (Last, First, Middle Initial) Mr. Dwight A Lauderdale Mailing Address 14043 SW 67 Place City St Palmetto Bay FI FEC ID number of contributing federal political committee. Name of Employer Lauderdale Productions, LLC Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) ISABEL MAY Mailing Address 9999 COLLINS AVE #15A City St BAL HARBOUR FI FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: Qeneral Other (specify) ▼ Full Name (Last, First, Middle Initial) Candace Ruskin Mailing Address 5500 COLLINS AVE	ate Zip Code	Transaction ID: SA11AI.4459 Amount of Each Receipt this Period Date of Receipt M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mr. Dwight A Lauderdale Mailing Address 14043 SW 67 Place City St Palmetto Bay Fl FEC ID number of contributing federal political committee. Name of Employer Lauderdale Productions, LLC Receipt For: Agg Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) ISABEL MAY Mailing Address 9999 COLLINS AVE #15A City St BAL HARBOUR FI FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: General Other (specify) ▼ Full Name (Last, First, Middle Initial) CANDACE RUSKIN Mailing Address 5500 COLLINS AVE	upation ncipal Owner pregate Year-to-Date ▼ 1000.00 ate Zip Code - 33154	Transaction ID: SA11AI.4459 Amount of Each Receipt this Period Date of Receipt M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Palmetto Bay FEC ID number of contributing federal political committee. Name of Employer Lauderdale Productions, LLC Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) ISABEL MAY Mailing Address 9999 COLLINS AVE #15A City St BAL HARBOUR FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) CANDACE RUSKIN Mailing Address 5500 COLLINS AVE	upation ncipal Owner pregate Year-to-Date ▼ 1000.00 ate Zip Code - 33154	Amount of Each Receipt this Period 1000.00 Contribution Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Lauderdale Productions, LLC Receipt For: Primary General Other (specify) Mailing Address 9999 COLLINS AVE #15A City St BAL HARBOUR FI FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: Primary General CC Receipt For: Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) CANDACE RUSKIN Mailing Address 5500 COLLINS AVE	upation ncipal Owner pregate Year-to-Date ▼ 1000.00 ate Zip Code - 33154	Date of Receipt M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
LLC Receipt For:	ate Zip Code 33154	Date of Receipt M M M 22 2 2 2 1 0 Transaction ID: SA11AI.4450 Amount of Each Receipt this Period 1000.00
ISABEL MAY Mailing Address 9999 COLLINS AVE #15A City St BAL HARBOUR FI FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) CANDACE RUSKIN Mailing Address 5500 COLLINS AVE	33154	Transaction ID: SA11AI.4450 Amount of Each Receipt this Period 1000.00
City BAL HARBOUR FILE FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) CANDACE RUSKIN Mailing Address 5500 COLLINS AVE	33154	Transaction ID: SA11AI.4450 Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) CANDACE RUSKIN Mailing Address 5500 COLLINS AVE		Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) CANDACE RUSKIN Mailing Address 5500 COLLINS AVE	unation	
Retired Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) CANDACE RUSKIN Mailing Address 5500 COLLINS AVE	unation	Contribution
Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) CANDACE RUSKIN Mailing Address 5500 COLLINS AVE	•	
CANDACE RUSKIN Mailing Address 5500 COLLINS AVE	regate Year-to-Date ▼ 1000.00	
000000000000000000000000000000000000000		Date of Receipt
#2203		05 03 YYYYY 2010
City St MIAMI BEACH FI	ate Zip Code - 33140	Transaction ID: SA11AI.4467 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	30110	1000.00
NI/A	upation usewife	Contribution
Receipt For: Primary General Other (specify) ▼	regate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)		3000.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12/17 (check only one)
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) FRIENDS OF MOUNT SINAI MEDICA			
Full Name (Last, First, Middle Initial) LLOYD RUSKIN			Date of Receipt
Mailing Address 5500 COLLINS AVE #2203			05 03 7 2010
City	State	Zip Code	Transaction ID: SA11AI.4468
MIAMI BEACH FEC ID number of contributing federal political committee.	FL C	33140	Amount of Each Receipt this Period 1000.00
Name of Employer N/A	Occupation Retired A	n utty., Former Owner Fedco	Contribution
Receipt For: Primary General Other (specify) ▼	, '	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mrs. Geraldine H Schottenstein	1		Date of Receipt
Mailing Address 10225 Collins Avenue #1001			05 12 2010
City Bal Harbour	State FL	Zip Code 33154	Transaction ID: SA11AI.4473
FEC ID number of contributing federal political committee.	C	33134	Amount of Each Receipt this Period 1000.00
Name of Employer Retired	Occupation Retired	n	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Ronald W Shane			Date of Receipt
Mailing Address 2522 Fisher Island Dri	ve		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Fisher Island	State FL	Zip Code 33109	Transaction ID: SA11Al.4471 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30100	1000.00
Name of Employer The Ronald W. Shane Center	Occupation Doctor	n	Contribution
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)			3000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 17 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) FRIENDS OF MOUNT SINAI MEDIC	Statements may not be sold or used by any persone name and address of any political committee to CAL CENTER PAC	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) ROBERT A STONE Mailing Address 2699 S BAYSHOR D SUITE 500 City MIAMI FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify)	State Zip Code FL 33133 C Occupation Certified Public Accountant Aggregate Year-to-Date 1000.00	Date of Receipt M M M / D D / Y Y Y Y Y Q Q 1 0 Transaction ID: SA11AI.4451 Amount of Each Receipt this Period 1000.00 Contribution
Full Name (Last, First, Middle Initial) Mr. James D Tate Mailing Address 12855 Biscayne Bay City North Miami FEC ID number of contributing federal political committee. Name of Employer Tate Capital Real Estate Sol Receipt For: Primary General Other (specify)	Drive State Zip Code FL 33181 C Occupation Executive Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y O 4 15 2010 Transaction ID: SA11AI.4439 Amount of Each Receipt this Period 1000.00 Contribution
Full Name (Last, First, Middle Initial) Mr. Leonard A Wien Mailing Address 925 Arthur Godfrey F Suite 205 City Miami Beach FEC ID number of contributing federal political committee. Name of Employer WFHLP Receipt For: Primary General Other (specify)	State Zip Code FL 33140 C Occupation Investor Aggregate Year-to-Date 1000.00	Date of Receipt M M M 23 2010 Transaction ID: SA11AI.4461 Amount of Each Receipt this Period 1000.00 Contribution
SUBTOTAL of Receipts This Page (optional)		3000.00

A.

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 14/17 Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FRIENDS OF MOUNT SINAI MEDICAL CENTER PAC Full Name (Last, First, Middle Initial) LOUIS WOLFSON Date of Receipt Mailing Address 9595 JOURNEY'S END LANE 0 4 22 2010 City State Zip Code Transaction ID: SA11AI.4452 **CORAL GABLES** FL 33156 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Contribution Name of Employer N/A Occupation Retired industrialists, thoroughbred h Receipt For: Aggregate Year-to-Date General Primary 1000.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	1000.00
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