PAGE 1 / 78

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

I OKW 3X	For Other Than An Au	thorized Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, typover the lines.	
, ,	ANESTHESIA ASSOC		AL ACTION COMMITTEE
<u> </u>			
ADDRESS (number and stree	7490 NEW TECHNOLOGY	/ WAY	
Check if different than previously reported. (ACC)	FREDERICK		MD 21703 -
2. FEC IDENTIFICATIO	N NUMBER ▼ C	TY▲	STATE ▲ ZIP CODE ▲
C C00416305		IS THIS REPORT X NEW (N)	OR AMENDED (A)
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports:	Report Due On:	b 20 (M2) May 2	O (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only) Sep 20 (M9) Pec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Repo	ort (Q1) (c) 12-Day PRE-Election Report for the:	Primary (12P) Convention (12C)	(M7) Oct 20 (M10) Jan 31 (YE) General (12G) Runoff (12R) Special (12S)
January 31 Year-End Repo	Flora	ion on	in the State of
July 31 Mid-Ye Report (Non-e Year Only) (M	POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Re (TER)		ion on	in the State of
5. Covering Period	11 29 2016	through	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examine Type or Print Name of Trea	ed this Report and to the best of Roth, Jeremy, , Dr., asurer	of my knowledge and belief	it is true, correct and complete.
Signature of Treasurer	Roth, Jeremy, , Dr.,	[Electronically Filed	7 Date 01 30 2017
NOTE: Submission of false,	erroneous, or incomplete informati	on may subject the person si	gning this Report to the penalties of 52 U.S.C. § 30109
Office Use Only			FEC FORM 3X Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE

Report Covering the Period: From:		0: 12 31 2016
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
S. (a) Cash on Hand January 1, 2016		109334.77
(b) Cash on Hand at Beginning of Reporting Period	97677.23	
(c) Total Receipts (from Line 19)	10600.00	59650.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	108277.23	168984.77
7. Total Disbursements (from Line 31)	14333.33	75040.87
3. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	93943.90	93943.90
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 multion	candidate committee. (see FEC FORM 1M)	
	For further information contact:	
	Federal Election Commission	

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)

Write or Type Committee Name

FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE

R	eport Covering the Period: From:		12 31 2016
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees		
	(i) Itemized (use Schedule A)	10450.00	, 39100.00
	(ii) Unitemized	150.00	20550.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	10600.00	59650.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	10600.00	59650.00
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
17	to Federal Candidates and Other Political Committees	0.00	0.00
	Other Federal Receipts (Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds	0.00	0.00
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	10600.00	59650.00
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	10600.00	59650.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

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)		5415.144. 1541 to 5416
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	1 1 1 1 1 1 1 1 1	
Expenditures	0.00	9344.40
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	0.00	9344.40
Transfers to Affiliated/Other Party		
Contributions to	0.00	0.00
Federal Candidates/Committees and Other Political Committees	0.00	10500.00
Independent Expenditures (use Schedule E)	0.00	0.00
Coordinated Party Expenditures (52 U.S.C. § 30116(d))	4 4	
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00
That I office Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))	0.00	0.00
Other Disbursements (Including		
Non-Federal Donations)	14333.33	55196.47
Federal Election Activity (52 U.S.C. § 30101(2) (a) Allocated Federal Election Activity (from Schedule H6)	20))	
(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	45 45 45
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	14333.33	75040.87
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	41000 00	
nom Enic Oij	14333.33	75040.87

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

rsements 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)	10600.00	59650.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10600.00	59650.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	9344.40
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	9344.40

						PAGE	6	OF	78	
FOR LINE NUMBER: (check only one) X 11a										
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or for commercial purposes, other than using			e to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHI	ESIA ASSOC	CIATES LLC POLITIC	AL ACTION COMMITTEE				
Full Name of Individual (Last, First, Middle Ajrawat, Satinder, , , Mailing Address 9905 Potomac Manors Dri	ve	Zip Code	Date of Receipt 12 23 2016 Transaction ID : SA11AI.10916				
Potomac FEC ID number of contributing federal political committee.	C	20854	Amount of Each Receipt this Period 50.00				
Name of Employer (for Individual) First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	Physic	ear-to-Date ▼	Payroll deduction				
Full Name of Individual (Last, First, Middle Ajrawat, Satinder, , , Mailing Address 9905 Potomac Manors Driver	Date of Receipt 12 30 2016						
City Potomac FEC ID number of contributing federal political committee.	State MD	Zip Code 20854	Transaction ID : SA11AI.11016 Amount of Each Receipt this Period 50.00				
Name of Employer (for Individual) First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	First Colonies Anesthesia Physician Receipt For: Primary General Aggregate Year-to-Date ▼						
Full Name of Individual (Last, First, Middle Azran, Marc, , , Mailing Address 800 Hillsboro Drive City Silver Spring FEC ID number of contributing federal political committee. Name of Employer (for Individual) First Colonies Anesthesia Receipt For: Primary General Other (specify)	State MD C	Zip Code 20902	Date of Receipt 12 23 2016 Transaction ID: SA11AI.10881 Amount of Each Receipt this Period 50.00 Memo Item Payroll deduction				
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numb			150.00				

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Any information copied from such Reports and or for commercial purposes, other than using the					
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES	LLC POLITICAL	ACTION COMMITTEE		
Full Name of Individual (Last, First, Middle In Azran, Marc, , , Mailing Address 800 Hillsboro Drive	nitial) or Full Organization N	Name	Date of Receipt		
City	Ctoto Zin Coo	lo.	12 30 2016		
City Silver Spring	State Zip Code MD 20902		Transaction ID : SA11AI.10981		
FEC ID number of contributing federal political committee.	C 20002		Amount of Each Receipt this Period 50.00		
Name of Employer (for Individual)	Occupation (for I	ndividual)	Memo Item		
First Colonies Anesthesia	Physician		Payroll deduction		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	600.00			
Full Name of Individual (Last, First, Middle In Barkinskiy, Maksim, , , Mailing Address 10021 Dickens Avenue	Name	Date of Receipt			
		12 23 2016			
City	· ·				
Bethesda	MD 20814		Transaction ID : SA11AI.10873 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		50.00		
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Physician	Individual)	Memo Item Payroll deduction		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	550.00			
Full Name of Individual (Last, First, Middle In Barkinskiy, Maksim, , ,	nitial) or Full Organization I	Name	Date of Receipt		
Mailing Address 10021 Dickens Avenue			12 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Bethesda	State Zip Coo MD 20814	le	Transaction ID : SA11AI.10973		
-	20814		Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		50.00		
Name of Employer (for Individual)	Occupation (for I	ndividual)	Memo Item		
First Colonies Anesthesia	Physician		Payroll deduction		
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date	600.00			
SUBTOTAL of Receipts This Page (optional)	<u> </u>		150.00		
TOTAL This Period (last page this line number	only)				

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\rangle	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA	A ASSO	CIATES LLC POLITICA	L ACTION COMMITTEE					
١.	Full Name of Individual (Last, First, Middle Initia Beck, Marc, , , Mailing Address 16 Norris Run Court	al) or Full Or	ganization Name	Date of Receipt					
	City	State	Zip Code	12 23 2016 Transaction ID : SA11AI.10896					
	Reisterstown	MD	21136	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		50.00					
	Name of Employer (for Individual)		pation (for Individual)	Memo Item					
	First Colonies Anesthesia	Phys	sician	Payroll deduction					
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 550.00						
3.	Full Name of Individual (Last, First, Middle Initia Beck, Marc, , , Mailing Address 16 Norris Run Court	Date of Receipt							
				12 30 2016					
	City	State	Zip Code	Transaction ID : SA11AI.10996					
	Reisterstown	MD	21136	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		50.00					
	Name of Employer (for Individual) First Colonies Anesthesia		upation (for Individual) sician	Memo Item Payroll deduction					
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 600.00						
).	Full Name of Individual (Last, First, Middle Initia Briggs, Jeffrey, , ,	al) or Full Or	rganization Name	Date of Receipt					
	Mailing Address 14952 Finegan Farm Rd			12 23 2016					
	City	State MD	Zip Code	Transaction ID : SA11AI.10854					
	Germantown	IVID	20874	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		50.00					
	Name of Employer (for Individual) First Colonies Anesthesia	Occu Phys	ipation (for Individual) ician	Memo Item Payroll deduction					
	Receipt For:	Aggregate `	Year-to-Date ▼						
	Primary General Other (specify)		550.00						
s	UBTOTAL of Receipts This Page (optional)		>	150.00					
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Primary

Other (specify)

General

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	9	OF	78		
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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Briggs, Jeffrey, , , Date of Receipt Mailing Address 14952 Finegan Farm Rd 2016 City Zip Code State Transaction ID: SA11AI.10954 MD Germantown 20874 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Buckley, Christopher, , , Date of Receipt Mailing Address 49 Boone Trail 2016 City State Zip Code Transaction ID: SA11AI.10930 MD Severna Park 21146 Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 450.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Buckley, Christopher, , , Date of Receipt Mailing Address 49 Boone Trail 30 2016 City Zip Code State Transaction ID: SA11AI.11030 MD Severna Park 21146 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼

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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE				
Full Name of Individual (Last, First, Middle In Bunker, John, , , Mailing Address 15229 National Pike	itial) or Full Organization Name	Date of Receipt				
City	State Zip Code	12 23 2016 Transaction ID : SA11AI.10933				
Hagerstown FEC ID number of contributing federal political committee.	MD 21740	Amount of Each Receipt this Period 50.00				
Name of Employer (for Individual) First Colonies Anesthesia Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation (for Individual) Physician Aggregate Year-to-Date ▼ 550.00	Memo Item Payroll deduction				
Full Name of Individual (Last, First, Middle In Bunker, John, , , Mailing Address 15229 National Pike	itial) or Full Organization Name	Date of Receipt				
City Hagerstown FEC ID number of contributing federal political committee. Name of Employer (for Individual) First Colonies Anesthesia	State Zip Code 21740 C Occupation (for Individual) Physician	Transaction ID : SA11AI.11033 Amount of Each Receipt this Period 50.00 Memo Item Payroll deduction				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00					
Full Name of Individual (Last, First, Middle In Cappuccino, Rachel, , , Mailing Address 2811 Sommersby Rd. City Mount Airy FEC ID number of contributing federal political committee. Name of Employer (for Individual) First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code MD 21771 C Occupation (for Individual) Physician Aggregate Year-to-Date 275.00	Date of Receipt 12 23 2016 Transaction ID: SA11AI.10926 Amount of Each Receipt this Period 25.00 Memo Item Payroll deduction				
SUBTOTAL of Receipts This Page (optional)	>	125.00				
TOTAL This Period (last page this line number	only)					

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Any information copied from such Reports and S or for commercial purposes, other than using the						
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE				
Full Name of Individual (Last, First, Middle Ini Cappuccino, Rachel, , , Mailing Address 2811 Sommersby Rd.	tial) or Full Organization Name	Date of Receipt				
City	State Zip Code	12 30 2016 Transaction ID : SA11AI.11026				
Mount Airy	MD 21771	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	25.00				
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction				
Receipt For: Primary General Other (specify) Other	Aggregate Year-to-Date ▼ 300.00	r ayroli deduction				
Full Name of Individual (Last, First, Middle Ini Charney, Donald, , , Mailing Address 3707 Meadowhill Court	tial) or Full Organization Name	Date of Receipt				
City Phoenix FEC ID number of contributing	State Zip Code MD 21131	12 23 2016 Transaction ID : SA11AI.10897 Amount of Each Receipt this Period				
federal political committee. Name of Employer (for Individual)	Occupation (for Individual)	50.00 Memo Item				
First Colonies Anesthesia Receipt For: □ Primary □ General □ Other (specify) ▼	Physician Aggregate Year-to-Date ▼ 550.00	Payroll deduction				
Full Name of Individual (Last, First, Middle Ini Charney, Donald, , ,	tial) or Full Organization Name	Date of Receipt				
Mailing Address 3707 Meadowhill Court City	State Zip Code	12 30 2016 Transaction ID : SA11AI.10997				
Phoenix	MD 21131	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer (for Individual) First Colonies Anesthesia Receipt For:	Occupation (for Individual) Physician	Memo Item Payroll deduction				
Primary General Other (specify)	Aggregate Year-to-Date ▼ 600.00					
SUBTOTAL of Receipts This Page (optional)		125.00				
TOTAL This Period (last page this line number	only)					

Bethesda

FEC ID number of contributing

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:						PAGE	 12	OF	78
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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Chary, Satyam, , , Date of Receipt Mailing Address 9 Alterwood Lane 2016 City State Zip Code Transaction ID: SA11AI.10898 MD Owings Mill 21117 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Chary, Satyam, , , Date of Receipt Mailing Address 9 Alterwood Lane 2016 City State Zip Code Transaction ID: SA11AI.10998 Owings Mill MD 21117 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 600.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Chen, Edward, , , Date of Receipt Mailing Address 10209 Fleming Avenue 23 2016 City State Zip Code Transaction ID: SA11AI.10855

federal political committee.	C	30.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number	per only)	1171171171
		FEC Schedule A (Form 3X) Rev. 06/2

20814

MD

50.00

Amount of Each Receipt this Period

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	ny information copied from such Reports and St for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	A ASSOC	CIATES LLC POLITICA	AL ACTION COMMITTEE
Α.	Full Name of Individual (Last, First, Middle Init Chen, Edward, , , Mailing Address 10209 Fleming Avenue	ial) or Full Org	ganization Name	Date of Receipt
	City	State	Zip Code	12 30 2016 Transaction ID : SA11AI.10955
	Bethesda	MD	20814	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual)	Occup	pation (for Individual)	Memo Item
	First Colonies Anesthesia	Physi	cian	Payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 600.00	
В.	Full Name of Individual (Last, First, Middle Init Chester, William, , , Mailing Address 1906 Thurston Rd.	ial) or Full Org	ganization Name	Date of Receipt
	City	State	Zip Code	12 23 2016
	Dickerson	MD	20842	Transaction ID : SA11AI.10856 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer (for Individual) First Colonies Anesthesia	Occup Physi	oation (for Individual) ician	Memo Item Payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 550.00	
	Full Name of Individual (Last, First, Middle Init Chester, William, , ,	ial) or Full Org	ganization Name	Date of Receipt
	Mailing Address 1906 Thurston Rd.			12 30 2016
	City Dickerson	State MD	Zip Code 20842	Transaction ID : SA11AI.10956 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) First Colonies Anesthesia	Occup Physic	oation (for Individual) cian	Memo Item Payroll deduction
	Receipt For: Primary General Other (specify)			
H	SUBTOTAL of Receipts This Page (optional)		<u> </u>	150.00
1 '	OTAL This Period (last page this line number of	л пу <i>)</i>	·····	

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or for commercial purposes, other than using						
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOC	CIATES LLC POLITIC	AL ACTION COMMITTEE			
Full Name of Individual (Last, First, Middle Chien, Derek, , , Mailing Address 13070 Twelve Hills Road	Initial) or Full Org	ganization Name	Date of Receipt 12 23 2016			
City Clarksville	State MD	Zip Code 21029	Transaction ID : SA11AI.10857 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		50.00			
Name of Employer (for Individual) First Colonies Anesthesia Receipt For: □ Primary □ General Other (specify) ▼	First Colonies Anesthesia Physician Receipt For: Primary General Aggregate Year-to-Date ▼					
Full Name of Individual (Last, First, Middle B. Chien, Derek, , , Mailing Address 13070 Twelve Hills Road	Initial) or Full Org	ganization Name	Date of Receipt 12 30 2016			
City Clarksville	State MD	Zip Code 21029	Transaction ID : SA11AI.10957 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		50.00			
Name of Employer (for Individual) First Colonies Anesthesia	Occu Phys	pation (for Individual) sician	Memo Item Payroll deduction			
Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 400.00				
Full Name of Individual (Last, First, Middle C. Ciolino, Charles, , ,	Initial) or Full Org	ganization Name	Date of Receipt			
Mailing Address 11008 South Glen Road			12 23 Y 2016			
City Potomac	State MD	Zip Code 20854	Transaction ID : SA11AI.10874 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		50.00			
Name of Employer (for Individual) First Colonies Anesthesia Receipt For:	Physi	pation (for Individual) ician ⁄ear-to-Date ▼	Memo Item Payroll deduction			
Other (specify) General						
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numb		·	150.00			

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Ciolino, Charles, , , Date of Receipt Mailing Address 11008 South Glen Road 2016 City State Zip Code Transaction ID: SA11AI.10974 MD Potomac 20854 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Coore, Lincoln, , , Date of Receipt Mailing Address 11546 Fox River Drive 2016 City State Zip Code Transaction ID: SA11AI.10906 Ellicott City MD 21042 Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General

Other (specify) ▼		825.00	
Full Name of Individual (Last, First, Middle In Coore, Lincoln, , ,	itial) or Full O	rganization Name	Date of Receipt
Mailing Address 11546 Fox River Drive			12 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID : SA11AI.11006
Ellicott City	MD	21042	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		75.00
Name of Employer (for Individual)	Occi	pation (for Individual)	Memo Item
First Colonies Anesthesia	Phys	ician	Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 900.00	
IDTOTAL of Descripto This Descriptoral			200.00

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Coursey, Melvin, , , Date of Receipt Mailing Address 18720 Shremor Drive 2016 City Zip Code State Transaction ID: SA11AI.10858 MD Derwood 20855 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Coursey, Melvin, , , Date of Receipt Mailing Address 18720 Shremor Drive 2016 City State Zip Code Transaction ID: SA11AI.10958 MD Derwood 20855 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 600.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Cutler, Carlo, , , Date of Receipt Mailing Address 10909 Sasha Boulevard 23 2016 City Zip Code State Transaction ID: SA11AI.10917 MD Hagerstown 21742 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Cutler, Carlo, , , Date of Receipt Mailing Address 10909 Sasha Boulevard 2016 City State Zip Code Transaction ID: SA11AI.11017 MD Hagerstown 21742 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. DeLoach, Lauren, , , Date of Receipt Mailing Address 15114 Pepperridge Drive 12 2016 City State Zip Code Transaction ID: SA11AI.10923 MD **Bowie** 20721 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 550,00 Other (specify)

		4 4	
Full Name of Individual (Last, First, Middle In DeLoach, Lauren, , ,	anization Name	Date of Receipt	
Mailing Address 15114 Pepperridge Drive	12 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State	Zip Code	Transaction ID : SA11AI.11023
Bowie	MD	20721	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
First Colonies Anesthesia	Physici	an	Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate Ye	ar-to-Date ▼ 600.00	
NIDTOTAL of Bassista This Bass (autisms)			125.00

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Name of Employer (for Individual)

General

First Colonies Anesthesia

Other (specify)

Receipt For:

Primary

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Dono, Patrick, , , Date of Receipt Mailing Address 17136 Wesley Chapel Road 2016 City Zip Code State Transaction ID: SA11AI.10899 MD Monkton 21111 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Dono, Patrick, , , Date of Receipt Mailing Address 17136 Wesley Chapel Road 2016 City State Zip Code Transaction ID: SA11AI.10999 MD Monkton 21111 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Emamhosseini, Ali, , , Date of Receipt Mailing Address 47788 Saulty Drive 23 2016 City State Zip Code Transaction ID: SA11AI.10880 VASterling 20165 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee.

Occupation (for Individual)

550.00

Physician

Aggregate Year-to-Date ▼

Memo Item

Payroll deduction

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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCI	IATES LLC POLITIC	CAL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle I Emamhosseini, Ali, , , Mailing Address 47788 Saulty Drive	nitial) or Full Orga	nization Name	Date of Receipt
C:h	Otata	Zin Code	12 30 2016
City Sterling	State VA	Zip Code 20165	Transaction ID : SA11AI.10980
FEC ID number of contributing federal political committee.	C	20100	Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupa Physici	ition (for Individual) an	Memo Item Payroll deduction
Receipt For: Primary General Other (specify) ▼]		
Full Name of Individual (Last, First, Middle In Evans, Richard, , , Mailing Address 6436 West Langley Lane	nitial) or Full Orga	nization Name	Date of Receipt
City McLean	State VA	Zip Code 22101	12 23 2016 Transaction ID : SA11AI.10878 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupa Physici	ation (for Individual) ian	Memo Item Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 550.00]
Full Name of Individual (Last, First, Middle In Evans, Richard, , ,	nitial) or Full Orga	nization Name	Date of Receipt
Mailing Address 6436 West Langley Lane	State	Zin Codo	12 30 2016
City McLean	State VA	Zip Code 22101	Transaction ID : SA11AI.10978 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupa Physicia	ition (for Individual) an	Memo Item Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate Yea	ar-to-Date ▼ 600.00]
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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	7	45	
Full Name of Individual (Last, First, Middle I Gabrielli, Tamara, , ,	Date of Receipt		
Mailing Address 504 Reserve Champion Driv	12 23 2016		
City	State	Zip Code	Transaction ID : SA11AI.10935
Rockville	MD	20850	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer (for Individual)	Occup	ation (for Individual)	Memo Item
First Colonies Anesthesia	Physic	,	Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optional)			100.00

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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE					
Full Name of Individual (Last, First, Middle Ini Gabrielli, Tamara, , , Mailing Address 504 Reserve Champion Drive	<i>,</i>	Date of Receipt					
City	State Zip Code	12 30 2016 Transaction ID : SA11AI.11035					
Rockville FEC ID number of contributing	MD 20850	Amount of Each Receipt this Period 50.00					
Rame of Employer (for Individual)	Occupation (for Individual)	Memo Item					
First Colonies Anesthesia Receipt For:	Physician Aggregate Year-to-Date ▼	Payroll deduction					
Primary General Other (specify) ▼							
Full Name of Individual (Last, First, Middle Ini Gambon, Thomas, , , Mailing Address 7700 Charleston Drive	tial) or Full Organization Name	Date of Receipt					
City Bethesda	State Zip Code MD 20817	12 23 2016 Transaction ID : SA11AI.10945 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С	50.00					
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00						
Full Name of Individual (Last, First, Middle Ini	tial) or Full Organization Name	Date of Receipt					
Mailing Address 7700 Charleston Drive		12 30 2016					
City Bethesda	State Zip Code 20817	Transaction ID : SA11AI.11045 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	50.00					
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction					
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 600.00						
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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Full Name of Individual (Last, First, Middle In Hairston-Jones, Shelly, , ,	itial) or Full Org	anization Name	Date of Receipt
Mailing Address 12312 Highstakes Drive	12 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State	Zip Code	Transaction ID : SA11AI.11029
Reisterstown	MD	21136	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual)	Occup	ation (for Individual)	Memo Item
First Colonies Anesthesia	Physic	ian	Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 600.00	

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hanna, John, , , Date of Receipt Mailing Address 9310 Leigh Mill Court 2016 City Zip Code State Transaction ID: SA11AI.10887 VA **Great Falls** 22066 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Hanna, John, , , Date of Receipt Mailing Address 9310 Leigh Mill Court 2016 City State Zip Code Transaction ID: SA11AI.10987 **Great Falls** VA 22066 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 600.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Hessinger, Glen, , , Date of Receipt Mailing Address 8101 Ruxton Crossing Road 23 2016 City Zip Code State Transaction ID: SA11AI.10902 MD Towson 21204 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE	
Full Name of Individual (Last, First, Middle I Hessinger, Glen, , , Mailing Address 8101 Ruxton Crossing Road		Date of Receipt	
City	State Zip Code	12 30 2016 Transaction ID : SA11Al.11002	
Towson	MD 21204	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С	50.00	
Name of Employer (for Individual) First Colonies Anesthesia Receipt For:	Occupation (for Individual) Physician Aggregate Year-to-Date ▼	Memo Item Payroll deduction	
Primary General Other (specify) ▼	600.00		
Full Name of Individual (Last, First, Middle I Hogarth, Jean-Max, , , Mailing Address 1614 Randallwood Ct	nitial) or Full Organization Name	Date of Receipt	
City	State Zip Code	12 23 2016 Transaction ID : SA11AI.10903	
Jarretsville	MD 21084	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	50.00	
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00		
Full Name of Individual (Last, First, Middle I Hogarth, Jean-Max, , ,	nitial) or Full Organization Name	Date of Receipt	
Mailing Address 1614 Randallwood Ct		12 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City Jarretsville	State Zip Code MD 21084	Transaction ID : SA11AI.11003 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	50.00	
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction	
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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE			
Full Name of Individual (Last, First, Middle In Holt, Nashwa, , , Mailing Address 110 Thrift Street	itial) or Full Organization Name	Date of Receipt			
City Gaithersburg	State Zip Code MD 20878	Transaction ID : SA11AI.10884			
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 50.00			
Name of Employer (for Individual) First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	Occupation (for Individual) Physician Aggregate Year-to-Date ▼ 550.00	Memo Item Payroll deduction			
Full Name of Individual (Last, First, Middle In Holt, Nashwa, , , Mailing Address 110 Thrift Street City Gaithersburg FEC ID number of contributing federal political committee. Name of Employer (for Individual) First Colonies Anesthesia	State Zip Code MD 20878 C Occupation (for Individual)	Date of Receipt 12 30 2016 Transaction ID : SA11AI.10984 Amount of Each Receipt this Period Memo Item Payroll deduction			
Receipt For: Primary General Other (specify) ▼	Physician Aggregate Year-to-Date ▼ 600,00	Payroll deduction			
Full Name of Individual (Last, First, Middle In Hong, Sung-Soo, , , Mailing Address 100 Croydon Road City Baltimore FEC ID number of contributing federal political committee. Name of Employer (for Individual) First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code MD 21212 C Occupation (for Individual) Physician Aggregate Year-to-Date 550.00	Date of Receipt 12 23 2016 Transaction ID : SA11AI.10904 Amount of Each Receipt this Period 50.00 Memo Item Payroll deduction			
SUBTOTAL of Receipts This Page (optional)	>	150.00			
TOTAL This Period (last page this line number	only)				

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hong, Sung-Soo, , , Date of Receipt Mailing Address 100 Croydon Road 2016 City Zip Code State Transaction ID: SA11AI.11004 MD **Baltimore** 21212 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Horn, Michael, , , Date of Receipt Mailing Address 500 Stonington Road 2016 City State Zip Code Transaction ID: SA11AI.10918 Silver Spring MD 20902 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 550.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Horn, Michael, , , Date of Receipt Mailing Address 500 Stonington Road 30 2016 City State Zip Code Transaction ID: SA11AI.11018 MD Silver Spring 20902 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify)

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,	•	,	, ,	, ,	for the purpose of soliciting contributions solicit contributions from such committee.		
NAME OF COMMITTEE (IN FU FIRST COLONIES A		SSOC	IATES LLC POLIT	TCAL	ACTION COMMITTEE		
Full Name of Individual (Last, Hough, Stuart, , , Mailing Address 9110 Travene		Full Orga	anization Name		Date of Receipt		
City	Sta		Zip Code		12 23 2016 Transaction ID : SA11AI.10859		
Frederick	ME)	21704		Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	С			75.00		
Name of Employer (for Individu	ual)	Occupa	ation (for Individual)		Memo Item		
First Colonies Anesthesia		Physic	ian		Payroll deduction		
Receipt For: Primary Genera Other (specify) ▼		egate Ye	ar-to-Date ▼ 825.00				
Full Name of Individual (Last, Hough, Stuart, , , Mailing Address 9110 Travene		anization Name		Date of Receipt			
					12 30 2016		
City	Sta		Zip Code		Transaction ID : SA11AI.10959		
Frederick	M)	21704		Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	Occupation (for Individual) Physician			75.00		
Name of Employer (for Individual First Colonies Anesthesia	ual)				Memo Item Payroll deduction		
Receipt For: Primary Genera Other (specify) ▼		egate Ye	ar-to-Date ▼ 900.00				
Full Name of Individual (Last, Hsiao, Leo, , ,	First, Middle Initial) or I	Full Orga	anization Name		Date of Receipt		
Mailing Address 115 Meridian	Lane				12 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	Sta		Zip Code		Transaction ID : SA11AI.10912		
Towson	M	ט	21286		Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C				50.00		
Name of Employer (for Individu First Colonies Anesthesia	ual)	Occupa Physici	ation (for Individual) an		Memo Item Payroll deduction		
Receipt For:		egate Ye	ar-to-Date ▼				
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Primary

C.

General

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hsiao, Leo, , , Date of Receipt Mailing Address 115 Meridian Lane 2016 City State Zip Code Transaction ID: SA11AI.11012 MD Towson 21286 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Hwang, David, , , Date of Receipt Mailing Address 9542 Newbridge Drive 2016 City State Zip Code Transaction ID: SA11AI.10953 MD 20854 Potomac Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For:

Other (specify) ▼		250.00	
Full Name of Individual (Last, First, Middle In Isaac, Sean, , , Mailing Address 7 Starlight Farm Drive	itial) or Full Orga	anization Name	Date of Receipt M = M
City	State	Zip Code	Transaction ID : SA11AI.10911
Phoenix	MD	21131	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
First Colonies Anesthesia	Physic	ian	Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 550.00	
LIDTOTAL of Descripts This Dame (authors)			350.00

Aggregate Year-to-Date ▼

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Isaac, Sean, , , Date of Receipt Mailing Address 7 Starlight Farm Drive 2016 City Zip Code State Transaction ID: SA11AI.11011 MD 21131 Phoenix Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Jagannath, Supriya, , , Date of Receipt Mailing Address 4109 Celtic Way 2016 City State Zip Code Transaction ID: SA11AI.10948 MD Frederick 21704 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 275.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Jagannath, Supriya, , , Date of Receipt Mailing Address 4109 Celtic Way 30 2016 City State Zip Code Transaction ID: SA11AI.11048 MD Frederick 21704 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 100.00 SUBTOTAL of Receipts This Page (optional).....

Receipt For:

Primary

General

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

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Johnson, David, , , Date of Receipt Mailing Address 5506 Bootjack Drive 2016 City State Zip Code Transaction ID: SA11AI.10937 MD Frederick 21702 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Johnson, David, , , Date of Receipt Mailing Address 5506 Bootjack Drive 2016 City State Zip Code Transaction ID: SA11AI.11037 Frederick MD 21702 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician

Other (specify) ▼	4	600.00	
Full Name of Individual (Last, First, Middle Ir Johnson, Laron, , ,	nitial) or Full Org	ganization Name	Date of Receipt
Mailing Address 6414 Tilden Lane			12 23 2016
City	State	Zip Code	Transaction ID : SA11AI.10879
Rockville	MD	20852	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual)	Occup	pation (for Individual)	Memo Item
First Colonies Anesthesia	Physic	cian	Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate Y	ear-to-Date ▼ 350.00	
IDTOTAL of Descripto This Descriptoral			150.00

Aggregate Year-to-Date ▼

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

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Johnson, Laron, , , Date of Receipt Mailing Address 6414 Tilden Lane 2016 City Zip Code State Transaction ID: SA11AI.10979 MD Rockville 20852 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Kamdar, Faisal, , , Date of Receipt Mailing Address 1626 Irvin St. 2016 City State Zip Code Transaction ID: SA11AI.10875 VA Vienna 22182 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Kamdar, Faisal, , , Date of Receipt Mailing Address 1626 Irvin St. 30 2016 City Zip Code State Transaction ID: SA11AI.10975 VAVienna 22182 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify)

150.00

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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name of Individual (Last, First, Middle In Kaufman, James, , , Mailing Address 7514 Arrowood Road	itial) or Full Organization Name	Date of Receipt
City Bethesda	State Zip Code MD 20817	12 23 2016 Transaction ID : SA11AI.10888 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia Receipt For: □ Primary □ General Other (specify) ▼	Occupation (for Individual) Physician Aggregate Year-to-Date ▼ 550.00	Memo Item Payroll deduction
Full Name of Individual (Last, First, Middle In Kaufman, James, , , Mailing Address 7514 Arrowood Road City Bethesda FEC ID number of contributing federal political committee. Name of Employer (for Individual) First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code 20817 C Occupation (for Individual) Physician Aggregate Year-to-Date 600.00	Date of Receipt 12 30 2016 Transaction ID : SA11AI.10988 Amount of Each Receipt this Period 50.00 Memo Item Payroll deduction
Full Name of Individual (Last, First, Middle In Kenol, Cynthia, , , Mailing Address 6579 Prestwick Drive City Highland FEC ID number of contributing federal political committee. Name of Employer (for Individual) First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code MD 20777 C Occupation (for Individual) Physician Aggregate Year-to-Date 700.00	Date of Receipt 12 23 2016 Transaction ID: SA11AI.10860 Amount of Each Receipt this Period 100.00 Memo Item Payroll deduction
SUBTOTAL of Receipts This Page (optional)	<u> </u>	200.00
TOTAL This Period (last page this line number	only)	4 4

Name of Employer (for Individual)

General

First Colonies Anesthesia

Other (specify)

Receipt For:

Primary

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

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kenol, Cynthia, , , Date of Receipt Mailing Address 6579 Prestwick Drive 2016 City Zip Code State Transaction ID: SA11AI.10960 MD Highland 20777 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Kim, HaengShik, , , Date of Receipt Mailing Address 11429 Twining Lane 2016 City State Zip Code Transaction ID: SA11AI.10876 MD 20854 Potomac Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 550.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Kim, HaengShik, , , Date of Receipt Mailing Address 11429 Twining Lane 30 2016 City State Zip Code Transaction ID: SA11AI.10976 MD Potomac 20854 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee.

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600.00

Occupation (for Individual)

Physician

Aggregate Year-to-Date ▼

Memo Item

Payroll deduction

Receipt For:

Primary

Other (specify)

General

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kim, James, , , Date of Receipt Mailing Address 7115 Kings Point Way 2016 City Zip Code State Transaction ID: SA11AI.10883 MD Columbia 21046 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Kim, James, , , Date of Receipt Mailing Address 7115 Kings Point Way 2016 City State Zip Code Transaction ID: SA11AI.10983 MD Columbia 21046 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 600.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Ko, Richard, , , Date of Receipt Mailing Address 6795 Stockwell Manor Dr. 23 2016 City Zip Code State Transaction ID: SA11AI.10861 VAFalls Church 22043 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician

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550.00

Aggregate Year-to-Date ▼

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Ko, Richard, , , Date of Receipt Mailing Address 6795 Stockwell Manor Dr. 2016 City Zip Code State Transaction ID: SA11AI.10961 VA Falls Church 22043 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Lee, Won, , , Date of Receipt Mailing Address 6812 Koandah Gardens 2016 City State Zip Code Transaction ID: SA11AI.10944 MD Highland 20777 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 550.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Lee, Won, , , Date of Receipt Mailing Address 6812 Koandah Gardens 30 2016 City State Zip Code Transaction ID: SA11AI.11044 MD Highland 20777 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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7

FEC ID number of contributing

Name of Employer (for Individual)

General

federal political committee.

First Colonies Anesthesia

Other (specify)

Receipt For:

Primary

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

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Lennox, William, , , Date of Receipt Mailing Address 3706A Meadowhill Court 2016 City Zip Code State Transaction ID: SA11AI.10913 MD Phoenix 21131 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Lennox, William, , , Date of Receipt Mailing Address 3706A Meadowhill Court 2016 City State Zip Code Transaction ID: SA11AI.11013 MD Phoenix 21131 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 800.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Litecky, Raymond, , , Date of Receipt Mailing Address 2710 Route 32 23 2016 City Zip Code State Transaction ID: SA11AI.10920 MD West Friendship 21794 Amount of Each Receipt this Period

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TOTAL This Period (last page this line number only)		_	_	7	_	_	7	_		-	_	

250.00

Occupation (for Individual)

Physician

Aggregate Year-to-Date ▼

C

50.00

Memo Item

Payroll deduction

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

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\rangle	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA	A ASSOCIATES	S LLC POLITICAL	ACTION COMMITTEE
Α.	Full Name of Individual (Last, First, Middle Initia Litecky, Raymond, , , Mailing Address 2710 Route 32	l) or Full Organization	n Name	Date of Receipt
	City	State Zip C		12 30 2016 Transaction ID : SA11AI.11020
	West Friendship	MD 2179	94	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual)	Occupation (fo	r Individual)	Memo Item
	First Colonies Anesthesia	Physician		Payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Da	300.00	
В.	Full Name of Individual (Last, First, Middle Initial Lockhart, Zakiya, , , Mailing Address 8750 Polished Pebble Way	l) or Full Organization	n Name	Date of Receipt
	Walling Address 8750 Polished Pebble Way			12 23 2016
	City	State Zip C	ode	Transaction ID : SA11AI.10885
	Laurel	MD 2072	23	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		75.00
	Name of Employer (for Individual) First Colonies Anesthesia	Occupation (fo	or Individual)	Memo Item Payroll deduction
	Receipt For:	Aggregate Year-to-Da	ate ▼	
	Primary General Other (specify) ▼	4	825.00	
c.	Full Name of Individual (Last, First, Middle Initial Lockhart, Zakiya, , ,	l) or Full Organization	n Name	Date of Receipt
	Mailing Address 8750 Polished Pebble Way			12 30 7 2016
	City Laurel	State Zip C MD 2072		Transaction ID : SA11AI.10985
	FEC ID number of contributing federal political committee.	C 2012		Amount of Each Receipt this Period 75.00
	Name of Employer (for Individual) First Colonies Anesthesia	Occupation (fo	r Individual)	Memo Item Payroll deduction
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Da	ate ▼ 900.00	
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Use separate schedule(s) for each category of the Detailed Summary Page

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Anv information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

	the name and address of any political committee	
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Malone, Thomas, , , Mailing Address 11667 Fairmont PI	Initial) or Full Organization Name	Date of Receipt
		12 23 2016
City	State Zip Code	Transaction ID : SA11AI.10938
ljamsville	MD 21754	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
First Colonies Anesthesia	Physician	Payroll deduction
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	825.00	
Full Name of Individual (Last, First, Middle 3. Malone, Thomas, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 11667 Fairmont PI		12 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.11038
Ijamsville	MD 21754	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	
Full Name of Individual (Last, First, Middle C. Martin, Stephen, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 3336 O Street, NW		12 23 2016
City Washington	State Zip Code DC 20007	Transaction ID : SA11AI.10862 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:		
Primary General Other (specify)	Aggregate Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optional)	_	200.00
TOTAL This Period (last page this line numb	<u> </u>	

Receipt For:

Primary

Other (specify)

General

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Martin, Stephen, , , Date of Receipt Mailing Address 3336 O Street, NW 2016 City Zip Code State Transaction ID: SA11AI.10962 DC Washington 20007 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Meshulam, Richard, , , Date of Receipt Mailing Address 3401 Fielding Road 2016 City State Zip Code Transaction ID: SA11AI.10905 MD **Baltimore** 21208 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 350.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Meshulam, Richard, , , Date of Receipt Mailing Address 3401 Fielding Road 30 2016 City State Zip Code Transaction ID: SA11AI.11005 MD **Baltimore** 21208 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician

Aggregate Year-to-Date ▼

400.00

150.00

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

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Moayed, Omid, , , Date of Receipt Mailing Address 8913 Cherbourg Drive 2016 City Zip Code State Transaction ID: SA11AI.10872 MD Potomac 20854 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Moayed, Omid, , , Date of Receipt Mailing Address 8913 Cherbourg Drive 2016 City State Zip Code Transaction ID: SA11AI.10972 MD Potomac 20854 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 600.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Morman, Allyson, , , Date of Receipt Mailing Address 6509 Autumn Wind Circle 09 2016 City Zip Code State Transaction ID: SA11AI.10850 MD Clarksville 21029 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1150.00 Other (specify)

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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 n	ame a	nd addr	ress of any political committe	e to	solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA	A AS	SOCI	IATES LLC POLITIC	CAL	ACTION COMMITTEE
۹.	Full Name of Individual (Last, First, Middle Initial Morman, Allyson, , ,	l) or Fu	ull Orga	nization Name		Date of Receipt
	Mailing Address 6509 Autumn Wind Circle					12 22 2016
	City Clarksville	State MD)	Zip Code 21029		Transaction ID : SA11AI.10851 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С				50.00
	Name of Employer (for Individual) First Colonies Anesthesia		Occupa Physici	ation (for Individual) an		Memo Item Payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggreg	gate Yea	ar-to-Date ▼ 1200.00		
3.	Full Name of Individual (Last, First, Middle Initial Mossman, Danielle, , , Mailing Address 3709 Falling Green Way	l) or Fu	ull Orga	unization Name		Date of Receipt
		04-4-		7:- Code		12 23 2016
	City Mt. Airy	State MD		Zip Code 21771		Transaction ID : SA11AI.10934 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С				50.00
	Name of Employer (for Individual) First Colonies Anesthesia		Occupa Physici	ation (for Individual) ian		Memo Item Payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggreg	gate Yea	ar-to-Date ▼ 550.00]	
<u> </u>	Full Name of Individual (Last, First, Middle Initial Mossman, Danielle, , ,	l) or Fu	ull Orga	nization Name		Date of Receipt
	Mailing Address 3709 Falling Green Way					12 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Mt. Airy	State MD)	Zip Code 21771	}	Transaction ID : SA11AI.11034 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С				50.00
	Name of Employer (for Individual) First Colonies Anesthesia		Physicia			Memo Item Payroll deduction
	Receipt For: Primary General Other (specify)	Aggreg	gate Yea	ar-to-Date ▼ 600.00]	
s	UBTOTAL of Receipts This Page (optional))	•	150.00
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or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATE	ES LLC POLITICA	AL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle II Munro, Thomas, , , Mailing Address 15310 Forest Lake Court	nitial) or Full Organizati	on Name	Date of Receipt
City		Code	12 23 2016 Transaction ID : SA11AI.10946
Darnestown FEC ID number of contributing federal political committee	MD 20	0874	Amount of Each Receipt this Period 75.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
First Colonies Anesthesia Receipt For: Primary General Other (coordin) =	Physician Aggregate Year-to-I		Payroll deduction
Other (specify) ▼ Full Name of Individual (Last, First, Middle II	nitial) or Full Organizati	825.00 on Name	
Munro, Thomas, , , Mailing Address 15310 Forest Lake Court			Date of Receipt 12 30 2016
City Darnestown	1 1 '	Code 874	Transaction ID : SA11AI.11046 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		75.00
Name of Employer (for Individual) First Colonies Anesthesia	Physician	for Individual)	Memo Item Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-I	Oate ▼ 900.00	
Full Name of Individual (Last, First, Middle In Nalls, Anna, , ,	nitial) or Full Organizati	on Name	Date of Receipt
Mailing Address 603 Queen Street, # 4 City	State Zip	Code	12 23 2016 Transaction ID : SA11Al.10863
Alexandria	'	314	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		100.00
Name of Employer (for Individual) First Colonies Anesthesia Receipt For:	Physician	for Individual)	Payroll deduction
Primary General Other (specify)	Aggregate Year-to-I	1100.00	
SUBTOTAL of Receipts This Page (optional)			250.00
TOTAL This Period (last page this line number	r only)		

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	for commercial purposes, other than using the				
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESI	A ASS	OCI/	ATES LLC POLITICA	AL ACTION COMMITTEE
Α.	Full Name of Individual (Last, First, Middle Initial Nalls, Anna, , , Mailing Address 603 Queen Street, # 4	al) or Full	Organ	nization Name	Date of Receipt 12 30 2016
	City	State		Zip Code	Transaction ID : SA11AI.10963
	Alexandria	VA		22314	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	-		100.00
	Name of Employer (for Individual)	Oc	cupati	ion (for Individual)	Memo Item
	First Colonies Anesthesia	Ph	nysicia	ın	Payroll deduction
	Receipt For:	Aggregat	e Yea	r-to-Date ▼	
	Primary General Other (specify) ▼		7	1200.00	
В.	Full Name of Individual (Last, First, Middle Initial Nicholas, Elizabeth, , ,	al) or Full	Organ	nization Name	Date of Receipt
	Mailing Address 10604 Avonlea Hills Court				12 23 2016
	City	State		Zip Code	Transaction ID : SA11AI.10931
	Hagerstown	MD		21742	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	50.00			
	Name of Employer (for Individual) First Colonies Anesthesia		ccupat hysicia	ion (for Individual) an	Memo Item Payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregat	e Yea	r-to-Date ▼ 300.00	
<u> </u>	Full Name of Individual (Last, First, Middle Initial Nicholas, Elizabeth, , ,	al) or Full	Organ	nization Name	Date of Receipt
•	Mailing Address 10604 Avonlea Hills Court				12 30 2016
	City	State		Zip Code	Transaction ID : SA11AI.11031
	Hagerstown	MD		21742	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			50.00
	Name of Employer (for Individual)	Oc	cupati	ion (for Individual)	Memo Item
	First Colonies Anesthesia	Ph	ysicia	n	Payroll deduction
	Receipt For:	Aggregat	e Yea	r-to-Date ▼	
	Primary General Other (specify)		-	350.00	
H	SUBTOTAL of Receipts This Page (optional)			<u> </u>	200.00

federal political committee.

First Colonites Anesthesia

Receipt For:

Primary

Name of Employer (for Individual)

General

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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Occupation (for Individual)

Physician

Aggregate Year-to-Date ▼

Memo Item

Payroll deduction

C.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Oletsky, Jon, , , Date of Receipt Mailing Address 6417 Enchanted Solitude Place 2016 City Zip Code State Transaction ID: SA11AI.11021 MD Columbia 21044 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonites Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Osuji, Emmanuel, , , Date of Receipt Mailing Address 8362 Governor Run 2016 City State Zip Code Transaction ID: SA11AI.10922 Ellicott City MD 21043 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 \triangle

Full Name of Individual (Last, First, Middle In Osuji, Emmanuel, , , Mailing Address 8362 Governor Run	nitial) or Full Or	rganization Name	Date of Receipt
Maining Address 8362 Governor Run	12 30 2016		
City	State	Zip Code	Transaction ID : SA11AI.11022
Ellicott City	MD	21043	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
First Colonies Anesthesia	Phys	ician	Payroll deduction
Receipt For: Primary General Other (specify)			

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

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

150.00

federal political committee.

First Colonies Anesthesia

Receipt For:

Name of Employer (for Individual)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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Memo Item

Payroll deduction

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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Owens, Philip, , , Date of Receipt Mailing Address 141 Adams St NW 2016 City State Zip Code Transaction ID: SA11AI.10864 Washington DC 20001 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Owens, Philip, Date of Receipt Mailing Address 141 Adams St NW 2016 City State Zip Code Transaction ID: SA11AI.10964 Washington DC 20001 Amount of Each Receipt this Period FEC ID number of contributing 50.00

Primary General Other (specify) ▼	/iggregate 1e	600.00	
Full Name of Individual (Last, First, Middle Ozkum, Kent, , , Mailing Address 10720 Dern Road	Initial) or Full Orga	anization Name	Date of Receipt 12 23 2016
City Emmitsburg	State MD	Zip Code 21727	Transaction ID : SA11AI.10947 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupa Physici	ation (for Individual) an	Memo Item Payroll deduction
Receipt For: Primary General Other (specify)			
	<u> </u>		150.00

Occupation (for Individual)

Physician

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

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Aggregate Year-to-Date ▼

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	ny information copied from such Reports and S for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSOC	CIATES LLC POLITICA	AL ACTION COMMITTEE
Α.	Full Name of Individual (Last, First, Middle Init Ozkum, Kent, , , Mailing Address 10720 Dern Road	ial) or Full Org	ganization Name	Date of Receipt
	City	State	Zip Code	12 30 2016 Transaction ID : SA11Al.11047
	Emmitsburg	MD	21727	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual)	Occup	oation (for Individual)	Memo Item
	First Colonies Anesthesia	Physi	ician	Payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 600.00	
В.	Full Name of Individual (Last, First, Middle Init Park, Paul, , , Mailing Address 510 Golden Oak Terrace	ial) or Full Org	ganization Name	Date of Receipt 12 23 2016
	City	State	Zip Code	
	Rockville	MD	20850	Transaction ID : SA11AI.10865 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	50.00		
	Name of Employer (for Individual) First Colonies Anesthesia	Occu Phys	pation (for Individual) ician	Memo Item Payroll deduction
	Receipt For: Primary General Other (specify) ▼			
	Full Name of Individual (Last, First, Middle Init Park, Paul, , ,	ial) or Full Org	ganization Name	Date of Receipt
	Mailing Address 510 Golden Oak Terrace			12 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Rockville	State MD	Zip Code 20850	Transaction ID : SA11AI.10965 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) First Colonies Anesthesia	Occup Physi	oation (for Individual) cian	Memo Item Payroll deduction
	Receipt For: Primary General Other (specify)	Aggregate Y	/ear-to-Date ▼ 600.00	
Н	SUBTOTAL of Receipts This Page (optional)		<u> </u>	150.00
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	for commercial purposes, other than using the				
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESI	A ASSO	CIATE	S LLC POLITICA	AL ACTION COMMITTEE
Α.	Full Name of Individual (Last, First, Middle Initi Pauliukonis, Kestutis, , , Mailing Address 1813 Solitaire Lane City	al) or Full C	rganization		Date of Receipt 12 23 2016
	McLean	VA	221		Transaction ID : SA11AI.10866
	FEC ID number of contributing federal political committee.	C			Amount of Each Receipt this Period 50.00
	Name of Employer (for Individual)	Occ	upation (fo	r Individual)	Memo Item
	First Colonies Anesthesia	Phy	sician		Payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Da	ate ▼ 550.00	
В.	Full Name of Individual (Last, First, Middle Initi Pauliukonis, Kestutis, , , Mailing Address 1813 Solitaire Lane	al) or Full C	rganizatior	n Name	Date of Receipt
	The state of the s				12 30 2016
	City	State	Zip C	ode	Transaction ID : SA11AI.10966
	McLean	VA	2210	01	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	50.00			
	Name of Employer (for Individual) First Colonies Anesthesia	I	upation (fo	or Individual)	Memo Item Payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Da	ate ▼ 600.00	
<u> </u>	Full Name of Individual (Last, First, Middle Initi	al) or Full C	rganization	n Name	Date of Receipt
	Mailing Address 4 Farm Haven Court				12 23 2016
	City Rockville	State MD	Zip C 2085		Transaction ID : SA11AI.10889 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			75.00
	Name of Employer (for Individual) First Colonies Anesthesia			r Individual)	Memo Item Payroll deduction
	Receipt For:		sician		- r ayron deduction
	Primary General Other (specify)	Aggregate	Year-to-Da	825.00	
H	SUBTOTAL of Receipts This Page (optional)			<u> </u>	175.00

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

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13 14				15	16		17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Peck, Michael, , , Date of Receipt Mailing Address 4 Farm Haven Court 2016 City State Zip Code Transaction ID: SA11AI.10989 MD Rockville 20852 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Peruvemba, Ramani, , , Date of Receipt Mailing Address 8302 Fox Haven Drive 2016 City Zip Code State Transaction ID: SA11AI.10867 VA McLean 22102 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 550.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Peruvemba, Ramani, , , Date of Receipt

Mailing Address 8302 Fox Haven Drive			12 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID : SA11AI.10967
McLean	VA	22102	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual)	Occur	pation (for Individual)	Memo Item
First Colonies Anesthesia	Physic	,	Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate Y	ear-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optional).		·····	175.00
TOTAL This Period (last page this line number	er only)	·····	7 7 7
			FEC Schedule A (Form 3X) Rev. 06/2

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Any information copied from such Reports and sor for commercial purposes, other than using the	Statements may r e name and addr	not be sold or used by any peress of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCI	ATES LLC POLITIC	AL ACTION COMMITTEE					
Full Name of Individual (Last, First, Middle In Peterkin, Michael, , , Mailing Address 1400 Church St. NW, #204	nitial) or Full Orga	nization Name	Date of Receipt					
City	Ctata	7in Codo	12 23 2016					
City Washington	State	Zip Code 20005	Transaction ID : SA11AI.10895					
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 50.00					
Name of Employer (for Individual)								
First Colonies Anesthesia	Physici	an	Payroll deduction					
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 250.00						
Full Name of Individual (Last, First, Middle In Peterkin, Michael, , , Mailing Address 1400 Church St. NW, #204	nitial) or Full Orga	nization Name	Date of Receipt					
1400 Church St. NVV, #204			12 30 2016					
City	State	Zip Code	Transaction ID : SA11AI.10995					
Washington	DC	20005	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		50.00					
Name of Employer (for Individual) First Colonies Anesthesia	Occupa Physici	ition (for Individual) ian	Memo Item Payroll deduction					
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 300.00						
Full Name of Individual (Last, First, Middle In Pirovic, Eugen, , ,	nitial) or Full Orga	nization Name	Date of Receipt					
Mailing Address 3912 Calverton Drive			12 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City Hyattsville	State MD	Zip Code 20782	Transaction ID : SA11AI.10894					
	IVID	20102	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		50.00					
Name of Employer (for Individual)	Occupa	tion (for Individual)	Memo Item					
First Colonies Anesthesia	Physicia	an	Payroll deduction					
Receipt For: Primary General Other (specify)	Aggregate Yea	ar-to-Date ▼ 550.00						
SUBTOTAL of Receipts This Page (optional)			150.00					
TOTAL This Period (last page this line number	only)							

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Pirovic, Eugen, , , Date of Receipt Mailing Address 3912 Calverton Drive 2016 City Zip Code State Transaction ID: SA11AI.10994 MD Hyattsville 20782 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Poursharif, Naeem, , , Date of Receipt Mailing Address 9506 Edgeley Rd 2016 City State Zip Code Transaction ID: SA11AI.10882 MD Bethesda 20814 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 550.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Poursharif, Naeem, , , Date of Receipt Mailing Address 9506 Edgeley Rd 30 2016 City Zip Code State Transaction ID: SA11AI.10982 MD Bethesda 20814 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify)

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Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any perse name and address of any political committee to					
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE				
Full Name of Individual (Last, First, Middle Ini Richman, Jeffrey, , , Mailing Address 6906 Granite Ridge Ct.	tial) or Full Organization Name	Date of Receipt				
City Baltimore	State Zip Code MD 21209	12 23 2016 Transaction ID : SA11AI.10910				
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 50.00				
Name of Employer (for Individual) First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	Occupation (for Individual) Physician Aggregate Year-to-Date ▼	Memo Item Payroll deduction				
Full Name of Individual (Last, First, Middle Ini Richman, Jeffrey, , , Mailing Address 6906 Granite Ridge Ct.	Date of Receipt					
City Baltimore FEC ID number of contributing federal political committee.	State Zip Code MD 21209	Transaction ID : SA11AI.11010 Amount of Each Receipt this Period 50.00				
Name of Employer (for Individual) First Colonies Anesthesia Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation (for Individual) Physician Aggregate Year-to-Date ▼ 600.00	Memo Item Payroll deduction				
Full Name of Individual (Last, First, Middle Ini Rizzuto, Charles, , , Mailing Address 6409 Pinehurst Rd City	tial) or Full Organization Name State Zip Code	Date of Receipt 12 23 2016 Transaction ID: SA11AI.10907				
Baltimore FEC ID number of contributing federal political committee.	MD 21212	Amount of Each Receipt this Period 50.00				
Name of Employer (for Individual) First Colonies Anesthesia Receipt For: Primary General Other (specify)	Occupation (for Individual) Physician Aggregate Year-to-Date ▼ 550.00	Memo Item Payroll deduction				
SUBTOTAL of Receipts This Page (optional)	>	150.00				
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\rangle	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA	A ASSO	CIATES LLC POLITICAL	. ACTION COMMITTEE				
١.	Full Name of Individual (Last, First, Middle Initia Rizzuto, Charles, , , Mailing Address 6409 Pinehurst Rd	l) or Full Oi	rganization Name	Date of Receipt				
	City	State	Zip Code	12 30 2016 Transaction ID : SA11AI.11007				
	Baltimore	MD	21212	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		50.00				
	Name of Employer (for Individual)		upation (for Individual)	Memo Item				
	First Colonies Anesthesia	Phys	sician	Payroll deduction				
	Receipt For: Primary General Other (specify) ▼	Year-to-Date ▼ 600.00						
3.	Full Name of Individual (Last, First, Middle Initia Rothschild, James, , , Mailing Address 205 Woodlawn Road	l) or Full O	rganization Name	Date of Receipt				
	2 250 Woodidiiii Modd			12 23 2016				
	City	State	Zip Code	Transaction ID : SA11AI.10914				
	Baltimore	MD	21210	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		100.00				
	Name of Employer (for Individual) First Colonies Anesthesia		upation (for Individual) sician	Memo Item Payroll deduction				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00					
).	Full Name of Individual (Last, First, Middle Initia Rothschild, James, , ,	l) or Full O	rganization Name	Date of Receipt				
	Mailing Address 205 Woodlawn Road			12 30 2016				
	City	State	Zip Code	Transaction ID : SA11AI.11014				
	Baltimore	MD	21210	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		100.00				
	Name of Employer (for Individual) First Colonies Anesthesia		upation (for Individual)	Memo Item Payroll deduction				
	Receipt For:	Aggregate	Year-to-Date ▼					
	Primary General Other (specify)	1200.00						
SI	JBTOTAL of Receipts This Page (optional)		>	250.00				
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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Salah, Hany, , , Date of Receipt Mailing Address 356 Copperfield Lane 2016 City State Zip Code Transaction ID: SA11AI.10932 VA Herndon 20170 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Salah, Hany, , , Date of Receipt Mailing Address 356 Copperfield Lane 2016 City State Zip Code Transaction ID: SA11AI.11032 VA Herndon 20170 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General C.

Other (specify) \blacktriangledown		400.00	
Full Name of Individual (Last, First, Middle In Sardarian, Leudvig, , ,	Date of Receipt		
Mailing Address 11601 Brandy Hall Lane	12 23 2016		
City	State	Zip Code	Transaction ID : SA11AI.10950
North Potomac	MD	20878	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
First Colonies Anesthesia	Physi	cian	Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate	/ear-to-Date ▼ 550.00	

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Sardarian, Leudvig, , , Date of Receipt Mailing Address 11601 Brandy Hall Lane 2016 City Zip Code State Transaction ID: SA11AI.11050 MD North Potomac 20878 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Scheinman, Gerald, , Dr., Date of Receipt Mailing Address 8010 Summer Mill Court 2016 City State Zip Code Transaction ID: SA11AI.10968 MD Bethesda 20817 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Seymour, Mark, , , Date of Receipt Mailing Address 400 Herrs Ridge Road 23 2016 City State Zip Code Transaction ID: SA11AI.10940 PΑ Gettysburg 17325 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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\rangle	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA	A ASSOCIATES LLC POLITICAL	. ACTION COMMITTEE				
١.	Full Name of Individual (Last, First, Middle Initia Seymour, Mark, , , Mailing Address 400 Herrs Ridge Road	ll) or Full Organization Name	Date of Receipt				
			12 30 2016				
	City Gettysburg	State Zip Code PA 17325	Transaction ID : SA11AI.11040 Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	50.00				
	Name of Employer (for Individual)	Occupation (for Individual) Physician	Memo Item				
	First Colonies Anesthesia	Payroll deduction					
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00					
3.	Full Name of Individual (Last, First, Middle Initia Singh, Ravi, , , Mailing Address 1155 Ripley Street, #1716	l) or Full Organization Name	Date of Receipt				
		12 23 2016					
	City	State Zip Code	Transaction ID : SA11AI.10886				
	Silver Spring	MD 20910	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	50.00				
	Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction				
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00					
).	Full Name of Individual (Last, First, Middle Initia Singh, Ravi, , ,	l) or Full Organization Name	Date of Receipt				
	Mailing Address 1155 Ripley Street, #1716		12 30 2016				
	City	State Zip Code	Transaction ID : SA11AI.10986				
	Silver Spring	MD 20910	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	50.00				
	Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction				
	Receipt For:	Aggregate Year-to-Date ▼					
	Primary General Other (specify)	400.00					
S	UBTOTAL of Receipts This Page (optional)	>	150.00				
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	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOC	CIATES LLC POLITIC	AL ACTION COMMITTEE
Α.		itial) or Full Org	ganization Name	Date of Receipt
	Mailing Address 5008 Green Bridge Rd.			12 23 2016
	City	State MD	Zip Code 21036	Transaction ID : SA11AI.10925
	Dayton	IVID	21030	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer (for Individual)	Occup	pation (for Individual)	Memo Item
	First Colonies Anesthesia	Physi	cian	Payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 275.00	
В.	Full Name of Individual (Last, First, Middle Ini Sowry, James, , , Mailing Address 5008 Green Bridge Rd.	Date of Receipt		
	Walling Address 5008 Green Bridge Rd.			12 30 2016
	City	State	Zip Code	Transaction ID : SA11AI.11025
	Dayton	MD	21036	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer (for Individual) First Colonies Anesthesia	Occup Physi	oation (for Individual) ician	Memo Item Payroll deduction
	Receipt For:	Aggregate Y	ear-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
— С.	Full Name of Individual (Last, First, Middle Ini Study, Robert, , ,	itial) or Full Orç	ganization Name	Date of Receipt
	Mailing Address 6 Beall Spring Court			12 23 / 2016
	Potomac Potomac	State MD	Zip Code 20854	Transaction ID : SA11AI.10890 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual)	Occup	pation (for Individual)	Memo Item
	First Colonies Anesthesia	Physic	,	Payroll deduction
	Receipt For: Primary General Other (specify)	Aggregate Y	ear-to-Date ▼ 550.00	
H	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			100.00

Use separate schedule(s) for each category of the

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Study, Robert, , , Date of Receipt Mailing Address 6 Beall Spring Court 2016 City Zip Code State Transaction ID: SA11AI.10990 MD Potomac 20854 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Sullivan, Lisa, , , Date of Receipt Mailing Address 4639 Teen Barnes Road 2016 City State Zip Code Transaction ID: SA11AI.10941 MD Frederick 21703 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 550.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Sullivan, Lisa, , , Date of Receipt Mailing Address 4639 Teen Barnes Road 30 2016 City State Zip Code Transaction ID: SA11AI.11041 MD Frederick 21703 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 150.00

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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE				
Full Name of Individual (Last, First, Middle Init Sullivan, Robert, , ,	ial) or Full Organization Name	Date of Receipt				
Mailing Address 4639 Teen Barnes Road		12 23 2016				
City	State Zip Code	Transaction ID : SA11AI.10942				
Frederick	MD 21703	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
First Colonies Anesthesia	Physician	Payroll deduction				
Receipt For:						
Primary General Other (specify) ▼	550.00					
Full Name of Individual (Last, First, Middle Init Sullivan, Robert, , ,	ial) or Full Organization Name	Date of Receipt				
Mailing Address 4639 Teen Barnes Road		12 30 2016				
City	State Zip Code	Transaction ID : SA11AI.11042				
Frederick	MD 21703	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	50.00				
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00					
Full Name of Individual (Last, First, Middle Init	ial) or Full Organization Name	Date of Receipt				
Mailing Address PO Box 6081		12 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City	State Zip Code VA 22106	Transaction ID : SA11AI.10891				
McLean	VA 22106	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer (for Individual)	Memo Item					
First Colonies Anesthesia Receipt For:	Payroll deduction					
Primary General						
Other (specify)	550.00					
SUBTOTAL of Receipts This Page (optional)		150.00				
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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Swann, Louis, , , Date of Receipt Mailing Address PO Box 6081 2016 City Zip Code State Transaction ID: SA11AI.10991 VA McI ean 22106 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Tan, Rojack, , , Date of Receipt Mailing Address 507 Goodland Place 2016 City State Zip Code Transaction ID: SA11AI.10892 MD 20850 Rockville Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 550.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Tan, Rojack, , , Date of Receipt Mailing Address 507 Goodland Place 30 2016 City State Zip Code Transaction ID: SA11AI.10992 MD Rockville 20850 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify)

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	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESI	A ASSO	CIATES LLC POLITICA	L ACTION COMMITTEE		
Α.	Full Name of Individual (Last, First, Middle Initi Uberoi, Francecsa, , , Mailing Address 2901 Boulderton Court	al) or Full Or	ganization Name	Date of Receipt 12 09 2016		
	City Baltimore	State MD	Zip Code 21209	Transaction ID : SA11AI.10852 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		25.00		
	Name of Employer (for Individual) First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	Phys	pation (for Individual) ician Year-to-Date ▼ 350.00	Memo Item Payroll deduction		
_ _	Full Name of Individual (Last, First, Middle Initi	Date of Resoint				
В.	Uberoi, Francecsa, , , Mailing Address 2901 Boulderton Court	Date of Receipt 12 22 2016				
	City Baltimore	State MD	Zip Code 21209	Transaction ID : SA11AI.10853 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	25.00				
	Name of Employer (for Individual) First Colonies Anesthesia					
	Receipt For: Primary General Other (specify) ▼					
С .	Full Name of Individual (Last, First, Middle Initi Underwood, Reed, , ,	al) or Full Or	ganization Name	Date of Receipt		
	Mailing Address 2030 8th Street NW, #512			12 23 2016		
	City Washington	State DC	Zip Code 20001	Transaction ID : SA11AI.10877 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		50.00		
	Name of Employer (for Individual) First Colonies Anesthesia	Physi		Memo Item Payroll deduction		
	Primary General Other (specify)	eipt For: Primary General Aggregate Year-to-Date ▼				
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	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSO	CIATES LLC POLITICA	L ACTION COMMITTEE		
Α.	Full Name of Individual (Last, First, Middle Init Underwood, Reed, , , Mailing Address 2030 8th Street NW, #512	ial) or Full Or	ganization Name	Date of Receipt 12 30 2016		
	City	State	Zip Code	Transaction ID : SA11AI.10977		
	Washington	DC	20001	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		50.00		
	Name of Employer (for Individual)	pation (for Individual)	Memo Item			
	First Colonies Anesthesia	Phys	ician	Payroll deduction		
	Receipt For: Primary General	Aggregate \				
	Other (specify) ▼					
В.	Full Name of Individual (Last, First, Middle Init Valedon, Arnaldo, , ,	Date of Receipt				
	Mailing Address 22 Woodfield Court	12 23 2016				
	City	State	Zip Code	Transaction ID : SA11AI.10924		
	Reisterstown	MD	21136	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	50.00				
	Name of Employer (for Individual) First Colonies Anesthesia					
	Receipt For: Primary General Other (specify) ▼	Aggregate \	∕ear-to-Date ▼ 550.00			
С .	Full Name of Individual (Last, First, Middle Init Valedon, Arnaldo, , ,	ial) or Full Or	ganization Name	Date of Receipt		
	Mailing Address 22 Woodfield Court			12 30 2016		
	City Reisterstown	State MD	Zip Code 21136	Transaction ID : SA11AI.11024 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		50.00		
	Name of Employer (for Individual) First Colonies Anesthesia	Occu Physi	pation (for Individual) ician	Memo Item Payroll deduction		
	Receipt For:	Aggregate \	/ear-to-Date ▼			
	Other (specify)	Primary General				
s	SUBTOTAL of Receipts This Page (optional)		>	150.00		
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Vanguri, Sanjay, , , Date of Receipt Mailing Address 4109 Celtic Way 2016 City State Zip Code Transaction ID: SA11AI.10949 MD Frederick 21704 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 275.00

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

Full Name of Individual (Last, First, Middle In Vanguri, Sanjay, , ,	Date of Receipt		
Mailing Address 4109 Celtic Way	12 30 2016		
City	State	Zip Code	Transaction ID : SA11AI.11049
Frederick	MD	21704	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		25.00
Name of Employer (for Individual) First Colonies Anesthesia	Occup Phys	oation (for Individual) ician	Memo Item Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 300.00	
E N	··· '	1 11 N.	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Visnich Jr., Nicholus, , , Date of Receipt Mailing Address 10816 Willow Run Court 23 2016 City State Zip Code Transaction ID: SA11AI.10869 MD Potomac 20854 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify)

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

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

75.00

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

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NAME OF COMMITTEE (In Full)

NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Ini Visnich Jr., Nicholus, , ,	itial) or Full Organization Name	Date of Receipt
Mailing Address 10816 Willow Run Court		12 30 2016
City Potomac	State Zip Code MD 20854	Transaction ID : SA11AI.10969 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name of Individual (Last, First, Middle Ini Nogt, Mark, , , Mailing Address 1152 Colonial Road	itial) or Full Organization Name	Date of Receipt 12 23 2016
City McLean	State Zip Code VA 22101	Transaction ID : SA11AI.10893 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name of Individual (Last, First, Middle Ini	itial) or Full Organization Name	Date of Receipt
Mailing Address 1152 Colonial Road		12 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City McLean	State Zip Code VA 22101	Transaction ID : SA11AI.10993 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optional)		125.00

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

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Any information copied from such Reports and or for commercial purposes, other than using th									
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOC	IATES LLC POLITIC	AL ACTION COMMITTEE						
Full Name of Individual (Last, First, Middle Ir Wahlgren, Christopher, , , Mailing Address 1200 Colvin Meadows Lane	nitial) or Full Orga	anization Name	Date of Receipt						
			12 23 2016						
City	State	Zip Code	Transaction ID : SA11AI.10870						
Great Falls	VA	22066	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		50.00						
Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item						
First Colonies Anesthesia	Physici	ian	Payroll deduction						
Receipt For: Primary General	· Aggregate rear-to-bate v								
Utner (specify) ▼		550.00							
Full Name of Individual (Last, First, Middle Ir Wahlgren, Christopher, , ,	nitial) or Full Orga	anization Name	Date of Receipt						
Mailing Address 1200 Colvin Meadows Lane			12 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
City	State	Zip Code	Transaction ID : SA11AI.10970						
Great Falls	VA	22066	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		50.00						
Name of Employer (for Individual) First Colonies Anesthesia	Occupa Physic	ation (for Individual) ian	Memo Item Payroll deduction						
Receipt For:	Aggregate Ye	ar-to-Date ▼							
Primary General Other (specify) ▼	•	600.00							
Full Name of Individual (Last, First, Middle Ir Wheeler, David, , ,	nitial) or Full Orga	anization Name	Date of Receipt						
Mailing Address 7108 Collingwood Ct			12 23 2016						
City	State	Zip Code	Transaction ID : SA11AI.10908						
Elkridge	MD	21075	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		50.00						
Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item						
First Colonies Anesthesia	Physici	an	Payroll deduction						
Receipt For: Primary General	Aggregate Ye	ar-to-Date ▼							
Other (specify)									
SUBTOTAL of Receipts This Page (optional)			150.00						
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Other (specify)

C.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Wheeler, David, , , Date of Receipt Mailing Address 7108 Collingwood Ct 2016 City State Zip Code Transaction ID: SA11AI.11008 MD Elkridge 21075 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Wherry, Thomas, , , Date of Receipt Mailing Address 611 W. 2nd Street 12 2016 City State Zip Code Transaction ID: SA11AI.10928 Frederick MD 21701 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 550,00

	4 114							
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Wherry, Thomas, , ,								
Mailing Address 611 W. 2nd Street								
State	Zip Code	Transaction ID : SA11AI.11028						
MD	21701	Amount of Each Receipt this Period						
С		50.00						
Occup	pation (for Individual)	Memo Item						
Physic	cian	Payroll deduction						
Aggregate Y	ear-to-Date ▼ 600.00							
. i	State MD C Occup Physic	Initial) or Full Organization Name State Zip Code 21701 C Occupation (for Individual) Physician Aggregate Year-to-Date ▼						

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

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Wilpon, Howard, , , Date of Receipt Mailing Address 18212 Wickham Road 2016 City Zip Code State Transaction ID: SA11AI.10915 MD Olney 20832 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Wilpon, Howard, , , Date of Receipt Mailing Address 18212 Wickham Road 2016 City State Zip Code Transaction ID: SA11AI.11015 MD Olney 20832 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 600.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Wolf, Monford, , , Date of Receipt Mailing Address 4822 Tilly Drive 23 2016 City State Zip Code Transaction ID: SA11AI.10927 MD Sykesville 21784 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify)

150.00

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	Statements may not be sold or used by any perse name and address of any political committee to					
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE				
Full Name of Individual (Last, First, Middle In Wolf, Monford, , , Mailing Address 4822 Tilly Drive	itial) or Full Organization Name	Date of Receipt				
City Sykesville	State Zip Code MD 21784	12 30 2016 Transaction ID : SA11AI.11027				
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 50.00				
Name of Employer (for Individual) First Colonies Anesthesia Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation (for Individual) Physician Aggregate Year-to-Date ▼ 600.00	Memo Item Payroll deduction				
Full Name of Individual (Last, First, Middle In Wu, You, , , Mailing Address 910 Dunlavin Ct City Timonium FEC ID number of contributing federal political committee. Name of Employer (for Individual) First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code MD 21093 C Occupation (for Individual) Physician Aggregate Year-to-Date ▼	Date of Receipt 12 23 2016 Transaction ID : SA11AI.10909 Amount of Each Receipt this Period 50.00 Memo Item Payroll deduction				
Full Name of Individual (Last, First, Middle In Wu, You, , , Mailing Address 910 Dunlavin Ct City Timonium FEC ID number of contributing federal political committee. Name of Employer (for Individual) First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code 21093 C Occupation (for Individual) Physician Aggregate Year-to-Date 600.00	Date of Receipt 12 30 2016 Transaction ID: SA11AI.11009 Amount of Each Receipt this Period 50.00 Memo Item Payroll deduction				
SUBTOTAL of Receipts This Page (optional)	<u> </u>	150.00				
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Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)

FIRST COLONIES ANESTHE	SIA ASSOC	CIATES LLC POLITICA	AL ACTION COMMITTEE				
Full Name of Individual (Last, First, Middle In Yang, Shao, , ,	nitial) or Full Org	ganization Name	Date of Receipt				
Mailing Address 703 Firestone Drive	12 23 2016						
City Silver Spring	State MD	Zip Code 20905	Transaction ID : SA11AI.10919 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	9						
Name of Employer (for Individual) First Colonies Anesthesia	Occup Physic	oation (for Individual) cian	Memo Item Payroll deduction				
Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 450.00					
Full Name of Individual (Last, First, Middle In Yang, Shao, , , Mailing Address 703 Firestone Drive	nitial) or Full Org	ganization Name	Date of Receipt				
City Silver Spring	State MD	Zip Code 20905	Transaction ID : SA11Al.11019 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		50.00				
Name of Employer (for Individual) First Colonies Anesthesia	Occup Physi	oation (for Individual) ician	Memo Item Payroll deduction				
Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 500.00					
Full Name of Individual (Last, First, Middle In Yu, Aiqin, , ,	nitial) or Full Org	ganization Name	Date of Receipt				
Mailing Address 13508 Gumspring Road			12 23 2016				
City Rockville	State MD	Zip Code 20850	Transaction ID : SA11AI.10871 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		50.00				
Name of Employer (for Individual) First Colonies Anesthesia	Physic		Memo Item Payroll deduction				
Receipt For: Primary General Other (specify)	Aggregate Y	′ear-to-Date ▼ 550.00					
SUBTOTAL of Receipts This Page (optional)			150.00				
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Use separate schedule(s) for each category of the

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Yu, Aiqin, , , Date of Receipt Mailing Address 13508 Gumspring Road 2016 City Zip Code State Transaction ID: SA11AI.10971 MD Rockville 20850 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Yun, Jungim, , , Date of Receipt Mailing Address 2057 Thurston Road 2016 City State Zip Code Transaction ID: SA11AI.10943 MD Frederick 21704 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 550.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **C.** Yun, Jungim, , , Date of Receipt Mailing Address 2057 Thurston Road 30 2016 City State Zip Code Transaction ID: SA11AI.11043 MD Frederick 21704 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER:							PAGE	7	72	OF	7	78
(check only one)												
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				e to solicit contributions from such committee.
	F COMMITTEE (In Full) COLONIES ANESTHESI	A ASSO	CIATES LLC POLITIC	CAL ACTION COMMITTEE
A. Yurka, Mailing A City Baltimore FEC ID r federal po Name of First Colo Receipt F	number of contributing olitical committee. Employer (for Individual) onies Anesthesia	State MD C Occu Phys	Zip Code 21230 Ipation (for Individual) sician Year-to-Date 225.00	Date of Receipt 12 23 2016 Transaction ID: SA11AI.10952 Amount of Each Receipt this Period 25.00 Memo Item Payroll deduction
B. Yurka, Mailing A City Baltimore FEC ID r federal po Name of First Colo Receipt F	number of contributing olitical committee. Employer (for Individual) inies Anesthesia	State MD C	Zip Code 21230 upation (for Individual) sician Year-to-Date ▼ 250,00	Date of Receipt 12 30 2016 Transaction ID: SA11AI.11052 Amount of Each Receipt this Period 25.00 Memo Item Payroll deduction
City FEC ID r federal por Name of Receipt F	number of contributing olitical committee. Employer (for Individual)	State	Zip Code Zip Code pation (for Individual) Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Amount of Each Receipt this Period Memo Item
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SC	HEDULE B (FEC Form 3X)			EOD LINE	FOR LINE NUMBER: PAGE 73 OF 78						
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\vdash	NAME OF COMMITTEE (In Full)	ne and addi	icos ui aiiy pullu	cai committee to	Solicit Continuations from Such Confinitiee.						
I \	FIRST COLONIES ANESTHESIA	ASSOC	IATESTIC	POLITICAL	ACTION COMMITTEE						
\angle			,, (1 LO LLO								
_	Full Name (Last, First, Middle Initial)				Date of Disbursement						
Λ.	Barbara Marx Brocato & Associate	es			Man / D D / Y Y Y Y						
<u> </u>	Mailing Address 18 Pinkney Street				12 27 2016						
-	Ditt.	Ctata	Zin Cada								
	City Annapolis	State MD	Zip Code 21401		FEC Identification Number						
	Purpose of Disbursement				C						
					Transaction ID : SB29.11053						
(Candidate Name			Category/	Amount of Each Disbursement this Period						
7	Office Cought: House Distance	mont Fam		Туре	2083.33						
(Office Sought: House Disburser Senate	ment For: Primary	General		2003.00						
	President	Other (spec			Memo Item						
	State: District:				Wellie Rell						
_	Full Name (Last, First, Middle Initial)				B						
В.	Citizens for Bryan Simonaire				Date of Disbursement 12 01 2016						
-	Mailing Address 441 Shady Lane										
-	5 ITI Glady Land										
	,	State	Zip Code		FEC Identification Number						
	Pasadena Purpose of Disbursement	MD	21122		C						
	,										
7	Candidate Name			Category/	Transaction ID: SB29.11067 Amount of Each Disbursement this Period						
-				Type	250.00						
(ment For:	Conoral		250.00						
	Senate President	Primary Other (spec	General cifv)		П						
5	State: District:	(Spot	,,		Memo Item						
_	Full Name (Last, First, Middle Initial)										
C.	Citizens For Dan Morhaim				Date of Disbursement						
_ N	Mailing Address PO Box 212				12 01 2016						
	1	State	Zip Code		FEC Identification Number						
	Stevenson Purpose of Disbursement	MD	21153								
					Transaction ID : SB29.11057						
(Candidate Name			Category/	Amount of Each Disbursement this Period						
-	2000-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-			Туре	252.00						
(Office Sought: House Disburser Senate	ment For: Primary	General		250.00						
	President	Other (spec			M 10						
5	State: District:	(-1	- 3,		Memo Item						
su	JBTOTAL of Disbursements This Page (optional)			•••••••	2583.33						
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SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 7				
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		Summary Page	21b 28a	22 23 26 27 28b 28c x 29 30b			
Any information copied from such Reports and State	nents may r	not be sold or use					
or for commercial purposes, other than using the nar							
NAME OF COMMITTEE (In Full)		_					
FIRST COLONIES ANESTHESIA	ASSOCI	ATES LLC I	POLITICAL	L ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)							
A. Citizens for Maggie McIntosh				Date of Disbursement			
Mailing Address 1050 Hull Street				12 01 2016			
Suite 120				12 01 2010			
,	State	Zip Code		FEC Identification Number			
Baltimore Purpose of Diaburgoment	MD	21230					
Purpose of Disbursement				C			
Candidate Name			0.1	Transaction ID : SB29.11062			
			Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disburse	ment For:			250.00			
Senate	Primary	General					
State: District:	Other (spec	cify) 🔻		Memo Item			
Full Name (Last, First, Middle Initial)				_			
B. Committee To Elect Joan Carter C	:onway			Date of Disbursement			
- Committee to Lieu Soan Carter C	onway			M M / D D / Y Y Y Y			
Mailing Address PO Box 1573				12 01 2016			
,	State	Zip Code		FEC Identification Number			
Baltimore Purpose of Disbursement	MD	21203		C			
p				Transaction ID : SB29.11069			
Candidate Name			Category/	Amount of Each Disbursement this Period			
05			Туре	4500.00			
Office Sought: House Disbursel Senate	ment For:	General		1500.00			
President	Primary Other (spec			п			
State: District:	(opoc	,,		Memo Item			
Full Name (Last, First, Middle Initial)							
C. Friends of Angela Angel				Date of Disbursement			
Mailing Address PO Box 6905				12 01 7 2016			
City	State	Zip Code		FFO Identification Number			
Upper Marlboro	MD	20792		FEC Identification Number			
Purpose of Disbursement							
Candidate Name				Transaction ID : SB29.11054			
Candidate Ivanie			Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disburse	ment For:		1 3 P C	500.00			
Senate	Primary	General		7 7 7			
President	Other (spec	cify) ▼		Memo Item			
State: District:				ш			
CURTOTAL of Dichurananta This Dawy (and				2250.00			
SUBTOTAL of Disbursements This Page (optional)			·····•	2200.00			
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SCH	EDULE B (FEC Form 3X)			EOD LINE	INE NUMBER: PAGE 75 OF 78					
ITEMIZED DISPLIDSEMENTS Use s			arate schedule(s)	(check only	TE HOMBEH.					
			category of the Summary Page	21b	22 23 26 27					
		Botalica		28a	28b 28c x 29 30b					
	nformation copied from such Reports and State commercial purposes, other than using the nar									
\vdash	ME OF COMMITTEE (In Full)	ne and addi	icos oi aiiy politi	cai committee to	SOURCE CONTINUED TO THE SUCH COMMITTEE.					
I \	IRST COLONIES ANESTHESIA	ASSOC	IATESTIC	POI ITICAI	ACTION COMMITTEE					
<u>_</u> ''			., \							
	II Name (Last, First, Middle Initial)				B (B)					
A. F	riends of Ariana Kelly				Date of Disbursement					
 Ma	ailing Address 9304 Ewing Drive				12 01 2016					
_										
Cit	·	State	Zip Code		FEC Identification Number					
	thesda rpose of Disbursement	MD	20817							
ı u	.pass of biobalcomont				C					
Ca	ndidate Name			Category/	Transaction ID: SB29.11055 Amount of Each Disbursement this Period					
				Type						
Off		ment For:			250.00					
	Senate President	Primary Other (spec	☐ General							
Sta		J.1107 (OPO)	,/ ▼		Memo Item					
Ful	II Name (Last, First, Middle Initial)									
B. F	riends of Erek L. Barron				Date of Disbursement					
	illing Address 4052 11 11 2				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
	illing Address 1050 Hull Street Suite 120				12 01 2016					
Cit	y Iltimore	State MD	Zip Code 21230		FEC Identification Number					
	rpose of Disbursement	וווט	21230		C					
					Transaction ID : SB29.11058					
Ca	ndidate Name			Category/	Amount of Each Disbursement this Period					
<u> </u>	Goo Cought: House	mont Fam		Туре	250.00					
Off	fice Sought: House Disburse Senate	ment For: Primary	General		250.00					
	President	Other (spec			M 10					
Sta	ate: District:				Memo Item					
	II Name (Last, First, Middle Initial)									
C. F	riends of Herb McMillan				Date of Disbursement					
Ma	ailing Address PO Box 6075				12 01 2016					
IVIC	, adioco 1 O Dox 00/3				0					
Cit	,	State	Zip Code		FEC Identification Number					
	napolis rpose of Disbursement	MD	21401		C					
. 3	•				Transaction ID : SB29.11059					
Ca	ndidate Name			Category/	Amount of Each Disbursement this Period					
-	Car Oanska			Туре	500.00					
Off	fice Sought: House Disburse Senate	ment For: Primary	General		500.00					
	President	Other (spec			M 10					
Sta		- (-	, ,		Memo Item					
	'									
SUB	TOTAL of Disbursements This Page (optional)			·····•	1000.00					
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S	CHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 76						76	OF 78					
IT	EMIZED DISBURSEMENTS		Use separate schedule(s)				y one)								
••		for each category of the Detailed Summary Page				21b	22 23 26					27			
_				28a			28b		28c	X	2	:9	30b		
	y information copied from such Reports and State for commercial purposes, other than using the na														
\setminus	NAME OF COMMITTEE (In Full)														
	FIRST COLONIES ANESTHESIA	ASSOC	IATES LLC F	POL	_ITI	CAL	_ A	CTI	۸O	I CC)[/ 	1M	ITTI	ĒΕ	
_	Full Name (Last, First, Middle Initial)														
A.	Friends of Jeff Ghrist						L	Date of	t Dis —	sburse	∍me	ent _			
	Mailing Address 24495 Holsinger Lane						12 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
	City	State	Zip Code					.EO 14		£:1:					
	Ridgely	MD	21660					EC Id	enti	ricatioi	יו ה	vum	iber		
	Purpose of Disbursement				-	\neg									
								_	ansa	action	ID	: S	B29.1	1060	
	Candidate Name		'		egor	y/	Α	moun	t of	Each	Di	sbu	rseme	nt this	Period
	Office Cought: House Dishuman			Т	уре									250.	00
	Office Sought: House Disburse Senate	ment For: Primary	General				L	-		,			7	200.	00
	President	Other (spe						-							
	State: District:	Other (open	Olly) V				L	Me	mo	Item					
_	Full Name (Last, First, Middle Initial)														
В.	•						С	Date of	f Dis	sburse	∍m∈	ent			
							M = M / D = D / Y = Y = Y								
	Mailing Address PO Box 3662					12 01 2016									
	City	State	Zip Code				FEC Identification Number								
	Frederick	MD 21705													
	Purpose of Disbursement		Category/ Type					C							
	Candidate Name							Transaction ID : SB29.11061							
	Candidate Hame							Amount of Each Disbursement this Period							
	Office Sought: House Disburse	ment For:					500.00								
	Senate	Primary						7 7 7							
	President	Other (spec	cify)				Memo Item								
	State: District:						_	IVIC	1110	item					
	Full Name (Last, First, Middle Initial)														
C.	Friends Of Mike Busch							Date of	f Dis	sburse	me	ent			
	Mailing Address DOD 201						- [M = M	1	D		/	Υ	Y Y	Υ
	Mailing Address PO Box 824						ŀ	12	٠.	Ü	1	٠.	-	2016	_
	City	State	Zip Code				_	.EO 14		£: &:					
	Annapolis	MD	21404				-	EC Id	enti	ricatioi	יו ה	vum	iber		
	Purpose of Disbursement				-	\neg			_			_			
								Tra	ansa	action	ID) : S	B29.1	1063	
	Candidate Name				egor	y/	Α	moun	t of	Each	Di	sbu	rseme	nt this	Period
	Office Sought: House Disburse	ment For:		ı	уре								-	500.	00
	Senate Dispulse	Primary	General				ŀ	-		,			7		
	President	Other (spe						٦							
	State: District:	, (5)50	•				L	Me	mo	Item					
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s	UBTOTAL of Disbursements This Page (optional).					•				7				1250	.00
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Ιт	OTAL This Period (last page this line number only	v)							_	_			_		

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SCHEDULE B (FEC Form 3X)			EOD LINE	NE NUMBER: PAGE 77 OF 78					
ITEMIZED DISBURSEMENTS		arate schedule(s)	(check only	E NOMBER.					
II LIVIIZED DISBURSEIVIEN IS	for each category of the								
	Detailed \$	Summary Page	28a	28b 28c x 29 30b					
Any information copied from such Reports and State	ments may r	not be sold or us	sed by any nerso						
or for commercial purposes, other than using the na									
NAME OF COMMITTEE (In Full)									
FIRST COLONIES ANESTHESIA	ASSOCI	ATESTIC	POLITICAI	ACTION COMMITTEE					
/	, (0000)	., .,	. 02.110/1	- , (3 . 13 ! 4 3 3 WIIVII I I L L					
Full Name (Last, First, Middle Initial)									
A. Friends Of Ron Young				Date of Disbursement					
				M M / D D / Y T Y T Y					
Mailing Address PO Box 724				12 01 2016					
211	O	I :							
City	State	Zip Code		FEC Identification Number					
Frederick Purpose of Disbursement	MD	21705							
ו מוףטפר טו טופטמופרוופרונ				C					
Candidate Name				Transaction ID : SB29.11071					
Cardinatio Harrio			Category/ Type	Amount of Each Disbursement this Period					
Office Sought: House Disburse	ment For:		Type	250.00					
Senate	Primary	General							
President	Other (spec								
State: District:	(-1	<i>></i> / ₹		Memo Item					
Full Name (Last, First, Middle Initial)									
B. Friends of Steve Hershey				Date of Disbursement					
Therias of Oleve Hersitey				M = M / D = D / Y = Y = Y					
Mailing Address 104 Wye View Road				12 01 2016					
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,									
City	State	Zip Code		FEC Identification Number					
Queenstown	MD	21658							
Purpose of Disbursement				Transaction ID : SB29.11072 Amount of Each Disbursement this Period 500.00					
Candidate Name									
Candidate maine			Category/						
Office Sought: House Disburse	ment For:		Туре						
Senate Disburse	Primary	General		300.00					
President	Other (spec								
State: District:	Outer (sher			Memo Item					
Full Name (Last, First, Middle Initial)									
C. Marylanders for Madaleno				Date of Disbursement					
- warylanders for wadateno									
Mailing Address 11117 Dewey Road				12 01 2016					
5 5 11 111 Doney Road									
City	State	Zip Code		FEC Identification Number					
Kensington	MD	20895							
Purpose of Disbursement				C					
Canalidata Nama				Transaction ID : SB29.11070					
Candidate Name			Category/	Amount of Each Disbursement this Period					
Office Squakt: House District	mont For		Туре	500.00					
	ment For:	Conoral		300.00					
Senate President	Other (spec	General							
State: District:	Other (spec	ally) ▼		Memo Item					
State. DISTIPCT.									
OUDTOTAL -4 Did				1250.00					
SUBTOTAL of Disbursements This Page (optional).			·····•	1200.00					
TOTAL This Period (last nage this line number only	·\		_						

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SCHEDULE B (FEC Form 3X)			EOD LINE	LINE NUMBER: PAGE 78 OF 78					
ITEMIZED DISBURSEMENTS	D DISPLIPSEMENTS Use separate schedule(s) (check of								
		category of the Summary Page	21b	22 23 26 27					
	Dotailed	- canimary rage	28a	28b 28c x 29 30b					
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NAME OF COMMITTEE (In Full)	iame and add	noss or any pollu	cai committee (C	, someti continuations from such confinitee.					
FIRST COLONIES ANESTHESI		HATESIIC	POLITICAL	ACTION COMMITTEE					
/		,,, \		L //OTTOTA GOIVIIVITTEL					
Full Name (Last, First, Middle Initial)				Date of Disbursement					
A. Marylanders For Miller				Date of Dispursement					
Mailing Address 1200 Light Street				12 05 2016					
Unit B	T -	T							
City Baltimore	State MD	Zip Code 21230		FEC Identification Number					
Purpose of Disbursement	IVID	21230		C					
•				Transaction ID : SB29.11074					
Candidate Name			Category/	Amount of Each Disbursement this Period					
Office Country			Type	5000.00					
Office Sought: House Disbur	sement For: Primary	General		5000.00					
President	Other (spe			П., .					
State: District:				Memo Item					
Full Name (Last, First, Middle Initial)									
B. People For Pendergrass				Date of Disbursement					
Mailing Address PO Box 6711				12 01 2016					
Maining Address PO BOX 0/11				12 01 2010					
City	State	Zip Code		FEC Identification Number					
Columbia Purpose of Disbursement	MD	21045							
i dipose of Disbursement				C					
Candidate Name			Category/	Transaction ID : SB29.11065 Amount of Each Disbursement this Period					
			Type						
<u> </u>	sement For:			750.00					
Senate President	Other (spe	General							
State: District:	Other (she	, on y j		Memo Item					
Full Name (Last, First, Middle Initial)									
C. The Committee To Elect Ted So	phocleus			Date of Disbursement					
Mailing Address 6584 Brentwood Road				12 01 2016					
waiiiiy Audiess 6584 Brentwood Road				12 01 2010					
City	State	Zip Code		FEC Identification Number					
Linthicum Purpose of Disbursement	MD	21090							
i dipose oi Dispuisement				C Towns in the Open Manage					
Candidate Name			Category/	Transaction ID: SB29.11066 Amount of Each Disbursement this Period					
			Type						
_	sement For:			250.00					
Senate President	Other (spe	General							
State: District:	Other (spe	Jony) ▼		Memo Item					
SUBTOTAL of Disbursements This Page (optional	l)			6000.00					
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