

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

MedAssets, Inc. Political Action Committee

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="2977.55"/>	<input type="text" value="2977.55"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="2977.55"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="23250.00"/>	<input type="text" value="23250.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="26227.55"/>	<input type="text" value="26227.55"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="158.76"/>	<input type="text" value="158.76"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="26068.79"/>	<input type="text" value="26068.79"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

MedAssets, Inc. Political Action Committee

Report Covering the Period: From: / / To: / /

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).....	22500.00	22500.00
(ii) Unitemized	750.00	750.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	23250.00	23250.00
(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)	23250.00	23250.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	23250.00	23250.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	23250.00	23250.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	158.76	158.76
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	158.76	158.76
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	158.76	158.76
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	158.76	158.76

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	23250.00	23250.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	23250.00	23250.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	158.76	158.76
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	158.76	158.76

**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 6 OF 16
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
MedAssets, Inc. Political Action Committee

A. Anthony Colaluca
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 North Point Center East
 Suite 200
 City Alpharetta State GA Zip Code 30022-8261
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MedAssets, Inc. Occupation Chief Financial Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2015
Transaction ID : 7175230
 Amount of Each Receipt this Period
 2000.00
 Contribution

B. Keith Hicks
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 North Point Center East
 Suite 200
 City Alpharetta State GA Zip Code 30022-8261
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MedAssets, Inc. Occupation Chief People Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2015
Transaction ID : 7175231
 Amount of Each Receipt this Period
 250.00
 Contribution

C. Amy Amick
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 North Point Center East
 Suite 200
 City Alpharetta State GA Zip Code 30022-8261
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MedAssets, Inc. Occupation President, RCM Segment
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2015
Transaction ID : 7175232
 Amount of Each Receipt this Period
 1000.00
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	3250.00
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	FOR LINE NUMBER: (check only one)	PAGE 7 OF 16
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
MedAssets, Inc. Political Action Committee

A. Charles O Garner III
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 North Point Center East
 Suite 200
 City Alpharetta State GA Zip Code 30022-1506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MedAssets, Inc. Occupation Executive Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2015
Transaction ID : 7175233
 Amount of Each Receipt this Period
 1000.00
 Contribution

B. David W Holder
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 North Point Center East
 Suite 200
 City Alpharetta State GA Zip Code 30022-1506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MedAssets, Inc. Occupation Senior Advisory Board Member
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2015
Transaction ID : 7175234
 Amount of Each Receipt this Period
 250.00
 Contribution

C. Lisa Simovic
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 North Point Center East
 Suite 200
 City Alpharetta State GA Zip Code 30022-8261
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MedAssets, Inc. Occupation Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2015
Transaction ID : 7175236
 Amount of Each Receipt this Period
 250.00
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
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	FOR LINE NUMBER: (check only one)	PAGE 8 OF 16
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MedAssets, Inc. Political Action Committee

A. Maureen A Gender
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 North Point Center East
 Suite 200
 City Alpharetta State GA Zip Code 30022-1506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MedAssets, Inc. Occupation Senior Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2015
Transaction ID : 7175239
 Amount of Each Receipt this Period
 500.00
 Contribution

B. Joan Mullins
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 North Point Center East
 Suite 200
 City Alpharetta State GA Zip Code 30022-8261
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MedAssets, Inc. Occupation Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2015
Transaction ID : 7175240
 Amount of Each Receipt this Period
 250.00
 Contribution

C. Jonathan H Glenn
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 North Point Center East
 Suite 200
 City Alpharetta State GA Zip Code 30022-1506
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MedAssets, Inc. Occupation Chief Legal Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2015
Transaction ID : 7175241
 Amount of Each Receipt this Period
 2000.00
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	2750.00
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	FOR LINE NUMBER: (check only one)	PAGE 9 OF 16
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MedAssets, Inc. Political Action Committee

A. Harris Hyman
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 North Point Center East
 Suite 200
 City Alpharetta State GA Zip Code 30022-8261
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MedAssets, Inc. Occupation Member of Board of Directors
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2015
Transaction ID : 7175242
 Amount of Each Receipt this Period
 1000.00
 Contribution

B. Matthew T Willaert
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 North Point Center East
 Suite 200
 City Alpharetta State GA Zip Code 30022-8261
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MedAssets, Inc. Occupation Senior Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2015
Transaction ID : 7175243
 Amount of Each Receipt this Period
 250.00
 Contribution

C. Michael Nolte
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 North Point Center East
 Suite 200
 City Alpharetta State GA Zip Code 30022-8261
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MedAssets, Inc. Occupation President, COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2015
Transaction ID : 7175244
 Amount of Each Receipt this Period
 1000.00
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	2250.00
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	FOR LINE NUMBER: (check only one)	PAGE 10 OF 16
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MedAssets, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Rand A Ballard		Date of Receipt
Mailing Address 100 North Point Center East Suite 200		<input type="text" value="06"/> / <input type="text" value="02"/> / <input type="text" value="2015"/>
City Alpharetta	State GA	Zip Code 30022-1506
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 7175245
Name of Employer MedAssets, Inc.		Amount of Each Receipt this Period
Occupation Chief Customer Officer		<input type="text" value="5000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Contribution
<input type="text" value="5000.00"/>		

Full Name (Last, First, Middle Initial) B. Charles Evans		Date of Receipt
Mailing Address 100 North Point Center East Suite 200		<input type="text" value="06"/> / <input type="text" value="02"/> / <input type="text" value="2015"/>
City Alpharetta	State GA	Zip Code 30022-8261
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 7175246
Name of Employer MedAssets, Inc.		Amount of Each Receipt this Period
Occupation Senior Advisory Board Member		<input type="text" value="500.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Contribution
<input type="text" value="500.00"/>		

Full Name (Last, First, Middle Initial) C. Vernon R Loucks Jr		Date of Receipt
Mailing Address 100 North Point Center East Suite 200		<input type="text" value="06"/> / <input type="text" value="02"/> / <input type="text" value="2015"/>
City Alpharetta	State GA	Zip Code 30022-1506
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 7175249
Name of Employer MedAssets, Inc.		Amount of Each Receipt this Period
Occupation Member of Board of Directors		<input type="text" value="1000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	Contribution
<input type="text" value="1000.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="6500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 11 OF 16
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MedAssets, Inc. Political Action Committee

A. Blaine Douglas
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 North Point Center East
 Suite 200
 City Alpharetta State GA Zip Code 30022-8261
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MedAssets, Inc. Occupation Senior Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2015
Transaction ID : 7175250
 Amount of Each Receipt this Period
 500.00
 Contribution

B. Kathy Willis
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 North Point Center East
 Suite 200
 City Alpharetta State GA Zip Code 30022-8261
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MedAssets, Inc. Occupation Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2015
Transaction ID : 7175251
 Amount of Each Receipt this Period
 500.00
 Contribution

C. Michael Costante
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 North Point Center East
 Suite 200
 City Alpharetta State GA Zip Code 30022-8261
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MedAssets, Inc. Occupation Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2015
Transaction ID : 7175252
 Amount of Each Receipt this Period
 250.00
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
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	FOR LINE NUMBER: (check only one)	PAGE 12 OF 16
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
MedAssets, Inc. Political Action Committee

Full Name (Last, First, Middle Initial)
A. Cosmo A Piccolo

Mailing Address 100 North Point Center East
Suite 200

City Alpharetta State GA Zip Code 30022-1506

FEC ID number of contributing federal political committee. **C**

Name of Employer MedAssets, Inc. Occupation Member of Board of Directors

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2015
Transaction ID : 7175253

Amount of Each Receipt this Period
1000.00

Contribution

Full Name (Last, First, Middle Initial)
B. Timothy Lyon

Mailing Address 100 North Point Center East
Suite 200

City Alpharetta State GA Zip Code 30022-8261

FEC ID number of contributing federal political committee. **C**

Name of Employer MedAssets, Inc. Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2015
Transaction ID : 7175255

Amount of Each Receipt this Period
250.00

Contribution

Full Name (Last, First, Middle Initial)
C. Sandra W Green

Mailing Address 100 North Point Center East
Suite 200

City Alpharetta State GA Zip Code 30022-8261

FEC ID number of contributing federal political committee. **C**

Name of Employer MedAssets, Inc. Occupation Senior Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 08 / 2015
Transaction ID : 7175293

Amount of Each Receipt this Period
250.00

Contribution

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
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	FOR LINE NUMBER:	PAGE 13 OF 16
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MedAssets, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Erik R Axter		Date of Receipt MM / DD / YYYY 06 / 12 / 2015 Transaction ID : 7175575
Mailing Address 100 North Point Center East Suite 200		Amount of Each Receipt this Period 500.00
City Alpharetta	State GA	Zip Code 30022-8261
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer MedAssets, Inc.	Occupation Senior Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Jim Keleher		Date of Receipt MM / DD / YYYY 06 / 12 / 2015 Transaction ID : 7175576
Mailing Address 100 North Point Center East Suite 200		Amount of Each Receipt this Period 250.00
City Alpharetta	State GA	Zip Code 30022-8261
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer MedAssets, Inc.	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ned R Lehman		Date of Receipt MM / DD / YYYY 06 / 12 / 2015 Transaction ID : 7175577
Mailing Address 100 North Point Center East Suite 200		Amount of Each Receipt this Period 500.00
City Alpharetta	State GA	Zip Code 30022-8261
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer MedAssets, Inc.	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
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	FOR LINE NUMBER:	PAGE 14 OF 16
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MedAssets, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Mark B Miriani		Date of Receipt MM / DD / YYYY 06 / 12 / 2015 Transaction ID : 7175578
Mailing Address 100 North Point Center East Suite 200		Amount of Each Receipt this Period 500.00
City Alpharetta	State GA	Zip Code 30022-1506
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer MedAssets, Inc.	Occupation Senior Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. John Julian		Date of Receipt MM / DD / YYYY 06 / 12 / 2015 Transaction ID : 7175579
Mailing Address 100 North Point Center East Suite 200		Amount of Each Receipt this Period 250.00
City Alpharetta	State GA	Zip Code 30022-8261
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer MedAssets, Inc.	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ronald A Hartmann		Date of Receipt MM / DD / YYYY 06 / 12 / 2015 Transaction ID : 7175580
Mailing Address 100 North Point Center East Suite 200		Amount of Each Receipt this Period 500.00
City Alpharetta	State GA	Zip Code 30022-1506
FEC ID number of contributing federal political committee. C		Contribution
Name of Employer MedAssets, Inc.	Occupation Senior Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
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	FOR LINE NUMBER: (check only one)	PAGE 15 OF 16
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MedAssets, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Natalie Gray		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 12 / 2015 Transaction ID : 7175581
Mailing Address 100 North Point Center East Suite 200		Amount of Each Receipt this Period 250.00
City Alpharetta	State GA	
Zip Code 30022-8261		Contribution
FEC ID number of contributing federal political committee. C		
Name of Employer MedAssets, Inc.	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Barbara Anspach		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 12 / 2015 Transaction ID : 7175948
Mailing Address 100 North Point Center East Suite 200		Amount of Each Receipt this Period 250.00
City Alpharetta	State GA	
Zip Code 30022-8261		Contribution
FEC ID number of contributing federal political committee. C		
Name of Employer MedAssets, Inc.	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Jessica Zeitlen		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 23 / 2015 Transaction ID : 7175949
Mailing Address 100 North Point Center East Suite 200		Amount of Each Receipt this Period 250.00
City Alpharetta	State GA	
Zip Code 30022-8261		Contribution
FEC ID number of contributing federal political committee. C		
Name of Employer MedAssets, Inc.	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	750.00
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	FOR LINE NUMBER: (check only one)	PAGE 16 OF 16
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MedAssets, Inc. Political Action Committee

A. Richard Tucker
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 North Point Center East
 Suite 200
 City Alpharetta State GA Zip Code 30022-8261
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MedAssets, Inc. Occupation Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 23 / 2015
Transaction ID : 7175950
 Amount of Each Receipt this Period
 250.00
 Contribution

B.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	22500.00