
4. TYPE OF REPORT
(Choose One)
(a) Quarterly Reports:


April 15
Quarterly Report (Q1)


July 15
Quarterly Report (Q2)


October 15
Quarterly Report (Q3)
January 31
Year-End Report (YE)
July 31 Mid-Year
Report (Non-election Year Only) (MY)
$\square$ Termination Report (TER)


Feb 20 (M2)

| $\square$ | May 20 (M5) |
| :--- | :--- |
| $\square$ | Jun $20($ M6 $)$ |
| $\square$ | Jul $20(M 7)$ |

(c) 12-Day PRE-Election Report for the:


Primary (12P)
Convention (12C)


General (12G)
Special (12S)

Election on $\qquad$

in the State of

Nov 20 (M11) (Non-Election Year Only)
Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE)
(d) 30-Day POST-Election Report for the:

Election on


General (30G)


Runoff (30R)
 Special (30S)
in the State of

AL
5. Covering Period

through



I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Richard L. Sharff Jr.

| Signature of Treasurer | Richard L. Sharff Jr. | [Electronically Filed] | Date | $\begin{aligned} & \mathrm{M} \\ & 12 \end{aligned}$ | $\begin{aligned} & D \\ & 04 \\ & \hline \end{aligned}$ |  | $2014$ |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. $\S 437 \mathrm{~g}$.

|  | Office Use Only |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |

FEC FORM 3X

FEC Form 3X (Rev. 02/2003)
Write or Type Committee Name
SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE


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

## Write or Type Committee Name

## SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE


11. Contributions (other than loans) From:
(a) Individuals/Persons Other

Than Political Committees
(i) Itemized (use Schedule A)............
(ii) Unitemized
(iii) TOTAL (add

Lines 11(a)(i) and (ii). $\qquad$
(b) Political Party Committees $\qquad$
(c) Other Political Committees (such as PACs). $\qquad$

|  | 4946.52 |
| :---: | :---: |
|  | 615.55 |
|  | 5562.07 |
|  | 0.00 |
|  | 0.00 |


|  | 29650.32 |
| :---: | :---: |
|  | 15300.55 |
|  | ,$\quad 44950.87$ |
|  | 0.00 |
|  | ,$\quad 0.00$ |

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)


|  | 0.00 |
| :---: | :---: |
|  | 0.00 |


|  | 0.00 |
| :---: | :---: |
| $-2,0.00$ |  |

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees. $\qquad$
17. Other Federal Receipts
(Dividends, Interest, etc.) $\qquad$
18. Transfers from Non-Federal and Levin Funds
(a) Non-Federal Account
(from Schedule H3)...........................
(b) Levin Funds (from Schedule H5) .........
(c) Total Transfers (add 18(a) and 18(b))..

|  | 0.00 |
| :---: | :---: |
| , 0.00 |  |
|  | 0.00 |

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) ......... $\square$

| 44976.87 |
| :---: | :---: |
| -24976.87 |

20. Total Federal Receipts
(subtract Line 18(c) from Line 19) ......... $\downarrow$


FEC Form 3X (Rev. 02/2003)

## II. Disbursements

21. Operating Expenditures:
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)
(i) Federal Share $\qquad$
(ii) Non-Federal Share. $\qquad$
(b) Other Federal Operating Expenditures $\qquad$
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) $\qquad$ $\ldots$
22. Transfers to Affiliated/Other Party Committees
23. Contributions to

Federal Candidates/Committees and Other Political Committees. $\qquad$
24. Independent Expenditures (use Schedule E)
25. Coordinated Party Expenditures
(2 U.S.C. §441a(d))
(use Schedule F)... $\qquad$
26. Loan Repayments Made $\qquad$
27. Loans Made
28. Refunds of Contributions To:
(a) Individuals/Persons Other Than Political Committees $\qquad$
(b) Political Party Committees $\qquad$
(c) Other Political Committees (such as PACs). s)..
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..........
29. Other Disbursements $\qquad$
0.0 .00
$0,0.00$
30. Federal Election Activity (2 U.S.C. §431(20))
(a) Allocated Federal Election Activity (from Schedule H6)
(i) Federal Share $\qquad$
(ii) "Levin" Share. $\qquad$
$\qquad$
(b) Federal Election Activity Paid Entirely With Federal Funds $\qquad$
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).
..

| , 0.00 |  |
| :---: | :---: |
| , 0, | 0.00 |
| 0, | 0.00 |
| 0, | 0.00 |


|  | 0.00 |
| :---: | :---: |
| ,$\quad$, | 0.00 |
| 0, | 0.00 |
| 0, | 0.00 |

31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..
0.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)

0.00

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

## III. Net Contributions/Operating Expenditures

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

COLUMN A Total This Period

COLUMN B Calendar Year-to-Date



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



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)

## SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)


Date of Receipt


Transaction ID : SA11AI. 4905
Amount of Each Receipt this Period
$\square 30.00$

Payroll deduction $\$ 10.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4906
Amount of Each Receipt this Period
57.00

Payroll deduction $\$ 19.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4907
Amount of Each Receipt this Period
45.00

Payroll deduction $\$ 15.00$ biweekly

| SUBTOTAL of Receipts This Page (optional)................................................................. | $132.00$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)...................................................... |  |

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



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## NAME OF COMMITTEE (In Full)

## SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

| Mailing Address 3000 Riverchase Galleria Suite 500 |  |
| :---: | :---: |
| City Birmingham | State Zip Code <br> AL 35244 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer <br> Surgical Care Affiliates | Occupation <br> Vice President |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date |

Full Name (Last, First, Middle Initial)
B. Kenneth Bulow

Mailing Address 3000 Riverchase Galleria

| City <br> Birmingham | State <br> AL | Zip Code <br> 35244 |
| :--- | :--- | :--- |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer |  |  |
| Surgical Care Affiliates | Occupation |  |
| Group Vice President |  |  |

Full Name (Last, First, Middle Initial)
C. Sandra K. Bunch

| $\begin{array}{ll}\text { Mailing Address } & 3000 \text { Riverchase Galleria } \\ \text { Suite } 500\end{array}$ |  |
| :---: | :---: |
| City | State Zip Code |
| Birmingham | AL 35244 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer | Occupation |
| Surgical Care Affiliates | Administrator |
| Receipt For: | Aggregate Year-to-Date $\boldsymbol{\nabla}$ |
| Other (specify) | $455.00$ |

Date of Receipt


Transaction ID : SA11AI. 4910
Amount of Each Receipt this Period
$\square 60.00$

Payroll deduction $\$ 20.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4911
Amount of Each Receipt this Period
60.00

Payroll deduction $\$ 20.00$ biweekly

Date of Receipt


## Transaction ID : SA11AI. 4912

Amount of Each Receipt this Period
30.00

Payroll deduction $\$ 10.00$ biweekly

SUBTOTAL of Receipts This Page (optional).

| 0 | 150.00 |
| :--- | :--- | :--- |

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## NAME OF COMMITTEE (In Full)

## SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)


Date of Receipt


Transaction ID : SA11AI. 4913
Amount of Each Receipt this Period
$\square 57.00$

Payroll deduction $\$ 19.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4915
Amount of Each Receipt this Period
150.00

Payroll deduction $\$ 50.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4917
Amount of Each Receipt this Period
346.14

Payroll deduction $\$ 115.38$ biweekly

| SUBTOTAL of Receipts This Page (optional)................................................................ | $553.14$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)...................................................... ${ }^{\text {a }}$. | - |

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## NAME OF COMMITTEE (In Full)

## SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)


Date of Receipt


Transaction ID : SA11AI. 4918
Amount of Each Receipt this Period
$\square, 60.00$

Payroll deduction $\$ 20.00$ biweekly
Full Name (Last, First, Middle Initial)
B.

| John H. Cole |
| :--- |

Mailing Address 3000 Riverchase Galleria
$\quad$ Suite 500

Date of Receipt


Transaction ID : SA11AI. 4919
Amount of Each Receipt this Period


Payroll deduction $\$ 10.00$ biweekly

## Date of Receipt



Transaction ID : SA11AI. 4920
Amount of Each Receipt this Period


Payroll deduction $\$ 19.00$ biweekly
$\square, 147.00$

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

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

FOR LINE NUMBER: PAGE 10 OF (check only one)


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## NAME OF COMMITTEE (In Full)

## SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Cindy L. Davis
Mailing Address 3000 Riverchase Galleria
Suite 500

Date of Receipt


Transaction ID : SA11AI. 4922
Amount of Each Receipt this Period
$\square 30.00$

Payroll deduction $\$ 10.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4923
Amount of Each Receipt this Period


Payroll deduction $\$ 10.00$ biweekly

## Date of Receipt



Transaction ID : SA11AI. 4925
Amount of Each Receipt this Period
75.00

Payroll deduction $\$ 25.00$ biweekly
$\square, 135.00$

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



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## NAME OF COMMITTEE (In Full)

## SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)


Date of Receipt


Transaction ID : SA11AI. 4926
Amount of Each Receipt this Period
$\square \quad 75.00$

Payroll deduction $\$ 25.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4929
Amount of Each Receipt this Period
231.00

Payroll deduction $\$ 77.00$ biweekly

## Date of Receipt



Transaction ID : SA11AI. 4930
Amount of Each Receipt this Period
345.00

Payroll deduction $\$ 115.00$ biweekly

SUBTOTAL of Receipts This Page (optional).


## 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 (check only one)


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## NAME OF COMMITTEE (In Full)

## SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)


Date of Receipt


Transaction ID : SA11AI. 4931
Amount of Each Receipt this Period
$\square 30.00$

Payroll deduction $\$ 10.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4932
Amount of Each Receipt this Period


Payroll deduction $\$ 10.00$ biweekly

## Date of Receipt



Transaction ID : SA11AI. 4934
Amount of Each Receipt this Period
30.00

Payroll deduction $\$ 10.00$ biweekly
$\square, 90.00$

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

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

FOR LINE NUMBER: PAGE 13 OF (check only one)


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## NAME OF COMMITTEE (In Full)

## SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)


Full Name (Last, First, Middle Initial)
B. Mary A. Gamez

Mailing Address 3000 Riverchase Galleria

| Suite 500 |  |
| :---: | :---: |
| City | State Zip Code |
| Birmingham | AL 35244 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer Surgical Care Affiliates | Occupation <br> Business Office Manager |
|  | Aggregate Year-to-Date $\square$ <br> 230.00 |

Full Name (Last, First, Middle Initial)
C. Gabriel M. Garcia

Mailing Address 3000 Riverchase Galleria


Date of Receipt


Transaction ID : SA11AI. 4935
Amount of Each Receipt this Period
$\square 75.00$

Payroll deduction $\$ 25.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4938
Amount of Each Receipt this Period


Payroll deduction $\$ 10.00$ biweekly

## Date of Receipt



Transaction ID : SA11AI. 4939
Amount of Each Receipt this Period
30.00

Payroll deduction $\$ 10.00$ biweekly

SUBTOTAL of Receipts This Page (optional).

| -235.00 |
| :--- | :--- | :--- |

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## NAME OF COMMITTEE (In Full)

## SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)


Date of Receipt


Transaction ID : SA11AI. 4940
Amount of Each Receipt this Period
$\square 30.00$

Payroll deduction $\$ 10.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4941
Amount of Each Receipt this Period
60.00

Payroll deduction $\$ 20.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4942
Amount of Each Receipt this Period
75.00

Payroll deduction $\$ 25.00$ biweekly

| SUBTOTAL of Receipts This Page (optional)................................................................ | $165.00$ |
| :---: | :---: |
| 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 15 OF (check only one)


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## NAME OF COMMITTEE (In Full)

## SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)


Date of Receipt


Transaction ID : SA11AI. 4943
Amount of Each Receipt this Period
$\square \quad 15.00$

Payroll deduction $\$ 15.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4944
Amount of Each Receipt this Period


Payroll deduction $\$ 15.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4946
Amount of Each Receipt this Period
45.00

Payroll deduction $\$ 15.00$ biweekly

| $\square$ | 105.00 |
| :--- | :--- | :--- |

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

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

FOR LINE NUMBER: PAGE 16 OF (check only one)


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## NAME OF COMMITTEE (In Full)

## SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)


Date of Receipt


Transaction ID : SA11AI. 4947
Amount of Each Receipt this Period
$\square 36.00$

Payroll deduction $\$ 12.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4949
Amount of Each Receipt this Period


Payroll deduction $\$ 10.00$ biweekly

## Date of Receipt



Transaction ID : SA11AI. 4950
Amount of Each Receipt this Period


Payroll deduction $\$ 20.00$ biweekly

| $\square$ | 126.00 |
| :--- | :--- | :--- |

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



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## NAME OF COMMITTEE (In Full)

## SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)


Date of Receipt


Transaction ID : SA11AI. 4952
Amount of Each Receipt this Period
$\square 30.00$

Payroll deduction $\$ 10.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4953
Amount of Each Receipt this Period
$\square 90.00$

Payroll deduction $\$ 30.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4954
Amount of Each Receipt this Period
60.00

Payroll deduction $\$ 20.00$ biweekly

| $\square$ | 180.00 |
| :--- | :--- | :--- |

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

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

FOR LINE NUMBER: PAGE 18 OF (check only one)


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## NAME OF COMMITTEE (In Full)

## SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

| Full Name (Last, First, Middle Initial) <br> A. Brian Konieczny |  |
| :---: | :---: |
| Mailing Address 3000 Riverchase Galleria Suite 500 |  |
| City Birmingham | State Zip Code <br> AL 35244 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer <br> Surgical Care Affiliates | Occupation <br> Administrator |
|  | Aggregate Year-to-Date $\square$ <br> 230.00 |

Date of Receipt


Transaction ID : SA11AI. 4956
Amount of Each Receipt this Period
$\square 30.00$

Payroll deduction $\$ 10.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4957
Amount of Each Receipt this Period
$\square 57.00$

Payroll deduction $\$ 19.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4959
Amount of Each Receipt this Period


Payroll deduction $\$ 20.00$ biweekly


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



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## NAME OF COMMITTEE (In Full)

## SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. | Julie A. Lineberger |
| :--- |
| Mailing Address 3000 Riverchase Galleria |
| Suite 500 |

| City | State | Zip Code |
| :--- | :--- | :--- |
| Birmingham | AL | 35244 |
| FEC ID number of contributing <br> federal political committee. | C |  |
| Name of Employer | Occupation |  |
| Surgical Care Affiliates | Administrator |  |
| Receipt For: |  |  |
| $\square$ Primary $\square$ General |  | 220.00 |
| Other (specify) $\nabla$ |  |  |

Date of Receipt


Transaction ID : SA11AI. 4960
Amount of Each Receipt this Period
$\square 30.00$

Payroll deduction $\$ 10.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4961
Amount of Each Receipt this Period


Payroll deduction $\$ 10.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4962
Amount of Each Receipt this Period
30.00

Payroll deduction $\$ 10.00$ biweekly


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



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## NAME OF COMMITTEE (In Full)

## SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)


Date of Receipt


Transaction ID : SA11AI. 4963
Amount of Each Receipt this Period
$\square 30.00$

Payroll deduction $\$ 10.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4964
Amount of Each Receipt this Period
75.00

Payroll deduction $\$ 25.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4965
Amount of Each Receipt this Period
75.00

Payroll deduction $\$ 25.00$ biweekly

SUBTOTAL of Receipts This Page (optional).

|  | 180.00 |
| :--- | :--- | :--- |

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



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## NAME OF COMMITTEE (In Full)

## SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)


Date of Receipt


Transaction ID : SA11AI. 4966
Amount of Each Receipt this Period
$\square 30.00$

Payroll deduction $\$ 10.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4970
Amount of Each Receipt this Period


Payroll deduction $\$ 10.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4972
Amount of Each Receipt this Period
42.00

Payroll deduction $\$ 14.00$ biweekly

| SUBTOTAL of Receipts This Page (optional)................................................................. | $102.00$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... |  |

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



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## NAME OF COMMITTEE (In Full)

## SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)


Date of Receipt


Transaction ID : SA11AI. 4973
Amount of Each Receipt this Period
$\square 30.00$

Payroll deduction $\$ 10.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4974
Amount of Each Receipt this Period


Payroll deduction $\$ 10.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4977
Amount of Each Receipt this Period
75.00

Payroll deduction $\$ 25.00$ biweekly

| SUBTOTAL of Receipts This Page (optional)............................................................... | 135.00 |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... |  |

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



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## NAME OF COMMITTEE (In Full)

## SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

| Mailing Address 3000 Riverchase Galleria$\qquad$ |  |
| :---: | :---: |
| City Birmingham | State Zip Code <br> AL 35244 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer Surgical Care Affiliates | Occupation <br> Administrator |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date $\square$ |

Date of Receipt


Transaction ID : SA11AI. 4978
Amount of Each Receipt this Period
$\square, 60.00$

Payroll deduction $\$ 20.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4979
Amount of Each Receipt this Period


Payroll deduction $\$ 10.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4980
Amount of Each Receipt this Period
60.00

Payroll deduction $\$ 20.00$ biweekly

| $\square$ | 150.00 |
| :--- | :--- | :--- |

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



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)

## SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)


Full Name (Last, First, Middle Initial)
B. Peggy Rhoads

Mailing Address 3000 Riverchase Galleria

| Suite 500 |  |
| :---: | :---: |
| City | State Zip Code |
| Birmingham | AL 35244 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer Surgical Care Affiliates | Occupation <br> Administrator |
|  | Aggregate Year-to-Date $\square$ <br> 230.00 |

Full Name (Last, First, Middle Initial)
C. Cory P Roberts

| Mailing Address 3000 Riverchase Galleria Suite 500 |  |
| :---: | :---: |
| City | State Zip Code |
| Birmingham | AL 35244 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer | Occupation |
| Surgical Care Affiliates | VP, Operations |
| Receipt For: | Aggregate Year-to-Date $\boldsymbol{V}$ |
| Other (specify) | $884.58$ |

Date of Receipt


Transaction ID : SA11AI. 4981
Amount of Each Receipt this Period
$\square 45.00$

Payroll deduction $\$ 15.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4982
Amount of Each Receipt this Period


Payroll deduction $\$ 10.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4983
Amount of Each Receipt this Period
115.38

Payroll deduction $\$ 38.46$ biweekly

|  | 190.38 |
| :--- | :--- | :--- |

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



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## NAME OF COMMITTEE (In Full)

## SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

| Mailing Address 3000 Riverchase Galleria Suite 500 |  |
| :---: | :---: |
| City <br> Birmingham | State Zip Code <br> AL 35244 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer Surgical Care Affiliates | Occupation <br> Administrator |
|  | Aggregate Year-to-Date $\square$ <br> 230.00 |

Date of Receipt


Transaction ID : SA11AI. 4984
Amount of Each Receipt this Period
$\square 30.00$

Payroll deduction $\$ 10.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4985
Amount of Each Receipt this Period
75.00

Payroll deduction $\$ 25.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4986
Amount of Each Receipt this Period


Payroll deduction $\$ 77.00$ biweekly

| SUBTOTAL of Receipts This Page (optional)................................................................ | 336.00 |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... | , |

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



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## NAME OF COMMITTEE (In Full)

## SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)


Date of Receipt


Transaction ID : SA11AI. 4987
Amount of Each Receipt this Period
$\square 75.00$

Payroll deduction $\$ 25.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4991
Amount of Each Receipt this Period
$\square 375.00$

Payroll deduction $\$ 125.00$ biweekly

## Date of Receipt



Transaction ID : SA11AI. 4992
Amount of Each Receipt this Period
75.00

Payroll deduction $\$ 25.00$ biweekly

SUBTOTAL of Receipts This Page (optional).


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



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## NAME OF COMMITTEE (In Full)

## SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)


Date of Receipt


Transaction ID : SA11AI. 4993
Amount of Each Receipt this Period
$\square 45.00$

Payroll deduction $\$ 15.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4994
Amount of Each Receipt this Period


Payroll deduction $\$ 15.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 4995
Amount of Each Receipt this Period
45.00

Payroll deduction $\$ 15.00$ biweekly

| SUBTOTAL of Receipts This Page (optional)................................................................ | , 135.00 |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... |  |

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



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## NAME OF COMMITTEE (In Full)

## SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

| Mailing Address 3000 Riverchase Galleria Suite 500 |  |
| :---: | :---: |
| City Birmingham | State Zip Code <br> AL 35244 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer Surgical Care Affiliates | Occupation Group Vice President |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date $\square$ |

Date of Receipt


Transaction ID : SA11AI. 4996
Amount of Each Receipt this Period
$\square 240.00$

Payroll deduction $\$ 80.00$ biweekly

| Full Name (Last, First, Middle Initial) <br> B. Timothy D. Szott |  |
| :---: | :---: |
| Mailing Address 3000 Riverchase Galleria Suite 500 |  |
| City | State Zip Code |
| Birmingham | AL 35244 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer | Occupation |
| Surgical Care Affiliates | Administrator |
| Receipt For: | Aggregate Year-to-Date $\mathbf{V}$ |
| Other (specify) | 230.00 |

Date of Receipt


Transaction ID : SA11AI. 4998
Amount of Each Receipt this Period


Payroll deduction $\$ 10.00$ biweekly

## Date of Receipt

c. Leslie Wachsman

| Mailing Address 3000 Riverchase Galleria Suite 500 |  |
| :---: | :---: |
| City | State Zip Code |
| Birmingham | AL 35244 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer | Occupation |
| Surgical Care Affiliate | Vice President |
| Receipt For: | Aggregate Year-to-Date $\boldsymbol{\nabla}$ |
| Other (specify) | $437.00$ |


| SUBTOTAL of Receipts This Page (optional).......................................................................... | $327.00$ |
| :---: | :---: |
| TOTAL This Period (last page this line number only)..................................................... |  |

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



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## NAME OF COMMITTEE (In Full)

## SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)


Date of Receipt

| $11$ | $\square$ | $2014$ |
| :---: | :---: | :---: |

Transaction ID : SA11AI. 5001
Amount of Each Receipt this Period
$\square 30.00$

Payroll deduction $\$ 10.00$ biweekly

Date of Receipt


Transaction ID : SA11AI. 5004
Amount of Each Receipt this Period


Payroll deduction $\$ 10.00$ biweekly

Date of Receipt


Amount of Each Receipt this Period
$\square$

|  | 60.00 |
| :---: | :---: |
|  | 4946.52 |

