

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Prison Health Services, Inc. Political Action Committee

ADDRESS (number and street) 105 Westpark Drive Suite 200

Check if different than previously reported. (ACC)

Brentwood TN 37027

2. **FEC IDENTIFICATION NUMBER** C00345496

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

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 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input checked="" type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

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

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12G)	

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

(d) 30-Day **Post -Election** Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 06 01 2008 through 06 30 2008

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 James Sprouse

Signature of Treasurer Electronically Filed by James Sprouse Date 07 15 2008

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

Office Use Only							
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Prison Health Services, Inc. Political Action Committee

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		67557.60
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	62175.79									
(c) Total Receipts (from Line 19) .....	2640.18	17285.57								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	64815.97	84843.17								
7. Total Disbursements (from Line 31) .....	0.00	20027.20								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	64815.97	64815.97								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	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**

Write or Type Committee Name  
Prison Health Services, Inc. Political Action Committee

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	2544.02	14942.85
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	96.16	2342.72
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	2640.18	17285.57
(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) .....	2640.18	17285.57
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 Transfer (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)) .....	2640.18	17285.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	2640.18	17285.57

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	27.20
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	27.20
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	10000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (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	10000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely 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))..	0.00	20027.20
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	20027.20

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	2640.18	17285.57
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2640.18	17285.57
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	27.20
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	27.20

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

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

FOR LINE NUMBER: PAGE 6 / 10  
(check only one)  
 11a    11b    11c    12  
 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)  
Prison Health Services, Inc. Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
RAYMOND LANGHAM

Mailing Address 608 REDLEAF RIDGE CR  
Suite 200

City State Zip Code  
NASHVILLE TN 37211-6936

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

Name of Employer Occupation  
Prison Health Services VP of Human Resources

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

**Transaction ID:** PR1030174620744

Amount of Each Receipt this Period  
40.00

P/R Deduction (\$20.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
GEOFFREY PERSELAY

Mailing Address 35 SANDY HILL ROAD  
Webster Commons Building E

City State Zip Code  
CHATHAM NJ 07928-1556

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

Name of Employer Occupation  
Prison Health Services Group Vice President of Operations

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

**Transaction ID:** PR1083045520744

Amount of Each Receipt this Period  
100.00

P/R Deduction (\$50.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
JOHN STAFFARONI

Mailing Address 220 LOPAX ROAD

City State Zip Code  
HARRISBURG PA 17112

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

Name of Employer Occupation  
Prison Health Services Regional Vice President

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

**Transaction ID:** PR1299857220744

Amount of Each Receipt this Period  
50.00

P/R Deduction (\$25.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **190.00**

**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 / 10
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<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)  
Prison Health Services, Inc. Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) LEE HARRINGTON	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 6 GRAYSTONE MANOR DRIVE	<b>Transaction ID:</b> PR1299857320744
	City State Zip Code CAMP HILL PA 17011	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Prison Health Services	Occupation Vice President	P/R Deduction (\$25.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) JAMES TINNEY	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 4903 RIDGE CREST CT	<b>Transaction ID:</b> PR1299940820744
	City State Zip Code FREDERICK MD 21702-3531	Amount of Each Receipt this Period 49.24
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Prison Health Services	Occupation Regional Vice President	P/R Deduction (\$24.62 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.06	

<b>C.</b>	Full Name (Last, First, Middle Initial) GREGG SHOEMAKER	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 7149 EST AVENIDA DEL RAY	<b>Transaction ID:</b> PR1299941020744
	City State Zip Code PEORIA AZ 85383	Amount of Each Receipt this Period 43.58
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Prison Health Services	Occupation Regional Vice President	P/R Deduction (\$21.79 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 283.27	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>142.82</b>
<b>TOTAL</b> 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 8 / 10  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Prison Health Services, Inc. Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
RICHARD HALLWORTH

Mailing Address 178 CHARLESTON PARK

City State Zip Code  
NASHVILLE TN 37205-4703

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

Name of Employer: Prison Health Services   Occupation: CEO/President/Director

Receipt For:  Primary    General    Other (specify) ▼

Aggregate Year-to-Date ▼ 2470.00

Date of Receipt: 06 / 30 / 2008  
Transaction ID: PR1299941520744  
Amount of Each Receipt this Period: 380.00  
P/R Deduction (\$190.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
MICHAEL CATALANO

Mailing Address 544 GRAND OAKS DRIVE

City State Zip Code  
BRENTWOOD TN 37027-5650

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

Name of Employer: Prison Health Services   Occupation: President, CEO & Chairman

Receipt For:  Primary    General    Other (specify) ▼

Aggregate Year-to-Date ▼ 2499.90

Date of Receipt: 06 / 30 / 2008  
Transaction ID: PR740402020744  
Amount of Each Receipt this Period: 384.60  
P/R Deduction (\$192.30 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
SCOTT HOFFMAN

Mailing Address 5609 OTTERSHAW CT

City State Zip Code  
BRENTWOOD TN 37027-4100

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

Name of Employer: Prison Health Services   Occupation: Senior Vice President & CAO

Receipt For:  Primary    General    Other (specify) ▼

Aggregate Year-to-Date ▼ 2499.90

Date of Receipt: 06 / 30 / 2008  
Transaction ID: PR740402720744  
Amount of Each Receipt this Period: 384.60  
P/R Deduction (\$192.30 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1149.20

**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 9 / 10  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Prison Health Services, Inc. Political Action Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) JESSE HUBLING</p> <p>Mailing Address 9510 GRAND HAVEN DRIVE</p> <p>City State Zip Code BRENTWOOD TN 37027-2619</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Prison Health Services</p> <p>Occupation Vice President for Business Dev.</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">988.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">06 / 30 / 2008</span></p> <p><b>Transaction ID:</b> PR740402920744</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">152.00</span></p> <p>P/R Deduction (\$76.00 Bi-Weekly)</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) CARL J KELDIE</p> <p>Mailing Address 6326 WESTCATES CT</p> <p>City State Zip Code BRENTWOOD TN 37027-5648</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Prison Health Services</p> <p>Occupation Corporate Medical Director</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">2600.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">06 / 30 / 2008</span></p> <p><b>Transaction ID:</b> PR740403020744</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">400.00</span></p> <p>P/R Deduction (\$200.00 Bi-Weekly)</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) LAWRENCE H POMEROY</p> <p>Mailing Address 358 ARDSLEY PLACE</p> <p>City State Zip Code NASHVILLE TN 37215-3247</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Prison Health Services</p> <p>Occupation SVP and Chief Development Officer</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">1495.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">06 / 30 / 2008</span></p> <p><b>Transaction ID:</b> PR740403420744</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">230.00</span></p> <p>P/R Deduction (\$115.00 Bi-Weekly)</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">782.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 10
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Prison Health Services, Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial) RODNEY HOLLIMAN		Date of Receipt MM / DD / YYYY 06 / 30 / 2008
Mailing Address 5008 FOUNTAINHEAD DR		<b>Transaction ID:</b> PR862784220744
City BRENTWOOD	State TN	Zip Code 37027-5832
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Prison Health Services	Occupation Group Vice President	P/R Deduction (\$100.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

**B.**

Full Name (Last, First, Middle Initial) JOANNA GARCIA		Date of Receipt MM / DD / YYYY 06 / 30 / 2008
Mailing Address 520 HOPEWOOD CT Suite 200		<b>Transaction ID:</b> PR919889620744
City FRANKLIN	State TN	Zip Code 37064-5529
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00
Name of Employer Prison Health Services	Occupation Vice President	P/R Deduction (\$40.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	280.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	2544.02