Image# 12940443369 PAGE 1 / 8

FEC FORM 3Y

REPORT OF RECEIPTS AND DISBURSEMENTS

TORW 3X	For Other	Than An Aut	horized Comm	ittee		Office Llee Only	
1 NAME OF	TYPE OR I	PRINT ▼	Evennes If t	ming type		Office Use Only	
NAME OF COMMITTEE (in ful		1111 11 ¥	Example: If to over the lines		12FE4M5		
FIRST COLONIE	S ANESTHES	SIA ASSOCI	ATES LLC PO	DLITICAL A	CTION CO	OMMITTEE	
ADDRESS (number and s	treet)	w Technology Way					
Check if differe							
than previously reported. (ACC)		k			MD	21703	
2. FEC IDENTIFICAT	ION NUMBER ▼	CI7	Y 🛦		STATE A	ZIP COI	DE 🛦
C C00416305			S THIS X	NEW (N) OR	AN (A)	IENDED	
4. TYPE OF REPO (Choose One)	Rep	ort	20 (M2)	May 20 (M5)	Aug	20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Report		On: Mar	20 (M3)	Jun 20 (M6)	Sep	20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly R	leport (Q1)	Apr	20 (M4)	Jul 20 (M7)	-	20 (M10)	Jan 31 (YE)
July 15 Quarterly R	(c)	12-Day PRE-Election	Primary (Runoff (12R)
October 15 Quarterly R		Report for the:	Convention	n (12C)	Special (12S) _	
January 31 Year-End R	leport (YE)	Election	on on 11	06	2012	in the State of	MD
July 31 Mic Report (No Year Only)	n-election (u)	30-Day POST-Election Report for the:	General (30G)	Runoff (3	50R)	Special (30S)
Termination (TER)	Report	Election	on on	/ D D /	Y	in the State of	
5. Covering Period	M M / D 01	2012	throug	h 10	/ D D /	2012	
certify that I have exam	nined this Report a	nd to the best of	my knowledge ar	d belief it is tru	e. correct and	d complete.	
Type or Print Name of T	•						
Signature of Treasurer	Dr. Jeremy Roth		[Electronic	ally Filed]	eate 10	/ 25 /	2012
NOTE: Submission of fals	e, erroneous, or inc	omplete informatio	n may subject the I	person signing th	nis Report to th	ne penalties of 2 U	J.S.C. §437g.
Office		·				-	
Use Only						FEC FOR Rev. 12/20	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE

_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
(a) Cash on Hand January 1, 2012		89717.90
(b) Cash on Hand at Beginning of Reporting Period	107415.27	
(c) Total Receipts (from Line 19)	0.00	36290.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	107415.27	126007.90
Total Disbursements (from Line 31)	3250.00	21842.63
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	104165.27	104165.27
Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
This committee has qualified as a multicandi	date committee. (see FEC FORM 1M)	

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

FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE

I. Receipts	COLUMN A	COLUMN B
<u> </u>	Total This Period	Calendar Year-to-Date
Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	0.00	25230.00
(i) Itemized (use Schedule A)	0.00	1020000
(**) 11.31	0.00	11060.00
(ii) Unitemized	0.00	11000.00
(iii) TOTAL (add	0.00	36290.00
Lines 11(a)(i) and (ii)▶	0.00	30230.30
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	7 7	
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines	7	
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	0.00	36290.00
Transfers From Affiliated/Other		
Party Committees	0.00	0.00
,		
All Loans Received	0.00	0.00
Loan Repayments Received	0.00	0.00
Offsets To Operating Expenditures	7	7
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
Refunds of Contributions Made		7
to Federal Candidates and Other		
Political Committees	0.00	0.00
Other Federal Receipts	7	
(Dividends, Interest, etc.)	0.00	0.00
Transfers from Non-Federal and Levin Funds	7	
(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
_	7	
Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))	0.00	36290.00
, , , , , , , , , , , , , , , , , , , ,	7	
Total Federal Receipts		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
 Operating Expendit (a) Allocated Federal Activity (from the content of t	eral/Non-Federal		200000000000000000000000000000000000000	
	hare	0.00	0.00	
(ii) Non Eada	aral Chara	1250.00	13492.63	
(b) Other Federal	ral Share	1250.55	10432.00	
	g	0.00	0.00	
(c) Total Operating	- '			
	(a)(ii), and (b))▶	1250.00	13492.63	
Transfers to Affiliat Committees	ed/Other Party	0.00	0.00	
 Contributions to Federal Candidates 				
and Other Political	Committees	0.00	0.00	
4. Independent Exper		0.00	0.00	
b. Coordinated Party	Expenditures	0.00	0.00	
(2 U.S.C. §441a(d) (use Schedule F))	0.00	0.00	
	F			
6. Loan Repayments	Made	0.00	0.00	
7 Loans Made		0.00	0.00	
3. Refunds of Contrib (a) Individuals/Per	utions To:			
Than Political	Committees	0.00	0.00	
<i>(1)</i> = =		0.00	0.00	
(b) Political Party (c) Other Political	Committees	0.00	0.00	
· /	s)	0.00	0.00	
		,		
(d) Total Contribut	tion Refunds (a), (b), and (c))▶	0.00	0.00	
(add Lilles 26	(a), (b), and (c))			
9. Other Disbursemer	nts	2000.00	8350.00	
	-ti-it- (0.11.0.0 \$404(00))	· ·		
	ctivity (2 U.S.C. §431(20)) eral Election Activity			
(from Schedul	•			
	are	0.00	0.00	
(ii) avial Ob	750	0.00	0.00	
` '	are on Activity Paid Entirely	0.00		
, ,	eral Funds	0.00	0.00	
` '	Election Activity (add			
Lines 30(a)(i)	, 30(a)(ii) and 30(b))▶	0.00	0.00	
I. Total Disbursement	ts (add Lines 21(c), 22,			
	28(d), 29 and 30(c))	3250.00	21842.63	
2. Total Federal Disbu				
)(ii) and Line 30(a)(ii)	2000.00	8350.00	

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
3. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	36290.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	36290.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

S ľ

S	CHEDULE B (FEC Form 3X)			FOR LINE I	NUMBER: PAGE 6 OF 8	
	EMIZED DISBURSEMENTS	Use separate schedule(s)		(check only	NONDELL.	
11	LIVIIZED DISBURSEIVIEN IS		tegory of the	21b	22 23 24 25 26	
		Detailed Su	mmary Page	27	28a 28b 28c X 29 30b	
Ar	ry information copied from such Reports and Statem	nents mav not	be sold or us	sed by any perso	on for the purpose of soliciting contributions	
	for commercial purposes, other than using the name					
\setminus	NAME OF COMMITTEE (In Full)					
$ \rangle$	FIRST COLONIES ANESTHESIA	ASSOCIA	TES LLC	POLITICAL	ACTION COMMITTEE	
\angle						
	Full Name (Last, First, Middle Initial)					
A.	Friends of Anthony G. Brown				Date of Disbursement	
	Moiling Address 4040 Hall Chroat				10 03 2012	
	Mailing Address 1010 Hull Street Suite 202				10 03 2012	
		State 2	Zip Code			
	Baltimore		21230		Transaction ID : SB29.6606	
	Purpose of Disbursement					
	Contribution			011	Amount of Each Disbursement this Period	
	Candidate Name			Category/	500.00	
	000			Туре	000.00	
	Office Sought: House Disbursen Senate	nent For: Primary	Conorol			
		Other (specify	General			
	State: MD District:	Other (specify	() ▼			
_	Full Name (Last, First, Middle Initial)					
В.					Date of Disbursement	
	Therias of Bornine Gamson				M M / D D / Y Y Y Y	
	Mailing Address 5532 Norbeck Road				10 08 2012	
	,		Zip Code		Transaction ID : SB29.6610	
	Rockville Purpose of Disbursement	MD	20853			
	Contribution			011	Amount of Each Disbursement this Period	
	Candidate Name				Autount of Each Bloodrooment tille 1 ends	
				Category/ Type	250.00	
	Office Sought:	nent For:		.,,,,,	,	
	Senate	Primary	General			
	President	Other (specify	') ▼			
	State: MD District:					
	Full Name (Last, First, Middle Initial)					
C.	Friends of Kathy Klausmeier				Date of Disbursement	
					M M / D D / Y Y Y Y Y	
	Mailing Address 4100 Walter Ave.				10 08 2012	
	City	State 2	Zip Code			
			21236		Transaction ID: SB29.6608	
	Purpose of Disbursement					
	Contribution			011	Amount of Each Disbursement this Period	
	Candidate Name			Category/	250.00	
	000			Туре	230.00	
	Office Sought: House Disbursen					
		Primary Other (specify	General			
	State: MD District:	Other (specify	() ▼			
Г	NID DIOLIOC.					
۱,	UBTOTAL of Disbursements This Page (optional)				1000.00	
\vdash						
-	OTAL This Period (last page this line number only)					

S 17

SCHEDULE B (FEC Form 3X)		F05 : 11:=	NUMBER: PAGE 7 OF 8
ITEMIZED DISBURSEMENTS	Use separate schedule(s) FOR LINE (check only	NOMBEIT.
II LIVIIZED DISBURSEMENIS	for each category of the	21b	22 23 24 25 26
	Detailed Summary Page	27	28a 28b 28c X 29 30b
Any information copied from such Reports and State	ments may not be sold or u	sed by any person	
or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full)			
angle FIRST COLONIES ANESTHESIA	ASSOCIATES LLC	POLITICAL	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)			
Friends of Kathy Szeliga			Date of Disbursement
" Friends of Kathy Szeliga			M M / D D / Y Y Y
Mailing Address PO Box 40			10 08 2012
City	State Zip Code MD 21087		Transaction ID : SB29.6609
Kingsville Purpose of Disbursement	MD 21087		
Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
		Type	500.00
	ment For:	,	
Senate	Primary General		
State: MD District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
B. Friends of Robert Gargiola			Date of Disbursement
Therias of Robert Sargiola			M M / D D / Y Y Y Y
Mailing Address 11 Balden Street			10 05 2012
Room 104			
City Annapolis	State Zip Code MD 21401		Transaction ID : SB29.6607
Purpose of Disbursement	21401		
Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	500.00
		Type	500.00
	ment For:		
Senate President	Primary General		
State: MD District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
C.			Date of Disbursement
			M - M / D - D / Y - Y - Y
Mailing Address			
City	State Zip Code		
Ony	State Zip Code		
Purpose of Disbursement			
			Amount of Each Disbursement this Period
Candidate Name		Category/	
Office Sought: House Disburse	ment For:	Туре	
Office Sought: House Disburse	Primary General		
President	Other (specify)		
State: District:	, , , , , , , , , , , , , , , , , , ,		
SUBTOTAL of Disbursements This Page (optional).		·····	1000.00
			2000.00
TOTAL This Period (last page this line number only	′)		2000.00

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE	8	OF	8	
FOR L	INE	21a O	F FORM	1 3X

NAME OF COMMITTEE (In Full)

<u> </u>	IRST COLONIES ANESTHESIA	1 A3300	JATES LLC	POLITICAL	
A.	Full Name (Last, First, Middle Initial)		ID : H4.6604		Allocated Activity or Event:
	Barbara Marx Brocato & Assoc	ciates			Administrative Fundraising Exempt
	Mailing Address 18 Pinkney Street				Voter Drive Direct Candidate Support
	City	State	Zip Code		Public Comm (ref to party only) by PAC
	Annapolis Purpose of Disbursement:	MD	21401		Allocated Activity or Event Year-To-Date
	Lobbying fees			001	13492.63
	Activity or Event Identifier: Administrative			Category/ Type	Date 10 03 / 2012
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
	0.00		7 7	1250.00	1250.00
В.	Full Name (Last, First, Middle Initial)				Allocated Activity or Event:
					Administrative Fundraising Exempt
	Mailing Address				Voter Drive Direct Candidate Support
	City	State	Zip Code		Public Comm (ref to party only) by PAC
	Down of Distance and				Allocated Activity or Event Year-To-Date
	Purpose of Disbursement:				
	Activity or Event Identifier:			Category/	M = M / D = D / Y = Y = Y
				Type	Date
	FEDERAL SHARE	+	NONFEDERAL	SHARE	= TOTAL AMOUNT
			, ,		
_	Full Name (Leet First Middle Initial)				Allocated Activity or Event:
C.	Full Name (Last, First, Middle Initial)				Allocated Activity or Event:
c.	Full Name (Last, First, Middle Initial) Mailing Address				Administrative Fundraising Exempt
C.		State	Zip Code		Administrative Fundraising Exempt
C.	Mailing Address City	State	Zip Code		Administrative Fundraising Exempt Voter Drive Direct Candidate Support
C.	Mailing Address City Purpose of Disbursement:	State	Zip Code		Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC
C.	Mailing Address City	State	Zip Code	Category/ Type	Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
c.	Mailing Address City Purpose of Disbursement: Activity or Event Identifier:		·	Туре	Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date
c.	Mailing Address City Purpose of Disbursement:	State +	Zip Code NONFEDERAL	Туре	Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date
c.	Mailing Address City Purpose of Disbursement: Activity or Event Identifier:		·	Туре	Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date
	Mailing Address City Purpose of Disbursement: Activity or Event Identifier:	+	NONFEDERAL	Туре	Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date
	Mailing Address City Purpose of Disbursement: Activity or Event Identifier: FEDERAL SHARE	+	NONFEDERAL	Type SHARE	Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date
	Mailing Address City Purpose of Disbursement: Activity or Event Identifier: FEDERAL SHARE JBTOTAL of Allocated Federal and NonFederal	+	NONFEDERAL s Page	Type SHARE	Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date TOTAL AMOUNT
SI	Mailing Address City Purpose of Disbursement: Activity or Event Identifier: FEDERAL SHARE JBTOTAL of Allocated Federal and NonFederal FEDERAL SHARE 0.00 OTAL This Period (last page for each line only)	+ Il Activity Thi +	NONFEDERAL s Page NONFEDERAL are to 21(a)(i) and	Type SHARE SHARE 1250.00 NonFederal sh	Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date TOTAL AMOUNT TOTAL AMOUNT 1250.00 are to 21(a)(ii))
SI	Mailing Address City Purpose of Disbursement: Activity or Event Identifier: FEDERAL SHARE JBTOTAL of Allocated Federal and NonFederal FEDERAL SHARE 0.00	+ Il Activity Thi +	NONFEDERAL 3 s Page NONFEDERAL	Type SHARE SHARE 1250.00 NonFederal sh	Administrative Fundraising Exempt Voter Drive Direct Candidate Support Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date TOTAL AMOUNT 1250.00