Image#	10931	017374
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FEC FORM 3X	AN	D DISB	OF REC URSEM An Authorize	ENTS	tee		Office Use Only	
1. NAME OF COMMITTEE (in fu		FEC MAILING YPE OR PRINT		ample:If typing	g, type			
					MMITTEE			
ADDRESS (number and	street) 19	01 RESEARCH	BOULEVARD	SUITE 350				
Check if differ than previousl reported. (ACC	y BC	DCKVILLE					20850	
2. FEC IDENTIFICAT	ION NUMBER	₩	CITY 🛋		S	STATE	ZIPCOD	e 🔺
C00416305			3. IS THIS REPOR		NEW (N) OR	AMI (A)	ENDED	
X July 15 Quarterly October Quarterly January 2 Quarterly July 31 M Report(N Year Only	orts: Report(Q1) Report(Q2) 15 Report(Q3) 31 Report(YE) lid-Year on-election y) (MY)	 Monthly Report Due On: (c) 12-Day PRE-Ele Report f (d) 30-Day Post -E Report f 	er the:	3)	(12C)	Sep 2	2S) in the State of	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) Runoff (12R)
(TER)	on Report		Election on				in the State of	
5. Covering Period	04	012	010	through	06	30	2010	
I certify that I have exam Type or Print Name of T		and to the best or. Jeremy Roth	of my knowledge	e and belief it is	s true, correct a	and complete.		
Signature of Treasurer	Electronically	Filed by Dr	leremy Roth		Da	ate 07	16	2010
NOTE : Submission of f	alse, erroneous,	or incomplete in	nformation may s	ubject the pers	son signing this	Report to the p	penalties of 2 U.S	.C 437g.
Office Use Only							FEC FORM (Rev. 12/200	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

2/34

FEC Form 3X (Rev. 02/2003)

F	eport Covering the Period: From:	D D Y Y Y Y 0 1 2 0 1 0	To: 0 6 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5.	(a) Cash on Hand January 1 2010 ^{Y Y Y}		65435.53
	(b) Cash on Hand at Begining of Reporting Period	66744.28]
	(c) Total Receipts (from Line 19)	12235.00	20325.00
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	78979.28	85760.53
	Total Disbursements (from Line 31)	9089.78	15871.03
	Cash on Hand at Close of		
	Reporting Period (subtract Line 7 from Line 6(d))	69889.50	69889.50
	Debts and Obligations owed TO		
	the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
0.	Debts and Obligations owed BY		
	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

FE6AN026

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE

Report Covering the Period: From:		Fo: 0 6 3 0 Y Y Y Y
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Contributions (other than loans) From: (a) Individuals/Persons Other 		
Than Political Committees (i) Itemized (use Schedule A)	11475.00	11475.00
(ii) Unitemized	760.00	8850.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	▶ 12235.00	20325.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees(such as PACs)(d) Total Contributions (add Lines	0.00	0.00
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	▶ 12235.00	20325.00
2. Transfers From Affiliated/Other Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
 Loan Repayments Received Offsets To Operating Expenditures 	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
to Federal candidates and Other Political Committees	0.00	0.00
 Other Federal Receipts (Dividends, Interest, etc.) 	0.00	0.00
Transfers from Non-Federal and Levin Fu	Inds	
(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
 Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) 		20325.00
. Total Federal Receipts (subtract Line 18(c) from Line 19)	12235.00	20325.00

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)	of Disbursements	4 / 34	
II. DISBURSEMENTS	COLUMN A – Total This Period	COLUMN B Calendar Year-to-Date	
 Operating Expenditures: (a) Shared Federal/Non-Federal 			
(a) Shaled Federal Noill Ederal 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	0.00	
(c) Total Operating Expenditures	• 0.00	0.00	
2. Transfers to Affiliated/Other Party			
Committees 3. Contributions to Endered Candidates/Committees	0.00	0.00	
Federal Candidates/Committees and Other Political Committees Independent Expenditure	5975.00	10475.00	
(use Schedule E)	0.00	0.00	
Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	
6. Loan Repayments Made	0.00	0.00	
7. Loans Made	0.00	0.00	
 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	
	3114.78	5396.03	
 Other Disbursements 	5114.76	5596.05	
 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	
1. Total Disbursements (add Lines 21(c), 22,			
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	9089.78	15871.03	
2. Total Federal Disbursements			
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	9089.78	15871.03	
		1007 1.00	

FE6AN026

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FEC Form 3X (Rev. 02/2003)

DETAILED SUMMARY PAGE

of Disbursements

5 / 34

	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)	12235.00	20325.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	12235.00	20325.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
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	0.00

FE6AN026

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6/34 (check only one)
ſ	Any information copied from such Reports and Si or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any perso	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA ASS			
A.	Full Name (Last, First, Middle Initial) Dr. Maksim Barkinskiy			Date of Receipt
	Mailing Address 4170 Bethesda Ave. #719			0 6 2 5 Y Y Y Y Y 0 6 2 5 2 0 1 0
	City	State	Zip Code	Transaction ID: SA11AI.5126
	Bethesda	MD	20814	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer First Colonies Anesthesia	Occupatio		payroll deduction
	Asso Receipt For:	physiciai		_
	Primary General	Aggregate	e Year-to-Date	1
	Other (specify)	0 0	250.00	
- В.	Full Name (Last, First, Middle Initial) Dr. Marc Beck			Date of Receipt
	Mailing Address 16 Norris Run Court			0 6 2 5 Y Y Y Y Y 0 6 2 5 2 0 1 0
	City	State	Zip Code	Transaction ID: SA11AI.5097
	Reisterstown	MD	21136	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		150.00
	Name of Employer First Colonies Anesthesia	Occupatio Physicia		 payroll deduction
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	250.00]
- C.	Full Name (Last, First, Middle Initial) Dr. John Bunker	I		Date of Receipt
	Mailing Address 15229 National Pike			0 6 2 5 2 0 1 0
	City	State	Zip Code	Transaction ID: SA11AI.5054
	Hagerstown	MD	21740	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		150.00
	Name of Employer First Colonies Anesthesia	Occupatio Physicia		 payroll contribution
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	250.00	
ſ	SUBTOTAL of Receipts This Page (optional)	I		450.00
	TOTAL This Period (last page this line number of		r	

	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 7/34			
	· · · ·		Use separate schedule(s) for each category of the	(check only one)			
	ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12			
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements ma name and ad	Ay not be sold or used by any person ldress of any political committee	13 14 15 16 17 son for the purpose of soliciting contributions to solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full)						
	FIRST COLONIES ANESTHESIA ASS	OMMITTEE					
Α.	Full Name (Last, First, Middle Initial) Dr. Donald Charney			Date of Receipt			
	Mailing Address 3707 Meadowhill Court	Mailing Address 3707 Meadowhill Court					
	City	State	Zip Code	Transaction ID: SA11AI.5098			
	Phoenix	MD	21131	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		150.00			
	Name of Employer First Colonies Anesthesia	Occupatio		payroll deduction			
		Physicia					
	Receipt For: Primary General	Aggregate	e Year-to-Date	-			
	Other (specify)	0 0	250.00				
в.	Full Name (Last, First, Middle Initial) Dr. Stayam Chary			Date of Receipt			
	Mailing Address 9 Alterwood Lane			0 6 / D D / Y Y Y Y 2 5 2 0 1 0			
	City	State	Zip Code	Transaction ID: SA11AI.5099			
	Owings Mill	MD	21117	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		150.00			
	Name of Employer First Colonies Anesthesia	Occupation Physicia		payroll deduction			
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Primary General Other (specify) ▼	0 0	250.00				
С.	Full Name (Last, First, Middle Initial) Dr. Thomas Chau			Date of Receipt			
	Mailing Address 7204 Loch Edin Court			0 6 2 5 2 0 1 0			
	City	State	Zip Code	Transaction ID: SA11AI.5074			
	Potomac	MD	20854	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		150.00			
	Name of Employer First Colonies Anesthesia	Occupation Physicia		payroll deduction			
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Primary General Other (specify) ▼	0 0	250.00				
	SUBTOTAL of Receipts This Page (optional)			450.00			
	TOTAL This Period (last page this line number of	oniy)					

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate s for each catego Detailed Summ	ry of the	FOR LINE NUMBER: PAGE 8 / 34 (check only one) 11c 12 X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	ay not be sold or use Idress of any politica	ed by any person al committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA ASS	SOCIATES	LLC POLITICAL	ACTION CON	IMITTEE
⊻ A.	Full Name (Last, First, Middle Initial) Dr. Dwayn Chen	Date of Receipt			
	Mailing Address 11415 Commonwealth #204	Drive			M M / D D Y
	City	State	Zip Code		Transaction ID: SA11AI.5077
	Rockville	MD	20852		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			150.00
	Name of Employer First Colonies Anesthesia	Occupation Physicia			payroll deduction
	Receipt For:	<u>, </u>	e Year-to-Date 🔻		1
	Primary General Other (specify)		0 0 0 0 0	250.00	
– B.	Full Name (Last, First, Middle Initial) Dr. Edward Chen	I			Date of Receipt
	Mailing Address 10209 Fleming Avenue	e			M M / D D / Y Y Y Y 06 25 2010
	City	State	Zip Code		Transaction ID: SA11AI.5075
	Bethesda	MD	20814		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			150.00 payroll deduction
	Name of Employer First Colonies Anesthesia	Occupatio Physicia			
	Receipt For:	Aggregate	e Year-to-Date 🔻		
	Primary General Other (specify) ▼	0 0		250.00	
– C.	Full Name (Last, First, Middle Initial) Dr. Jen Chen	1			Date of Receipt
	Mailing Address 1104 Mill Ridge Road				0 6 / 2 5 / Y Y Y Y 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	City	State	Zip Code		Transaction ID: SA11AI.5076
		VA	22102		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			150.00
	Name of Employer First Colonies Anesthesia	Occupatio Physicia			payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 🔻	250.00	
ſ	SUBTOTAL of Receipts This Page (optional)				450.00
-	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number				450.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 34 (check only one)
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA ASS	SOCIATES LLC POLITICAL ACTION CC	DMMITTEE
۷ A.	Full Name (Last, First, Middle Initial) Dr. William Chester	Date of Receipt	
	Mailing Address 5801 Nicholon Lane #1915		0 6 2 5 Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: SA11AI.5078
	North Bethesda	MD 20852	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	150.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	payroll deduction
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00]
- B.	Full Name (Last, First, Middle Initial) Dr. Lincoln Coore		Date of Receipt
	Mailing Address 4846 Lee Hollow Place	9	M M / D D Y
	City	State Zip Code	Transaction ID: SA11AI.5100
	Ellicott City	MD 21043	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		225.00
	Name of Employer First Colonies Anesthsia	Occupation Physician	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	375.00	
- C.	Full Name (Last, First, Middle Initial) Dr. Melvin Coursey	I	Date of Receipt
	Mailing Address 18720 Shremor Drive		M M / D D / Y
	City	State Zip Code	Transaction ID: SA11AI.5079
	Derwood	MD 20855	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		150.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00]
Γ		1	525.00

			[i			
	SCHEDULE A (FEC Form 3X)		Use separate	schedule(s)	FOR LINE NUMBER: PAGE 10 / 34 (check only one)		
	TEMIZED RECEIPTS		for each cate	gory of the	\overline{X} 11a 11b 11c 12		
-			Detailed Sum	mary Page			
	Any information copied from such Reports and S or for commercial purposes, other than using the	for the purpose of soliciting contributions					
	NAME OF COMMITTEE (In Full)						
	FIRST COLONIES ANESTHESIA ASS	MMITTEE					
∠ A.	Full Name (Last, First, Middle Initial) Dr. Lauren Deloach	Date of Receipt					
	Mailing Address 15114 Pepperridge Dri	ve			0 6 / 2 5 / Y Y Y Y Y 0 0 1 0		
	City	State	Zip Code		Transaction ID: SA11AI.5045		
	Bowie	MD	20721		Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C			150.00		
	Name of Employer	Occupatio	n		payroll deduction		
	Name of Employer First Colonies Anesthesia	Physicia					
	Receipt For:	Aggregate	e Year-to-Date 🔻	,	1		
	Primary General			250.00			
_	Other (specify)	0 0	0 0 0 0	230.00			
в.	Full Name (Last, First, Middle Initial) Dr. Karen Dugan				Date of Receipt		
	Mailing Address 4107 Vickie Lynn Cour	0 6 / 2 5 / Y Y Y Y 0 1 0					
	City	State	Zip Code		Transaction ID: SA11AI.5055		
	<u>Mt. Airy</u>	MD	21771		Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C			150.00		
	Name of Employer First Colonies Anesthsia	Occupatio Physicia			- payroll deduction		
	Receipt For:	Aggregate	e Year-to-Date 🔻	,			
	Primary General Other (specify) ▼		0 0 0 0	250.00			
- C.	Full Name (Last, First, Middle Initial) Dr. Todd Epstein				Date of Receipt		
-	Mailing Address 11305 Struttman Terra	ice			M M / D D / Y Y Y Y 06 25 2010		
	City	State	Zip Code		Transaction ID: SA11AI.5114		
	North Bethesda	MD	20852		Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C			150.00		
	Name of Employer First Colonies Anesthesia	Occupatio Physicia			payroll deduction		
	Receipt For:	Aggregate	e Year-to-Date 🔻	,			
	Primary General Other (specify) ▼			250.00			
Γ					450.00		
┝	SUBTOTAL of Receipts This Page (optional)			····· •			
	TOTAL This Period (last page this line number	only)		►			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11/34 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17
Ar	ny information copied from such Reports and S for commercial purposes, other than using the	n for the purpose of soliciting contributions solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA ASS	MMITTEE	
 A.	Full Name (Last, First, Middle Initial) Dr. Richard Evans	Date of Receipt	
	Mailing Address 6436 West Langley La	ane	06 / D D / Y Y Y Y 06 25 2010
	City	State Zip Code	Transaction ID: SA11AI.5127
	McLean	VA 22101	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	150.00
	Name of Employer First Colonies Anesthesia Asso	Occupation physician	 payroll deduction
	Receipt For:	Aggregate Year-to-Date ▼	
	<pre>Primary General Other (specify) ▼</pre>	250.00	
— B.	Full Name (Last, First, Middle Initial) Dr. Tamara Gabrielli		Date of Receipt
	Mailing Address 504 Reserve Champic	M M / D D / Y Y Y Y 06 25 2010	
	City	State Zip Code	Transaction ID: SA11AI.5058
	Rockvillem	MD 20850	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	150.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	 payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
 c.	Full Name (Last, First, Middle Initial) Dr. James Glass	1	Date of Receipt
	Mailing Address 1441 Rhode Island Av #410	ve., N.W.	0 6 2 5 2 0 1 0
	City	State Zip Code	Transaction ID: SA11AI.5128
	Washington	DC 20005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	payroll deduction
	Name of Employer First Colonies Anesthesia	Occupation physician	
	Asso Receipt For:	Aggregate Year-to-Date V	-
	Primary General Other (specify) ▼	250.00	
s	UBTOTAL of Receipts This Page (optional)	L	450.00
	OTAL This Period (last page this line number	·	

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12/34 (check only one) 11a X 11a 11b 11c 12 I 13 14 15 16 17
	or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA ASS	SOCIATES LLC POLITICAL ACTION CO	MMITTEE
A.	Full Name (Last, First, Middle Initial) Dr. Steven Grube		Date of Receipt
	Mailing Address 13895 Foxtower Road		06 / ^D ^D ^D ^D ^Y ^Y ^Y ^Y ^Y
	City	State Zip Code	Transaction ID: SA11AI.5059
	Thurmont	MD 21788	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	150.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	payroll deduction
	Receipt For:	Aggregate Year-to-Date ▼	1
	Primary General Other (specify) ▼	250.00	
— В.	Full Name (Last, First, Middle Initial) Dr. Keith Hairston		Date of Receipt
	Mailing Address 12312 Highstakes Driv	06 / ^D D D / <u>Y Y Y Y</u> 25 / <u>2010</u>	
	City	State Zip Code	Transaction ID: SA11AI.5103
	Reisterstown	MD 21136	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		payroll deduction
	Name of Employer First Colonies Anesthesia	Occupation Physician	
	Receipt For:	Aggregate Year-to-Date V	
	Other (specify)	250.00	
– c.	Full Name (Last, First, Middle Initial) Dr. Jean-Max Hogarth	1	Date of Receipt
	Mailing Address 1614 Randallwood Co	urt	0 6 2 5 2 0 1 0
	City	State Zip Code	Transaction ID: SA11AI.5105
	Jarretsville	MD 21084	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		150.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)	·	450.00
	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13/34 (check only one) 11a X 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 for for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.							
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA ASS	OCIATES LLC POLITICAL ACTION CO	MMITTEE					
۷ ۸.	Full Name (Last, First, Middle Initial) Dr. Sung Hong	Date of Receipt						
	Mailing Address 8525 Huntspring Drive	06 / 25 / Y Y Y Y 025 / 2010						
	City	State Zip Code	Transaction ID: SA11AI.5106					
	Lutherville	MD 21093	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C	150.00					
	Name of Employer First Colonies Anesthesia	Occupation Physician	 payroll deduction 					
	Receipt For:	Aggregate Year-to-Date ▼	-					
	Primary General Other (specify) ▼	250.00						
– В.	Full Name (Last, First, Middle Initial) Dr. Steven Hopper		Date of Receipt					
	Mailing Address 4550 N. Park Avenue #101		0 6 / ^D D / <u>Y</u> Y Y Y 2 5 2 0 1 0					
	City	State Zip Code	Transaction ID: SA11AI.5115					
	Chevy Chase	MD 20815	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C	150.00					
	Name of Employer First Colonies Anesthesia	Occupation Physician	 payroll deduction 					
	Receipt For:	Aggregate Year-to-Date 🔻	_					
	Primary General Other (specify) The second seco	250.00						
– c.	Full Name (Last, First, Middle Initial) Dr. Stuart Hough		Date of Receipt					
	Mailing Address 9110 Travener Circle		0 6 2 5 2 0 1 0					
	City	State Zip Code	Transaction ID: SA11AI.5080					
	Frederick	MD 21704	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C	225.00					
	Name of Employer First Colonies Anesthesia	Occupation Physician	payroll deduction					
	Receipt For: Primary General	Aggregate Year-to-Date ▼						
	Other (specify)	375.00						
Γ	SUBTOTAL of Receipts This Page (optional)		525.00					
	TOTAL This Period (last page this line number of	only)						

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and St	atements ma	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any perso	FOR LINE NUMBER: PAGE 14 / 34 (check only one) 11c 12 X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions 11 11 11
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA ASS			
Α.	Full Name (Last, First, Middle Initial) Dr. Sean Isaac Mailing Address 920 Newington Ave. City Baltimore FEC ID number of contributing federal political committee.	State MD C	Zip Code 21217	Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 1 0 Transaction ID: SA11AI.5107 Amount of Each Receipt this Period 150.00 payroll deduction
	Name of Employer First Colonies Anesthesia Asso Receipt For: Primary General Other (specify) ▼	Occupation physicia Aggregate]
В.	Full Name (Last, First, Middle Initial) Dr. David Johnson Mailing Address 5506 Bootjack Drive			Date of Receipt
	City <u>Frederick</u> FEC ID number of contributing federal political committee.	State MD	Zip Code 21702	Transaction ID: SA11AI.5061 Amount of Each Receipt this Period 150.00
	Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	Occupatio Physicia Aggregate		payroll deduction
C.	Full Name (Last, First, Middle Initial) Dr. Christina Johnston Mailing Address 3458 Holland Cliffs Roa	ad		Date of Receipt
	City <u>Huntingtown</u> FEC ID number of contributing	State MD	Zip Code 20639	0 6 2 5 2 0 1 0 Transaction ID: SA11AI.5046 Amount of Each Receipt this Period 150.00
	federal political committee. Name of Employer First Colonies Anesthesia	Occupatio Physicia	n	payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 250.00]
	SUBTOTAL of Receipts This Page (optional)			450.00
	TOTAL This Period (last page this line number of	only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for each category of the	FOR LINE NUMBER: PAGE 15/34 (check only one)
	Any information copied from such Reports and	Detailed Summary Page Statements may not be sold or used by any personal statements	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)	ne name and address of any political committee to	
. Z	Full Name (Last, First, Middle Initial) Dr. James Kaufman		Date of Receipt
•	Mailing Address 7514 Arrowwood Roa	ad	0 6 2 5 2 0 1 0
	City Bethesda	State Zip Code MD 20817	Transaction ID: SA11AI.5116
	FEC ID number of contributing federal political committee.	MD 20817	Amount of Each Receipt this Period 150.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00]
_	Full Name (Last, First, Middle Initial) Dr. Cynthia Kenol Mailing Address 6579 Prestwick Drive		Date of Receipt
	City	State Zip Code	0 6 2 5 2 0 1 0 Transaction ID: SA11AI.5062
	Highland	MD 20777	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	150.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00]
_	Full Name (Last, First, Middle Initial) Dr. Del Kirkpatrick		Date of Receipt
	Mailing Address 3004 Hollow Crest Pl	0 6 2 5 2 0 1 0	
	City Brookeville	State Zip Code MD 20833	Transaction ID: SA11AI.5081 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		150.00
	Name of Employer First Colonies Anesthesia Asso	Occupation physician	payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00]
Γ	SUBTOTAL of Receipts This Page (optional)		450.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and S	tatements ma	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any perso	FOR LINE NUMBER: PAGE 16 / 34 (check only one) 11a X 11a 13 14 15 16 17 on for the purpose of soliciting contributions
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA ASS			
Α.	Full Name (Last, First, Middle Initial) Dr. Richard Ko Mailing Address 4101 Hunt Road			Date of Receipt
	City	State	Zip Code	Transaction ID: SA11AI.5082
	Fairfax	VA	22032	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer First Colonies Anesthesia	Occupatio Physicia		payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 250.00]
в.	Full Name (Last, First, Middle Initial) Dr. Harkisan Laheri Mailing Address 11722 Split Tree Circle)		Date of Receipt
				06 25 2010
	City	State	Zip Code	Transaction ID: SA11AI.5083
	Potomac	MD	20854	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer First Colonies Anesthesia	Occupatio Physicia	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 250.00]
- С.	Full Name (Last, First, Middle Initial) Dr. Kathleen Leavitt			Date of Receipt
	Mailing Address 3467 North Venice Stre			0 6 / 2 5 / Y Y Y Y 2 0 1 0
	City	State VA	Zip Code	Transaction ID: SA11AI.5117
	Arlington FEC ID number of contributing federal political committee.	C	22207	Amount of Each Receipt this Period
	Name of Employer First Colonies Anesthesia	Occupatio Physicia		payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 250.00]
	SUBTOTAL of Receipts This Page (optional)	•		450.00
Ī	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 17 / 34 (check only one) 11a X 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 for for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.						
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA ASS	SOCIATES LLC POLITICAL ACTION CO	MMITTEE				
۷ A.	Full Name (Last, First, Middle Initial) Dr. Thomas Malone	Date of Receipt					
	Mailing Address 11667 Fairmont Place	06 / 25 / Y Y Y Y 006 / 25 / 2010					
	City	State Zip Code	Transaction ID: SA11AI.5063				
	ljamsville	MD 21754	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	225.00				
	Name of Employer First Colonies Anesthesia	Occupation Physician	 payroll deduction 				
	Receipt For:	Aggregate Year-to-Date V	1				
	Primary General Other (specify) ▼	375.00					
- В.	Full Name (Last, First, Middle Initial) Dr. Mollyann March	I	Date of Receipt				
	Mailing Address 6504 Greentree Road	M M / D D / Y Y Y Y 06 25 2010					
	City	State Zip Code	Transaction ID: SA11AI.5047				
	Bethesda	MD 20817	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	225.00				
	Name of Employer First Colonies Anesthesia	Occupation Physician					
	Receipt For:	Aggregate Year-to-Date V					
	Primary General Other (specify) ▼	375.00					
- C.	Full Name (Last, First, Middle Initial) Dr. Stephen Martin	1	Date of Receipt				
-	Mailing Address 3336 O Street, NW		0 6 2 5 2 0 1 0				
	City	State Zip Code	Transaction ID: SA11AI.5084				
	Washington	DC 20007	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	150.00				
	Name of Employer First Colonies Anesthesia	Occupation Physician	 payroll deduction 				
	Receipt For:	Aggregate Year-to-Date V					
	Primary General Other (specify) ▼	250.00					
ſ	SUBTOTAL of Receipts This Page (optional)	·····	600.00				
ŀ	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	X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Si or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA ASS	name and address of any political committ	tee to solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Dr. Anna Noriega Mailing Address 603 Queen Street #4		Date of Receipt
	City	State Zip Code	Transaction ID: SA11AI.5085
	<u>Alexandria</u>	VA 22314	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	300.00
	Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 500.00	payroll deduction
- B.	Full Name (Last, First, Middle Initial) Dr. Denis O'Fallon Mailing Address 12123 Merricks Court		Date of Receipt
		Chata Zia Orada	06 25 2010
	City Monrovia	State Zip Code MD 21770	Transaction ID: SA11AI.5064
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
	Name of Employer First Colonies Anesthesia	Occupation Physician	payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 250.00	
- C.	Full Name (Last, First, Middle Initial) Dr. Philip Owens Mailing Address 141 Adams Street, NW	,	
	City	State Zip Code	0 6 2 5 2 0 1 0 Transaction ID: SA11AI.5086
	Washington	DC 20001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	150.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
ſ	SUBTOTAL of Receipts This Page (optional)		600.00
	TOTAL This Period (last page this line number	only)	•

			•
	SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 19/34
		000 00000000000000000000000000000000000	(check only one)
	ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12
		Detailed Summary Page	
[Any information copied from such Beports and	Statements may not be sold or used by any perso	
	or for commercial purposes, other than using th	he name and address of any political committee to	solicit contributions from such committee.
	FIRST COLONIES ANESTHESIA AS	SOCIATES LLC POLITICAL ACTION CO	DMMITTEE
•	Full Name (Last, First, Middle Initial) Dr. Kent Ozkum		Date of Receipt
Α.			
	Mailing Address 10720 Dern Road	0 6 2 5 2 0 1 0	
	City	State Zip Code	Transaction ID: SA11AI.5066
	Emmisburg	MD 21727	Amount of Each Receipt this Period
	FEC ID number of contributing		150.00
	federal political committee.		150.00
			payroll deduction
	Name of Employer First Colonies Anesthesia	Occupation	
	Asso	physician	_
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	250.00	11
	Other (specify)	250.00	
-	Full Name (Last, First, Middle Initial)	•	
В.	Dr. Paul Park		Date of Receipt
	Mailing Address 821 Oak Knoll Terrac	M M / D D / Y Y Y Y	
		06 25 2010	
	City	State Zip Code	Transaction ID: SA11AI.5087
	Rockville	MD 20850	Amount of Each Receipt this Period
	FEC ID number of contributing		
	federal political committee.	C	150.00
	Name of Employer First Colonies Anesthesia	Occupation	payroll deduction
	First Colonies Anesthesia	Physician	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General		1
	Other (specify)	250.00	
			1
-	Full Name (Last, First, Middle Initial)		
C.	Dr. Kestutis Pauliukonis		Date of Receipt
•	Mailing Address 1813 Solitaire Lane		M M / D D / Y Y Y Y
	To to contaile Laile		06 25 2010
	City	State Zip Code	Transaction ID: SA11AI.5088
	McLean	VA 22101	
		V// 22101	Amount of Each Receipt this Period
	FEC ID number of contributing	C	150.00
	federal political committee.		
	Name of Employer	Occupation	payroll deduction
	Name of Employer First Colonies Anesthesia	Physician	
		Aggregate Year-to-Date V	-1
	Beceipt For:		
	Receipt For:		
	Primary General	250.00	1
]
г	Primary General		
[Primary General Other (specify) ▼	250.00	450.00
[Primary General	250.00	450.00
	Primary General Other (specify) ▼	250.00	450.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 34 (check only one) 11c X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA ASS	OCIATES LLC POLITICAL ACTION CO	MMITTEE
⊻ A.	Full Name (Last, First, Middle Initial) Dr. Michael Peck		Date of Receipt
	Mailing Address 4 Farm Haven Court	06 / 25 / Y Y Y Y 2010	
	City	State Zip Code	Transaction ID: SA11AI.5118
	Rockville	MD 20852	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	225.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	 payroll deduction
	Receipt For:	Aggregate Year-to-Date ▼	_
	Primary General Other (specify) ▼	375.00	
– В.	Full Name (Last, First, Middle Initial) Dr. Ramani Peruvemba		Date of Receipt
	Mailing Address 8400 Tysons Trace Co	M M / D D / Y Y Y Y 06 25 2010	
	City	State Zip Code	Transaction ID: SA11AI.5089
	Vienna	VA 22182	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	150.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	
	Receipt For:	Aggregate Year-to-Date	_
	Primary General Other (specify) ▼	250.00	
– C.	Full Name (Last, First, Middle Initial) Dr. Eugen Pirovic	1	Date of Receipt
	Mailing Address 3912 Calverton Drive		0 6 2 5 2 0 1 0
	City	State Zip Code	Transaction ID: SA11AI.5119
	Hyattsville	MD 20782	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	150.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	 payroll deduction
	Receipt For:	Aggregate Year-to-Date V	
	Primary General Other (specify) ▼	250.00	
ſ	SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	525.00
	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 34 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17
	or for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA ASS	SOCIATES LLC POLITICAL ACTION CC	DMMITTEE
∠ A.	Full Name (Last, First, Middle Initial) Dr. Clyde Pray		Date of Receipt
	Mailing Address 908 Oak Knoll Terrace	2	0 6 2 5 Y Y Y Y Y 0 6 2 5 2 0 1 0
	City	State Zip Code	Transaction ID: SA11AI.5129
	Rockville	MD 20850	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	150.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	payroll deduction
	Receipt For:	Aggregate Year-to-Date ▼	-
	Primary General Other (specify) ▼	250.00]
- 3.	Full Name (Last, First, Middle Initial) Dr. Charles Rizzuto	1	Date of Receipt
	Mailing Address 6409 Pinehurst Road	0 6 / D D / Y Y Y Y 2 5 2 0 1 0	
	City	State Zip Code	Transaction ID: SA11AI.5109
	Baltimore	MD 21212	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	150.00
	Name of Employer First Colonis Anesthesia	Occupation Physician	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00]
-).	Full Name (Last, First, Middle Initial) Dr. Timothy Robinson	1	Date of Receipt
	Mailing Address 2212 Dalewood Road		0 6 2 5 2 0 1 0
	City	State Zip Code	Transaction ID: SA11AI.5110
	Timonium FEC ID number of contributing federal political committee.	MD 21093	Amount of Each Receipt this Period
	Name of Employer First Colonies Anesthesia	Occupation Physician	payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00]
Γ	SUBTOTAL of Receipts This Page (optional)	۱	450.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22/34 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA AS	SOCIATES LLC POLITICAL ACTION CO	MMITTEE
۷ A .	Full Name (Last, First, Middle Initial) Dr. Alexander Rubin	Date of Receipt	
	Mailing Address 6611 Hunter Trail Way	M M / D D / Y Y Y Y 06 25 2010	
	City	State Zip Code	Transaction ID: SA11AI.5067
	Frederick	MD 21702	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	150.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	 payroll deduction
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	
- В.	Full Name (Last, First, Middle Initial) Dr. Suzanne Scattergood		Date of Receipt
	Mailing Address 14700 Crossway Road	0 6 2 5 2 0 1 0	
	City	State Zip Code	Transaction ID: SA11AI.5068
	Rockville	MD 20853	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	300.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	 payroll deduction
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	500.00	
– C.	Full Name (Last, First, Middle Initial) Dr. Gerald Scheinman	1	Date of Receipt
	Mailing Address 8010 Summer Mill Co	urt	0 6 2 5 2 0 1 0
	City	State Zip Code	Transaction ID: SA11AI.5090
	Bethesda	MD 20817	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	150.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	 payroll deduction
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	
	SUBTOTAL of Receipts This Page (optional)	·	600.00
F	TOTAL This Period (last page this line number		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and St	atements ma	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any perso	FOR LINE NUMBER: PAGE 23 / 34 (check only one) 11c 12 X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA ASS			
Α.	Full Name (Last, First, Middle Initial) Dr. Mark Seymour Mailing Address 2932 Thurston Rd. City Frederick FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesai Asso Receipt For:	State MD C Occupatio physician Aggregate		Date of Receipt
-	Primary General Other (specify) ▼		250.00	
В.	Full Name (Last, First, Middle Initial) Dr. Nader Soliman Mailing Address 22905 David Mill Road City	State	Zip Code	Date of Receipt 06 25 $2010Transaction ID: SA11AI.5091$
	Germantown FEC ID number of contributing federal political committee.	MD C	20876	Amount of Each Receipt this Period 150.00 payroll deduction
	Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	Occupatio Physicial Aggregate]
С.	Full Name (Last, First, Middle Initial) Dr. Robert Study Mailing Address 6 Beall Spring Court			Date of Receipt
	City <u>Potomac</u> FEC ID number of contributing federal political committee.	State MD	Zip Code 20854	0 6 2 5 2 0 1 0 Transaction ID: SA11AI.5120 Amount of Each Receipt this Period 150.00
	Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	Occupatio Physicia Aggregate		payroll deduction
	SUBTOTAL of Receipts This Page (optional)		······	450.00
	TOTAL This Period (last page this line number of	only)		

		
SCHEDULE A (FEC Form 3X	Use separate schedule(s)	FOR LINE NUMBER: PAGE 24/34
ITEMIZED RECEIPTS	for each category of the	(check only one)
	Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and	d Statements may not be sold or used by any persor	
or for commercial purposes, other than using t	he name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
FIRST COLONIES ANESTHESIA A	SSOCIATES LLC POLITICAL ACTION CO	MMITTEE
Full Name (Last, First, Middle Initial) Dr. Lisa Sullivan		Date of Receipt
Mailing Address 2454 Five Schillings	Road	0 6 / D D / Y Y Y Y 0 6 25 2010
City	State Zip Code	Transaction ID: SA11AI.5070
Frederick	MD 21701	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer First Colonies Anesthsia	Occupation	payroll deduction
First Colonie's Anesthsia	Physician	
Receipt For:	Aggregate Year-to-Date V	
Primary General	250.00	
Other (specify) ▼		
Full Name (Last, First, Middle Initial) Dr. Robert Sullivan		Date of Receipt
Mailing Address 2454 Five Schillings	Road	0 6 2 5 2 0 1 0
City	State Zip Code	Transaction ID: SA11AI.5071
Frederick	MD 21701	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.		150.00
Name of Emplover	Occupation	payroll deduction
Name of Employer First Colonies Anesthesia	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)		Data of Passiat
. <u>Dr. Louis Swann</u> Mailing Address PO Box 6081		Date of Receipt
		06 25 2010
City	State Zip Code	Transaction ID: SA11AI.5121
McLean	VA 22106	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer First Colonies Anesthesia	Occupation Physician	 payroll deduction
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	250.00	
Other (specify)		
SUBTOTAL of Receipts This Page (optional)		450.00
GODICIAL OF RECEIPTS THIS Fage (optional)	· · · · · · · · · · · · · · · · · · ·	
TOTAL This Period (last page this line numb	er only)	

I	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25/34 (check only one) 11a X 11a 11b 11c 12 I3 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
		SOCIATES LLC POLITICAL ACTION CO	MMITTEE
A.	Full Name (Last, First, Middle Initial) Dr. John Tam		Date of Receipt
	Mailing Address 10905 Cripplegate Ro	ad	06 25 Y Y Y Y 006 25 2010
	City	State Zip Code	Transaction ID: SA11AI.5092
	Potomac	MD 20854	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	150.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	 payroll deduction
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary General Other (specify)	250.00	
- В.	Full Name (Last, First, Middle Initial) Dr. Rojack Tan		Date of Receipt
	Mailing Address 507 Goodland Place		06 / D D / Y Y Y Y 025 / 2010
	City	State Zip Code	Transaction ID: SA11AI.5122
	Rockville	MD 20850	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	150.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
– c.	Full Name (Last, First, Middle Initial) Dr. Bernard Tsai	1	Date of Receipt
	Mailing Address 10013 New London Di	rive	0 6 2 5 2 0 1 0
	City	State Zip Code	Transaction ID: SA11AI.5093
	Potomac	MD 20854	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	150.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
ſ	SUBTOTAL of Receipts This Page (optional)	•	450.00
F	TOTAL This Period (last page this line number	only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and Sta	itements ma	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any perso	FOR LINE NUMBER:PAGE 26 / 34(check only one)11c12X11a11b11c121314151617on for the purpose of soliciting contributions
	or for commercial purposes, other than using the n			
Α.	Full Name (Last, First, Middle Initial) Dr. Reed Underwood Mailing Address 1518 T Street, NW City Washington FEC ID number of contributing federal political committee.	State DC	Zip Code 20009	Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 1 0 Transaction ID: SA11AI.5130 Amount of Each Receipt this Period 150.00
	Name of Employer First Colonies Anesthesia <u>Asso</u> Receipt For: Primary General Other (specify) ▼	Occupation physician Aggregate		payroll deduction
В.	Full Name (Last, First, Middle Initial) Dr. Arnaldo Valedon Mailing Address 22 Woodfield Court	State	Zip Code	Date of Receipt
	Reisterstown FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	MD C Occupatio Physicia	21136	Transaction ID: SA11AI.5050 Amount of Each Receipt this Period 150.00 payroll deduction
C.	Full Name (Last, First, Middle Initial) Dr. Martha Van Clief Mailing Address 405 Apple Grove Road			Date of Receipt
	City <u>Silver Spring</u> FEC ID number of contributing federal political committee. Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼	State MD C Occupatic Physicia Aggregate		0 6 2 5 2 0 1 0 Transaction ID: SA11AI.5051 Amount of Each Receipt this Period 150.00 150.00
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	Full Name (Last, First, Middle Initial)			
Α.	Dr. Paul Van Nice Mailing Address 71401 Meadow Lane			Date of Receipt
	City	State	Zip Code	Transaction ID: SA11AI.5094
	Chevy Chase	MD	20815	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer First Colonies Anesthesia	Occupatio Physicia		 payroll deduction
	Receipt For:	-	e Year-to-Date 🔻	1
	Primary General Other (specify) ▼		250.00]
в.	Full Name (Last, First, Middle Initial) Dr. Mark Vogt			Date of Receipt
	Mailing Address 1149 Colonial Road			0 6 / 2 5 / Y Y Y Y 2 0 1 0
	City	State	Zip Code	Transaction ID: SA11AI.5124
	McLean	VA	22101	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		payroll deduction
	Name of Employer First Colonies Anesthesia	Occupatio Physicia		
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify) ▼	0 0	250.00	
C.	Full Name (Last, First, Middle Initial) Dr. Christopher Wahlgren			Date of Receipt
	Mailing Address 1200 Colvin Meadows I			0 6 / 2 5 / Y Y Y Y 2 0 1 0
	City Creat Falls	State VA	Zip Code	Transaction ID: SA11AI.5095
	Great Falls FEC ID number of contributing federal political committee.	C	22066	Amount of Each Receipt this Period
	Name of Employer First Colonies Anesthesia	Occupatio Physicia		payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 250.00]
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	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and S	tatements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 34 (check only one)
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Α.	Full Name (Last, First, Middle Initial) Dr. Timothy Wex Mailing Address 11429 Cedar Ridge Dr	ive		Date of Receipt
	City	State	Zip Code	0 6 2 5 2 0 1 0 Transaction ID: SA11AI.5125
	Potomac	VA	20854	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer First Colonies Anesthesia	Occupatio Physicial		payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00]
В.	Full Name (Last, First, Middle Initial) Dr. David Wheeler Mailing Address 7108 Collingwood Cou	I		Date of Receipt
		II L		06 25 2010
	City	State	Zip Code	Transaction ID: SA11AI.5111
	Elkridge	MD	21075	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer First Colonies Anesthesia	Occupatio Physicia	n	
	Receipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 250.00]
С.	Full Name (Last, First, Middle Initial) Dr. Thomas Wherry			Date of Receipt
	Mailing Address 611 W. 2nd Street			M M / D D / Y Y Y Y Y 06 25 2010
	City	State	Zip Code	Transaction ID: SA11AI.5052
	Frederick FEC ID number of contributing federal political committee.	MD	21701	Amount of Each Receipt this Period
	Name of Employer First Colonies Anesthesia	Occupatio Physicial		payroll deduction
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 250.00]
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Full Name (Last, First, Middle Initial) Dr. Howard Wilpon Mailing Address 18212 Wickham		Date of Receipt 0 6 / 2 5 / 2 0 1 0
City	State Zip Code	Transaction ID: SA11AI.5053
Olney	MD 20832	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		150.00
Name of Employer First Colonies Anesthesia	Occupation Physician	 payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Aiqin Yu Mailing Address 13508 Gumspring	ng Road	Date of Receipt
		06 25 2010
City	State Zip Code	Transaction ID: SA11AI.5096
Rockville FEC ID number of contributing federal political committee.	MD 20850	Amount of Each Receipt this Period
Name of Employer First Colonies Anesthesia	Occupation Physician	payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
C. Full Name (Last, First, Middle Initial) Dr. Jungim Yun Mailing Address 2057 Thurston F	Boad	Date of Receipt
City	State Zip Code	06 25 2010
Frederick	MD 21704	Transaction ID: SA11AI.5073 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer First Colonies Anesthesia	Occupation Physician	 payroll deduction
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
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Full Name (Last, First, Middle Initial) Transaction ID: SB23.5029 Citizens for Adrienne Jones Date of Disbursement Mailing Address 17 W. Courtland St. State 210 State Zip Code Bel Air MD 21014 Purpose of Disbursement contribution Category/ Amount of Each Disbursement this Peric Citizens for Adrienne Jones Disbursement For: 2010 Amount of Each Disbursement this Peric Office Sought: X House Disbursement For: 2010 Primary X General Office Sought: X House Disbursement For: 2010 Date of Disbursement this Peric Office Sought: X House Disbursement For: 2010 Date of Disbursement Other (specify) V State: MD State: MD State: MD Mailing Address 8 Park Center Court Category/ Tassaction ID: SB23.5020 City State: MD Disbursement For: 2010 Amount of Each Disbursement this Peric Office Sought: X House Disbursement For: 2010 Category/ Office Sought: X House Disbursement For: 2010 Category/ City Senate President Disbursement For: 2010 <td>NAME OF COMMITTEE (In Full)</td> <td></td> <td></td> <td></td>	NAME OF COMMITTEE (In Full)			
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City Baltimore	StateZip CodeMD21236					Amou	int of	Eac	n Dis	sburs	em	ent thi	_	iod
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Friends of Barry Glassman						Date of M	of Dis	sburs	D D	ent	Y	Y	YY	
Mailing Address 401 Miller Office Building	J					0 6			04			2 0 ·	10	
City Annapolis	StateZip CodeMD21401					Amou	int of	Eac	n Dis	sburs	em	ent thi	-	iod
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Friends of Catherine Pugh						Date			seme	ent	v			1
Mailing Address 326 Saint Paul St. Suite 300						06			04			2 0 ·	<u>A</u>	
Baltimore	State Zip Code MD 21202					Amou	int of	Eac	n Dis	sburs	em	ent thi		iod
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	City Glen Burnie	State Zip Code MD 21061				Amou	nt o	fΕ	ach	Dis	burse	-		_	od
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	Mailing Address 51 Fleet St.					0 ^M 5	М	/	^D 1	3	/ Y	ž	0 ľ)	
	City Annapolis	State Zip Code MD 21401				Amou	nt o	fΕ	ach	Dis	burse	men	t this	Peri	od
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FIRST COLONIES ANESTHESIA ASSOCI	ATES LLC	POLITICAL A	٩СТ	ION		MITTE	Ξ						
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