

# 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  
Baxter Healthcare Political Action Committee

ADDRESS (number and street) 1501 K Street, NW  
Suite 375  
 Check if different than previously reported. (ACC)  
Washington DC 20005

2. **FEC IDENTIFICATION NUMBER** C00117838  
**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:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 02 01 2011 through 02 28 2011

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 Sarah Creviston

Signature of Treasurer Electronically Filed by Sarah Creviston Date 03 11 2011

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

A. Form/Schedule : **F3X**

Transaction ID :

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Baxter Healthcare Political Action Committee

Report Covering the Period: From: 

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	Y	Y	Y	Y	2	0	1	1		96424.54
Y	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period .....	104291.78									
(c) Total Receipts (from Line 19) .....	10823.75	21690.99								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	115115.53	118115.53								
7. Total Disbursements (from Line 31) .....	25000.00	28000.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	90115.53	90115.53								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
Baxter Healthcare Political Action Committee

Report Covering the Period: From: 

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	1	1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	4599.53	6477.81
(ii) Unitemized .....	6224.22	15213.18
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	10823.75	21690.99
(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) .....	10823.75	21690.99
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)) .....	10823.75	21690.99
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	10823.75	21690.99

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25000.00	28000.00
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	0.00
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))..	25000.00	28000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25000.00	28000.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

6 / 22

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 .....	10823.75	21690.99
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10823.75	21690.99
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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 22  
(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)  
Baxter Healthcare Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Michael J. Baughman

Mailing Address 5343 N Lakewood Avenue

City State Zip Code  
Chicago IL 60640

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

Name of Employer: Baxter International, Inc. Occupation: CVP, Controller

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 02 / 04 / 2011  
**Transaction ID:** 20110311155146-147  
 Amount of Each Receipt this Period: 100.00

**B.** Full Name (Last, First, Middle Initial)  
Michael J. Baughman

Mailing Address 5343 N Lakewood Avenue

City State Zip Code  
Chicago IL 60640

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

Name of Employer: Baxter International, Inc. Occupation: CVP, Controller

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 02 / 18 / 2011  
**Transaction ID:** 20110311155357-148  
 Amount of Each Receipt this Period: 100.00

**C.** Full Name (Last, First, Middle Initial)  
Susan K. Brown

Mailing Address 917 Geneva St

City State Zip Code  
Glendale CA 91207

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

Name of Employer: Baxter International, Inc. Occupation: VP, Manufacturing

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 251.08

Date of Receipt: 02 / 18 / 2011  
**Transaction ID:** 20110311155357-17  
 Amount of Each Receipt this Period: 62.77

**SUBTOTAL** of Receipts This Page (optional) ..... ► 262.77

**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 8 / 22  
(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

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)  
Baxter Healthcare Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Sebastian J. Bufalino

Mailing Address 1091 Pine Meadow Ct

City State Zip Code  
Vernon Hills IL 60061

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

Name of Employer  
Baxter International, Inc. Occupation  
VP, Corporate Audit

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
212.40

Date of Receipt  
MM / DD / YYYY  
02 / 18 / 2011

**Transaction ID:** 20110311155357-161

Amount of Each Receipt this Period  
53.10

**B.**

Full Name (Last, First, Middle Initial)  
Sarah L. Creviston

Mailing Address 23 Wynstone Way

City State Zip Code  
North Barrington IL 60010

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

Name of Employer  
Baxter International, Inc. Occupation  
VP, Government Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
425.24

Date of Receipt  
MM / DD / YYYY  
02 / 04 / 2011

**Transaction ID:** 20110311155146-132

Amount of Each Receipt this Period  
106.31

**C.**

Full Name (Last, First, Middle Initial)  
Sarah L. Creviston

Mailing Address 23 Wynstone Way

City State Zip Code  
North Barrington IL 60010

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

Name of Employer  
Baxter International, Inc. Occupation  
VP, Government Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
425.24

Date of Receipt  
MM / DD / YYYY  
02 / 18 / 2011

**Transaction ID:** 20110311155357-133

Amount of Each Receipt this Period  
106.31

**SUBTOTAL** of Receipts This Page (optional) ..... ► **265.72**

**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 22
	<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)  
Baxter Healthcare Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Margarita Cruz-casse		Date of Receipt
	Mailing Address Calle Guama #70 Mansiones Los Cedr		<input type="text" value="02"/> / <input type="text" value="18"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Cayey	PR	00736
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20110311155357-187
Name of Employer Baxter		Occupation Dir, Logistics	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="204.96"/>	<input type="text" value="51.24"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Robert M. Davis		Date of Receipt
	Mailing Address 21515 Hummingbird Court		<input type="text" value="02"/> / <input type="text" value="04"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Kildeer	IL	60047
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20110311155146-48
Name of Employer Baxter International, Inc.		Occupation CVP, President - Renal	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="692.32"/>	<input type="text" value="173.08"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Robert M. Davis		Date of Receipt
	Mailing Address 21515 Hummingbird Court		<input type="text" value="02"/> / <input type="text" value="18"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Kildeer	IL	60047
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 20110311155357-48
Name of Employer Baxter International, Inc.		Occupation CVP, President - Renal	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="692.32"/>	<input type="text" value="173.08"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="397.40"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 10 / 22  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Baxter Healthcare Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Valery E. Gallagher

Mailing Address 14334 Spring Meadow Court

City State Zip Code  
Green Oaks IL 60048

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

Name of Employer Occupation  
Baxter International, Inc. Dir, State Government Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 307.68

Date of Receipt  
MM / DD / YYYY  
02 / 04 / 2011

**Transaction ID:** 20110311155146-65

Amount of Each Receipt this Period  
76.92

**B.** Full Name (Last, First, Middle Initial)  
Valery E. Gallagher

Mailing Address 14334 Spring Meadow Court

City State Zip Code  
Green Oaks IL 60048

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

Name of Employer Occupation  
Baxter International, Inc. Dir, State Government Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 307.68

Date of Receipt  
MM / DD / YYYY  
02 / 18 / 2011

**Transaction ID:** 20110311155357-65

Amount of Each Receipt this Period  
76.92

**C.** Full Name (Last, First, Middle Initial)  
James M. Gatling

Mailing Address 391 Sherbrooke Court

City State Zip Code  
Crystal Lake IL 60012

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

Name of Employer Occupation  
Baxter International, Inc. CVP, Global Manufacturing Ops

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 641.52

Date of Receipt  
MM / DD / YYYY  
02 / 04 / 2011

**Transaction ID:** 20110311155146-15

Amount of Each Receipt this Period  
160.38

**SUBTOTAL** of Receipts This Page (optional) ..... ► **314.22**

**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 11 / 22  
(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)  
Baxter Healthcare Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
James M. Gatling

Mailing Address 391 Sherbrooke Court

City State Zip Code  
Crystal Lake IL 60012

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

Name of Employer  
Baxter International, Inc. Occupation  
CVP, Global Manufacturing Ops

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
641.52

Date of Receipt  
MM / DD / YYYY  
02 / 18 / 2011

**Transaction ID:** 20110311155357-15

Amount of Each Receipt this Period  
160.38

**B.**

Full Name (Last, First, Middle Initial)  
Arthur J. Gibson

Mailing Address 3775 Riverly Trace

City State Zip Code  
Marietta GA 30067

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

Name of Employer  
Baxter International, Inc. Occupation  
VP, Environ, Health & Safety

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.80

Date of Receipt  
MM / DD / YYYY  
02 / 18 / 2011

**Transaction ID:** 20110311155357-54

Amount of Each Receipt this Period  
55.20

**C.**

Full Name (Last, First, Middle Initial)  
Andrew C. Hayes

Mailing Address 1620 Timber Woods Lane

City State Zip Code  
Libertyville IL 60048

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

Name of Employer  
Baxter International, Inc. Occupation  
Sr Director, New Product Intro

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
263.08

Date of Receipt  
MM / DD / YYYY  
02 / 18 / 2011

**Transaction ID:** 20110311155357-80

Amount of Each Receipt this Period  
65.77

**SUBTOTAL** of Receipts This Page (optional) ..... ► **281.35**

**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 12 / 22  
(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)  
Baxter Healthcare Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Irene P. Jakimcius

Mailing Address 2208 Wesley Ave.

City State Zip Code  
Evanston IL 60201

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

Name of Employer: Baxter International, Inc. Occupation: Assoc General Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 334.52

Date of Receipt: 02 / 04 / 2011

**Transaction ID:** 20110311155146-151

Amount of Each Receipt this Period: 83.63

**B.**

Full Name (Last, First, Middle Initial)  
Irene P. Jakimcius

Mailing Address 2208 Wesley Ave.

City State Zip Code  
Evanston IL 60201

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

Name of Employer: Baxter International, Inc. Occupation: Assoc General Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 334.52

Date of Receipt: 02 / 18 / 2011

**Transaction ID:** 20110311155357-152

Amount of Each Receipt this Period: 83.63

**C.**

Full Name (Last, First, Middle Initial)  
Richard L. Kirkendall

Mailing Address 717 Elmwood Av.

City State Zip Code  
Wilmette IL 60091

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

Name of Employer: Baxter International, Inc. Occupation: VP Quality, Medication Delivery

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 02 / 04 / 2011

**Transaction ID:** 20110311155146-119

Amount of Each Receipt this Period: 75.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **242.26**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 22  
(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)  
Baxter Healthcare Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Richard L. Kirkendall

Mailing Address 717 Elmwood Av.

City State Zip Code  
Wilmette IL 60091

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

Name of Employer  
Baxter International, Inc.

Occupation  
VP Quality, Medication Delivery

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
02 / 18 / 2011

**Transaction ID:** 20110311155357-119

Amount of Each Receipt this Period  
75.00

**B.**

Full Name (Last, First, Middle Initial)  
Marie G. Kissel

Mailing Address 1 Baxter Pkwy c/o Gerald Lema  
C/O Gerald Lema

City State Zip Code  
Deerfield IL 60015

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

Name of Employer  
Baxter International, Inc.

Occupation  
Dir, Gov. Affairs & Public Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
311.96

Date of Receipt  
MM / DD / YYYY  
02 / 04 / 2011

**Transaction ID:** 20110311155146-165

Amount of Each Receipt this Period  
77.99

**C.**

Full Name (Last, First, Middle Initial)  
Marie G. Kissel

Mailing Address 1 Baxter Pkwy c/o Gerald Lema  
C/O Gerald Lema

City State Zip Code  
Deerfield IL 60015

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

Name of Employer  
Baxter International, Inc.

Occupation  
Dir, Gov. Affairs & Public Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
311.96

Date of Receipt  
MM / DD / YYYY  
02 / 18 / 2011

**Transaction ID:** 20110311155357-166

Amount of Each Receipt this Period  
77.99

**SUBTOTAL** of Receipts This Page (optional) ..... ► **230.98**

**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 14 / 22  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Baxter Healthcare Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Edward A. Langan

Mailing Address 450 East Waterside Drive Unit 1702  
Unit 1702

City Chicago State IL Zip Code 60601

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

Name of Employer Baxter International, Inc. Occupation VP II, Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 04 / 2011  
Transaction ID: 20110311155146-2  
Amount of Each Receipt this Period 75.00

**B.** Full Name (Last, First, Middle Initial)  
Edward A. Langan

Mailing Address 450 East Waterside Drive Unit 1702  
Unit 1702

City Chicago State IL Zip Code 60601

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

Name of Employer Baxter International, Inc. Occupation VP II, Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 18 / 2011  
Transaction ID: 20110311155357-2  
Amount of Each Receipt this Period 75.00

**C.** Full Name (Last, First, Middle Initial)  
Timothy P. Lawrence

Mailing Address 876 Writer CT

City Vernon Hills State IL Zip Code 60061

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

Name of Employer Baxter International, Inc. Occupation VP Manufacturing Med Delivery

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 242.84

Date of Receipt 02 / 18 / 2011  
Transaction ID: 20110311155357-130  
Amount of Each Receipt this Period 60.71

**SUBTOTAL** of Receipts This Page (optional) ..... ► 210.71

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 22  
(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)  
Baxter Healthcare Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Michael E. Martin

Mailing Address 10680 Red Leaf Circle

City State Zip Code  
Lakewood IL 60014

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

Name of Employer  
Baxter International, Inc.

Occupation  
VP I, Mfg Strategic Planning

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.70

Date of Receipt  
MM / DD / YYYY  
02 / 18 / 2011

**Transaction ID:** 20110311155357-20

Amount of Each Receipt this Period  
40.14

**B.**

Full Name (Last, First, Middle Initial)  
Jeanne K. Mason

Mailing Address 1760 Duffy Lane

City State Zip Code  
Bannockburn IL 60015

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

Name of Employer  
Baxter International, Inc.

Occupation  
CVP, Human Resources

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
MM / DD / YYYY  
02 / 04 / 2011

**Transaction ID:** 20110311155146-153

Amount of Each Receipt this Period  
175.00

**C.**

Full Name (Last, First, Middle Initial)  
Jeanne K. Mason

Mailing Address 1760 Duffy Lane

City State Zip Code  
Bannockburn IL 60015

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

Name of Employer  
Baxter International, Inc.

Occupation  
CVP, Human Resources

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
MM / DD / YYYY  
02 / 18 / 2011

**Transaction ID:** 20110311155357-154

Amount of Each Receipt this Period  
175.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **390.14**

**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 16 / 22  
(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)  
Baxter Healthcare Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Robert L. Parkinson

Mailing Address 1332 Edgewood Lane

City State Zip Code  
Northbrook IL 60062

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

Name of Employer: Baxter International, Inc. Occupation: Chairman, President & CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2115.40

Date of Receipt: 02 / 04 / 2011  
**Transaction ID:** 20110311155146-158  
 Amount of Each Receipt this Period: 528.85

**B.** Full Name (Last, First, Middle Initial)  
Robert L. Parkinson

Mailing Address 1332 Edgewood Lane

City State Zip Code  
Northbrook IL 60062

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

Name of Employer: Baxter International, Inc. Occupation: Chairman, President & CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2115.40

Date of Receipt: 02 / 18 / 2011  
**Transaction ID:** 20110311155357-159  
 Amount of Each Receipt this Period: 528.85

**C.** Full Name (Last, First, Middle Initial)  
Carla D. Pittman

Mailing Address 3933 Kenway Avenue

City State Zip Code  
Los Angeles CA 90008

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

Name of Employer: Baxter International, Inc. Occupation: Sr Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 229.84

Date of Receipt: 02 / 18 / 2011  
**Transaction ID:** 20110311155357-123  
 Amount of Each Receipt this Period: 57.46

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1115.16**

**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 / 22  
(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)  
Baxter Healthcare Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
David H. Resnicoff

Mailing Address 926 Valley Road

City State Zip Code  
Glencoe IL 60022

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

Name of Employer  
Baxter International, Inc.

Occupation  
Assoc Gen Coun/VP Compliance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
233.00

Date of Receipt  
MM / DD / YYYY  
02 / 18 / 2011

**Transaction ID:** 20110311155357-155

Amount of Each Receipt this Period  
58.25

**B.**

Full Name (Last, First, Middle Initial)  
Roibin Ryan

Mailing Address 1419 W Berteau

City State Zip Code  
Chicago IL 60613

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

Name of Employer  
Baxter International, Inc.

Occupation  
Deputy Gen Counsel, Lit & Empl

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
407.56

Date of Receipt  
MM / DD / YYYY  
02 / 04 / 2011

**Transaction ID:** 20110311155146-152

Amount of Each Receipt this Period  
101.89

**C.**

Full Name (Last, First, Middle Initial)  
Roibin Ryan

Mailing Address 1419 W Berteau

City State Zip Code  
Chicago IL 60613

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

Name of Employer  
Baxter International, Inc.

Occupation  
Deputy Gen Counsel, Lit & Empl

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
407.56

Date of Receipt  
MM / DD / YYYY  
02 / 18 / 2011

**Transaction ID:** 20110311155357-153

Amount of Each Receipt this Period  
101.89

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **262.03**

**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 18 / 22
	<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)  
Baxter Healthcare Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
James K. Saccaro

Mailing Address 915 Ash Street

City State Zip Code  
Winnetka IL 60093

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

Name of Employer  
Baxter International, Inc. Occupation  
VP, Strategy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 2 / 1 8 / 2 0 1 1

**Transaction ID:** 20110311155357-163

Amount of Each Receipt this Period  
62.50

**B.**

Full Name (Last, First, Middle Initial)  
David P. Scharf

Mailing Address 931 Oak Street

City State Zip Code  
Winnetka IL 60093

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

Name of Employer  
Baxter International, Inc. Occupation  
CVP, General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
365.40

Date of Receipt  
M M / D D / Y Y Y Y  
0 2 / 0 4 / 2 0 1 1

**Transaction ID:** 20110311155146-149

Amount of Each Receipt this Period  
91.35

**C.**

Full Name (Last, First, Middle Initial)  
David P. Scharf

Mailing Address 931 Oak Street

City State Zip Code  
Winnetka IL 60093

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

Name of Employer  
Baxter International, Inc. Occupation  
CVP, General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
365.40

Date of Receipt  
M M / D D / Y Y Y Y  
0 2 / 1 8 / 2 0 1 1

**Transaction ID:** 20110311155357-150

Amount of Each Receipt this Period  
91.35

**SUBTOTAL** of Receipts This Page (optional) ..... ► **245.20**

**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: (check only one)	PAGE 19 / 22
	<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)  
Baxter Healthcare Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Chandra Sekhar		Date of Receipt MM / DD / YYYY 02 / 18 / 2011		
	Mailing Address 1621 Mission Hills Rd Unit 211 Apt 211		<b>Transaction ID:</b> 20110311155357-3		
	City Northbrook	State IL	Zip Code 60062	Amount of Each Receipt this Period 61.01	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Baxter International, Inc.	Occupation VP II, Mfg Strategic Planning			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 244.04			

<b>B.</b>	Full Name (Last, First, Middle Initial) John P. Shannon		Date of Receipt MM / DD / YYYY 02 / 18 / 2011		
	Mailing Address 432 Utley		<b>Transaction ID:</b> 20110311155357-139		
	City Elmhurst	State IL	Zip Code 60126	Amount of Each Receipt this Period 61.54	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Baxter International, Inc.	Occupation GM, US BioPharm			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 246.16			

<b>C.</b>	Full Name (Last, First, Middle Initial) Onelia Ann Vera		Date of Receipt MM / DD / YYYY 02 / 04 / 2011		
	Mailing Address 619 Oleander Drive		<b>Transaction ID:</b> 20110311155146-131		
	City Hallandale	State FL	Zip Code 33009	Amount of Each Receipt this Period 103.92	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Baxter International, Inc.	Occupation Assoc General Counsel			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 415.68			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	226.47
<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 20 / 22
	(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)  
Baxter Healthcare Political Action Committee

**A.**

Full Name (Last, First, Middle Initial) Onelia Ann Vera		Date of Receipt MM / DD / YYYY 02 / 18 / 2011
Mailing Address 619 Oleander Drive		<b>Transaction ID:</b> 20110311155357-132
City Hallandale	State FL	Zip Code 33009
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 103.92
Name of Employer Baxter International, Inc.	Occupation Assoc General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 415.68	

**B.**

Full Name (Last, First, Middle Initial) Subramaniam Yogendran		Date of Receipt MM / DD / YYYY 02 / 18 / 2011
Mailing Address Baxter Healthcare Corp. One Baxter Baxter Healthcare Corp.		<b>Transaction ID:</b> 20110311155357-97
City Deerfield	State IL	Zip Code 60015
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 51.20
Name of Employer Baxter International, Inc.	Occupation VP, US Supply Chain	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 204.80	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>155.12</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>4599.53</b>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Baxter Healthcare Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Chris Lee for Congress <hr/> Mailing Address PO Box 15395 <hr/> City Rochester State NY Zip Code 14615 <hr/> Purpose of Disbursement 2012 Primary Candidate Name Christopher John Lee <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 26 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: CFAC46ABBDD8DB03F5A Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 4 / 2 0 1 1
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 011
	Contribution
<b>B.</b> Full Name (Last, First, Middle Initial) National Republican Congressional Committee <hr/> Mailing Address 320 First Street SE <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement 2011 Contribution Candidate Name National Republican Congressional Committee <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: 5A13A1F6FBAC1E10E76 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 4 / 2 0 1 1
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 011
	Contribution
<b>C.</b> Full Name (Last, First, Middle Initial) New Democrat Coalition Political Action Committee Aka Ndc Pac <hr/> Mailing Address 607 14th Street NW Suite 800 <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement 2011 Contribution Candidate Name New Democrat Coalition Political Action Committee Aka Ndc Pac Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: 14C3B6B110FF6875E5C Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 4 / 2 0 1 1
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 011
	Contribution

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

15000.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 22

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Baxter Healthcare Political Action Committee

A.	Full Name (Last, First, Middle Initial) Tfp-Fojb Committee		Transaction ID: 90A5B14CDB889057B97	
	Mailing Address 631-B Pennsylvania Avenue SE		Date of Disbursement MM / DD / YYYY 02 / 04 / 2011	
	City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 10000.00
	Purpose of Disbursement 2011 Contribution		011 Category/ Type	
	Candidate Name Tfp-Fojb Committee			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
	State: District:	Contribution		

SUBTOTAL of Disbursements This Page (optional) ..... ▶

10000.00

TOTAL This Period (last page this line number only) ..... ▶

25000.00