01/31/2008 16:57

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORIVI 3X	For Oth	er Than An	Authorize	d Committ	ee		Office Use Onl	l y
NAME OF COMMITTEE (in full)		MAILING LAI OR PRINT		ample:If typing er the lines	g, type			
MVP Health Care Inc. Fed	eral PAC	1 1 1 1 1						
							1 1 1 1	
ADDRESS (number and street)	625 Sta	ate Street						
Check if different								
than previously reported. (ACC)	Schene	ectady				NY	12305	
2. FEC IDENTIFICATION NU	JMBER 1	_	CITY 🛕		;	STATEA	ZIPC	CODE A
C00431429			3. IS THIS REPORT		NEW (N) OR		AMENDED A)	
4. TYPE OF REPORT (Choose One)	`´R	lonthly eport	Feb 20 (M2)	May 20 (M5)	Au	ıg 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	, D	ue On:	Mar 20 (M3)	Jun 20 (M6)	Se	ep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15	_		Apr 20 (M4)	Jul 20 (M7)	Oc	et 20 (M10)	Jan 31 (YE)
Quarterly Report July 15	(c)	12-Day	on 🔲	Primary (12F	P)	Genera	l (12G)	Runoff (12R)
Quarterly Report October 15 Quarterly Report		Report for t	he:	Convention ((12C)	Special	(12G)	
X January 31 Quarterly Report			Election on				in th State	
July 31 Mid-Year Report(Non-elect Year Only) (MY)	tion (d)	30-Day Post -Elect		General (300	G)	Runoff	(30R)	Special (30S)
Termination Rep (TER)	ort	·	Election on			• • •	in th State	
5. Covering Period	07 0	1 200	7	through	12	3 1	2007	
I certify that I have examined thi	s Report and	to the best of r	ny knowledge	and belief it is	true, correct	and complete	.	
Type or Print Name of Treasure	r <u>Mr. F</u> ı	rank Fanshawe						
Signature of Treasurer Elect	ronically Filed	d by Mr. Fran	nk Fanshawe		D	Date 0.1	3 1	2008
NOTE : Submission of false, er	roneous, or in	ncomplete infor	mation may s	ubject the pers	on signing thi	s Report to th	ne penalties of 2	U.S.C 437g.
Office Use							FEC FO	RM 3X

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name MVP Health Care Inc. Federal PAC [®] D " D 0.7 12 0 1 2007 3 1 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 0.00 Ž007 January 1 (b) Cash on Hand at 7250.00 Begining of Reporting Period 17043.08 24293.08 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 24293.08 24293.08 6(a) and 6(c) for Column B) 5713.24 5713.24 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 18579.84 18579.84 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 483.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission

999 E street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name MVP Health Care Inc. Federal PAC

0 1 3^D1 м м 0 7 м м 1 2 2007 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 22823.08 16223.08 (i) Itemized (use Schedule A) 820.00 1470.00 (ii) Unitemized (iii) TOTAL (add 17043.08 24293.08 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 17043.08 24293.08 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (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)). 19. Total Receipts (add Lines 11(d), 17043.08 24293.08 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 17043.08 24293.08 (subtract Line 18(c) from Line 19)

DETAILED SUMMARY PAGE

of Disbursements

Page 4

FEC Form 3X (Rev. 02/2003)

	II. DISBURSEMENTS	Total This Period		
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		Calendar Year-to-Date	
	Activity (from Schedule H4) (i) Federal Share	0.00	0.00	
	(ii) Non-Federal Share	463.24	463.24	
	(b) Other Federal Operating			
	Expenditures	0.00	0.00	
	(c) Total Operating Expenditures	463.24	463.24	
22	(add 21(a)(i), (a)(ii) and (b))	403.24	403.24	
	Committees	0.00	0.00	
23.	Contributions to Federal Candidates/Committees			
	and Other Political Committees	5250.00	5250.00	
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	
06	Loop Denoviments Made	0.00	0.00	
26.	Loan Repayments Made	0.00	0.00	
	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	0.00	0.00	
	(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)	0.00	0.00	
	(i) Federal Share			
	(ii) "Levin" Share	0.00	0.00	
	(b) Federal Election Activity Paid Entirely	0.00	0.00	
	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))	5713.24	5713.24	
32.	Total Federal Disbursements			
J∠.	(subtract Line 21(a)(ii) and Line 30(a)(ii)			
	from Line 31)	5250.00	5250.00	
	·			

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	17043.08	24293.08
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	17043.08	24293.08
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) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 19 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federal PAC	Statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Charles Bloss Mailing Address 708 Stephens Place City Schenectady FEC ID number of contributing federal political committee. Name of Employer MVP Receipt For: Primary General Other (specify)	State Zip Code NY 12303 C Occupation Administrative Aggregate Year-to-Date 750.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) Rupert Brady Mailing Address 920 Cherry Lane City Vestal FEC ID number of contributing federal political committee. Name of Employer MVP Receipt For: Primary General Other (specify)	State Zip Code NY 13850 C Occupation Administrative Aggregate Year-to-Date 208.35	Date of Receipt M M D D Q Q D
Full Name (Last, First, Middle Initial) Sue Ann Brown Mailing Address 9 Wembly Court City Delmar FEC ID number of contributing federal political committee. Name of Employer MVP Receipt For: Primary General Other (specify)	State Zip Code NY 12054 C Occupation Administrative Aggregate Year-to-Date 250.00	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional)		1208.35

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for	e separate schedule(s) each category of the stailed Summary Page	FOR LINE NUMBER: PAGE 7 / 19 (check only one) X 11a 11b 11c 12 13 14 15 16 1
0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may not be name and address	oe sold or used by any person of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federal PAC			
	Full Name (Last, First, Middle Initial) Patricia Deferio			Date of Receipt
	Mailing Address 7723 Majestic Drive			07 30 7 2007
	City Liverpool		Zip Code 13090	Transaction ID: SA11AI.4239
	FEC ID number of contributing federal political committee.	C	13030	Amount of Each Receipt this Period 250.00
	Name of Employer MVP	Occupation Administrative	<u> </u>	PAC Contribution
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-		
_	Full Name (Last, First, Middle Initial) Bernard Engelbery			Date of Receipt
	Mailing Address 68 E. Bentwood Court			07 30 YYYY 2007
	City		Zip Code	Transaction ID: SA11AI.4189
	Albany	NY 1	12203	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.02
	Name of Employer MVP	Occupation Administrative)	PAC Contribution
	Receipt For:	Aggregate Year-	to-Date ▼	_
	Primary General Other (specify) ▼		250.02	
_	Full Name (Last, First, Middle Initial) Frank Fanshawe			Date of Receipt
	Mailing Address 430 Ridgehill Road			07 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City		Zip Code	Transaction ID: SA11AI.4181
	Schenectady	NY 1	12303	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		750.00 PAC Contribution
	Name of Employer MVP	Occupation Treasurer		PAC CONTINUTION
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-	to-Date ▼ 750.00	
Г	SUBTOTAL of Receipts This Page (optional) .			1250.02

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 19 (check only one) X 11a 11b 11c 12 13 14 15 16
A	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any pers name and address of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federal PAC		
	Full Name (Last, First, Middle Initial) Mark Fish		Date of Receipt
	Mailing Address 500 Normanskill Place		07 / 30 / Y Y Y Y Y
	City Slingerlands	State Zip Code NY 12159	Transaction ID: SA11AI.4191 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer MVP	Occupation Administrative	PAC Contribution
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	
_	Full Name (Last, First, Middle Initial) Joyce Gallimore		Date of Receipt
	Mailing Address 3 Bay Crest Drive		07 30 7 2007
	City	State Zip Code	Transaction ID: SA11AI.4241
	South Burlington FEC ID number of contributing federal political committee.	VT 05403	Amount of Each Receipt this Period 250.00
	Name of Employer MVP	Occupation Administrative	PAC Contribution
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Bill Geddings		Date of Receipt
	Mailing Address 75 Robinwood Drive		07 30 7 2007
	City Clifton Doub	State Zip Code NY 12065	Transaction ID: SA11AI.4183
	Clifton Park FEC ID number of contributing federal political committee.	NY 12065	Amount of Each Receipt this Period 499.98
	Name of Employer MVP	Occupation Administrative	PAC Contribution
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98	
Γ,	SUBTOTAL of Receipts This Page (optional)		1749.98

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 19 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using t	Statements may not be sold or used by any personal statements may not be sold or used by any personal he 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) MVP Health Care Inc. Federal PAC		
Full Name (Last, First, Middle Initial) Jane Gentile Mailing Address 63 Helmsford Way		Date of Receipt
City	State Zip Code	07 30 2007 Transaction ID: SA11AI.4179
Penfield	NY 14526	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.75
Name of Employer MVP	Occupation Administrative	PAC Contribution
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	750.75	
Full Name (Last, First, Middle Initial) Patrick Glavey		Date of Receipt
Mailing Address 165 Windemere Roa	d	07 07 YYYY 2007
City	State Zip Code	Transaction ID: SA11AI.4171
Rochester	NY 14610	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer MVP	Occupation Administrative	PAC Contribution
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Denise Gonick		Date of Receipt
Mailing Address 803 Via Marchella		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: SA11AI.4169
Schenectady	NY 12303	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer MVP	Occupation Administrative	PAC Contribution
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional)		2750.75
TOTAL This Period (last page this line numb	•	

IT	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS by information copied from such Reports and Si	tatements may	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 19 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or	NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federal PAC	name and add	dress of any political committee to	os solicit contributions from such committee.
4.	Full Name (Last, First, Middle Initial) Jack Graafeiland Mailing Address 85 Pinehurst Place	Stata	Zip Code	Date of Receipt 0 7
	City Middletown	State CT	2ip Code 06457	Transaction ID: SA11AI.4215 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00437	700.00
	Name of Employer MVP Receipt For: Primary General Other (specify) ▼	Occupation Administr Aggregate		PAC Contribution
— 3.	Full Name (Last, First, Middle Initial) David Henderson Mailing Address 1 Loudon Heights	<u> </u>		Date of Receipt 0 7 3 0 2 0 0 7
	City	State	Zip Code	Transaction ID: SA11AI.4221
	Loudonville	NY	12211	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1002.00 PAC Contribution
	Name of Employer MVP	Occupation Administr	rative	PAC Contribution
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1002.00	
<u> </u>	Full Name (Last, First, Middle Initial) Rosemarie Hogan Mailing Address 45 Crestwood Drive			Date of Receipt 0 7 3 0 2 0 0 7
	City	State	Zip Code	Transaction ID: SA11AI.4193
	Schenectady	NY	12306	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer MVP	Occupation Administr	rative	PAC Contribution
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)			1952.00

	ULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 19 (check only one) X 11a
or for comm	ation copied from such Reports and St nercial purposes, other than using the DF COMMITTEE (In Full) Health Care Inc. Federal PAC	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Mailing / City Clifton	Address 10 Cider Mill Drive	State NY	Zip Code 12065	Date of Receipt M M M J D D J 2 0 0 7 Transaction ID: SA11AI.4233 Amount of Each Receipt this Period 250.00
Receipt Pr	f Employer For: imary General ther (specify) ▼	Occupation Administ Aggregate		PAC Contribution
Gary Hu	ne (Last, First, Middle Initial) ghes Address 1602 Bradley Street			Date of Receipt 0 7 3 0 2 0 0 7
	ectady number of contributing political committee.	State NY	Zip Code 12309	Transaction ID: SA11AI.4197 Amount of Each Receipt this Period 250.00
Receipt Pr	For: imary General ther (specify)	Occupation Administ Aggregate		PAC Contribution
Full Nan Jon Hug Mailing A				Date of Receipt 0 7 3 0 2 0 0 7
	number of contributing	State NY	Zip Code 13357	Transaction ID: SA11AI.4213 Amount of Each Receipt this Period 250.00
	oolitical committee. f Employer	Occupation Administ		
	For: imary General ther (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOT#	AL of Receipts This Page (optional)			750.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	fo	se separate schedule(s) r each category of the etailed Summary Page	FOR LINE NUMBER: PAGE 12 / 19 (check only one) X 11a
A C	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not e name and address	be sold or used by any pers of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MVP Health Care Inc. Federal PAC			
	Full Name (Last, First, Middle Initial) William John			Date of Receipt
	Mailing Address 5 Sonat Road			07 30 7 2007
	City Clifton Park	State NY	Zip Code 12065	Transaction ID: SA11AI.4245 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1200	240.00
	Name of Employer MVP	Occupation Administrativ	e	PAC Contribution
	Receipt For: Primary General Other (specify) ▼	Aggregate Year		
_	Full Name (Last, First, Middle Initial) Dennis Kant			Date of Receipt
	Mailing Address 11 White Briar			07 30 YYYY 2007
	City		Zip Code	Transaction ID: SA11AI.4247
	Pittsford	NY	14534	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		750.00
	Name of Employer MVP	Occupation Administrativ	e	PAC Contribution
	Receipt For:	Aggregate Year	r-to-Date ▼	
	Primary General Other (specify) ▼		750.00	
_	Full Name (Last, First, Middle Initial) Barbara Leonard	l		Date of Receipt
	Mailing Address 848 DeCamp Avenue			07 30 YYYY 2007
	City		Zip Code	Transaction ID: SA11AI.4229
	Schenectady FEC ID number of contributing federal political committee.	C	12309	Amount of Each Receipt this Period 250.00
	Name of Employer	Occupation Administrativ	0	PAC Contribution
	Receipt For:	Aggregate Year		
	Primary General Other (specify) ▼		250.00	
Γ	SUBTOTAL of Receipts This Page (optional)	<u> </u>		1240.00

	HEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 19 (check only one) X 11a 11b 11c 12 13 14 15 16 1
or f	rinformation copied from such Reports and S or commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may no e name and addre	ot be sold or used by any pers ss of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	MVP Health Care Inc. Federal PAC			
٠. ي	Full Name (Last, First, Middle Initial) Joseph Lia			Date of Receipt
-	Mailing Address 12 Sutherland Drive	State	Zip Code	07 30 2007
	City Highland Mills	NY	2ip Code 10930	Transaction ID: SA11AI.4177 Amount of Each Receipt this Period
Ī	FEC ID number of contributing ederal political committee.	C		769.98
Ī	Name of Employer MVP	Occupation Administrat	ive	PAC Contribution
Ī	Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 769.98	
	Full Name (Last, First, Middle Initial) Carl Maleri, Jr.	I		Date of Receipt
-	Mailing Address 19 Crimson Way			07 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	City	State	Zip Code	Transaction ID: SA11AI.4237
Ī	Webster FEC ID number of contributing rederal political committee.	C	14580	Amount of Each Receipt this Period 750.00
i	Name of Employer MVP	Occupation Administrat	ive	PAC Contribution
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 750.00	
	Full Name (Last, First, Middle Initial) Donna Michele			Date of Receipt
-	Mailing Address 24 Kraus Road			07 30 2007
	City Albany	State NY	Zip Code 12203	Transaction ID: SA11AI.4223 Amount of Each Receipt this Period
	FEC ID number of contributing rederal political committee.	C		250.00
	Name of Employer MVP	Occupation Administrat	ive	PAC Contribution
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 250.00	
su	BTOTAL of Receipts This Page (optional)	1		1769.98

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	f	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 19 (check only one) X
ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federal PAC	Statements may not e name and address	be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) James Morrill			Date of Receipt
Mailing Address 54 Henderson Road			07 30 2007
City Glenmont	State NY	Zip Code 12077	Transaction ID: SA11AI.4207 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	12077	1000.00
Name of Employer MVP	Occupation Administrativ	ve	PAC Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Yea		
Full Name (Last, First, Middle Initial) Richard Odorizzi			Date of Receipt
Mailing Address 71 East Claremond Di	rive		07 30 YYYY 2007
City	State	Zip Code	Transaction ID: SA11AI.4203
Voorheesville	NY	12186	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00 PAC Contribution
Name of Employer MVP	Occupation Administrativ	ve	PAC Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dawn Ryman	1		Date of Receipt
Mailing Address 48 Morning Glory Way	/		07 30 7 2007
City	State	Zip Code	Transaction ID: SA11AI.4173
Schenectady FEC ID number of contributing federal political committee.	C	12306	Amount of Each Receipt this Period 750.00
Name of Employer MVP	Occupation Administrativ	ve	PAC Contribution
Receipt For: Primary General Other (specify)	Aggregate Yea	ar-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optional)	•		2000.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15/19 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federal PAC			
Full Name (Last, First, Middle Initial) Kelly Shea-Bradley			Date of Receipt
Mailing Address 6 Eastview Road			0 9 1 2 2 0 0 7
City	State	Zip Code	Transaction ID: SA11AI.4258
Latham FEC ID number of contributing federal political committee.	C	12110	Amount of Each Receipt this Period 300.00
Name of Employer MVP	Occupation Administ		PAC Contribution
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) David Stitt	1		Date of Receipt
Mailing Address 684 Macelroy Road			07 30 2007
City Ballston Spa	State NY	Zip Code 12019	Transaction ID: SA11AI.4211
FEC ID number of contributing federal political committee.	C	12019	Amount of Each Receipt this Period 252.00
Name of Employer MVP	Occupation Administ		PAC Contribution
Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 252.00	
Full Name (Last, First, Middle Initial) Tracy Tadaro-Ott			Date of Receipt
Mailing Address 33 Everett Drive			07 30 2007
City Rochester	State NY	Zip Code 14624	Transaction ID: SA11AI.4175
FEC ID number of contributing federal political committee.	C	14024	Amount of Each Receipt this Period 750.00
Name of Employer MVP	Occupation Administ		PAC Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optional)		1302.00

A.

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 16/19 Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 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) MVP Health Care Inc. Federal PAC Full Name (Last, First, Middle Initial) Date of Receipt Douglas Tucker Mailing Address 10 Braniff Drive 07 30 2007 City State Zip Code Transaction ID: SA11AI.4227 Camillus NY 13031 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. **PAC Contribution** Name of Employer MVP Occupation Administrative Receipt For: Aggregate Year-to-Date General Primary 250.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	250.00
TOTAL This Period (last page this line number only)	•	16223.08

A.

В.

President District:

Magon 2000201110		
SCHEDULE B (FEC Form 3X)		LINE NUMBER: PAGE 17/19
ITEMIZED DISBURSEMENTS	for each category of the	k only one) 1b 22 X 23 24 25 26 7 28a 28b 28c 29 30b
Any Information copied from such Reports and State or for commercial purposes, other than using the nar		
NAME OF COMMITTEE (In Full) MVP Health Care Inc. Federal PAC		
Full Name (Last, First, Middle Initial) AHIP PAC Administrative Account		Transaction ID: SB23.4257 Date of Disbursement 0 8 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Mailing Address 601 Pennsylvania Aven	ue, NW	08 09 2007
City Washington	State Zip Code DC 20004	Amount of Each Disbursement this Period
Purpose of Disbursement 2-5-5-1 Contribution	011	5000.00
Candidate Name	Category Type	
Senate President	ement For: 2008 Primary General Other (specify)	
State: District: Full Name (Last, First, Middle Initial)		
Arcuri for Congress		Transaction ID: SB23.4254 Date of Disbursement
Mailing Address P.O. Box 8508		08 7 22 7 2007
City Utica	State Zip Code NY 13505	Amount of Each Disbursement this Period
Purpose of Disbursement Political Contribution	011	250.00
Candidate Name	Category Type	1
· —	ement For: 2008 Primary General Other (specify)	

SUBTOTAL of Disbursements This Page (optional)	•			•	•	5250.00	
TOTAL This Period (last page this line number only)	•					5250.00	

State:

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

(Use separate schedule(s)

PAGE 18 / 19 FOR LINE NUMBER:

Excluding	Loans
LAGIGATING	Louiso

	cluding Loans				r each ered line)	(check only one)	9 X 10
NA	AME OF COMMITTEE (In Full)	DAC					1 1
IVI	VP Health Care Inc. Federal	PAC					
	A. Full Name (Last, First, Middl Deluxe Business Checks	e Initial) of Debtor or	Creditor		Nature of De Check Pri	ebt (Purpose): nting	
	Mailing Address P.O. Box 74	12572					
		tate 0H	ZIP Code 45274				
	Outstanding Balance Beginnir	ng This Period			Trai	nsaction ID: SD1	0.4163
	1.	45.00					
	Amount Incurred This	Period	Payment This Period		Outstandir	ng Balance at Close	e of This Period
		0.00	0.00				145.00
	B. Full Name (Last, First, Middl Media Well Done	e Initial) of Debtor or	Creditor		Nature of De Advertisin	ebt (Purpose):	
	Mailing Address 96 Jay Stree	et					
	City St Schenectady N	tate Y	ZIP Code 12305				
	Outstanding Balance Beginnir	ng This Period			Trai	nsaction ID: SD1	0.4165
	3	38.00					
	Amount Incurred This	Period	Payment This Period		Outstandir	ng Balance at Close	e of This Period
		0.00	0.00				338.00
1)	SUBTOTALS This Period This	s Page (optional)				4	83.00
2)	TOTALS This Period (last page	this line number only	9			4	83.00
3)	TOTAL OUTSTANDING LOAN	S from Schedule (C (last page only)	•			0.00
4)	ADD 2) and 3) and carry forwa	ard to appropriate line	of Summary Page (last page only)	<u> </u>		4	83.00

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE	1				
FOR	LINE	21a	OF	FORM 3X	

				FOR LINE 21a OF FURIVISA
IAME OF COMMITTEE (In	Full)			
MVP Health Care Inc.	Federal PAC			
A. Full Name (Last, Find Media Well Done	rst, Middle Initial)			Type of Allocated Activity:
				Administrative Fundraising Exempt
Mailing Address				Voter Drive Direct Candidate Support
96 Jay Street				D B this course (or the marks such) by BAC
City	State	Zip Code		Public Comm (ref to party only) by PAC
Schenectady	NY	12305		Allocated Activity or Event Year-To-Date
Purpose of Disbursem Federal PAC Broch			Category/ Type	338.00
Activity or Event Identification Administrative	fier:		1 -7,65	Date 0 8 0 9 7 2 0 0 7 Transaction ID: H4.4251
FEDER	AL SHARE	+ NONFEDERAL	. SHARE	= TOTAL AMOUNT
	0.00		338.00	338.00
B. Full Name (Last, Fin Deluxw Business C				Type of Allocated Activity: X Administrative Fundraising Exempt
Mailing Address				Voter Drive Direct Candidate Support
P.O. Box 742572				□ Voter Drive □ Direct Candidate Support
City	State	Zip Code		Public Comm (ref to party only) by PAC
Cincinnati	ОН	45274	11 1	Allocated Activity or Event Year-To-Date
Purpose of Disbursem Check Printing	ent:		Category/ Type	463.24
Activity or Event Identification Administrative	fier:		Турс	Date 0 8 0 9 7 2 0 0 7 Transaction ID: H4.4253
FEDER	AL SHARE	+ NONFEDERAL	SHARE	= TOTAL AMOUNT
	0.00		125.24	125.24

SUBT	OTAL of Allocated Federal and NonFederal	Activ	vity This Page		
	FEDERAL SHARE	+	NONFEDERAL SHARE	_ =	TOTAL AMOUNT
	0.00		463.24		463.24
TOTA	L This Period (last page for each line only)(Fede	eral share to 21(a)(i) and NonFederal share	to 2	21(a)(i))
	FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
	0.00] [463.24		463.24