### ¢¢ S. M LΛ (J) N) 0 N

FE5AN015

FEC FORM 3X

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

2007 AUG 27 AM 10: 12

				Offi	ce Use Only
1. NAME OF COMMITTEE (in full)	PE OR PRINT \	Example: If typir over the lines.	ng, type	12FE4M5	nn_
First Colonies Anesthesia Associat	First Colonies Anesthesia Associates, LLC Political Action Committee				
	<u></u>	<u> </u>	<del></del>	<u> </u>	
ADDRESS (number and street)	901 Research Boulevard	Suite 350			
Check if different than previously reported. (ACC)	ockville			MD 208	350
2. FEC IDENTIFICATION NUMB	ER V CITY	′ <b>^</b>	s	TATE A	ZIP CODE A
C 00416305	3. IS		IEW N) <b>OR</b>	AMEND (A)	DED
4. TYPE OF REPORT (Choose One)	Report 🖳	20 (M2)	May 20 (M5)	Aug 20 (I	M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:			lun 20 (M6)	Sep 20 (I	M9) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q1)			lul 20 (M7)	Oct 20 (N	
July 15 Quarterly Report (Q2)	PRE-Election Report for the:	Primary (12P  Convention (		General (12G) Special (12S)	
October 15 Quarterly Report (Q3) January 31		\ <u>[</u>	ا ، لوما ت	, , , , , , , , , , , , , , , , , , ,	in the
Year-End Report (YE)  July 31 Mid-Year	Election	on			State of
Report (Non-election Year Only) (MY)	(d) 30-Day  POST-Election  Report for the:	General (300	i) [	Runoff (30R)	Special (30S)
Termination Report (TER)	Election	on 11 /	07 ′	2007	in the MD
5. Covering Period 10	19 / 2006	through	11	′ [°27°] ′ [°	2006
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	eremy Roth, MD	5/17			
Signature of Treasurer	Meny 130	Mari	Da	ate 0 9	23'2067
NOTE: Submission of false, erroneous	, or incomplete information	may subject the pers	son signing thi	s Report to the pe	enalties of 2 U.S.C. §437g.
Office Use Only				F	FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE** OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name First Colonies Anesthesia Associates, LLC Political Action Committee 2006 ъ Report Covering the Period: From: To: **COLUMN A** COLUMN B This Period Calendar Year-to-Date (a) Cash on Hand 2006 6,831.64 January 1, (b) Cash on Hand at 16,744.04 Beginning of Reporting Period...... 26,975.00 0.00 (c) Total Receipts (from Line 19) ...... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 16,744,04 33,806.64 6(a) and 6(c) for Column B)..... 22,175.97 Total Disbursements (from Line 31)..... 8. Cash on Hand at Close of Reporting Period 11,630.37 11,630.37 (subtract Line 7 from Line 6(d))..... 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ...... 10. Debts and Obligations Owed BY the Committee (Itemize all on 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**

	PEINICED SQUIMANTI I AGE	
FEC Form 3X (Rev. 02/2003)	of Receipts	Page 3
Write or Type Committee Name		
First Colonies Anesthesia Associates, LLC	Political Action Committee	
Tilgt Colorines / tilestitesia / tascolates, EEO		
Report Covering the Period: From:	10 / 01 / 2006	To: 10 18 / 2006
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
A Collins (Alberthe Leave) Francisco	- Iotal IIIIs Fellou	Calendar Tear-to-Date
<ul><li>11. Contributions (other than loans) From:</li><li>(a) Individuals/Persons Other</li></ul>		
Than Political Committees		
(i) Itemized (use Schedule A)	0.00	15,710.00
(i) itemized (dae considure A)	[	
(ii) Unitemized	0.00	11,265.00
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)	0.00	26,975.00
(b) Political Party Committees		
(c) Other Political Committees		
(such as PACs)	··	
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	[0.00]	26,975.00
Totals to Line 33, page 5)	· [	20,975.00
12. Transfers From Affiliated/Other		
Party Committees	·· Lananana	<u></u>
40.484		
13. All Loans Received	· Landan	
14. Loan Repayments Received	·	
15. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	·· [	<u> </u>
16. Refunds of Contributions Made to Federal Candidates and Other		
Political Committees		
17. Other Federal Receipts	" Landarana	
(Dividends, Interest, etc.)		
18. Transfers from Non-Federal and Levin Fu	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
(a) Non-Federal Account		
(from Schedule H3)		
,		
(b) Levin Funds (from Schedule H5)		
(b) Lovin rando (nom conodato rio)	" [	
(c) Total Transfers (add 18(a) and 18(b))		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		[
19. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))	0.00	26,975.00
		( <u></u>
20. Total Federal Receipts		

0.00

(subtract Line 18(c) from Line 19) .......▶

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B
21. (	Operating Expenditures:	Iotal inis Period	Calendar Year-to-Date
(	a) Allocated Federal/Non-Federal		
	Activity (from Schedule H4)		
	(i) Federal Share		<u></u>
	(ii) Non-Federal Share		2,717.23
(	b) Other Federal Operating		
,	Expenditures		\
	c) Total Operating Expenditures		
v	(add 21(a)(i), (a)(ii), and (b))		
ד פכ	ransfers to Affiliated/Other Party		
	Committees		
23. C	Contributions to		
F	Federal Candidates/Committees and Other Political Committees	3,750.00	3,750.00
	ndependent Expenditures		
25. Ç	use Schedule E) Coordinated Party Expenditures 2 U.S.C. §441a(d)) use Schedule F)		L^
5	2 U.S.C. §441a(d)) use Schedule F)		
(	do concado i / m		<u> </u>
26	oan Repayments Made		
20	Can riepaymento Made		<u> </u>
27. L	oans Made		3-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0
28. F	Refunds of Contributions To:		
(	a) Individuals/Persons Other Than Political Committees		
	man Foliucai Committees		
,	b) Political Party Committees		
	c) Other Political Committees		
(	(such as PACs)		
	(3001 43 1 703)		L
,	d) Total Contribution Refunds		
,	(add Lines 28(a), (b), and (c))▶		
	(and Lines 20(a), (b), and (c))		<u> </u>
20 C	Other Disbursements	1,363.67	17.072.71
<b>2</b> 0. (	Julier Diabaractificina		
30 F	Federal Election Activity (2 U.S.C. §431(20))		
	a) Allocated Federal Election Activity		
`	(from Schedule H6)		
	(i) Federal Share		
	(1) 1 000101 011010 11111111111111111111		
	(ii) "Levin" Share		
,	b) Federal Election Activity Paid Entirely		L_r_r
,	With Federal Funds		
,			
,	· -		
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	L. r. r. r. r. r. r. l	
24 7	Total Dishursaments (add Lines 21/s) 22		
	Total Disbursements (add Lines 21(c), 22,	E 442.07	23.539.94
2	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	5,113.67	23,339.94
י ממ	Total Federal Disbursements		
	subtract Line 21(a)(ii) and Line 30(a)(ii)	[5 113 <b>67</b> ]	23,539.94
ī	rom Line 31)	5,113.07	23,339.94
	rom Line 31)	5,113.67	Lanna

(subtract Line 37 from Line 36) ......

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5 COLUMN A COLUMN B III. Net Contributions/Operating Ex-**Total This Period** Calendar Year-to-Date penditures 33. Total Contributions (other than loans) 0.00 26,975.00 (from Line 11(d), page 3) ..... 34. Total Contribution Refunds (from Line 28(d))..... 35. Net Contributions (other than loans) 26,975.00 0.00 (subtract Line 34 from Line 33) ..... 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ........ ▶ 37. Offsets to Operating Expenditures (from Line 15, page 3) ..... 38. Net Operating Expenditures

SCHEDULI	ЕВ	(FEC	Form	3X)
ITEMIZED	DISE	BURSE	MENT	S

SOURDOLL D (LEG LOUIL SX)	Use separate schedule(s) for each category of the	FOR LINE		
TEMIZED DISBURSEMENTS		(check only		24 25 26
	Detailed Summary Page	27	28a X 28	
Any information copied from such Reports and Statem	ents may not be sold or used	by any perso	on for the purpose	e of soliciting contributions
or for commercial purposes, other than using the name  NAME OF COMMITTEE (In Full)	and address of any political	Committee to	SONGIL CONTRIBUTIO	ns nom such committee.
First Colonies Anesthesia Associates, LLC	Political Action Committee			
Full Name (Last, First, Middle Initial)	<u> </u>		<del></del>	
1. Miller, Mike			Date of Disbur	
Mailing Address State House, H-107	· · · · · · · · · · · · · · · · · · ·		[10"] / [10"]	2006
	tate Zip Code D 21401-1991			
Purpose of Disbursement Political Contribution	Ī	011	Americal of For	sh Dishamanana Ahia Dadad
Candidate Name			Amount of Eac	ch Disbursement this Period
Mike Miller		Category/ Type	L	500.00
Office Sought: House Disbursem				
	Primary ∑ General  Other (specify) ▼			
State: MD District: 27				_
Full Name (Last, First, Middle Initial)				
Kelly, Delores G.				1 LANGE STATE OF THE STATE OF T
Mailing Address 11 Bladen St., Room 302				2006
	tate Zip Code 1D 21401	j		
Purpose of Disbursement Political Contribution		011	Amount of Fac	ch Disbursement this Period
Candidate Name		Category/	/income or Eac	<del></del>
Delores G. Kelly		Туре	<u> </u>	250.00
	ent For:  Primary ∑ General  Other (specify) ▼			
State: MD District: 10				
Full Name (Last, First, Middle Initial)			D-4- / D1-1	
Exum, Nathaniel			Date of Disbur	75ement
Mailing Address 11 Bladen St., Room 303				2006
City S Annapolis	tate Zip Code MD 21401			
Purpose of Disbursement Political Contribution		011	Amount of Eac	ch Disbursement this Period
Candidate Name Nathaniel Exum		Category/ Type		250.00
Office Sought: House Disbursem	ent For:	.,,,,,	[ <u></u>	
	Primary X General			
State: MD District: 24	Other (specify)			
SUBTOTAL of Disbursements This Page (optional)				
TOTAL This Period (last page this line number only).		<b>&gt;</b>		1,000.00

# SCHEDULE B (FEC Form 3Y)

SCHEDOLE B (FEC FOIII 3X)	l lles conserets sebodulo(s)		NE NUMBER: PAGE 2 OF 4	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	check only o	'	24 25 26
	Detailed Summary Page	27	22 X 23 28a 28b	24   25   26 28c   29   30b
Any information copied from such Reports and Statem	ents may not be sold or used			
or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)				
First Colonies Anesthesia Associates, LLC P	olitical Action Committee			
<u>/ </u>				
Full Name (Last, First, Middle Initial)			Date of Disbursemer	·t
Klausmeier, Kathy				
Mailing Address	<del></del>		10 / 61 0	2006
110 College Ave.			ليميا نصي	
	tate Zip Code			
	MD 21401			
Purpose of Disbursement Political Contribution	F	011	Amount of Each Diel	oursement this Period
Candidate Name		011	The state of the s	<u> </u>
Kathy Klausmeier		Category/ Type		250.00
Office Sought: House Disbursers	nent For:			
X Senate	Primary X General			
	Other (specify) ▼			
State: MD District: 8	<del></del>			
Full Name (Last, First, Middle Initial)			Date of Disbursemer	**
B. Busch, Mike		1		
Mailing Address			10 01	2006
State House				
•	itate Zip Code			
Annapolis Purpose of Disbursement	MD 21401			
Political Contribution		011	Amount of Each Disk	oursement this Period
Candidate Name		<u></u>		
Mike Busch		Category/ Type	<u></u>	500.00
Office Sought: X House Disbursen	nent For:			
Senate	Primary General	j		
President State: MD District: 30	Other (specify) ▼			
Oldio, State Dioliton	·			
Full Name (Last, First, Middle Initial) C.		ļ	Date of Disbursemen	nt
Pendergrass, Shane		ì		
Mailing Address 6 Bladen St., Room 262			10 01	2006
	State Zip Code	<del></del>		
Annapolis	MD 21401			
Purpose of Disbursement	1 [	011		
Political Contribution Candidate Name		011		oursement this Period
Candidate Haile		Category/ Type		250.00
Office Sought:   X   House   Disbursen	nent For:	.,,,,	[	
	Primary X General	1		
President	Other (specify) ▼	)		
State: MD District:				
SUBTOTAL of Disbursements This Page (optional)				
TOTAL Tide Deviced dead once the least of				2,000.00
TOTAL This Period (last page this line number only)				

SCHEDOLE B (LEG FOILL GK)	Use separate schedule(s) for each category of the	FOR LINE		PAGE 3 OF 4
TEMIZED DISBURSEMENTS		(check only	<u> </u>	
	Detailed Summary Page	21b	22 X 23	24 25 26
<del></del>		27	28a 28b	
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full)			<del>_</del>	
First Colonies Anesthesia Associates, LLC P	olitical Action Committee			
Full Name (Last, First, Middle Initial)				
A. Hammen, Pete			Date of Disburs	ement
	<del></del>		10 / 0	1 2006
Mailing Address 6 Bladen St., Room 241				
· ·	tate Zip Code			
Annapolis Purpose of Disbursement	MD 21401			
Political Contribution	[	011	Amount of Each	n Disbursement this Period
Candidate Name			\	~
Pete Hammen		Category/ Type		250.00
Office Sought:   X   House   Disbursem	ent For:	.,,,,,	<u> </u>	( <u></u>
· F-1 - 1 F-3	Primary X General			
	Other (specify)			
State: MD District: 46				
Full Name (Last, First, Middle Initial)				
3. Kach, Wade		!	Date of Disburs	sement
Mailing Address 6 Bladen St., 201				2006
	tate Zip Code			
	MD 21401			
Purpose of Disbursement	i fr			
Political Contribution		011	Amount of Each	h Disbursement this Period
Candidate Name		Category/		200.00
Wade Kach		Туре	<u> </u>	
Office Sought: X House Disburser	027			
	Primary X General Other (specify) ▼			
State: MD District: 5B	outer (openity)			
Full Name (Last, First, Middle Initial)				
<b>)</b> .			Date of Disburs	sement
Zirkin, Bobby			[ <u>[M</u> ] / [ <u>[</u>	المبيئينينيا / العير
Mailing Address 11 Bladen St., 2 West Wing			10 0	2006
City	tate Zip Code			
	MD 21401			
Purpose of Disbursement	ļ <u>r</u>	744		
Political Contribution 0 Candidate Name		011	Amount of Each Disbursement this Period	
Bobby Zirkin		Category/ Type		100.00
Office Sought: X House Disbursen	nent For:	туре	<u> </u>	<u></u>
· • • • • • • • • • • • • • • • • • • •	Primary X General			
President	Other (specify) ▼	ĺ		
State: MD District: 11				
SUBTOTAL of Disbursements This Page (optional)				
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TOTAL This Period (last page this line number only).		······· <b>&gt;</b>	<u></u>	2,550.00

# SCHEDULE B (FEC Form 3Y)

	TILDOLL B (I LO I OIIII OX)	Lien concrete echodule/s)	FOR LINE		
TEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the	(check only		
		Detailed Summary Page	21b	22 X 23 26 25 26 30b	
A	us information could from such Departs and China	anta mau nat ha sald s		<del></del>	
an Or	y information copied from such Reports and Statem for commercial purposes, other than using the nam	nems may not be sold of usine and address of any politic	ed by any perso cal committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)				
$\rangle$	First Colonies Anesthesia Associates, LLC P	olitical Action Committee			
_					
۸	Full Name (Last, First, Middle Initial)			Date of Disbursement	
٠.	Mooney, Alex				
	Mailing Address			10 / 01 / 2006	
	11 Bladen St., Room 402				
	•	State Zip Code		-	
	Annapolis Purpose of Disbursement	MD 21401			
	Political Contribution		011	Amount of Each Disbursement this Period	
	Candidate Name		Category/	200.00	
	Alex Mooney		Type	200.00	
	Office Sought: House Disburserr				
		Primary X General			
	State: MD District: 3	Other (specify) ▼			
	Full Name (Last, First, Middle Initial)		-		
В.				Date of Disbursement	
	Briggs, Jeff			( 1000 ) ( 1000 ) ( 1000 )	
	Mailing Address	· · · · · · · · · · · · · · · · · · ·		10 01 2006	
	•	State Zip Code			
	Annapolis Purpose of Disbursement	MD 21401			
	Political Contribution		011	Amount of Each Disbursement this Period	
	Candidate Name		Category/	1000.00	
	Michael Steele		Type	1000.00	
	Office Sought: House Disburserr				
		Primary X General			
	State: MD District:	Other (specify) ▼			
_	Full Name (Last, First, Middle Initial)				
C.				Date of Disbursement	
	<del></del>	<del></del>		ليعميم ، ليعميا ، ليمميميا	
	Mailing Address				
	City	State Zip Code			
	Purpose of Disbursement				
Political Contribution			Amount of Each Disbursement this Period		
	Candidate Name Bobby Zirkin		Category/		
	Office Sought:   House   Disbursem	nent For:	Туре		
	_ <u> </u>	Primary General			
	<u> </u>	Other (specify)			
	State: District:		_	<u></u>	
S	SUBTOTAL of Disbursements This Page (optional)				
TOTAL This David /less need this line symbol sales				3,750.00	
T	OTAL This Period (last page this line number only).				

# SCHEDULE B (FEC Form 3X)

SCHEDOLE D (LEG LOHIII SX)	Lies comprets sale-dul-4s	FOR LINE		OF 1	
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only			
	Detailed Summary Page	21b 27		25 26 30b	
Any information copied from such Reports and Statem	ents may not be sold or used				
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)					
First Colonies Anesthesia Associates, LLC Polit	tical Action Committee				
Full Name (Last, First, Middle Initial)			Data of Diahaman		
A. Barbara Marx Brocato & Associates			Date of Disbursement		
Mailing Address			MOM / 1090 / 1 200	2_1,1,2	
18 Pinkney St				لنحي	
	tate Zip Code			· · · · · · · · · · · · · · · · · · ·	
Annapolis, MD 21401	<del> </del>				
Purpose of Disbursement Lobbyist Fees	[	001	Amount of Each Disbursement	this Parind	
Candidate Name		<u></u>			
	'	Category/ Type		1,363.67	
Office Sought: House Disbursem	ent For:				
	Primary General				
<u> </u>	Other (specify) Lobbyist Fe	es			
State: District:	LODDJIST C			<del></del>	
Full Name (Last, First, Middle Initial) 3.		i	Date of Disbursement		
			المريس / المريس / المريس المري	البادييان	
Mailing Address					
City	tate Zip Code				
Purpose of Disbursement					
•			Amount of Each Disbursement	this Period	
Candidate Name		Category/			
Office Sought:	lent For	Туре		<u> </u>	
Office Sought: House Disbursem	ent For: Primary General				
	Other (specify)				
State: District:					
Full Name (Last, First, Middle Initial)					
<b>2.</b>			Date of Disbursement		
Mailing Address			( C.	<u>~~~~</u>	
Maming Addiess					
City	tate Zip Code				
Purpose of Disbursement					
Constitute Name		<u></u>	Amount of Each Disbursement	this Period	
Candidate Name		Category/		<u> </u>	
Office Sought:   House   Disbursem	ent For:	Туре	<u> </u>	<u></u>	
I	Primary General	ł			
L	Other (specify) ▼				
State: District:				_	
SUBTOTAL of Disbursements This Page (optional)					
TOTAL This Period (last page this line number only)					

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING The FEC added this page to the end of this filing to indicate h	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirm	nation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Business	Day Delivery
Received from House Records & Registration Office,	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	eceipt or Postmarked
En	8/27/07
PREPARER (3/2005)	DATE PREPARED