



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Baxter Healthcare Political Action Committee**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>		75783.55
(b) Cash on Hand at Beginning of Reporting Period.....	75783.55	
(c) Total Receipts (from Line 19) .....	11475.29	11475.29
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	87258.84	87258.84
7. Total Disbursements (from Line 31).....	0.00	0.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	87258.84	87258.84
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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**Baxter Healthcare Political Action Committee**

Report Covering the Period: From:  /  /  To:  /  /

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).....	2420.44	2420.44
(ii) Unitemized .....	9054.85	9054.85
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	11475.29	11475.29
(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) .....	11475.29	11475.29
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 Transfers (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))..... ▶	11475.29	11475.29
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	11475.29	11475.29

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (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) Allocated 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)) ..	0.00	0.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	0.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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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) .....	11475.29	11475.29
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	11475.29	11475.29
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 6 OF 9
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<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. Sarah L. Creviston**  
Full Name (Last, First, Middle Initial)

Mailing Address 23 Wynstone Way

City North Barrington State IL Zip Code 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 ▼ 226.66

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 18 / 2013  
**Transaction ID : 20130130153757-134**

Amount of Each Receipt this Period  
 113.33

**B. Robert M. Davis**  
Full Name (Last, First, Middle Initial)

Mailing Address 21515 Hummingbird Court

City Kildeer State IL Zip Code 60047

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

Name of Employer Baxter International, Inc. Occupation CVP, President - Med Products

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 403.84

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 04 / 2013  
**Transaction ID : 20130111121145-45**

Amount of Each Receipt this Period  
 201.92

**C. Robert M. Davis**  
Full Name (Last, First, Middle Initial)

Mailing Address 21515 Hummingbird Court

City Kildeer State IL Zip Code 60047

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

Name of Employer Baxter International, Inc. Occupation CVP, President - Med Products

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 403.84

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 18 / 2013  
**Transaction ID : 20130130153757-46**

Amount of Each Receipt this Period  
 201.92

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 517.17

**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 7 OF 9
	<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**

**A. Richard Marritt**  
Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 18 / 2013**

**Transaction ID : E1D320379D097C8CD26**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 1760 Duffy Lane

City State Zip Code  
 Bannockburn IL 60015

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

Name of Employer Occupation  
 Baxter International, Inc. CVP, Human Resources

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **384.62**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 18 / 2013**

**Transaction ID : 20130130153757-166**

Amount of Each Receipt this Period  
**192.31**

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

Mailing Address 1332 Edgewood Lane

City State Zip Code  
 Northbrook IL 60062

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1123.08**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 04 / 2013**

**Transaction ID : 2013011121145-170**

Amount of Each Receipt this Period  
**561.54**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1003.85</b>
<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: (check only one)	PAGE 8 OF 9
	<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**

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

Mailing Address 1332 Edgewood Lane

City Northbrook State IL Zip Code 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 ▼ 1123.08

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 18 / 2013  
**Transaction ID : 20130130153757-171**

Amount of Each Receipt this Period  
 561.54

**B. Roibin Ryan**  
Full Name (Last, First, Middle Initial)

Mailing Address 1419 W Berteau

City Chicago State IL Zip Code 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 ▼ 217.24

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 18 / 2013  
**Transaction ID : 20130130153757-165**

Amount of Each Receipt this Period  
 108.62

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

Mailing Address 931 Oak Street

City Winnetka State IL Zip Code 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 ▼ 238.46

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 18 / 2013  
**Transaction ID : 20130130153757-162**

Amount of Each Receipt this Period  
 119.23

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 789.39

**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 9 OF 9
(check only one)	
<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**

**A. Onelia Ann Vera**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 619 Oleander Drive  
 City Hallandale State FL Zip Code 33009  
 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 ▼ 220.06

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 18 / 2013  
**Transaction ID : 20130130153757-133**  
 Amount of Each Receipt this Period  
 110.03

**B.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	110.03
<b>TOTAL</b> This Period (last page this line number only).....▶	2420.44