

**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

Radiation Therapy Services, Inc Political Action Committee

ADDRESS (number and street)

2234 Colonial Blvd.

Attn: Margarita Suarez

Check if different than previously reported. (ACC)

Fort Myers

FL

33907

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00385120

3. IS THIS REPORT

x

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)

x 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

01

01

2005

through

06

30

2005

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

Daniel E. Dosoretz, MD

Signature of Treasurer

Electronically Filed by Daniel E. Dosoretz, MD

Date

07

29

2005

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. 02/2003)

**SUMMARY PAGE**

**OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Radiation Therapy Services, Inc Political Action Committee

Report Covering the Period: From: <sup>M</sup>01 <sup>D</sup>01 <sup>Y</sup>2005 To: <sup>M</sup>06 <sup>D</sup>30 <sup>Y</sup>2005

	<b>COLUMN A</b> This Period	<b>COLUMN B</b> Calendar Year-to-Date
6. (a) Cash on Hand January 1 <sup>Y</sup> 2005		60090.00
(b) Cash on Hand at Beginning of Reporting Period .....	60090.00	
(c) Total Receipts (from Line 19) .....	37270.00	37270.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	97360.00	97360.00
<hr/>		
7. Total Disbursements (from Line 31) .....	26000.00	26000.00
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	71360.00	71360.00
<hr/>		
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. 02/2003)

Page 3

Write or Type Committee Name

Radiation Therapy Services, Inc Political Action Committee

Report Covering the Period: From: <sup>M</sup>01 <sup>-</sup>01 <sup>-</sup>2005<sup>Y</sup> To: <sup>M</sup>06 <sup>-</sup>30 <sup>-</sup>2005<sup>Y</sup>

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) .....	35050.00	35050.00
(ii) Unitemized .....	220.00	220.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)) .....	35270.00	35270.00
(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) .....	35270.00	35270.00
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 .....	2000.00	2000.00
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)) .....	37270.00	37270.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	37270.00	37270.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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.....	26000.00	26000.00
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 ActMty (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))..	26000.00	26000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(i) from Line 31).....	26000.00	26000.00

**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) .....	35270.00	35270.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	35270.00	35270.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 / 14

(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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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)  
Radiation Therapy Services, Inc Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Mrs. Celia Dosoretz</b>		Date of Receipt M / D / Y 01 / 24 / 2005
Mailing Address 13221 Ponderosa Way		Transaction ID: 21501675
City Fort Myers	State FL	Zip Code 33907
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer Canterbury School	Occupation Teacher	Aggregate Year-to-Date ▼ 5000.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. DR. DANIEL E. DOSORETZ, MD</b>		Date of Receipt M / D / Y 01 / 24 / 2005
Mailing Address 13221 PONDEROSA WAY		Transaction ID: 21501676
City FORT MYERS	State FL	Zip Code 33907
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer 21st Century Oncology, Inc	Occupation Medical Doctor	Aggregate Year-to-Date ▼ 5000.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. MARK LESLIE SOBOSZAK</b>		Date of Receipt M / D / Y 04 / 21 / 2005
Mailing Address 5871 KINGSMILL DRIVE		Transaction ID: 22117628
City SALISBURY	State MD	Zip Code 21801
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Katin Radiation Therapy, PA	Occupation Medical Doctor	Aggregate Year-to-Date ▼ 1000.00
Receipt For: Primary      General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>11000.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 7 / 14  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Radiation Therapy Services, Inc Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Andrew L Woods</b>		Date of Receipt M / D / Y 04 / 25 / 2005
Mailing Address 15021 Rolling Hills Drive		Transaction ID: 22117829
City Glenwood	State MD	Zip Code 21738
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer 21st Century Oncology, Inc	Occupation Attorney	Contribution
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. Mr DAVID M KOENINGER</b>		Date of Receipt M / D / Y 05 / 23 / 2005
Mailing Address 18040 MONTELAGO COURT		Transaction ID: 22374541
City MIROMAR LAKES	State FL	Zip Code 33913
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2500.00
Name of Employer 21st Century Oncology, Inc	Occupation Chief Financial Officer	Contribution
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>C. Paul E. Walner, MD</b>		Date of Receipt M / D / Y 08 / 09 / 2005
Mailing Address 140 Fallswood Drive		Transaction ID: 22378811
City Moorestown	State MD	Zip Code 08057
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer 21st Century Oncology, Inc	Occupation Senior Vice President	Contribution
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>7750.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 8/14

(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)  
Radiation Therapy Services, Inc Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Dr John Garton</b>		Date of Receipt M / D / Y 06 / 13 / 2005
Mailing Address 773D Silver Bell Drive		Transaction ID: 22374540
City	State	Zip Code
Sarasota	FL	34241
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer Retired	Occupation Medical Doctor	Contribution
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. Betty Rubenstein</b>		Date of Receipt M / D / Y 06 / 21 / 2005
Mailing Address 133D1 Ponderosa Way		Transaction ID: 22379296
City	State	Zip Code
Fort Myers	FL	33907
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation Housewife	Contribution
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. DAVID E. LEE</b>		Date of Receipt M / D / Y 06 / 08 / 2005
Mailing Address 9741 MAR LARGO C		Transaction ID: PR1587085112171
City	State	Zip Code
FORT MYERS	FL	33919
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 240.00
Name of Employer 21st Century Oncology, Inc	Occupation Physician Assistant	P/R Deduction (\$20.00)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional) .....	<b>10240.00</b>
TOTAL This Period (last page this line number only) .....	



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

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

FOR LINE NUMBER: PAGE 9 / 14  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Radiation Therapy Services, Inc Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Dr. JAMES H. STEVENS, MD</b>		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 488D DESTINY WAY		Transaction ID: PR1567294912171
City	State	Zip Code
DESTIN	FL	32541
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2400.00
Name of Employer 21st Century Oncology, Inc	Occupation Medical Doctor	P/R Deduction (\$200.00 Bi-Weekly)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	

Full Name (Last, First, Middle Initial) <b>B. Mrs. VICTORIA DANTON</b>		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 1409 DAVIS DRIVE		Transaction ID: PR1580085112171
City	State	Zip Code
ET. MYERS	FL	33519
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 900.00
Name of Employer 21st Century Oncology, Inc	Occupation Admin Manager	P/R Deduction (\$75.00 Bi-Weekly)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

Full Name (Last, First, Middle Initial) <b>C. QUINTEN CURTIS BLACK, MD</b>		Date of Receipt M / M / D D / Y Y Y Y
Mailing Address 1404 KENTON LANE		Transaction ID: PR1580879412171
City	State	Zip Code
ASHEVILLE	NC	28803
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 480.00
Name of Employer RTA of Western NC, PA	Occupation Medical Doctor	P/R Deduction (\$40.00 Bi-Weekly)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3780.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

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

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NAME OF COMMITTEE (In Full)  
Radiation Therapy Services, Inc Political Action Committee

Full Name (Last, First, Middle Initial) A. Dr Patrick Michael Francke		Date of Receipt M / D / Y
Mailing Address 31 SABAL ISLAND DRIVE		Transaction ID: PR1693307912171
City	State	Zip Code
Ocean Ridge	FL	33435
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 480.00
Name of Employer 21st Century Oncology, Inc	Occupation Medical Doctor	P/R Deduction (\$40.00)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) B. Dr Keith Lawrence Miller		Date of Receipt M / D / Y
Mailing Address 12731 Terabella Way		Transaction ID: PR1692755712171
City	State	Zip Code
Fort Myers	FL	33912
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1800.00
Name of Employer 21st Century Oncology, Inc	Occupation Medical Doctor	P/R Deduction (\$150.00 Bi-Weekly)
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 1800.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	2280.00
TOTAL This Period (last page this line number only) .....	▶	35050.00

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

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

FOR LINE NUMBER: PAGE 11 / 14

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16	

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NAME OF COMMITTEE (In Full)  
Radiation Therapy Services, Inc Political Action Committee

Full Name (Last, First, Middle Initial) A. Friends Of Gordon Smith		Date of Receipt M / D / Y 04 / 16 / 2005
Mailing Address 228 S Washington Ste 115		Transaction ID: 22382173
City Alexandria	State VA	Zip Code 22314
FEC ID number of contributing federal political committee. C C00383554		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	Contribution Refund
Receipt For: 2008 Primary X General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	2000.00
TOTAL This Period (last page this line number only) .....	▶	2000.00

**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 12 / 14

<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)  
Radiation Therapy Services, Inc Political Action Committee

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

Mailing Address P.O Box 16488

City Arlington State VA Zip Code 22215

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

011  
Category/  
Type

Transaction ID: 21501671  
Date of Disbursement  
01 / 18 / 2005

Amount of Each Disbursement this Period  
5000.00

Contribution

Full Name (Last, First, Middle Initial)  
**B. Republican Majority Fund**

Mailing Address 101 Constitution Ave, NW Suite 900 West

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

011  
Category/  
Type

Transaction ID: 21501670  
Date of Disbursement  
01 / 18 / 2005

Amount of Each Disbursement this Period  
2000.00

Contribution

Full Name (Last, First, Middle Initial)  
**C. Friends Of Gordon Smith**

Mailing Address 228 South Washington Street Suite 115

City Alexandria State VA Zip Code 22215

Purpose of Disbursement  
Contribution

Candidate Name Sen. Gordon Smith

Office Sought: House Senate President State: OR District 2

Disbursement For: 2006 Primary General Other (specify) ▼

011  
Category/  
Type

Transaction ID: 21501673  
Date of Disbursement  
01 / 18 / 2005

Amount of Each Disbursement this Period  
2000.00

Contribution

**SUBTOTAL** of Disbursements This Page (optional) ▶ **9000.00**

**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 13 / 14

<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)  
Radiation Therapy Services, Inc Political Action Committee

Full Name (Last, First, Middle Initial)  
**A. White Mountain PAC**

Mailing Address P.O. Box 1772

City Concord State NH Zip Code 03302-1812

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: Primary General Other (specify) ▼

011  
Category/  
Type

Transaction ID: 21501668  
Date of Disbursement  
01 / 18 / 2005

Amount of Each Disbursement this Period  
2000.00

Contribution

Full Name (Last, First, Middle Initial)  
**B. Friends Of Gordon Smith**

Mailing Address 228 S Washington Ste 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
1996 General Election Debt Reduction

Candidate Name  
Sen. Gordon Smith

Office Sought: House Senate President  
State: OR District 2

Disbursement For: 1996 Primary General Other (specify) ▼

011  
Category/  
Type

Transaction ID: 22381324  
Date of Disbursement  
03 / 30 / 2005

Amount of Each Disbursement this Period  
5000.00

1996 General Election Debt Reduction

Full Name (Last, First, Middle Initial)  
**C. Friends Of Mark Foley**

Mailing Address 1316 Lake Victoria Dr

City Lake Worth State FL Zip Code 33461

Purpose of Disbursement  
Contribution

Candidate Name  
Rep. Mark Foley

Office Sought:  House Senate President  
State: FL District 16

Disbursement For: 2006 Primary General Other (specify) ▼

011  
Category/  
Type

Transaction ID: 22117646  
Date of Disbursement  
04 / 26 / 2005

Amount of Each Disbursement this Period  
5000.00

Contribution

**SUBTOTAL** of Disbursements This Page (optional) ▶ **12000.00**

**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 14 / 14

<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)  
Radiation Therapy Services, Inc Political Action Committee

Full Name (Last, First, Middle Initial)  
A. Kennedy For Senate 2006

Mailing Address 301 4th St Ne Suite 202

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Contribution

Candidate Name  
Sen. Edward Kennedy

Office Sought: House Disbursement For: 2006  
 Senate  Primary General  
 President  
 State: MA District 1 Other (specify) ▼

011  
Category/  
Type

Transaction ID: 22380758  
Date of Disbursement

06 / 16 / 2005

Amount of Each Disbursement this Period

5000.00

Contribution

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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

26000.00