080

FEC FORM 3X

REPORT OF RECEIPTS

For Other Than An Authorized Committee

RECEIVED

2012 JAN 31 AM 10: 20

Office Use Only FEU MAIL CENT

Rev. 12/2004

1.	NAME OF		
	COMMITTEE	(in	full)

Use

Only

FE6AN026

TYPE OR PRINT ▼

Example: If typing, type

12FE4M5

over the lines. 10, NC, U, R, E, MEDICALL, CORP, POLITICAL ACTION COMMITTEE TNVERNESS ADDRESS (number and street) 15 U. 1 T. E. 650 Check if different than previously reported. (ACC) ENGLEWOOD |CD CITY A STATE A ZIP CODE FEC IDENTIFICATION NUMBER ▼ 3. IS THIS NEW **AMENDED** C00487629 **REPORT** (N) OR (A) TYPE OF REPORT (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) Report (Non-Election Year Only) (Choose One) Due On: Dec 20 (M12) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (Non-Election Year Only) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report (Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 **PRE-Election** Quarterly Report (Q2) Report for the: Convention (12C) Special (12S) October 15 Quarterly Report (Q3) in the January 31 Election on State of Year-End Report (YE) July 31 Mid-Year (d) 30-Day Report (Non-election **POST-Election** General (30G) Runoff (30R) Special (30S) Year Only) (MY) Report for the: Termination Report in the (TER) State of Election on ol 2011 Covering Period through 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 30 2012 Signature of Treasurer Date NOTE: Submission of false, exroneous. or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. Office FEC FORM 3X

12030722484

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)	OF RECEIPTS AND DISBURSEMENTS	Page 2
Write or Type Committee Name ON WIFE HEDICAL CORP.	POURICE ACTION COMMITTEE	
	THE STREET AND ADDRESS OF THE STREET AND ADD	3,1 20,1,1
		OLUMN B ar Year-to-Date
6. (a) Cash on Hand January 1, Zo 11		5. 20.0.00
(b) Cash on Hand at Beginning of Reporting Period	890000	
(c) Total Receipts (from Line 19)	180000	55,0000
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	10,70000	. (.0.7.0.0.0.0
7. Total Disbursements (from Line 31)	1000000	1000000
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	70000	7.00.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	and the control of th	
Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		
This committee has qualified as a mul	ticandidate 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

FEC Form 3X (Rev. 06/2004)		Page 3
Write or Type Committee Name		
ONCLUZE MEDICAL CORP POLITICA		······································
Report Covering the Period: From:	7 01 20 11	го: 12 31 2011
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	1,800.00	, 5,500.00
(1) 110/11202 (200 001102010 1 1)/1111111111	1,1000	, 0,000.
(ii) Unitemized		, ,
(iii) TOTAL (add	160000	· · ·
Lines 11(a)(i) and (ii)▶	, , , , , , , , , , , , , , , , , , , ,	5,500.0
(b) Political Party Committees		
(c) Other Political Committees	and the second s	, , , , , , , , , , , , , , , , , ,
(such as PACs)	the second second second	
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	18000	5,500.00
Totals to Line 33, page 5)	1,800.00	,, , , , , , , , , , , , , , , , , , ,
2. Transfers From Affiliated/Other Party Committees	·	;
Tary Committees	3	the state of the s
. All Loans Received	2 . 3	· · · · · · · · · · · · · · · · · · ·
4. Loan Repayments Received	*	• • • • • • • • • • • • • • • • • • •
5. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)	and the second second	
(Carry Totals to Line 37, page 5)	y , *	, , , , , , , , , , , , , , , , , , , ,
Refunds of Contributions Made to Federal Candidates and Other		
Political Committees		
7. Other Federal Receipts	en e	9
(Dividends, Interest, etc.)		
3. Transfers from Non-Federal and Levin Funds	and the state of t	
(a) Non-Federal Account		
(from Schedule H3)	edin ž e odnik Žerove (* oden	y y y y
(b) Levin Funds (from Schedule H5)		<i>y</i>
(a) Total Transfers (add 19(a) and 19(b))		
(c) Total Transfers (add 18(a) and 18(b))	, ,	· • • • • • • • • • • • • • • • • • • •
9. Total Receipts (add Lines 11(d),	2222	
12, 13, 14, 15, 16, 17, and 18(c))▶	3,700 00	, 5,500.00
). Total Federal Receipts	3,700.00	5,500.00 5,500.00
(subtract Line 18(c) from Line 19)▶	370000	550000
(Salada Enio Tolo) non Enio Tol	, , , , , ,	, 5,000,00

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) Allocated Federal/Non-Federal Activity (from Schedule H4)		Odicinal Teal-to-Date				
	(i) Federal Share	5	5 5				
	(ii) Non-Federal Share(b) Other Federal Operating	* * * * * * * * * * * * * * * * * * *	,				
	Expenditures(c) Total Operating Expenditures	* * * * * * * * * * * * * * * * * * *					
22	(add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party	, , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,				
	Committees	· · · · · · · · · · · · · · · · · · ·	, , , , , , , , , , , , , , , , , , ,				
	Contributions to Federal Candidates/Committees and Other Political Committees	, 10,000.00	, 10,000,00				
24.	Independent Expenditures (use Schedule E)						
25.	(2 U.S.C. §441a(d)) (use Schedule F)		3 3				
		*					
26.	Loan Repayments Made						
	Loans Made Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	• • • • • • • • • • • • • • • • • • •					
	(b) Political Party Committees		and the second s				
	(c) Other Political Committees		• • • • • • • • • • • • • • • • • • •				
	(such as PACs)	, , , , , , , , , , , , , , , , , , , ,	7				
	(d) Total Contribution Refunds	and strong appropriate the second	The second second second				
	(add Lines 28(a), (b), and (c))▶	,	, , , , , , , , , , , , , , , , , , ,				
29.	Other Disbursements		tana ara sa				
30.	Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity						
	(from Schedule H6)	the state of the s					
	(i) Federal Share	7	The state of the s				
	(ii) "Levin" Share						
	(b) Federal Election Activity Paid Entirely With Federal Funds						
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶						
31.	Total Disbursements (add Lines 21(c), 22,		en e				
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	, 10,000.00	, (D, 00 0.0D				
32.	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)						
	from Line 31)	, (0,00000	, 10,00000				
			, , , =				

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)	1,800.00	550000
34. Total Contribution Refunds		
(from Line 28(d))	y , ,	ş 7 •
35. Net Contributions (other than loans)	180000	6,600.00
(subtract Line 34 from Line 33)	, 1,800.00	, 6,600.00
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		
(subtract Line 37 from Line 36)		y 2 *

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 1 OF 900 (check only one)
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the			rson for the purpose of soliciting contributions
NAME OF COMMITTEE (IN FUI) ONCLUE MEDICAL CORP POLITION	CAL ACTI	ON COMMITTEE	
Full Name (Last, First, Middle Initial) A. Pegler, William Mailing Address 24462 E. Frost Drive City FEC ID number of contributing federal political committee. Name of Employer Well Corp Receipt For:	State C 0	Zip Code 80016	Date of Receipt 0.7 0 0 2 0 1 2 0 1 1 2 0 1 1 1 1 1 1 1 1 1
Primary General Other (specify) Full-Name (Last, First, Middle Initial)	3	*	
B. <u>realer</u> , William Mailing Address 24462 E. Frost Drive City 1	State	Zip Code	Date of Receipt
FEC ID number of contributing federal political committee.	<u> </u>	80016	Amount of Each Receipt this Period , , , I O D. O
Name of Employer Dicture Midical Corp Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼	
Full Name (Last, First, Middle Initial) C. Pegler, William Mailing Aedress 24462 E. Frost Drive City 10	State	Zip Code	Date of Receipt 07 29 20 1-1
FEC ID number of contributing federal political committee.	C	80010	Amount of Each Receipt this Period
Name of Employer	Occupation		
Receipt For: Primary General Other (spacify)	Aggregate Ye	ear-to-Date ▼	
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE ZOF Y (check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statements or for commercial purposes, other than using the name an NAME OF COMMITTEE (in Full)	nd address of any political committee	erson for the purpose of soliciting contributions
/ ONCLUEE MEDICAL CORPPOLITICAL A	ACTION COMMITTEE	
Full Name (Last, First, Middle Initial) A. Leath, William Mailing Address 24462 E. Frost Drive City State CO FEC ID number of contributing federal political committee. Name of Employor Occupa	80016	Date of Receipt 08 12 2011 Amount of Each Receipt this Period 100000
Receipt For: Primary General Other (specify)	yate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) B. Choole, Belsy Hrm Mailing Address [0293 E. Sheri Lane City Knalewood Co	Zip Code 80111 - 6209	Date of Receipt Date of Receipt Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer N/A Coccupa		7 00 00
Full Name (Last, First, Middle Initial) C. Yeach, Timothy Mailing Address 2251 W. Dry Creek Rd. City Litheton Control City C		Date of Receipt Date of Receipt Date of Rec
FEC ID number of contributing federal political committee. Name of Employer Dicture Medical Corp Occupa		Amount of Each Receipt this Period , , 3 00.00
SUBTOTAL of Receipts This Page (optional)		, 1,100.00
TOTAL This Period (last page this line number only)		·

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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7	NAME OF COMMITTEE (in Full)		deress of any personal communication							., 0.00			
\rangle	ancher Medical Corprolitica	AL ACT	TION COMMITTEE						_				
A.	Full Name (Last, First, Middle Initial)				Date of	i Re	9C6	eipt					
	Mailing Address E. Frost Drive	Otete	7in Oode		08	,	•	21)	2	Ď	ľ	ľ
	Hurora	State CO	Zip Code 8001V		Amount	of	E	ach R	ес	eipt th	is F	eriod	
	FEC ID number of contributing federal political committee.	C					,			ij.	10	0.	00
	Oncure Medical Corp	Occupation CO	0										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼										
В.	Full Name (Last, First, Middle Initial) Yealer. William			,	Date of	f Re	ece	eipt					
	Mailing Address 24462 E. Frost Drive				09 09 2011						Ĭ		
	Hurora	State	Zip Code 80010		Amount of Each Receipt this Period								<u> </u>
	FEC ID number of contributing federal political committee.	C			, , 1,00,0							00	
	Ducure Medical Corp.	Occupation COD											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼										
c.	Full Name (Last, First, Middle Initial)				Date o	f Re	ec	eipt					
	24412 E. Frost Drive							23	3	1 Y	2	io	(
	- Hurora	State	Zip Code 80016		Amoun	t of	f E	ach F	?ec	eipt th	is F	Period	
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	Oncure Medical Corp	Occupation CC											
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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	ny information copied from such Reports and Stat for commercial purposes, other than using the na							
abla	NAME OF COMMITTEE (in Full)							
<u>/</u>	ONCLUBE MEDICAL CORPPOLITIC	AL ACT	ION COMMITTEE					
Α.	Full Name (Last, First, Middle Initial)			Date of Rec	ceipt			
	Mailing Address 24462 E. Frost Drive			_ " Ö ′	07 2011			
	Purora	State	Zip Code 80016	Amount of E	Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C	• . •	,	, [00,00			
	Orcure Medical Corp	Occupation	00					
	Descint Fam	Aggregate '	Year-to-Date ▼					
	Other (specify) ▼		, 2,600 00	·				
В.	Full Name (Last, First, Middle Initial)			Date of Rec	ceipt			
-	Mailing Address				D D 1 A A A A			
	City	State	Zip Code	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С			, , , , , , , , , , , , , , , , , , ,			
	Name of Employer	Occupation						
	Receipt For: Primary General	Aggregate	Year-to-Date ▼					
	Other (specify) ▼		5					
c.	Full Name (Last, First, Middle Initial)			Date of Rec	ceipt			
	Mailing Address			路 辞 /	U D / V Y Y Y			
	City	State	Zip Code	Amount of E	Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C			, , , , , ,			
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SCHEDULE B. (FEC Form 3X)

TEMES DISPUSSED	Use separate schedule(s)	FOR LINE (check only	NUMBER:	PAGE / OF /		
ITEMIZED DISBURSEMENTS	for each category of the	(Check only	22 23	24 25 26		
	Detailed Summary Page	27	28a 28b	28c 29 30b		
Any information copied from such Reports and Statem or for commercial purposes, other than using the name						
NAME OF COMMITTEE (In Full)						
) ONCURE MEDICAL CORP POLI	TICAL ACTION (DIMMITT	EE			
Full Name (Last, First, Middle Initial)			Date of Disburs	sement		
Stabenow For Senate						
Mailing Address 1050 K Street NW, ste 3			07 2	2011		
Washington D	tate Zip Code C 2000					
Purpose of Disbursement						
Candidate Name			Amount of Eac	h Disbursement this Period		
Stabenow		Category/ Type		5,000.00		
Office Sought: House Disbursem	211 to 101 to 10					
	Primary General Other (specify)					
State: District:	(opony/ ▼					
Full Name (Last, First, Middle Initial)	Full Name (Last, First, Middle Initial)					
B. Bill Nelson For Senate			Date of Disburs	sement		
Mailing Address	Mailing Address					
1050 K Street NW, Ste. 315	tate Zip Code					
Washington D	C 20001					
Purpose of Disbursement			Amount of Eac	h Disbursement this Period		
Candidate Name		Category/	-			
Bill Nelson		Type	3	5,000.00		
Office Sought: House Disbursen	nent For: Primary X General					
Lame 4	Other (specify)					
State: District:	-	·				
Full Name (Last, First, Middle Initial) C.			Date of Disburs	sement		
				o i s à s a		
Mailing Address	-					
City	ity State Zip Code					
Purpose of Disbursement						
Candidate Name				h Disbursement this Period		
			,	· • •		
Office Sought: House Disburserr Senate	nent For: Primary General					
	Other (specify)					
State: District:						
SUBTOTAL of Disbursements This Page (optional)		>	•	10,000.00		
TOTAL This Period (last page this line number only).			· * * * * * * * * * * * * * * * * * * *	10,000.00		

Federal Election ENVELOPE REPLACEMENT PAGE The FEC added this page to the end of the	FOR INCOMING DOC	
Hand Delivered	D	ate of Receipt
USPS First Class Mail	P	ostmarked
USPS Registered/Certified	P	ostmarked (R/C)
USPS Priority Mail	P	ostmarked
Delivery Confirmation™ o	r Signature Confirmation	n™ Label
USPS Express Mail	P	ostmarked
Postmark Illegible		
No Postmark		
Overnight Delivery Service (Specify):	UPS s	hipping Date
	Next Business Day	Delivery
Received from House Records & Regist		ate of Receipt
Received from Senate Public Records C		ate of Receipt
Received from Electronic Filing Office	D	ate of Receipt
Other (Specify):	Date of Receipt	t or Postmarked
W.		1/31/12
PREPARER (3/2005)	D.	ATE PREPARED
,	•	