Image# 202007109244413494

FEC FORM 3X PAGE 1 / 80

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

						Office Use Only	
1.	NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typin over the lines.	g, type	12FE4M	5	
U							
ADI V	DRESS (number and street) Check if different	4535 Dressler RD NW					
L	than previously reported. (ACC)	Canton			ОН	44718	
2.	FEC IDENTIFICATION N		ΓΥ 🔺	S		ZIP COI	DE 🔺
	C C00544957			EW N) OR	AM (A)	ENDED	
4.	TYPE OF REPORT (Choose One)	Report	20 (M2)	1ay 20 (M5)	Aug	20 (M8)	Nov 20 (M11) (Non-Election Year Only)
	(a) Quarterly Reports:			un 20 (M6)		20 (M9)	Dec 20 (M12) (Non-Election Year Only)
	April 15 Quarterly Report (Q1)		ul 20 (M7)		20 (M10)	Jan 31 (YE)
	July 15 Quarterly Report (Q2) (C) 12-Day PRE-Election	Primary (12P)		General (Runoff (12R)
	October 15 Quarterly Report (Q3) Report for the:	Convention (1	12C)	Special (1	125)	
	January 31 Year-End Report (YE) Election	on on		YYYYYY	in the State of	
	July 31 Mid-Year Report (Non-election Year Only) (MY)	on (d) 30-Day POST-Election Report for the:	General (30G)	Runoff (3	0R)	Special (30S)
	Termination Repor (TER)		on on		Y Y Y Y Y	in the State of	
5.	Covering Period	4 01 / Y Y Y 2020	through	M M 06	/ D D / 30	2020	
	ertify that I have examined t	his Report and to the best of Orlee, Panitch, , , er	my knowledge and b	elief it is true	e, correct and	I complete.	
Sigi	Orlanature of Treasurer	re, Panitch, , ,	[Electronically	Filed] Da	ate 07	/ D D / 10	2020
NO		neous, or incomplete informatio	n may subject the pers	on signing thi	s Report to th	e penalties of 52	U.S.C. § 30109
L	Office Use Only					FEC FOR Rev. 05/20	

X

Γ	- FEC Form 3X (Rev. 05/2016)	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	Page 2
W	Irite or Type Committee Name		
ι	JSACS PAC		
R	eport Covering the Period: From: 04	M / D D / Y Y Y Y 01 2020 To:	06 / Y Y Y Y 2020
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2020		131501.78
	(b) Cash on Hand at Beginning of Reporting Period	154578.46	
	(c) Total Receipts (from Line 19)	64726.72	136503.40
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	219305.18	268005.18
7.	Total Disbursements (from Line 31)	23550.00	72250.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	195755.18	195755.18
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY 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. 05/2016)

Page 3

Write or Type Committee Name

USACS PAC

Report Covering the Period: From: 04	/ D D / Y Y Y Y 01 2020 Te	b: 06 / 06 / 2020
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	60548.24	444400 44
(i) Itemized (use Schedule A)	60046.24	114463.11
(ii) Unitemized	4178.48	17540.29
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)	64726.72	132003.40
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	64726.72	132003.40
Totals to Line 33, page 5)		
2. Transfers From Affiliated/Other Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
4. Loan Repayments Received	0.00	0.00
5. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
6. Refunds of Contributions Made	4	
to Federal Candidates and Other		
Political Committees	0.00	2500.00
7. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	2000.00
3. Transfers from Non-Federal and Levin Funds 느		
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
9. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	64726.72	136503.40
	-71 -71 -71	
D. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	64726.72	136503.40

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016) Page 4 COLUMN A COLUMN B **II. Disbursements Total This Period Calendar Year-to-Date** 21. Operating Expenditures: Allocated Federal/Non-Federal (a) Activity (from Schedule H4) 0.00 0.00 Federal Share (i) 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 0.00 0.00 Expenditures (c) Total Operating Expenditures 0.00 (add 21(a)(i), (a)(ii), and (b)) 0.00 22. Transfers to Affiliated/Other Party Committees..... 0.00 0.00 23 Contributions to Federal Candidates/Committees 47500.00 and Other Political Committees... 12000.00 24. Independent Expenditures (use Schedule E)...... Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... 0.00 0.00 25. 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 19 Loans Made.... Refunds of Contributions To: (a) Individuals/Persons Other 0.00 27. 28. 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees 0.00 0.00 Other Political Committees (C) (such as PACs)..... 0.00 0.00 Total Contribution Refunds (d) (add Lines 28(a), (b), and (c))...... 0.00 0.00 29. Other Disbursements (Including Non-Federal Donations)..... 24750.00 11550.00 30. Federal Election Activity (52 U.S.C. § 30101(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 Total Federal Election Activity (add (C) 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)).. 23550.00 72250.00 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... 23550.00 72250.00

DETAILED SUMMARY PAGE

of Disbursements

COLUMN A

Total This Period

FEC Form	3X	(Rev.	05/2016)
----------	----	-------	----------

III. Net Contributions/ Operating Expenditures

33.	Total Contributions (other than loans)
	(from Line 11(d), page 3)
34.	Total Contribution Refunds
	(from Line 28(d))
35.	Net Contributions (other than loans)
	(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
	(subtract Line 37 from Line 36)

	-7-		 -7	64726.72
				0.00
	-7		-7	
				64726.72
-	7	1	7	
				0.00
	7		-7	1 454
				0.00
	7		-7	1.1.1
				0.00
1	-7-	1	-7-	

						132003.40	
		-7			7	132003.40	
						0.00	٦
	-	-7			-	0.00	_
						132003.40	
la de		- 7			-	102000.40	
						0.00	
		-			-	0.00	
F		-7		-	-7	0.00	
			_			0.00	
	-		_			0.00	

- 7

COLUMN B

Calendar Year-to-Date

Page 5

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 6 OF

		Use separate schedule(s)	(check only one)												
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c												
Any information copied from such Reports and or for commercial purposes, other than using t			rson for the purpose of solicitin	g contributions											
NAME OF COMMITTEE (In Full)		duress of any political committee													
Full Name of Individual (Last, First, Middle Aboutalib, Angela, , ,	Initial) or Full O	rganization Name	Date of Receipt												
Mailing Address 2 East Erie St Apt 3306			Model Model Model Model Yes Yes												
City Chicago	State IL	Zip Code 60611-3169													
FEC ID number of contributing federal political committee.	C		300.00												
Name of Employer (for Individual) Virtual Locations		upation (for Individual) ior Director of Quality and Educat	Memo Item \$100.00/Monthly												
Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 600.00													
Full Name of Individual (Last, First, Middle B. Albaugh, Chad, , ,	Initial) or Full O	rganization Name	Date of Receipt												
Mailing Address 1602 River Bluff Rd	01-1-	7. 0.1	06 / D D / Y Y Y Y Y 2020												
City Morehead City	State NC	Zip Code 28557	Transaction ID : SA11AI.12039 Amount of Each Receipt this Period												
FEC ID number of contributing federal political committee.	С		450.00												
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) dical Director	Memo Item \$150.00/Monthly												
Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 900.00													
Full Name of Individual (Last, First, Middle C. Aldeen, Amer, , ,	Initial) or Full O	rganization Name	Date of Receipt												
Mailing Address 17327 Ladera Estates Blvd			06 / D D / Y	2020 Y											
City Lutz	State FL	Zip Code 33548-4817	Transaction ID : SA11AI.11957 Amount of Each Receipt this Period												
FEC ID number of contributing federal political committee.	C			450.00											
Name of Employer (for Individual) Virtual Locations		upation (for Individual) of Medical Officer	Memo Item \$150.00/Monthly												
Receipt For: 2020 Primary General X Other (specify) Other	Aggregate	Year-to-Date ▼ 900.00													
SUBTOTAL of Receipts This Page (optional).				1200.00											
TOTAL This Period (last page this line number	er only)														

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 7 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements may	not be sold or used by any p ress of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) USACS PAC			
Full Name of Individual (Last, First, Middle A. Aldred, Brian, , , Mailing Address 3508 Good Night Trail	e Initial) or Full Orga	anization Name	Date of Receipt
City Leander	State TX	Zip Code 78641-3628	06 30 2020 Transaction ID : SA11AI.12126 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		450.00
Name of Employer (for Individual) Emergency Svc Partners, LLC Receipt For: 2020		ation (for Individual) n Medical Director	Memo Item \$150.00/Monthly
Primary General Conter (specify) Conter	Aggregate Ye	ar-to-Date ▼ 900.00]
Full Name of Individual (Last, First, Middle B. Altmin, Stephen, , , Mailing Address 2641 4th Street	e Initial) or Full Orga	anization Name	Date of Receipt
City Boulder FEC ID number of contributing federal political committee. Name of Employer (for Individual) Colorado Emergency Service Physicians, Receipt For: 2020 Primary General Other (specify) Colored Content of Individual (Last, First, Middle	Aggregate Ye	300.00	06 30 2020 Transaction ID : SA11AI.11928 Amount of Each Receipt this Period 150.00 Memo Item \$50.00/Monthly
C. Ammon, Stefen, , , Mailing Address 2 Mountain High Ct.			Date of Receipt
City Littleton	State CO	Zip Code 80127	Transaction ID : SA11AI.11929 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		150.00
Name of Employer (for Individual) Colorado Emergency Service Physicians, Receipt For: 2020 Primary General Cother (specify) Other		ation (for Individual) I Director ar-to-Date ▼ 300.00	\$50.00/Monthly
SUBTOTAL of Receipts This Page (optional TOTAL This Period (last page this line numl			750.00

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 8 OF

				for each category of the Detailed Summary Page	>	-	11a 13		1	1b 4		11c 15		12 16		17			
	y information copied from such Reports and St for commercial purposes, other than using the											oliciting		ntribu	tions				
	NAME OF COMMITTEE (In Full)																		
Α.	Full Name of Individual (Last, First, Middle Initi Anderson, Britney, , , Mailing Address 637 Ruby Trust Way	al) or Full O		Date of Receipt															
	City	State		Zip Code	_	06 30 2020 Transaction ID : SA11AI.11930													
	Castle Rock	со		80108								ceipt th							
	FEC ID number of contributing federal political committee.	С			100.00														
	Name of Employer (for Individual) Virtual Locations Receipt For: 2020	Reg	, jion	tion (for Individual) al Vice President	Memo Item \$100.00/Monthly														
	Primary General X Other (specify) ▼ Other	Aggregate	Aggregate Year-to-Date ▼ 400.00																
в.	Full Name of Individual (Last, First, Middle Initi Atez, Francisco, , ,	al) or Full O) or Full Organization Name							Date of Receipt									
	Mailing Address 17376 Emerald Chase Drive				06 30 2020														
	City	State						Transaction ID : SA11AI.11958 Amount of Each Receipt this Period											
	Tampa	FL	33647	_	Aı	moun	nt of	Ea	ach I	Red	ceipt th	nis P	eriod						
	FEC ID number of contributing federal political committee.	C					300.00												
	Name of Employer (for Individual) Tampa Bay Emergency Physicians, LLC		•	tion (for Individual) al Director of Risk Managemen	t \$	Memo Item \$100.00/Monthly													
	Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Yea	ar-to-Date ▼ 600.00															
<u>с</u> .	Full Name of Individual (Last, First, Middle Initi Augustine, James, , ,	al) or Full O	rga	nization Name		D	ate o	of Re	ece	eipt									
	Mailing Address 7868 Classics Dr.		06 30 / Y Y Y Y 2020																
	City Naples	State FL		Zip Code 34113-3063	_	Transaction ID : SA11AI.11959 Amount of Each Receipt this Period													
	FEC ID number of contributing federal political committee.	С		450.00															
				Occupation (for Individual) Chairman, National Clinical Governance					Memo Item \$150.00/Monthly										
	Receipt For: 2020	Aggregate	Yea	ar-to-Date 🔻															
	Primary General X Other (specify) Other		-	900.00															
s	UBTOTAL of Receipts This Page (optional)			•••••					,		Ξ			850.	00]			
т	OTAL This Period (last page this line number c	only)		•••••		ĺ			,			-	_						

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 9 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	Image: Crieck only one) Image: The second
Any information copied from such Reports and or for commercial purposes, other than using th	Statements may not be sold or used by any pe ne name and address of any political committee	rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
Full Name of Individual (Last, First, Middle I Bagnoli, Dominic, , , Mailing Address 50 East Drive City Hartville FEC ID number of contributing	State Zip Code OH 44632	Date of Receipt
federal political committee. Name of Employer (for Individual) USACS Management Group Receipt For: 2020 Primary General Other (specify) ♥ Other	C Occupation (for Individual) Executive Chairman Aggregate Year-to-Date 2083.15	Memo Item \$416.63/Monthly
Full Name of Individual (Last, First, Middle II Baker, Brian, , , Mailing Address 1209 E Cumberland Ave Uni City Tampa FEC ID number of contributing federal political committee. Name of Employer (for Individual) Tampa Bay Emergency Physicians, LLC Receipt For: 2020 Primary General Other (specify) ♥ Other		Date of Receipt
Full Name of Individual (Last, First, Middle II Balewick, Donna, , , Mailing Address 626 Phillips Rd City Blairsville FEC ID number of contributing federal political committee. Name of Employer (for Individual) AHN Medical Group, LLC Receipt For: 2020 Primary General Other (specify) Other	Initial) or Full Organization Name State Zip Code PA 15717-4233 C Occupation (for Individual) Medical Director of Integrated Acute C Aggregate Year-to-Date ▼ 900.00	Date of Receipt
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numbe	r only)	1733.26

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 10 OF

IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	Image: Concert only one) Image: The concert only one) </th
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements maname and a	ay not be sold or used by any pe ddress of any political committee	rson for the purpose of soliciting contributions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) USACS PAC			
A.	Full Name of Individual (Last, First, Middle Initia Barquin, Jose, , , Mailing Address 1011 charles st City clearwater FEC ID number of contributing federal political committee. Name of Employer (for Individual) Tampa Bay Emergency Physicians, LLC Receipt For: 2020 Primary General Other (specify) ▼ Other	State FL Occu Asso	rganization Name Zip Code 33755 upation (for Individual) ociate Medical Director Year-to-Date ▼ 300.00	Date of Receipt
В.	Full Name of Individual (Last, First, Middle Initia Bedolla, John, , , Mailing Address 1000 San Marcos Street Unit 324	al) or Full O	rganization Name	Date of Receipt
	City Austin FEC ID number of contributing federal political committee. Name of Employer (for Individual) Emergency Service Partners, LLC Receipt For: 2020 Primary General Other (news)	Eme	Zip Code 78702-2667 upation (for Individual) ergency Physician Year-to-Date ▼ 600,00	Transaction ID : SA11AI.12127 Amount of Each Receipt this Period 300.00 Memo Item \$100.00/Monthly
C.	✔ Other (specify) ♥ Full Name of Individual (Last, First, Middle Initia Bender, Sean, , , Mailing Address 520 Elm Street City Denver	al) or Full O		Date of Receipt 06 / 30 / 2020 Transaction ID : SA11AI.11931
	FEC ID number of contributing federal political committee. Name of Employer (for Individual) Virtual Locations Receipt For: 2020 Primary General Other (specify)	Occu Regi	upation (for Individual) ional Vice President Year-to-Date ▼ 900.00	Amount of Each Receipt this Period 450.00 Memo Item \$150.00/Monthly
s	UBTOTAL of Receipts This Page (optional)			900.00
	OTAL This Period (last page this line number or			

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 11 OF

IT.	EMIZED RECEIPTS		Use separate schedule(s)	(ch	eck onl	y one)						
11			for each category of the Detailed Summary Page		* 11a 13	11b	11c	12	Г	17		
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any p ddress of any political committe	erson	for the	purpose	of soliciting	g contrib	oution	ns		
	NAME OF COMMITTEE (In Full) USACS PAC											
Α.	Full Name of Individual (Last, First, Middle Init Biersbach, Raymond, , ,	ial) or Full O	rganization Name		Date of Receipt							
	Mailing Address 234 Lakeshore Dr				м м 06	/ D 3	D / Y	2020				
	City Mooresville	State NC	Zip Code 28117-7535		Transaction ID : SA11AI.12040 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С			<u> </u>		-		0.00			
	Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) lity Director			emo Item Monthly	I					
	Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 600.00	1								
в.	Full Name of Individual (Last, First, Middle Init Bishop, Sara, , , Mailing Address PO Box 2175	ial) or Full O	rganization Name		M M	Receipt		YY	I Y	1		
	City Morehead City	State NC	Zip Code 28557	_		action ID	30 : SA11AI Receipt tl		nd	_		
	FEC ID number of contributing federal political committee.	C				225.00						
	Name of Employer (for Individual) USACS Medical Group, LTD	Occupation (for Individual) APP Lead				Memo Item \$75.00/Monthly						
	Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 450.00]								
С.	Full Name of Individual (Last, First, Middle Init Bissell, Brad, , ,	ial) or Full O	rganization Name		Date of	Receipt						
	Mailing Address 3535 Selwyn Farms Ln.				06 ^M	3	30	2020	Y]		
	City Charlotte	State NC	Zip Code 28209-4082				D : SA11AI Receipt tl	-	bd			
	FEC ID number of contributing federal political committee.	С			<u> </u>	9	y	15	0.00			
	Name of Employer (for Individual) USACS Medical Group, LTD Receipt For: 2020	Med	upation (for Individual) ical Director	Memo Item \$150.00/Monthly								
	Primary General Conter (specify) Other	Aggregate	Year-to-Date ▼ 450.00]								
s	UBTOTAL of Receipts This Page (optional)			•		9	9	67:	5.00			
т	OTAL This Period (last page this line number	only)		•					-			

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 12 OF

ıт.	EMIZED RECEIPTS		Use separate schedule(s)	(ch	neck onl	y or	ne)					
11			for each category of the Detailed Summary Page		× 11a 13		11b	11c 15	12	Г	17	
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	y not be sold or used by any p ddress of any political committe	erson e to s	for the	purp ntrib	pose of	soliciting	g contri	ributic	ons	
	NAME OF COMMITTEE (In Full) USACS PAC											
Α.	Full Name of Individual (Last, First, Middle Ini Blankenship, Robert, , ,	tial) or Full O	rganization Name	Date of Receipt								
	Mailing Address 7058 Ravens Run				06 / D D / Y Y Y Y 2020							
	City Cincinnati	State OH	Zip Code 45244-3591		Transaction ID : SA11AI.12066 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		<u> </u>			1.95	4	50.00)		
	Name of Employer (for Individual) USACS Medical Group, LTD	Occupation (for Individual) Medical Director					ttem hthly					
	Receipt For: 2020 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 900.00	1								
в.	Full Name of Individual (Last, First, Middle Ini Bown, Nicholas, , , Mailing Address 532 College Blvd	tial) or Full O	rganization Name		Date o	f Re	D D	/ Y	Ŷ		7	
	City San Antonio	State TX	Zip Code 78209					SA11AI.			_	
	FEC ID number of contributing federal political committee.	С							50.00)		
	Name of Employer (for Individual) Emergency Service Partners, LLC	Occupation (for Individual) Medical Director				Memo Item \$150.00/Monthly						
	Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate]									
С.	Full Name of Individual (Last, First, Middle Ini Bradstreet, Jennifer, , ,	tial) or Full O	rganization Name		Date of	f Re	ceipt					
	Mailing Address 8026 Vanity Hill		- 1		06		30	JL	¥ 2020	0		
	City San Antonio	State TX	Zip Code 78256-2509					SA11AI. eceipt th				
	FEC ID number of contributing federal political committee.	С		450.00)		
	Name of Employer (for Individual) Virtual Locations Receipt For: 2020	Regi	ipation (for Individual) onal Vice President	\$150.00/Monthly								
	Primary General Vither (specify) Other	Aggregate	Year-to-Date ▼ 900.00]								
s	UBTOTAL of Receipts This Page (optional)			<u> </u>		_	,	,	13	50.00		
т	OTAL This Period (last page this line number	only)					_	-		-		

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 13 OF

80

TEMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b 14	11c	12	17			
Any information copied from such Reports or for commercial purposes, other than us				or the		pose of	f solicitir	ng contribu	itions			
NAME OF COMMITTEE (In Full)												
Full Name of Individual (Last, First, Mid Brice, Matthew, , ,	ddle Initial) or Full O	rganization Name		ate of	Re	ceipt						
Mailing Address 17007 Arrowhead Ct	04-4-	7.0.0		06 / 30 / 2020 Transaction ID : SA11AI.12130								
City College Station	State TX	Zip Code 77845				-	-					
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 300.00									
Name of Employer (for Individual) Emergency Svc Partners, LLC		upation (for Individual) dical Director	\$1	Me 00.00/		ttem hthly						
Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 600.00										
Full Name of Individual (Last, First, Mid B. Brill, April, , ,	ddle Initial) or Full O	rganization Name		ate of	Re	ceipt						
Mailing Address 25537 Prairiewood Ln				^M 06	1	30		Y Y Y 2020	Y			
City	State	Zip Code					SA11A					
Shorewood	IL	60404-2526	A	mount	of	Each F	Receipt	this Period				
FEC ID number of contributing federal political committee.	C							150	00			
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) Education Director	\$5	Me 0.00/M		ltem hly						
Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 300.00										
Full Name of Individual (Last, First, Mid C. Buchanan, Curtis, , ,	ddle Initial) or Full O	rganization Name		ate of	Re	ceipt						
Mailing Address 3608 Shadow Arbor W				^M 06	1	D 30		2020	Y			
City Lutz	State FL	Zip Code 33548	A					1.11962 this Period				
FEC ID number of contributing federal political committee.	С				_	, .		450	.00			
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) argency Physician	Memo Item \$150.00/Monthly									
Receipt For: 2020 Primary General X Other (specify) Other	Aggregate	Year-to-Date ▼ 900.00										
SUBTOTAL of Receipts This Page (option	nal)							900	00			
TOTAL This Period (last page this line n	umber only)											

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 14 OF

IT.			Use separate schedule(s)	(cheo	k on	ly o	ne)					
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b 14	11c		12 16	17	
	y information copied from such Reports and Si for commercial purposes, other than using the				r the		pose of	f soliciting	g cont	tributio	ons	
$\left\rangle$	NAME OF COMMITTEE (In Full) USACS PAC											
A.	Full Name of Individual (Last, First, Middle Init Burke, Thomas, , ,	ial) or Full O	Organization Name	D	Date of Receipt							
	Mailing Address 1010 Gapter Road				06 / D D / Y Y Y Y 06 30 2020							
	City Boulder	State CO	Zip Code 80303		Transaction ID : SA11AI.11932 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С								150.00)	
	Name of Employer (for Individual) Colorado Emergency Service Physicians,		upation (for Individual) ergency Physician	\$50	M 0.00/N		thly					
	Receipt For: 2020 Primary General X Other (specify) V Other	Aggregate	Year-to-Date ▼ 300.00]								
в.	Full Name of Individual (Last, First, Middle Init Caceres, Camilo, , , Mailing Address 2419 Smallman Street Unit 401	ial) or Full O	Organization Name		ate o M M		eceipt		202	20		
	City Pittsburgh	State PA	Zip Code 15222-5643	Transaction ID : SA Amount of Each Rece				SA11AI.	12099	•		
	FEC ID number of contributing federal political committee.	С		noun				-	450.00)		
	Name of Employer (for Individual) AHN Medical Group, LLC		Occupation (for Individual) Quality Director				o Item nthly					
	Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 900.00]								
<u>с.</u>	Full Name of Individual (Last, First, Middle Init Carney, Bryan, , ,	ial) or Full O	Organization Name	D	ate o	of Re	eceipt					
	Mailing Address 2408 Marsh Tern Ln				06	/	D 30		y 202			
	City Morehead City	State NC	Zip Code 28557-4772					: SA11AI Receipt th				
	FEC ID number of contributing federal political committee.	С		ļ			y .	. ,		450.00)	
	Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) istant Medical Director	\$150.00/Monthly								
	Receipt For: 2020 Primary General X Other (specify) Other	Aggregate	Year-to-Date ▼ 900.00	1								
	UBTOTAL of Receipts This Page (optional)				-	-	, ,	5	1(050.00)	

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

PAGE 15 OF

		Detailed Summary Page	×	11a		11b	11c	12					
Annu information to the total total				13		14	15	16	17				
Any information copied from such Report or for commercial purposes, other than u													
NAME OF COMMITTEE (In Full)	<u> </u>												
Full Name of Individual (Last, First, M Carter, Stephen, , ,	iddle Initial) or Full O	rganization Name		Date of	f Re	eceipt							
Mailing Address 161 Glen Eagles Driv	e			м м 06	/	30	/ Y	y y 2020	Y				
City	State	Zip Code		Trans	acti	ion ID :	SA11AI.	12131					
Cibolo	ТХ	78108-3343	A	moun	t of	Each R	eceipt th	nis Period					
FEC ID number of contributing federal political committee.	C			150.00									
Name of Employer (for Individual) Emergency Service Partners, LLC		upation (for Individual) ergency Physician	\$5	M 0.00/N		ttem thly							
Receipt For: 2020 Primary General ✔ Other (specify) ♥ Other	Aggregate	Year-to-Date ▼ 300.00]										
Full Name of Individual (Last, First, M 3. Casey, John, , ,	iddle Initial) or Full O	rganization Name		Date of	f Re	eceipt							
Mailing Address 5156 Baker Ridge Dr.				^M 06	/	D D D 30	/ Y	y y 2020	Y				
City	State	Zip Code		Trans	acti	ion ID :	SA11AI.	12067					
Columbus	ОН	43228	A	moun	t of	Each R	eceipt th	nis Period					
FEC ID number of contributing federal political committee.	С			_		-		450.	00				
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) ional Director of Scholars	\$1	Memo Item \$150.00/Monthly									
Receipt For: 2020 Primary General ★ Other (specify) ★ Other	Aggregate	Aggregate Year-to-Date ▼ 900.00											
Full Name of Individual (Last, First, M Cetta, Michael, , ,	liddle Initial) or Full O	rganization Name		Date of	f Re	eceipt							
Mailing Address 16 Piney Glen Court				^M 06	/	30	/ Y	y y 2020	Y				
City	State	Zip Code					SA11AI						
Potomac	MD	20854	A	moun	t of	Each R	eceipt th	nis Period					
FEC ID number of contributing federal political committee.	С					y		1200.	00				
Name of Employer (for Individual)		upation (for Individual)		Memo Item									
USACS Management Group Receipt For: 2020	I	of Integrated Acute Care		\$400.00/Monthly									
Primary General	Aggregate	Year-to-Date ▼											
X Other (specify) Other		2400.00	4										
SUBTOTAL of Receipts This Page (opti	onal)					, .	. ,	1800.	00				
TOTAL This Period (last page this line	number only)		•										

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 16 OF

IT.	EMIZED RECEIPTS		Use separate schedule(s)	(ch	neck only	y one)						
			for each category of the Detailed Summary Page		× 11a 13	11b	11c		12 16	17		
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any ddress of any political committ	person ee to s	for the	purpose	of solicitir	ng cont	tributio	ons		
	NAME OF COMMITTEE (In Full)											
A.	Full Name of Individual (Last, First, Middle Init Chatfield, Kenneth, , ,	ial) or Full O	rganization Name		Date of Receipt							
	Mailing Address 142 Isle of Venice Dr				м м 06	/ D	30	Y Y 202	20			
	City Ft Lauderdale	State FL	Zip Code 33301		Transaction ID : SA11AI.12170 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С			150.00							
	Name of Employer (for Individual) USACS Management Group, Ltd.		upation (for Individual) of Information Officer		M \$50.00/N	emo Iter Ionthly	m					
	Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 300.00									
В.	Full Name of Individual (Last, First, Middle Init Cirillo, Louis, , , Mailing Address 91 Woodridge Drive	ial) or Full O	rganization Name		Date of	Receip	t	YY	YYY	ſ		
	City Saunderstown	State RI	Zip Code 02874-1943				30 D : SA11A		9			
	FEC ID number of contributing federal political committee.	С			Amoun	or Eac	h Receipt		450.00)		
	Name of Employer (for Individual) Virtual Locations	Occupation (for Individual) Director of Government Affairs				Memo Item \$150.00/Monthly						
	Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 900.00									
с.	Full Name of Individual (Last, First, Middle Init Cline, Gretchann, , ,	ial) or Full O	rganization Name		Date of	Receip	ıt					
	Mailing Address 8506 Queen Heights				06	L	30	Ý Ý 202	20			
	City San Antonio	State TX	Zip Code 78254-2329				I D : SA11A h Receipt					
	FEC ID number of contributing federal political committee.	С			<u> </u>	y	,		150.00)		
	Name of Employer (for Individual) Emergency Service Partners, LLC Receipt For: 2020	Syst	upation (for Individual) em APP Lead		Memo Item \$50.00/Monthly							
	Primary General Conter (specify) Other	Aggregate	Year-to-Date ▼ 300.00									
s	UBTOTAL of Receipts This Page (optional)			•		y	,	7	750.00)		
Т	OTAL This Period (last page this line number of	only)					.		-			

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 17 OF

IT.	EMIZED RECEIPTS		Use separate schedule(s)	(che	ck on	ly or	ne)					
			for each category of the Detailed Summary Page	×	11a 13		11b 14	11c	12	1	,	
	y information copied from such Reports and Sta for commercial purposes, other than using the n				or the		pose of	soliciting	g contrib	outions		
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full)											
A.	Full Name of Individual (Last, First, Middle Initia Colfer, Orion, , ,	l) or Full Or	ganization Name	C	Date of Receipt							
	Mailing Address 2523 Hanover Ave				06 / D D / Y Y Y Y 2020							
	City Richmond	State VA	Zip Code 23220	A	Transaction ID : SA11AI.12172 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С						 	450	0.00		
	Name of Employer (for Individual) Virtual Locations	'	pation (for Individual) anal Director of Patient Experienc	\$1	M		o Item nthlv					
	Receipt For: 2020 Primary General ✓ Other (specify) ▼ Other		Year-to-Date ▼ 900.00									
в.	Full Name of Individual (Last, First, Middle Initia Conley, Amy, , ,	l) or Full Or	ganization Name		Date o	of Re	eceipt					
	Mailing Address 6419 Renwick Circle				м м 06	/	30	/ Y	y 2020	Y		
	City Tampa	State Zip Code FL 33647					-	SA11AI. leceipt th		d		
	FEC ID number of contributing federal political committee.								300	0.00		
	Name of Employer (for Individual) Tampa Bay Emergency Physicians, LLC	Occupation (for Individual) Regional Transfer Center Director			Memo Item \$100.00/Monthly							
	Receipt For: 2020 Primary General ✓ Other (specify) ▼ Other	Aggregate \										
С.	Full Name of Individual (Last, First, Middle Initia	l) or Full Or	ganization Name		Date o	of Re	eceipt					
	Mailing Address 8780 Surrey Place				^M 06	/	30	/ Y	y y 2020	Y		
	City Maineville	State OH	Zip Code 45039-9519	A				SA11AI		d		
	FEC ID number of contributing federal political committee.	С					y	. ,	240	0.00		
	Name of Employer (for Individual) USACS Medical Group, LTD		pation (for Individual) tor of APPs	\$8	\$80.00/Monthly							
	Receipt For: 2020 Primary General X Other (specify) Other	Year-to-Date ▼ 480.00										
s	UBTOTAL of Receipts This Page (optional)								990	0.00	Ī	
т	OTAL This Period (last page this line number or	ıly)	······	Ī			-	,		-	ĺ	

SCHEDULE A (FEC Form 3X) _ _ _ _ _ _ _ _

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 18 OF

IT.	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)								
11			for each category of the Detailed Summary Page	X 11a 11b 11c 12								
	y information copied from such Reports and Sta for commercial purposes, other than using the r											
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) USACS PAC											
A.	Full Name of Individual (Last, First, Middle Initia Coomes, Justin, , ,	al) or Full Or	ganization Name	Date of Receipt								
	Mailing Address 7762 Westwind Lane			06 30 / Y Y Y Y 2020								
	City Montgomery	State OH	Zip Code 45242-5008	Transaction ID : SA11AI.12069 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		450.00								
	Name of Employer (for Individual) USACS Medical Group, LTD		pation (for Individual) cal Director	Memo Item \$150.00/Monthly								
	Receipt For: 2020 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 900.00									
B.	Full Name of Individual (Last, First, Middle Initia Correll, Bodie, , ,	al) or Full Or	ganization Name	Date of Receipt								
	Mailing Address 782 Archie Lane			M M / D D / Y Y Y Y 06 30 2020								
	City Belton	State TX	Zip Code 76513	Transaction ID : SA11AI.12133 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		450.00								
	Name of Employer (for Individual) Emergency Service Partners, LLC		pation (for Individual) ical Director	Memo Item \$150.00/Monthly								
	Receipt For: 2020 Primary General ✓ Other (specify) ▼ Other	Aggregate `	Year-to-Date ▼ 900.00									
с.	Full Name of Individual (Last, First, Middle Initia Corrigan, Kevin, , ,	al) or Full Or	ganization Name	Date of Receipt								
	Mailing Address 9338 Standerwick Ln			M M / D D / Y Y Y Y 06 30 2020								
	City Huntersville	State NC	Zip Code 28078	Transaction ID : SA11AI.12047 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		450.00								
	Name of Employer (for Individual) USACS Medical Group, LTD Receipt For: 2020	Interi	pation (for Individual) m Medical Director Year-to-Date ▼	Memo Item \$150.00/Monthly								
	Primary General Conter (specify) Other		900.00									
s	UBTOTAL of Receipts This Page (optional)			1350.00								
т	OTAL This Period (last page this line number or	וy)										

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 19 OF

ıт.			Use separate schedule(s)	(0	check on	ly or	ne)					
11			for each category of the Detailed Summary Page		X 11a 13		11b 14	11c 15		ſ	17	
Ar or	ny information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any address of any political commit	v perso ttee to	n for the	pur	pose of	soliciting	g contr	ributio	ons	
	NAME OF COMMITTEE (In Full)											
Α.	Full Name of Individual (Last, First, Middle Initi Darnell, Mark, , ,	al) or Full O	Organization Name	Date of Receipt								
	Mailing Address 5125 Duffy Rd. SE				06	/	D D D 30	/ Y	Y 202	0		
	City Lancaster	State OH	Zip Code 43130-9451		Transaction ID : SA11AI.12070 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		<u> </u>				4	50.00)		
	Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) dical Director		M \$150.00		ttem nthly					
	Receipt For: 2020 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 900.00									
в.	Full Name of Individual (Last, First, Middle Initi Dayton, John, , , Mailing Address 1914 E Gray Fox Drive	al) or Full O	Organization Name		Date o		eceipt 30	/ Y	2020	Y ∎ Y C	7	
	City Draper	State UT	Zip Code 84020-5630	Trans		ion ID :	SA11AI. eceipt th	12171				
	FEC ID number of contributing federal political committee.	C								00.00)	
	Name of Employer (for Individual) Virtual Locations	Occupation (for Individual) Firefighter				Memo Item \$100.00/Monthly						
	Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate										
<u>с</u> .	Full Name of Individual (Last, First, Middle Initi De Angelis, Sydney, , ,	al) or Full O	Organization Name		Date o	of Re	eceipt					
	Mailing Address 114 E Church St				^M 06	/	30	/ Y	2020			
	City Frederick	State MD	Zip Code 21701					SA11AI				
	FEC ID number of contributing federal political committee.	С					y .	, ,	3	00.00)	
	Name of Employer (for Individual) MEP Health, LLC Receipt For: 2020	Eme	upation (for Individual) ergency Physician Year-to-Date ▼		Memo Item \$100.00/Monthly							
	Primary General Conter (specify) Other		600.00									
s	UBTOTAL of Receipts This Page (optional)						,		10	50.00		
т	OTAL This Period (last page this line number of	only)					-		_	- 1970		

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 20 OF

IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
	y information copied from such Reports and Sta for commercial purposes, other than using the n			on for the purpose of soliciting contributions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) USACS PAC			
A.	Full Name of Individual (Last, First, Middle Initia Denmark, Thomas, , , Mailing Address 13122 S Yorktown Ave City Bixby FEC ID number of contributing federal political committee. Name of Employer (for Individual) USACS Medical Group, LTD Receipt For: 2020	State OK C Occo Cha	Organization Name Zip Code 74008-7665 cupation (for Individual) airman e Year-to-Date ▼	Date of Receipt 06 / 30 / 2020 Transaction ID : SA11AI.12095 Amount of Each Receipt this Period 150.00 Memo Item \$50.00/Monthly
	Primary General ✔ Other (specify) ♥ Other		300.00	
в.	Full Name of Individual (Last, First, Middle Initia DiCaprio, Michael, , , Mailing Address 3960 N. Monet Ct. City Allison Park FEC ID number of contributing federal political committee. Name of Employer (for Individual) USACS Medical Group, Ltd. Receipt For: 2020 Primary General Other (specify) Other	State PA C Qua	Organization Name Zip Code 15101 cupation (for Individual) uality Director e Year-to-Date ▼ 300.00	Date of Receipt
C.	Full Name of Individual (Last, First, Middle Initia DiRando, Jesse, , , Mailing Address 33531 Royal Saint George Drive City Avon FEC ID number of contributing federal political committee. Name of Employer (for Individual)	State OH C	Zip Code 44011 cupation (for Individual)	Date of Receipt 06 ' 30 ' 2020 Transaction ID : SA11AI.12071 Amount of Each Receipt this Period 450.00 Memo Item
	Virtual Locations Receipt For: 2020 Primary General Other (specify) Other	1	e President, Clinical Resource Grou e Year-to-Date ▼ 900.00	\$150.00/Monthly
	UBTOTAL of Receipts This Page (optional)		F	750.00
	e e mis i snos nuor pago ano number on		•••••••••••••••••••••••••••••••••••••••	

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 21 OF

IТ			Use separate schedule(s)	(ch	neck only	y one))					
11			for each category of the Detailed Summary Page		× 11a 13		1b 4	11c 15	12	Γ	17	
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	Statements ma e name and a	ay not be sold or used by any address of any political commiti	person tee to s	for the	purpo	se of so	oliciting	contrib	ution	าร	
	NAME OF COMMITTEE (In Full) USACS PAC											
Α.	Full Name of Individual (Last, First, Middle In Domuczicz, Kenneth, , ,	itial) or Full O	organization Name		Date of Receipt							
	Mailing Address 3217 Raspberry Rd				06 / D D / Y Y Y Y 2020							
	City Austin	State TX	Zip Code 78748				n ID : Sa ach Rec		12134 is Period	d		
	FEC ID number of contributing federal political committee.	С			<u> </u>			-9	150	0.00		
	Name of Employer (for Individual) Travis County Emergency Physicians, PA Receipt For: 2020	Med	upation (for Individual) dical Director		M \$50.00/N	emo li Ionthl						
	Primary General Viter (specify) Cother	Aggregate	Year-to-Date ▼ 300.00									
B.	Full Name of Individual (Last, First, Middle In Dorai, Suprina, , , Mailing Address 7911 El Dorado Drive	itial) or Full O	Organization Name		Date of	[:] Rece	eipt 30	/ Y	2020	Y	1	
	City Austin	State TX		Trans		n ID : S/			d	-		
	FEC ID number of contributing federal political committee.	С			. 01 E			150				
	Name of Employer (for Individual) Emergency Service Partners, LLC		upation (for Individual) dical Director		M \$50.00/N	emo li Ionthly						
	Receipt For: 2020 Primary General X Other (specify) Other	Aggregate	Year-to-Date ▼ 300.00									
с.	Full Name of Individual (Last, First, Middle In	itial) or Full O	Organization Name		Date of	Rece	eipt					
	Mailing Address 1344 County Road 3552				^M 06	1	D D D 30		y y 2020	Y]	
	City Queen City	State TX	Zip Code 75572				n ID : S ach Rec		12136 is Period	d		
	FEC ID number of contributing federal political committee.	С			<u> </u>	9		y	225	5.00		
	Name of Employer (for Individual) Emergency Service Partners, LLC Receipt For: 2020	APP	upation (for Individual) P Lead		M \$75.00/N	emo I Ionthl						
	Primary General Viter (specify) Other	Aggregate	Year-to-Date ▼ 450.00									
s	UBTOTAL of Receipts This Page (optional)			•	[.	9		y	525	5.00		
т	OTAL This Period (last page this line number	only)		•		. ,		- 7-				

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 22 OF

171	EMIZED RECEIPTS			separate schedule(s)	(cł	neck onl	у о	ne)	L						
				ach category of the led Summary Page		× 11a 13		11b 14	11c		2 16	17			
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	y not be ddress o	e sold or used by any po of any political committee	erson erson	for the	pur ntrik	pose of	soliciting	g cont	ributio	ons			
	NAME OF COMMITTEE (In Full)														
<u>к</u>	Full Name of Individual (Last, First, Middle Init Dschaak, Tyler, , ,	tial) or Full O	I) or Full Organization Name					Date of Receipt							
	Mailing Address 585 Paisley Dr					06 / 0 D / Y Y Y Y 2020									
	City Colorado Springs	State CO		Code 0906		Transaction ID : SA11AI.11934 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С				<u> </u>				4	450.00)			
	Name of Employer (for Individual) USACS Medical Group, LTD			for Individual) edical Director		M \$150.00		o Item nthly							
	Receipt For: 2020 Primary General X Other (specify) V Other	Aggregate	Year-to-	Date ▼ 900.00]										
B.	Full Name of Individual (Last, First, Middle Init Eakin, Paul, , , Mailing Address 1455 Hunakai St.	on Name		Date o	f Re	eceipt	/ Y	Ý	YY						
	Apt. 1 City	State Zip Code HI 96816-5526							SA11AI.		-				
	Honolulu FEC ID number of contributing federal political committee.	C				Amoun	t of	Each H	leceipt th		riod 150.00)			
	Name of Employer (for Individual) USACS Medical Group, LTD		•	(for Individual) edical Director		M \$50.00/N		o Item thly							
	Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-	Date ▼ 300.00											
с.	Full Name of Individual (Last, First, Middle Ini Edginton, Simon, , ,	tial) or Full O	rganizati	on Name		Date of	f Re	eceipt							
	Mailing Address 28671 Corbara Place	1				06	1	30) / Y	y 202					
	City Wesley Chapel	State FL	·	Code 543				-	SA11AI						
	FEC ID number of contributing federal political committee.	С				<u> </u>		9	, ,	4	150.00)			
	Name of Employer (for Individual) Tampa Bay Emergency Physicians, LLC Receipt For: 2020		onal Chi	for Individual) ef Medical Officer		M \$150.00		o Item nthly							
	Primary General Conter (specify) Other		7	900.00]										
s	UBTOTAL of Receipts This Page (optional)			•••••	•		l	7	. ,	10	050.00)			
т	OTAL This Period (last page this line number	only)		••••••	•										

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 23 OF

80

IT.			Use separate s		(ch	neck onl	y or	ne)					
11	EMIZED RECEIPTS		for each catego Detailed Summ			X 11a 13		11b	11c 15		2 6 [17	
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and a	l ay not be sold or u ddress of any polit	sed by any point ical committee	erson erson	for the	pur ntrib	pose of	soliciting	g contr	ributic	ons	
	NAME OF COMMITTEE (In Full) USACS PAC												
Α.	Full Name of Individual (Last, First, Middle Initi Eisenberg, Steven, , ,	ial) or Full O		Date of Receipt									
	Mailing Address 35590 Michael Drive					06 / ^Y Y Y Y 2020							
	City Solon	State OH	Zip Code 44139						SA11AI. eceipt th				
	FEC ID number of contributing federal political committee.	С				<u> </u>				4	50.00)	
	Name of Employer (for Individual) USACS Management Group		upation (for Individential Individential Counsel	ual)		M \$150.00		ttem hthly					
	Receipt For: 2020 Primary General ✔ Other (specify) ♥ Other	Aggregate	Year-to-Date ▼	900.00									
В.	Full Name of Individual (Last, First, Middle Initi Falcone, Angelo, , , Mailing Address 2606 Tridelphia Lake Road	rganization Name			Date o	f Re	eceipt	/ Y	2020		٦		
	City Brookeville	State Zip Code MD 20833						ion ID : :	SA11AL	11997			
	FEC ID number of contributing federal political committee.	С									50.00)	
	Name of Employer (for Individual) USACS Management Group		upation (for Individ sident	ual)		M \$150.00/		ttem hthly					
	Receipt For: 2020 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼	900.00									
C.	Full Name of Individual (Last, First, Middle Initi Faulk, Michael, , ,	,	rganization Name			Date o							
	Mailing Address 3951 Fluvanna-Townline Road	State	Zip Code			06 Trans		30	/ Y SA11AI.	2020 12034	0		
	Jamestown	NY	14701-9032						eceipt th				
	FEC ID number of contributing federal political committee.	С				Ľ.	_	<u>y</u>		1	50.00)	
	Name of Employer (for Individual) AHN Medical Group, LLC Receipt For: 2020	Med	upation (for Individ	,	;	M \$50.00/		o Item thly					
	Primary General Conter (specify) Other	Aggregate	Year-to-Date ▼	300.00									
s	UBTOTAL of Receipts This Page (optional)			••••••	•			, .	, ,	10	50.00)	
Т	OTAL This Period (last page this line number of	only)			•			-			-		

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 24 OF

ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)											
Full Name of Individual (Last, First, Middle A. Fearheiley, Corey, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 2604 Rain Song			06 30 2020								
City Leander	State TX	Zip Code 78641	Transaction ID : SA11AI.12137 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period								
Name of Employer (for Individual) Emergency Service Partners, LLC		upation (for Individual) dical Director	Memo Item \$50.00/Monthly								
Receipt For: 2020 Primary General X Other (specify) V Other	Aggregate	Year-to-Date ▼ 300.00]								
Full Name of Individual (Last, First, Middle B. Ferrand, David, , , Mailing Address 193 Bryna Lane	Initial) or Full C	Prganization Name	Date of Receipt								
City Carnegie	State PA	Zip Code 15106-1473	Transaction ID : SA11AI.12101 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		300.00								
Name of Employer (for Individual) Virtual Locations		upation (for Individual) fighter	Memo Item \$100.00/Monthly								
Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 600.00]								
Full Name of Individual (Last, First, Middle C. Flanigan, Alan, , ,	Initial) or Full C	Prganization Name	Date of Receipt								
Mailing Address 195 McGregor Street Apt 405	1		06 / D D / Y Y Y Y 2020								
City Manchester	State NH	Zip Code 03102-3777	Transaction ID : SA11AI.12031 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		450.00								
Name of Employer (for Individual) USACS Medical Group, Ltd. Receipt For: 2020	Med	upation (for Individual) lical Director	Memo Item \$150.00/Monthly								
Primary General Conter (specify) Other	Aggregate	Year-to-Date ▼ 900.00]								
SUBTOTAL of Receipts This Page (optional).			900.00								
TOTAL This Period (last page this line number	er only)										

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 25 OF

		Use separate schedule(s)	(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 or for commercial purposes, other than using t			person for the purpose of soliciting contributions						
NAME OF COMMITTEE (In Full)									
Full Name of Individual (Last, First, Middle A. Fleming, Sean, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 2300 Shoreham Circle			M M / D D / Y Y Y Y 06 30 2020						
City Lewisville	State TX	Zip Code 75056	Transaction ID : SA11AI.12138 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C		450.00						
Name of Employer (for Individual) Emergency Service Partners, LLC Receipt For: 2020 Primary General Other (specify) The other	Med	upation (for Individual) dical Director Year-to-Date ▼ 900.00	Memo Item \$150.00/Monthly						
Full Name of Individual (Last, First, Middle Flores, Anna, , , Mailing Address 2608 Del Curto Rd, Unit 3	Initial) or Full C	organization Name	Date of Receipt						
City Austin	State TX	Zip Code 78704-6014	Transaction ID : SA11AI.12139 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		150.00						
Name of Employer (for Individual) Emergency Service Partners, LLC		upation (for Individual) P Lead	Memo Item \$50.00/Monthly						
Receipt For: 2020 Primary General ★ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 300.00]						
Full Name of Individual (Last, First, Middle C. Forcada-Lowrie, Raymundo, , ,	Initial) or Full C	organization Name	Date of Receipt						
Mailing Address 775 Potters Ave			M M / D D / Y Y Y Y 06 30 2020						
City Providence	State RI	Zip Code 02907-3075	Transaction ID : SA11AI.12120 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		300.00						
Name of Employer (for Individual) Virtual Locations Receipt For: 2020	Fire	upation (for Individual) fighter	Memo Item \$100.00/Monthly						
Primary General Conter (specify) Other	Aggregate	Year-to-Date ▼ 600.00]						
SUBTOTAL of Receipts This Page (optional).			900.00						
TOTAL This Period (last page this line number	er only)								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 26 OF

			Use separate schedule(s)	(che	ck onl	y or	ne)					
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b 14	11c		2 16	17	
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	y not be sold or used by any p ddress of any political committe	erson for e to sol	or the	pur ntrib	pose of	soliciting	g cont	ributio	ons	
	NAME OF COMMITTEE (In Full) USACS PAC											
A.	Full Name of Individual (Last, First, Middle Init Foss, David, , ,	tial) or Full O	rganization Name		Date o	f Re	eceipt					
	Mailing Address 915 Tschoepe Rd			M M / D D / Y 06 30							Y	
	City Seguin	State TX	Zip Code 78155	A	Transaction ID : SA11AI.12140 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С			_			-	4	450.00	0	
	Name of Employer (for Individual) Emergency Service Partners, LLC		ipation (for Individual) ical Director	\$1	M 50.00		o Item nthly					
	Receipt For: 2020 Primary General ✔ Other (specify) ♥ Other	Aggregate	Year-to-Date ▼ 900.00]								
в.	Full Name of Individual (Last, First, Middle Ini Frary, James, , , Mailing Address 4009 Grassmere Lane	tial) or Full O	rganization Name		Date o	f Re	D			Y	Ý	
	City	State TX	Zip Code					SA11AI.				
	Dallas FEC ID number of contributing federal political committee.	C					Each F	Receipt th		riod 150.00	0	
	Name of Employer (for Individual) USACS Management Group	Occupation (for Individual) Chief Executive Officer					ttem hthly					
	Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 900.00]								
С.	Full Name of Individual (Last, First, Middle Inite Freedman, Scott, , ,	tial) or Full O	rganization Name		Date o	f Re	eceipt					
	Mailing Address 12814 Doe Lane				^M 06	/	30		202		Ŷ	
	City N. Potomac	State MD	Zip Code 20878	A				SA11AI. Receipt th				
	FEC ID number of contributing federal political committee.	С					,		4	150.00	0	
	Name of Employer (for Individual) MEP Health, LLC Receipt For: 2020	Pedi	pation (for Individual) atric Medical Director	\$1	M 50.00		o Item nthly					
	Primary General Conter (specify) Other	Aggregate	Year-to-Date ▼ 900.00]								
	UBTOTAL of Receipts This Page (optional)						,	,	13	350.00)	

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 27 OF

			Deteiled Summer / Dece	×	11a		11b		11c		12		
			Detailed Summary Page		13		14	\vdash	15	$\left \right $	16	17	
	nformation copied from such Reports and S commercial purposes, other than using the								soliciting		ntributi	ions	
\ \	ME OF COMMITTEE (In Full) SACS PAC												
	ll Name of Individual (Last, First, Middle Ini amma, Brett, , ,	tial) or Full O	Organization Name		Date of Receipt								
Ma	iling Address 14930 Finegan Farm Drive				^M 06	/	D	в ВО	/ Y		020	Y	
Cit Da	y arnestown	State MD	Zip Code 20874		Transaction ID : SA11AI.12000 Amount of Each Receipt this Period								
	C ID number of contributing leral political committee.	С		150.00								0	
ME	me of Employer (for Individual) EP Health, LLC		upation (for Individual) dical Director	Memo Item \$50.00/Monthly									
Re	ceipt For: 2020 Primary General ✔ Other (specify) ♥ Other	Aggregate	Year-to-Date ▼ 300.00]									
	II Name of Individual (Last, First, Middle Ini arber, Suzanne, , ,	tial) or Full O	organization Name		Date of	Re	eceipt						
Ma	iling Address 7700 Overlook Hills Lane				м м 06	1	D	р 30	/ Y)20	Y	
Cit Ci	y ncinnati	State OH	Zip Code 45244-3289	Transaction ID : SA11AI.12073 Amount of Each Receipt this Period									
	C ID number of contributing leral political committee.						- 75	_	300.0	0			
US	ame of Employer (for Individual) ACS Medical Group, LTD		upation (for Individual) gional Quality Director	Memo Item \$100.00/Monthly									
	eceipt For: 2020 Primary General ✔ Other (specify) ♥ Other	Aggregate	Year-to-Date ▼ 600.00										
	II Name of Individual (Last, First, Middle Ini Garcia-Gonzalez, Alexander, , ,	tial) or Full O	Organization Name		Date of	Re	eceipt						
	iling Address 19916 Bluff Oak Blvd				^M 06	1		B0	/ Y)20 [°]	Ŷ	
Cit Ta	y ampa	State FL	Zip Code 33647-2973						SA11AI.				
	C ID number of contributing leral political committee.	С					y		, <u>,</u>	_	150.0	0	
Ta Re	me of Employer (for Individual) mpa Bay Emergency Physicians, LLC ceipt For: 2020 Primary General Cother (specify) Other	Med	upation (for Individual) lical Director Year-to-Date ▼ 300.00	\$	M(b Item	ı					
SUB	TOTAL of Receipts This Page (optional)		•	.			y		,		600.0	0	
тот	AL This Period (last page this line number	only)	•••••				-						

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 28 OF

ITEMIZED RECEIPTS			Use separate schedule(s)	(check	only o	one)					
			for each category of the Detailed Summary Page	× 11		11b	11c	12			
	y information copied from such Reports and Sta for commercial purposes, other than using the r				he pu						
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) USACS PAC										
A.	Full Name of Individual (Last, First, Middle Initia Garfinkel, Michael, , ,	al) or Full Or	ganization Name	Date	e of F	Receipt					
	Mailing Address 2821 Grand Lake Dr				06 / D D / Y Y Y Y 06 30 2020						
	City Lafayette	State CO	Zip Code 80026			tion ID : f Each R					
	FEC ID number of contributing federal political committee.	С						300	.00		
	Name of Employer (for Individual) USACS Medical Group, LTD		ipation (for Individual) rgency Physician	\$100		no Item onthly					
	Receipt For: 2020 Primary General ✔ Other (specify) ♥ Other Other	Aggregate	Year-to-Date ▼ 433.34]		-					
B.	Full Name of Individual (Last, First, Middle Initia Geary, Daniel, , ,	al) or Full Or	ganization Name	Date	e of F	Receipt					
	Mailing Address 7265 Hidden Lake Estate dr				м 96	/ D D 30	/ Y	y y 2020	Y		
	City Mechanicsville	State VA	Zip Code 23111-6274			tion ID : f Each R	-				
	FEC ID number of contributing federal political committee.	С	249.99								
	Name of Employer (for Individual) MEP Health, LLC	Occu Med	Memo Item \$83.33/Monthly								
	Receipt For: 2020 Primary General ✓ Other (specify) ▼ Other	Aggregate `	Year-to-Date ▼ 499.98]							
<u>с.</u>	Full Name of Individual (Last, First, Middle Initia Gerhart, Caleb, , ,	al) or Full Or	ganization Name	Date	e of F	Receipt					
	Mailing Address 1111 Lancashire Drive)6	/ 30	/ Y	y y 2020	Y		
	City Indian Land	State SC	Zip Code 29707			c tion ID : f Each R					
USACS Medical Group, LTD G						y .		150	.00		
			pation (for Individual) ity Director	\$50.0	Men 00/Mo	no Item nthly					
	Primary General Conter (specify) Other	Year-to-Date ▼ 300.00]								
s	UBTOTAL of Receipts This Page (optional)					, .	. ,	699.	99		
т	OTAL This Period (last page this line number or	וy)									

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 29 OF

ITEMIZED RECEIPTS		Use separate schedule(s)	(check	only	one)						
11			for each category of the Detailed Summary Page	X 11	- H	11b	11c	12			
	y information copied from such Reports and Sta for commercial purposes, other than using the r				the pu						
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) USACS PAC										
A.	Full Name of Individual (Last, First, Middle Initia Gibson, George, , ,	al) or Full Or	rganization Name	Date	e of F	Receipt					
	Mailing Address 4100 Wallace Shire Dr.				06 / D D / Y Y Y Y 06 30 2020						
	Cilege Station	State TX	Zip Code 77845			ction ID : of Each R			k		
	FEC ID number of contributing federal political committee.	С						150	.00		
	Name of Employer (for Individual) Travis County Emergency Physicians, PA		pation (for Individual) ical Director	\$50.0	Men 00/Mo	no Item nthly					
	Receipt For: 2020 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 300.00]							
в.	Full Name of Individual (Last, First, Middle Initia Goen, Paul, , ,	al) or Full Or	ganization Name	Date	e of F	Receipt					
	Mailing Address 4417 Leonard Road			06 / D D / Y Y Y Y Y 2020							
	City Bryan	State TX	Zip Code 77807			tion ID : of Each R			ł		
	FEC ID number of contributing federal political committee.	С					300	.00			
	Name of Employer (for Individual) Emergency Service Partners, LLC		ipation (for Individual) em Medical Director	\$100		no Item onthly					
	Receipt For: 2020 Primary General ✓ Other (specify) ▼ Other	Aggregate `	Year-to-Date ▼ 600.00								
с.	Full Name of Individual (Last, First, Middle Initia Gonzalez, Javier, , ,	al) or Full Or	ganization Name	Date	e of F	Receipt					
	Mailing Address 4527 Scarlet Loop				D6	/ D D 30	/ Y	ү ү 2020	Y		
	City Wesley Chapel	State FL	Zip Code 33544			ction ID : of Each R			t		
FEC ID number of contributing federal political committee.						, .	, ,	450	.00		
	Name of Employer (for Individual) Tampa Bay Emergency Physicians, LLC Receipt For: 2020 Primary General Other (specify) Other	pation (for Individual) cal Director Year-to-Date ▼ 900.00	\$150		no Item onthly						
s	UBTOTAL of Receipts This Page (optional)			. [900	.00		
	OTAL This Period (last page this line number or										

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 30 OF

IT.	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)						
			for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 1 ¹						
	y information copied from such Reports and Sta for commercial purposes, other than using the r			erson for the purpose of soliciting contributions						
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full)									
A.	Full Name of Individual (Last, First, Middle Initia Groomes, Roderick, , ,	l) or Full Or	rganization Name	Date of Receipt						
	Mailing Address 417 Edgewood Drive			06 / D D / Y Y Y Y 06 30 2020						
	City Sarver	State PA	Zip Code 16055-9266	Transaction ID : SA11AI.12103 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		150.00						
	Name of Employer (for Individual) AHN Medical Group, LLC		upation (for Individual) lical Director	\$50.00/Monthly						
	Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 300.00							
B	Full Name of Individual (Last, First, Middle Initia Guyton, Steven, , ,	l) or Full Or	rganization Name	Date of Receipt						
	Mailing Address 111 Stillwater Lane			06 30 2020						
	City Pittsburgh	State PA	Zip Code 15143-8899	Transaction ID : SA11AI.12104 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		450.00						
	Name of Employer (for Individual) AHN Medical Group, LLC		upation (for Individual) lical Director	Memo Item \$150.00/Monthly						
	Receipt For: 2020 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 900.00							
С.	Full Name of Individual (Last, First, Middle Initia Hall, Timothy, , ,	l) or Full Or	rganization Name	Date of Receipt						
	Mailing Address 1380 Woodhurst Drive			06 30 2020						
	City Rock Hill	State SC	Zip Code 29732-2082	Transaction ID : SA11AI.12122 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		450.00						
USACS Medical Group, LTD			upation (for Individual) rgency Physician	Memo Item \$150.00/Monthly						
	Receipt For: 2020 Primary General Conter (specify) Other	Year-to-Date ▼ 900.00]							
s	UBTOTAL of Receipts This Page (optional)			1050.00						
т	OTAL This Period (last page this line number or	ıly)	· · · · · · · · · · · · · · · · · · ·							

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 31 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17						
or for commercial purposes, other than using t		person for the purpose of soliciting contributions tee to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)								
Full Name of Individual (Last, First, Middle I A. Hall, Wyatt, , , Mailing Address 2310B Old Trail Rd.	Initial) or Full Organization Name	Date of Receipt						
City	State Zip Code	06 30 2020 Transaction ID : SA11AI.11936						
Avon	CO 81620	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	150.00						
Name of Employer (for Individual) Colorado Emergency Service Physicians,	Occupation (for Individual) Medical Director	\$50.00/Monthly						
Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate Year-to-Date ▼ 300.00							
Full Name of Individual (Last, First, Middle I B. Hanlon, Dennis, , ,	Initial) or Full Organization Name	Date of Receipt						
Mailing Address 200 Windermere Ct.		06 30 Y Y Y Y Y 2020						
City McMurray	StateZip CodePA15317	Transaction ID : SA11AI.12105 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	300.00						
Name of Employer (for Individual) USACS Medical Group, Ltd.	Occupation (for Individual) Medical Director	Memo Item \$100.00/Monthly						
Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate Year-to-Date ▼ 600.00]						
Full Name of Individual (Last, First, Middle I C. Hanson, Kim, , ,	Initial) or Full Organization Name	Date of Receipt						
Mailing Address 2503 Whispering Oaks Circ	le	06 / D D / Y Y Y Y 06 30 2020						
City Bryan	StateZip CodeTX77802-2024	Transaction ID : SA11AI.12145 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	150.00						
Name of Employer (for Individual) Emergency Service Partners, LLC	Occupation (for Individual) APP Lead	\$50.00/Monthly						
Receipt For: 2020 Primary General X Other (specify) Other	Aggregate Year-to-Date ▼ 300.00							
SUBTOTAL of Receipts This Page (optional)	1	600.00						
TOTAL This Period (last page this line number								

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 32 OF

IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	\mathbf{X} 11a 11b 11c 12 13 14 15 16 17								
	ny information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions								
	NAME OF COMMITTEE (In Full) USACS PAC											
Α.	Full Name of Individual (Last, First, Middle Init Harris, John, , , Mailing Address 785 Joe Tyl Road	ial) or Full Or	ganization Name	Date of Receipt								
				06 30 2020								
	City	State TX	Zip Code	Transaction ID : SA11AI.12147								
	Texarkana		75501-5105	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		450.00								
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item								
	Travis County Emergency Physicians, PA	Med	ical Director	\$150.00/Monthly								
	Receipt For: 2020	Aggregate	Year-to-Date 🔻									
	Primary General ★ Other (specify) ★ Other		900.00									
в.	Full Name of Individual (Last, First, Middle Init Hart, Alicia, , ,	ial) or Full Or	ganization Name	Date of Receipt								
	Mailing Address 8005 Villefranche	06 30 2020										
	City	State	Zip Code	Transaction ID : SA11AI.12148								
	Corpus Christi	ТХ	78414-6024	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С		150.00								
Emergency Convice Derthere LLC			ipation (for Individual) stant Medical Director	Memo Item \$50.00/Monthly								
	Receipt For: 2020 Primary General X Other (specify) V Other	Aggregate	Year-to-Date ▼ , 300.00									
С.	Full Name of Individual (Last, First, Middle Init Henry, Androni, , ,	Date of Receipt										
	Mailing Address 241 Sweet Gum Road	06 / D D / Y Y Y Y 2020										
	City Pittsburgh	State PA	Zip Code 15238-1353	Transaction ID : SA11AI.12106 Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	С										
	Name of Employer (for Individual) AHN Medical Group, LLC		pation (for Individual) cal Director of Integrated Acute C	Memo Item \$150.00/Monthly								
	Receipt For: 2020 Primary General X Other (specify)	Aggregate `	Year-to-Date ▼ 900.00									
s	Other GUBTOTAL of Receipts This Page (optional)		, , <u>.</u>	1050.00								
т	OTAL This Period (last page this line number	only)	••••••									

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 33 OF

ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)											
			for each category of the Detailed Summary Page	×	11a 13		11b	11c 15	12	Г	17				
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	L ay not be sold or used by any p ddress of any political committee	erson e to so	for the	purp ntribi	ose of	soliciting	g contri	butio	ns				
	NAME OF COMMITTEE (In Full) USACS PAC														
<u> </u>	Full Name of Individual (Last, First, Middle Ini Herndon, Yalonda, , ,	tial) or Full O	rganization Name		Date of	Re	ceipt								
	Mailing Address 2509 Mill Wright Rd						D D 30	/ Y	2020		1				
	City Concord	State NC	Zip Code 28027					SA11AI. eceipt th		od					
	FEC ID number of contributing federal political committee.	С			<u> </u>		,		15	50.00					
	Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) Ility Director	\$	M 50.00/N		ltem hly								
	Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 300.00]											
в.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hibbs, Nathaniel, , , Mailing Address 6634 S. Prescott Way					F Re	ceipt	/ Y	Y	Υ	-				
	City	State Zip Code				06 30 2020 Transaction ID : SA11AI.11937									
	Littleton	CO	80120	Amount of Each Receipt thi					is Peri	od					
	FEC ID number of contributing federal political committee.	C				300.00									
	Name of Employer (for Individual) Colorado Emergency Service Physicians,		upation (for Individual) ergency Physician	Memo Item \$100.00/Monthly											
	Receipt For: 2020 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 600.00]											
с.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Higginbotham, Eric, , ,					Re	ceipt								
	ailing Address 1701B South 2nd Street Unit B					06 / 30 / 2020 Transaction ID : SA11AI.12149									
	City Austin	State TX	Zip Code 78704	_				SA11AI. eceipt th		od					
	FEC ID number of contributing federal political committee.	С			Ľ.		9	, y	45	50.00					
	Name of Employer (for Individual) Emergency Service Partners, LLC		upation (for Individual) lical Director	\$	M 150.00		Item hthly								
	Receipt For: 2020 Primary General X Other (specify) Other	Aggregate	Year-to-Date ▼ 900.00]											
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number			<u> </u>			, . , .	, , ,	90	00.00	-				

SCHEDULE A	(FEC Form 3X)							
ITEMIZED RECEIPTS								

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 34 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
or for commercial purposes, other than	rts and Statements may not be sold or used by any using the name and address of any political commit	person for the purpose of soliciting contributions								
NAME OF COMMITTEE (In Full)										
Full Name of Individual (Last, First, N Holt, Douglas, , , Mailing Address 207 Cabbage Inlet Lagrangian	Date of Receipt									
City Wilmington	StateZip CodeNC28409-3004	06 30 2020 Transaction ID : SA11AI.12052 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C	300.00								
Name of Employer (for Individual) USACS Medical Group, Ltd. Receipt For: 2020 Primary General Other (specify)	Occupation (for Individual) Firefighter Aggregate Year-to-Date ▼ 600.00	Memo Item \$100.00/Monthly								
Full Name of Individual (Last, First, N B. Hummel, Laura, , ,	Other Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hummel, Laura, , , Mailing Address 807 S. Roxmere Road									
City Tampa FEC ID number of contributing federal political committee.	StateZip CodeFL33609-4235C	Transaction ID : SA11AI.11967 Amount of Each Receipt this Period 300.00								
Name of Employer (for Individual) Tampa Bay Emergency Physicians, LL Receipt For: 2020 Primary General	C Occupation (for Individual) Regional Education Director Aggregate Year-to-Date ▼	Memo Item \$100.00/Monthly								
★ Other (specify) ▼ Other	Aiddle Initial) or Full Organization Name									
C. <u>Hydari, Irfan, , ,</u> Mailing Address 3203 Walnut Ave	Date of Receipt									
City Austin	StateZip CodeTX78722-1635	Transaction ID : SA11AI.12150 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C	450.00								
Name of Employer (for Individual) Virtual Locations Receipt For: 2020 Primary General Cother (specify) Other	Occupation (for Individual) Regional Vice President Aggregate Year-to-Date ▼ 900.00	\$150.00/Monthly								
	number only)									

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 35 OF

ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)								
II LIVIIZED KEGEIF 13		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17								
			erson for the purpose of soliciting contributions to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)											
Full Name of Individual (Last, First, Middle A. Iyer, Sujit, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 1204 Kinney Avenue	M M / D D / Y Y Y Y 06 30 2020										
City Austin	State TX	Zip Code 78704	Transaction ID : SA11AI.12151 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		Memo Item \$100.00/Monthly								
Name of Employer (for Individual) Emergency Service Partners, LLC		upation (for Individual) ergency Physician									
Receipt For: 2020 Primary General Conter (specify) Conter		Year-to-Date ▼ 600.00									
Full Name of Individual (Last, First, Middle B. Janikas, John, , ,	Date of Receipt										
Mailing Address 748 Carlton Road	06 30 2020										
City Clifton Park	State NY	Zip Code 12065-1023	Transaction ID : SA11AI.12036 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		249.99								
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) dical Director	Memo Item \$83.33/Monthly								
Receipt For: 2020 Primary General Cher (specify) Ther	Aggregate	Year-to-Date ▼ 499.98									
Full Name of Individual (Last, First, Middle C. Jeffrey, Douglas, , ,	Initial) or Full O	rganization Name	Date of Receipt								
Mailing Address 1109 Bluebonnet Lane	M M / D D / Y Y Y Y 06 30 2020										
City Austin	State TX	Zip Code 78704-2005	Transaction ID : SA11AI.12152 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		450.00								
Name of Employer (for Individual) Emergency Service Partners, LLC Receipt For: 2020	Eme	upation (for Individual) ergency Physician	Memo Item \$150.00/Monthly								
Primary General Cher (specify) Other	Aggregate	Year-to-Date ▼ 900.00]								
SUBTOTAL of Receipts This Page (optional)		999.99								
TOTAL This Period (last page this line num	per only)										

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 36 OF

			for each category of the	X	11a		11b		11c		12				
			Detailed Summary Page		13	-	14	┢	15		16	17			
	y information copied from such Reports and for commercial purposes, other than using the				for the		pose		oliciting	g con	ntribut	ions			
\rangle	NAME OF COMMITTEE (In Full) USACS PAC														
Α.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Jenis, Andrew, , ,					f Re	eceipt								
	Mailing Address 115 Cayuga Heights Road City State Zip Code						06 / D D / Y Y Y Y 2020								
	City Ithaca	State NY		Transaction ID : SA11AI.12037											
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 450.00 Memo Item \$150.00/Monthly											
	Name of Employer (for Individual) Virtual Locations	Occi Reg	\$												
	Receipt For: 2020 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 900.00	1											
в.	Full Name of Individual (Last, First, Middle In Johnston, Christopher, , ,	nitial) or Full O	rganization Name		Date o	f Re	eceipt								
	Mailing Address 1459 Milwaukee St.						D 3	D 80	/ Y	202	20	Y			
	City	State	Zip Code		Transaction ID : SA11AI.11938					-	_				
	Denver	CO	80206		Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		<u> </u>	_	-		-9-	_	150.0	00				
	Name of Employer (for Individual) Colorado Emergency Service Physicians,	Occ Med	\$	Memo Item \$50.00/Monthly											
	Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate]												
с.	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Jones, Bruce, , ,						eceipt								
	Mailing Address 4187 Colister Drive						06 30 2020								
	City	State OH	Zip Code		Transaction ID : SA11AI.12075						_				
	Dublin		43016-6162		Amount of Each Receipt this Pe					is Pe	əriod				
	FEC ID number of contributing federal political committee.	С		Ľ.		y		y		450.0	00				
	Name of Employer (for Individual)	Occupation (for Individual)			Memo Item										
	USACS Medical Group, LTD Receipt For: 2020	Medical Director			150.00	/Moi	nthly								
	Primary General X Other (specify) Other	Aggregate													
-	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line numbe						, ,		5	1	050.0	0			

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 37 OF

			Use separate schedule(s)	(ch	(check only one)						
11			for each category of the Detailed Summary Page				11b	11c	12	Г	17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any p ddress of any political committed	erson e to so	13 for the plicit cor	purp	ose of :	soliciting	g contri	butio	ns
	NAME OF COMMITTEE (In Full)										
A .	Full Name of Individual (Last, First, Middle Init Jones, Wayne, , ,	ial) or Full Oi	rganization Name		Date of	Rec	ceipt				
	Mailing Address 6063 Deerfield Drive				06 30 2020						
	City Fairview	State Zip Code PA 16415				Transaction ID : SA11AI.12107 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С			<u> </u>		y		15	50.00	
	Name of Employer (for Individual) AHN Medical Group, LLC		upation (for Individual) lical Director		M0 50.00/N		ltem nly				
	Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 300.00	1							
в.	Full Name of Individual (Last, First, Middle Init Jouriles, Nicholas, , , Mailing Address 398 Bentleyville Road	rganization Name	_	Date of	Rec	ceipt	/ Y	Y	Y Y		
	City Moreland Hills	State Zip Code OH 44022-2433			06 30 2020 Transaction ID : SA11AI.12076 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С									
	Name of Employer (for Individual) USACS Medical Group, LTD	Occupation (for Individual) Vice Chair of Faculty Development			Memo Item \$50.00/Monthly						
	Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 300.00]							
С.	Full Name of Individual (Last, First, Middle Init Kapadia, Homi, , ,	ial) or Full O	rganization Name		Date of	Rec	ceipt				
	Mailing Address 31281 Island Dr				^M 06	/	^D 30	/ Y	2020		
	City Evergreen	State CO	Zip Code 80439-8966					SA11AI. eceipt th		od	
	FEC ID number of contributing federal political committee.	С			<u> </u>		y	y	45	50.00	
	Name of Employer (for Individual) Virtual Locations		Occupation (for Individual) Regional Vice President				ltem thly				
	Receipt For: 2020 Primary General X Other (specify) Other	Aggregate	Year-to-Date ▼ 900.00]							
s	UBTOTAL of Receipts This Page (optional)			•			9	J	75	50.00	
Т	OTAL This Period (last page this line number of	only)		•			,			-	

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 38 OF

80

ITEMIZED RECEIPTS			for each category of Detailed Summary F		X 11a 13	11b 14	11c 15	12 16	17		
	y information copied from such Reports and Sta for commercial purposes, other than using the										
	NAME OF COMMITTEE (In Full) USACS PAC										
Α.											
	City Hagerstown	State MD	Zip Code 21742	06 30 2020 Transaction ID : SA11AI.12004 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С				-15-	-	450	0.00		
	Name of Employer (for Individual) Virtual Locations Receipt For: 2020 Primary General Other (specify) The other	Reg	upation (for Individual) jional Vice President Year-to-Date ▼ 90	0.00	Memo Item \$150.00/Monthly						
— B.	Full Name of Individual (Last, First, Middle Initi Kendall, Jayne, , ,		Date of	Receipt							
	Mailing Address 21710 Parsons Green Row				/ D D 30	/ Y	y y 2020	Y			
	City Cornelius	State NC	Zip Code 28031		Transaction ID : SA11AI.12053 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		300.00							
	Name of Employer (for Individual) Virtual Locations		upation (for Individual) gional Vice President		\$100.00/Monthly						
	Receipt For: 2020 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼	0.00							
C.	Full Name of Individual (Last, First, Middle Initi Kirtz, Jeremy, , ,	al) or Full C	rganization Name		Date of	Receipt					
	Mailing Address 906 S Fremont Ave				06 / D D / Y Y Y Y 06 30 2020						
	City Tampa	State FL	Zip Code 33606			ction ID :			d		
	FEC ID number of contributing federal political committee.	С			150.00						
	Name of Employer (for Individual) Tampa Bay Emergency Physicians, LLC Receipt For: 2020 Primary General	Med	upation (for Individual) lical Director Year-to-Date ▼		Mei \$50.00/Mo	mo Item onthly					
_	Conter (specify)	L	30	0.00							
s	UBTOTAL of Receipts This Page (optional)			····· ►		y	,	900	0.00		
т	OTAL This Period (last page this line number o	nly)		►					-		

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 39 OF

			Use separate schedule(s)			(check only one)						
				ach category of the led Summary Page		× 11a 13		11b	11c 15		2	17
Ar or	ny information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	ly not be ddress o	e sold or used by any pe of any political committee	erson erson	for the	pur ntrik	pose of	soliciting	g conti	ributic	ons
	NAME OF COMMITTEE (In Full)											
A.	Full Name of Individual (Last, First, Middle Init Klein, David, , ,	tial) or Full O	rganizat	ion Name		Date o	f Re	eceipt				
	Mailing Address 11736 Gainsborough Road					06 30 2020						
	City Potomac	StateZip CodeMD20854				Transaction ID : SA11AI.12006 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С				<u> </u>				3	300.00)
	Name of Employer (for Individual) USACS Management Group		Occupation (for Individual) National Director of Quality					o Item nthly				
	Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-	Date ▼ 600.00								
Full Name of Individual (Last, First, Middle Initial) or Full Orga Kleinman, Jacob, , , Mailing Address 120 Marvelwood Place			rganizat	ion Name		Date o	f Re	eceipt	/ Y	Y 2020		
	City Pittsburgh	State Zip Code PA 15215-1569			_	Transaction ID : SA11AI.12108 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C			150.00							
	Name of Employer (for Individual) AHN Medical Group, LLC	Occupation (for Individual) Medical Director				Memo Item \$50.00/Monthly						
	Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-	Date ▼ 300.00								
С.	Full Name of Individual (Last, First, Middle Init Kolodzik, Joan, , ,	tial) or Full O	rganizat	ion Name		Date o	f Re	eceipt				
	Mailing Address 1108 Paxon Court					^M 06	/	D D D 30	/ Y	2020		
	City Bellbrook	State OH	· · ·	Code 305-8959					SA11AI. eceipt th			
	FEC ID number of contributing federal political committee.	С				<u> </u>		y	y	4	150.00)
	Virtual Locations		Occupation (for Individual) National Director of Continuing Medica					o Item Inthly				
	Receipt For: 2020 Primary General X Other (specify) Other	Aggregate	Year-to-	Date ▼ 900.00								
s	UBTOTAL of Receipts This Page (optional)			•••••		ļ.		y	, , , , , , , , , , , , , , , , , , ,	9	900.00)
Т	OTAL This Period (last page this line number	only)		••••••	•	L.			-			

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 40 OF

ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)							
		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)										
Full Name of Individual (Last, First, Middle A. Kornas, Rebecca, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 4338 Wyandot St			06 30 2020							
City Denver	State CO	Zip Code 80211-1761	Transaction ID : SA11AI.11941 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		150.00							
Name of Employer (for Individual) Colorado Emergency Service Physicians,		upation (for Individual) ergency Physician	\$50.00/Monthly							
Receipt For: 2020 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 300.00]							
Full Name of Individual (Last, First, Middle B. Kramer, Olga, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 5836 Kinglet Lane			06 30 / Y Y Y Y							
City Charlotte	State NC	Zip Code 28269-7115	Transaction ID : SA11AI.12054 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		150.00 Memo Item \$50.00/Monthly							
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) P Lead								
Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 300.00]							
Full Name of Individual (Last, First, Middle C. Kuchinski, Joseph, , ,	Initial) or Full C	organization Name	Date of Receipt							
Mailing Address 5869 Heaven View Drive			M M / D D / Y Y Y Y 06 30 2020							
City Las Vegas	State NV	Zip Code 89135-1296	Transaction ID : SA11AI.12023 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		550.00							
Name of Employer (for Individual) USACS Medical Group, LTD Receipt For: 2020	Med	upation (for Individual) lical Director	\$150.00/Monthly							
Primary General Conter (specify) Other	Aggregate	Year-to-Date ▼ 1300.00]							
SUBTOTAL of Receipts This Page (optional)			850.00							
TOTAL This Period (last page this line numb	er 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 41 OF

ITEMIZED RECEIPTS		Detailed Summary Page		11a 13		11b 14	11c	12	17			
Any information copied from such Reports a or for commercial purposes, other than usin							soliciting	g contribu	utions			
NAME OF COMMITTEE (In Full)												
Full Name of Individual (Last, First, Midd Laberge, Anne-Marie, , , Mailing Address 114 Nazarene Ct	-											
			N	06 30 2020								
City Fombell	State PA	Zip Code 16123-2420		Transaction ID : SA11AI.12109								
FEC ID number of contributing federal political committee.	C		An	Amount of Each Receipt this Period								
Name of Employer (for Individual) AHN Medical Group, LLC		upation (for Individual) ality Director	\$50	\$50.00/Monthly								
Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 300.00										
Full Name of Individual (Last, First, Midd B. Land, Larry, , ,	Da	ate of	Re	ceipt								
Mailing Address 10014 Hazelnut Court							/ Y	y y 2020	Y			
City _Tampa	State FL	Zip Code 33647		Transaction ID : SA11AI.11969 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.		_		,		450	.00					
Name of Employer (for Individual) Tampa Bay Emergency Physicians, LLC							Memo Item \$150.00/Monthly					
Receipt For: 2020 Primary General ★ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 900.00										
Full Name of Individual (Last, First, Midd C. LeBlanc, Louis, , ,	e Initial) or Full C	Organization Name	Da	ate of	Re	ceipt						
Mailing Address 1428 Lacy Lane			The second secon	06 30 2020								
City Rock Hill	State SC	Zip Code 29732-7723					SA11AI.	12123 iis Period	4			
FEC ID number of contributing federal political committee.	С			iount			,	150	_			
Name of Employer (for Individual) Virtual Locations		upation (for Individual) fighter	\$50	Me 0.00/M		ltem hly						
Receipt For: 2020 Primary General Conter (specify) Other	I	Year-to-Date ▼ 300.00]			-						
SUBTOTAL of Receipts This Page (optiona	u)							750	.00			
TOTAL This Period (last page this line num	nber only)					,						

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 42 OF

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	Image: Concern only one) Image: X 11a 11b 11c 12 Image: 13 14 15 16 17				
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements mana and a	ay not be sold or used by any p address of any political committee	erson for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full)							
Full Name of Individual (Last, First, Middle Init Lee, Sidney, , , Mailing Address 1200 Queen Emma Street Apt 2001	tial) or Full C	Organization Name	Date of Receipt				
City	State	Zip Code	Transaction ID : SA11AI.11985				
Honolulu	HI	96813-6311	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		150.00				
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item				
USACS Medical Group, LTD	Med	dical Director	\$50.00/Monthly				
Receipt For: 2020	Aggregate	Year-to-Date 🔻					
Primary General ★ Other (specify) ★ Other		300.00]				
Full Name of Individual (Last, First, Middle Init B. Lewis, Brandon, , ,	tial) or Full C	Organization Name	Date of Receipt				
Mailing Address 3648 Calusa Springs Dr			M M / D D / Y Y Y Y 06 30 2020				
City	State	Zip Code	Transaction ID : SA11AI.12154				
College Station	TX	77845-4545	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		450.00				
Name of Employer (for Individual) Virtual Locations		upation (for Individual) gional Vice President	Memo Item \$150.00/Monthly				
Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ , 900.00]				
Full Name of Individual (Last, First, Middle Init C. Lim, David, , ,	tial) or Full C	Organization Name	Date of Receipt				
Mailing Address 3919 Luz del faro			06 / Y Y Y Y 06 30 2020				
City San Antonio	State TX	Zip Code	Transaction ID : SA11AI.12155				
		78261-2765	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		150.00				
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item				
Travis County Emergency Physicians, PA	Mec	lical Director	\$50.00/Monthly				
Receipt For: 2020	Aggregate	Year-to-Date 🔻					
Other (specify) Other		300.00]				
SUBTOTAL of Receipts This Page (optional)			750.00				
TOTAL This Period (last page this line number of							

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 43 OF

ITEMIZED RECEIPTS			Use separate schedule(s)	(ch	(check only one)						
11			for each category of the Detailed Summary Page	×	11a 13		11b 14	11c	12		17
	y information copied from such Reports and Sta for commercial purposes, other than using the n				for the		pose of	soliciting	g contril	butio	ns
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full)										
A.	Full Name of Individual (Last, First, Middle Initia Little, Andrew, , ,	l) or Full Or	ganization Name		Date of	f Re	eceipt				
Mailing Address 5514 Aryshire Dr					06	1	30) / Y	y 2020		1
	City Dublin	State OH	Zip Code 43017-9428		Transaction ID : SA11AI.12078 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.									30	0.00	
	Name of Employer (for Individual) USACS Medical Group, LTD		pation (for Individual) rgency Physician	\$	M 100.00/		ttem nthly				
	Receipt For: 2020 Primary General ✓ Other (specify) ▼ Other	Aggregate]								
В.	Full Name of Individual (Last, First, Middle Initia Loar, Jesse, , , Mailing Address 2554 E. Maplewood Ave.	ganization Name		Date of	f Re	eceipt		Y Y			
	City	State	Zip Code	06 30 Transaction ID					2020		
	Centennial C FEC ID number of contributing federal political committee.		CO 80121			Amount of Each Receipt this Period					
	Name of Employer (for Individual) Colorado Emergency Service Physicians,	Occupation (for Individual) Co-Medical Director			M		ttem hthly				
	Receipt For: 2020 Primary General Other (specify) There	Aggregate Year-to-Date ▼ 900.00									
С.	Full Name of Individual (Last, First, Middle Initia MacLean, Craig, , ,	l) or Full Or	ganization Name		Date of	f Re	eceipt				
Mailing Address 64 Newfields Road					^M 06	/	30		2020	Y	1
	City Exeter	State NH	Zip Code 03833-4542					SA11AI. leceipt th		od	
	FEC ID number of contributing federal political committee.	С			<u> </u>		, i	, <u>,</u>	45	0.00	
	Name of Employer (for Individual) USACS Medical Group, LTD		Occupation (for Individual) Director of Quality				o Item nthly				
Receipt For: 2020 Aggreg Primary General X Other (specify) Other			egate Year-to-Date ▼ 900.00								
s	UBTOTAL of Receipts This Page (optional)			•			7	. ,	120	0.00	
т	OTAL This Period (last page this line number on	ıly)		•			,			-	

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 44 OF

TEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)							
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 1 ¹							
			erson for the purpose of soliciting contributions to solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)										
Full Name of Individual (Last, First, Middle A. MacLeod, Bruce, , ,	e Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 1515 Mohican Dr			06 30 2020							
City Pittsburgh	State PA	Zip Code 15228-1615	Transaction ID : SA11AI.12111 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C		450.00							
Name of Employer (for Individual) Virtual Locations		upation (for Individual) ional Vice President	Memo Item \$150.00/Monthly							
Receipt For: 2020 Primary General ✔ Other (specify) ♥ Other	Aggregate	Year-to-Date ▼ 900.00]							
Full Name of Individual (Last, First, Middle Mann, Rubeal , , , Mailing Address 10122 Concord Road	Initial) or Full O	rganization Name	Date of Receipt							
City Dublin	State	Zip Code 43017-9434	06 30 2020 Transaction ID : SA11AI.12081							
FEC ID number of contributing federal political committee.	С	4-5017-54-54	Amount of Each Receipt this Period 300.00							
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) dical Director	Memo Item \$100.00/Monthly							
Receipt For: 2020 Primary General ✔ Other (specify) ♥ Other	Aggregate	Year-to-Date ▼ 600.00]							
Full Name of Individual (Last, First, Middle Martinez, Anthony, , ,	Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 7897 Broadway St. Unit 10										
City San Antonio	State TX	Zip Code 78209	Transaction ID : SA11AI.12156 Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	С		450.00							
		upation (for Individual) em Medical Director	Memo Item \$150.00/Monthly							
Primary General Conter (specify) Other	Aggregate	Year-to-Date ▼ 900.00]							
SUBTOTAL of Receipts This Page (optional))		1200.00							
TOTAL This Period (last page this line numb	per only)									

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 45 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17				
or for commercial purposes, other than using		y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)						
Full Name of Individual (Last, First, Middle Mattke, Angela, , , Mailing Address 1080 Pebblebrook Rd. SE	Initial) or Full Organization Name	Date of Receipt				
City	State Zip Code	06 30 2020 Transaction ID : SA11AI.11981				
Mableton	GA 30126-5612	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	450.00				
Name of Employer (for Individual) Virtual Locations	Occupation (for Individual) Firefighter	Memo Item \$150.00/Monthly				
Receipt For: 2020 Primary General X Other (specify) ▼ Other	Primary General 900.00					
Full Name of Individual (Last, First, Middle B. Mayz, Kurtis, , ,	Date of Receipt					
Mailing Address 1 E Main St Ste 404	Ste 404					
City Champaign	State Zip Code IL 61820-1313	Transaction ID : SA11AI.11989 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	450.00				
Name of Employer (for Individual) Virtual Locations	Occupation (for Individual) Firefighter	Memo Item \$150.00/Monthly				
Receipt For: 2020 Primary General X Other (specify) Other	Aggregate Year-to-Date ▼ 900.00					
Full Name of Individual (Last, First, Middle C. McAtee, Jill, , ,	Initial) or Full Organization Name	Date of Receipt				
Mailing Address 8112 Sweet Dreams Court		M M / D D / Y Y Y Y 06 30 2020				
City Las Vegas	StateZip CodeNV89131-1537	Transaction ID : SA11AI.12024 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	225.00				
Name of Employer (for Individual) USACS Medical Group, LTD	Occupation (for Individual) Advanced Practice Provider	Memo Item \$75.00/Monthly				
Receipt For: 2020 Primary General Conter (specify) Other	Aggregate Year-to-Date ▼ 450.00					
SUBTOTAL of Receipts This Page (optional)		1125.00				
TOTAL This Period (last page this line numb						

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 46 OF

ITE	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements ma ame and a	hay not be sold or used by any pers address of any political committee to	on for the purpose of soliciting contributions
\rangle	NAME OF COMMITTEE (In Full) USACS PAC			
Α.	Primary General X Other (specify) ▼	State CO Occo Med	Organization Name Zip Code 81302-3484 cupation (for Individual) edical Director e Year-to-Date ▼ 600.00	Date of Receipt 06 2020 Transaction ID : SA11AI.11943 Amount of Each Receipt this Period 300.00 Memo Item \$100.00/Monthly
B.	Other Full Name of Individual (Last, First, Middle Initial Meers, Holley, , , Mailing Address 24 Quincy Street	Organization Name	Date of Receipt	
	City Chevy Chase FEC ID number of contributing federal political committee. Name of Employer (for Individual) MEP Health, LLC Receipt For: 2020 Primary General X Other (specify) Y Other	Med	Zip Code 20815-4227	06 30 2020 Transaction ID : SA11AI.12008 Amount of Each Receipt this Period 300.00 Memo Item \$100.00/Monthly
C.	Full Name of Individual (Last, First, Middle Initial Meyer, Kendra, , , Mailing Address 85 Beatty Lane) or Full O	Drganization Name	Date of Receipt
	Scenery Hill FEC ID number of contributing federal political committee. Name of Employer (for Individual) AHN Medical Group, LLC	PA C Occu Dire	200 Code 15360-1537 Cupation (for Individual) ector of APPs ⇒ Year-to-Date ▼ 300.00	Transaction ID : SA11AI.12112 Amount of Each Receipt this Period 150.00 Memo Item \$50.00/Monthly
S	UBTOTAL of Receipts This Page (optional)		•	750.00
т	OTAL This Period (last page this line number on	ly)	•	

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 47 OF

		ECEIPTS Use separate schedule(s) for each category of the					ne)				
	EMIZED RECEIPTS		for each category of the Detailed Summary Page		× 11a		11b	11c		r	47
	y information copied from such Reports and Sta for commercial purposes, other than using the									ributic	
	NAME OF COMMITTEE (In Full) USACS PAC								1.0011		
<u> </u>	Full Name of Individual (Last, First, Middle Initia Miner, D., , ,	al) or Full O	Drganization Name		Date of	f Re	ceipt				
	Mailing Address 2398 S. Garfield St.				м м 06	1		/ Y	y 202	ү ү 0	1
	City Denver	State CO	Zip Code 80210					SA11AI. eceipt th			
	FEC ID number of contributing federal political committee.	С								50.00)
	Name of Employer (for Individual) Colorado Emergency Service Physicians,		cupation (for Individual) dical Director		M \$50.00/N		ltem hly				
	Receipt For: 2020 Primary General ✔ Other (specify) ♥ Other	Aggregate	Year-to-Date ▼ 300.00]							
B.	Full Name of Individual (Last, First, Middle Initia Mirhadi, Michael, , , Mailing Address 1984 Caversham Way	al) or Full O	Organization Name		Date of	f Re	ceipt	/ Y	Y	YYY	-
	City	State CA	Zip Code 95630					SA11AI.			
	FEC ID number of contributing federal political committee.	С		is Per 1	100 50.00)					
	Name of Employer (for Individual) USACS Medical Group, LTD		cupation (for Individual) dical Director		M \$50.00/N		ltem hly				
	Receipt For: 2020 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ , 300.00]							
с.	Full Name of Individual (Last, First, Middle Initia Misra, Swarup, , ,	al) or Full O	Drganization Name		Date of	f Re	ceipt				
	Mailing Address 9667 Ashley Green Ct NW	01-1-	7.000		06		30		2020	0	
	City Concord	State NC	Zip Code 28027					SA11AI. eceipt th			
	FEC ID number of contributing federal political committee.	С			Ľ.		y .	,	4	50.00)
	Name of Employer (for Individual) USACS Medical Group, LTD Receipt For: 2020	Qua	supation (for Individual) ality Director		M \$150.00		ttem hthly				
	Primary General Conter (specify) Other	Aggregate	Year-to-Date ▼ 900.00]							
S	UBTOTAL of Receipts This Page (optional)				<u> </u>		,	,	7	50.00	
т	OTAL This Period (last page this line number o	nly)								-	

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 48 OF

17	EMIZED RECEIPTS		Use separate schedule(s)	(check only one)
			for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	y information copied from such Reports and Sta for commercial purposes, other than using the			person for the purpose of soliciting contributions
$\left.\right\rangle$	NAME OF COMMITTEE (In Full)			
Α.	Full Name of Individual (Last, First, Middle Initia Natali, David, , ,	al) or Full O	organization Name	Date of Receipt
	Mailing Address 115 Pheasant Drive			M M / D D / Y Y Y Y 06 30 2020
	City Blawnox	State PA	Zip Code 15238-2207	Transaction ID : SA11AI.12113 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		450.00
	Name of Employer (for Individual) AHN Medical Group, LLC		upation (for Individual) ergency Physician	Memo Item \$150.00/Monthly
	Receipt For: 2020 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 900.00]
B	Full Name of Individual (Last, First, Middle Initia Nguyen, Vicky, , ,	al) or Full O	organization Name	Date of Receipt
	Mailing Address 336 E 1st Ave Apt 203			06 / 0 D / Y Y Y Y 06 2020
	City Denver	State CO	Zip Code 80203-4379	Transaction ID : SA11AI.11946 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		150.00
	Name of Employer (for Individual) Colorado Emergency Service Physicians,		upation (for Individual) dical Director	Memo Item \$50.00/Monthly
	Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 300.00]
C.	Full Name of Individual (Last, First, Middle Initia Osmundson, Michael, , ,	al) or Full O	organization Name	Date of Receipt
	Mailing Address 62 East Dr.			06 / D D / Y Y Y Y 06 2020
	City Hartville	State OH	Zip Code 44632-8890	Transaction ID : SA11AI.12084 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		450.00
	Name of Employer (for Individual) USACS Management Group		upation (for Individual) sident	\$150.00/Monthly
	Receipt For: 2020 Primary General X Other (specify) Other	Aggregate	Year-to-Date ▼ 900.00]
s	UBTOTAL of Receipts This Page (optional)			1050.00
т	OTAL This Period (last page this line number or	nly)		

SCHEDULE A (FEC Form 3X) ITEMIZED DECEIDTS

Use separate schedule(s)

FOR LINE NUMBER:

(check only one)

PAGE 49 OF

ITEMIZED REGEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
Full Name of Individual (Last, First, Middle I Otwell, Justin, , , Mailing Address 1736 Oakview Rd	nitial) or Full C	Organization Name	Date of Receipt
City	State	Zip Code	06 30 2020
Decatur	GA	30030	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		150.00
Name of Employer (for Individual) USACS Management Group		upation (for Individual) e President of Claims and Risk Ma	Memo Item \$50.00/Monthly
Receipt For: 2020 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 300.00	
Full Name of Individual (Last, First, Middle I B. Panitch, Orlee, , ,	nitial) or Full C	Organization Name	Date of Receipt
Mailing Address 11753 Gainsborough Road			M M / D D / Y Y Y Y 06 30 2020
City Potomac	State MD	Zip Code 20854	Transaction ID : SA11AI.12010 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		450.00
Name of Employer (for Individual) USACS Management Group		upation (for Individual) gional Chief Administrative Officer	Memo Item \$150.00/Monthly
Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 900.00	
Full Name of Individual (Last, First, Middle I C. Parks, Thomas, , ,	nitial) or Full C	Organization Name	Date of Receipt
Mailing Address 11533 Sand Stone Rock Dr			06 30 2020
City Riverview	State FL	Zip Code 33569-8709	Transaction ID : SA11AI.11972 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		225.00
Name of Employer (for Individual) Tampa Bay Emergency Physicians, LLC		upation (for Individual) anced Practice Provider	Memo Item \$75.00/Monthly
Receipt For: 2020	Aggregate	Year-to-Date V	
Primary General Conter (specify) Other		450.00	
SUBTOTAL of Receipts This Page (optional)			825.00
TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3X) _ _ _ _ _

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 50 OF

IT.	EMIZED RECEIPTS		Use separate schedule(s)	(check	only	one)						
			for each category of the Detailed Summary Page		- F	11b	11c	12	17			
	y information copied from such Reports and Sta for commercial purposes, other than using the r			erson for	the p	urpose o	f soliciting	g contrib	utions			
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full)											
A.	Full Name of Individual (Last, First, Middle Initia Patlovany, Matthew, , ,	ll) or Full Or	rganization Name	Dat	e of	Receipt						
	Mailing Address 19938 Terra Canyon				06 ^M	/ D 30		ү ү 2020	Y			
	City San Antonio	State TX	Zip Code 78255-2344				: SA11AI Receipt th		d			
	FEC ID number of contributing federal political committee.	С						450	0.00			
	Name of Employer (for Individual) Virtual Locations		upation (for Individual) sident	\$150		no Item Ionthly						
	Receipt For: 2020 Primary General X Other (specify) ▼		Year-to-Date ▼ 900.00			lonany						
	Full Name of Individual (Last, First, Middle Initia	l) or Full Or	rganization Name	-								
B.	Percy, Carmella, , ,			_		Receipt						
	Mailing Address 6875 Stonebridge Lane				06	30		2020	Ý			
	Clover	State SC	Zip Code 29710-9372				SA11AI . Receipt th		d			
	FEC ID number of contributing federal political committee.	С		150								
	Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) lical Director	\$50.	Mei 00/Mc	mo Item Inthly						
	Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 300.00]								
С.	Full Name of Individual (Last, First, Middle Initia Perfetti, Joyce, , ,	ll) or Full Or	rganization Name	Dat	e of	Receipt						
	Mailing Address 29470 Picana Lane				06 ^M	/ 30		y y 2020	Y			
	City Wesley Chapel	State FL	Zip Code 33543				: SA11AI Receipt th		d			
	FEC ID number of contributing federal political committee.	С			_	y	9).00			
	Name of Employer (for Individual) USACS Medical Group, LLC		upation (for Individual) ociate Medical Director	\$100		mo Item Ionthly						
	Receipt For: 2020 Primary General Conter (specify) Other	Aggregate	Year-to-Date ▼ 400.00]								
s	UBTOTAL of Receipts This Page (optional)							900).00			
	OTAL This Period (last page this line number or						- , - ,					

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 51 OF

177	EMIZED RECEIPTS	Use separate schedule(s)									
			for each category of the Detailed Summary Page	X	11a 13		11b	11c 15		12 16	17
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any p ddress of any political committee	erson e to so	for the	pur _l ntrib	pose of	soliciting	g cont	tributio	ons
	NAME OF COMMITTEE (In Full)										
Α.	Full Name of Individual (Last, First, Middle Init Phillips, Donald, , ,	tial) or Full O	rganization Name		Date of	f Re	ceipt				
	Mailing Address 1315 Woodglen Ct				^M 06	1	D D 30	/ Y	Y 202	20	Y
	City Aledo	State TX	Zip Code 76008	_				SA11AI. eceipt th			
	FEC ID number of contributing federal political committee.	С			<u> </u>			· ·	4	450.00	0
	Name of Employer (for Individual)	Оссі	upation (for Individual)		M	emo	Item				
	USACS Medical Group, Ltd.	Fire	fighter	\$	150.00/	/Mor	nthly				
	Receipt For: 2020 Primary General X Other (specify) ▼	Aggregate	Year-to-Date ▼ 900.00	1							
	Other			11.							
в.	Full Name of Individual (Last, First, Middle Init Phillips, Todd, , ,	tial) or Full O	rganization Name		Date of	f Re	ceipt				
	Mailing Address 2407 Motif Ct				06	/	D D D 30	/ Y	202	20	Y
	City	State	Zip Code		Trans	acti	on ID :	SA11AI.	12026	`	
	Henderson	NV	89052-5531		Amount	t of	Each R	eceipt th	nis Pe	riod	
	FEC ID number of contributing federal political committee.	С			<u> </u>		-			150.00	0
	Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) 9 Lead	\$	M 50.00/N		ltem hly				
	Receipt For: 2020 Primary General	Aggregate	Year-to-Date ▼								
	Cher (specify) ▼ Other		, 300.00								
C.	Full Name of Individual (Last, First, Middle Init Pines, Jesse, , ,	tial) or Full O	rganization Name		Date of	f Re	ceipt				
	Mailing Address 2424 N Potomac St				^M 06	1	D D D 30	/ Y	y 202		Y
	City	State VA	Zip Code					SA11AI			
	Arlington	VA	22207		Amount	t of	Each R	eceipt th	is Pe	riod	
	FEC ID number of contributing federal political committee.	С			Ľ.		,	, <u>,</u>	3	300.0	0
	Name of Employer (for Individual) Virtual Locations		upation (for Individual) onal Director of Clinical Innovati	\$	M 100.00		ttem hthly				
	Receipt For: 2020 Primary General	Aggregate	d.								
	Conter (specify) Other										
s	UBTOTAL of Receipts This Page (optional)			•			, .	. ,	Ę	900.00	0
т	OTAL This Period (last page this line number	only)		•						-	

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 52 OF

		Use separate schedule(s) for each category of the				neck onl	у о	ne)			
11				ch category of the ed Summary Page		X 11a 13		11b 14	11c	12	17
	y information copied from such Reports and St for commercial purposes, other than using the					for the		pose of	soliciting	g contribu	tions
	NAME OF COMMITTEE (In Full) USACS PAC										
A.	Full Name of Individual (Last, First, Middle Initi Posin, Shawn, , ,	al) or Full O	rganizatio	on Name		Date o	f Re	eceipt			
	Mailing Address 229 Washington Ave.					м м 06	/	D 30	D / Y	ү ү 2020	Ŷ
	City Wheeling	State WV	-	Code 003					SA11AI. Receipt th		
	FEC ID number of contributing federal political committee.	С				<u> </u>				300	00
	Name of Employer (for Individual) USACS Medical Group, LTD		•	or Individual) dical Director		M \$100.00		o Item nthly			
	Receipt For: 2020 Primary General X Other (specify) V Other	Aggregate	Year-to-E	0ate ▼ 600.00	1						
в.	Full Name of Individual (Last, First, Middle Initi Pyle, Moira, , , Mailing Address 2220 Valley Oaks Cove	al) or Full O	rganizatio	on Name		Date o	fRe	eceipt	о / Y	YY	Y
	City	State	· · ·	Code		06 Trans	act	30 ion ID :	SA11AI.	2020 12160	
	Leander FEC ID number of contributing federal political committee.	C	78	541		Amoun	t of	Each F	Receipt th	nis Perioc 225	_
	Name of Employer (for Individual) Emergency Service Partners, LLC		upation (i jional AP	or Individual) P Lead		M \$75.00/N		o Item thly			
	Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-E	Date ▼ 450.00							
с.	Full Name of Individual (Last, First, Middle Initi Radford, Shawn, , ,	al) or Full O	rganizatio	on Name		Date of	f Re	eceipt			
	Mailing Address 210 N Wells St Apt 4101					^M 06		30		2020	Ŷ
	City Chicago	State IL		Code 606-1352					Receipt th		
	FEC ID number of contributing federal political committee.	С				Ľ.		y	9	450	00
	Name of Employer (for Individual) Virtual Locations Receipt For: 2020	Direc	ctor of Fir	-		M \$150.00		o Item onthly			
	Primary General Conter (specify) Other	Aggregate	Year-to-E	0ate ▼ 1900.00							
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number c			-	•			, , , ,		975.	00

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 53 OF

IT!	EMIZED RECEIPTS		Use separate schedule(s)	(check	only	one	e)				
11			for each category of the Detailed Summary Page				11b	11c	12		7
	y information copied from such Reports and Sta for commercial purposes, other than using the r			erson for		ourp					17 s
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) USACS PAC										
A.	Full Name of Individual (Last, First, Middle Initia Reed, Rhett, , ,	al) or Full Or	rganization Name	Da	te of	Rec	ceipt				
	Mailing Address 12509 Red Mesa Hollow			M	06 [™]	/	D D 30	/ Y	y y 2020	Ŷ	
	City Austin	State TX	Zip Code 78739					SA11AI. eceipt th	. 12161 his Peric	d	
	FEC ID number of contributing federal political committee.	С					,		30	0.00	
	Name of Employer (for Individual) Emergency Service Partners, LLC		upation (for Individual) dical Director	\$10	Me 0.00/I		ltem thly				
	Receipt For: 2020 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 600.00]							
B.	Full Name of Individual (Last, First, Middle Initia Ricciardi, Daniel, , ,	al) or Full Or	rganization Name	Da	te of	Rec	eipt				
	Mailing Address 736 Cole Street			M	06	/	D D D 30	/ Y	2020	Y	
	City Charlottesville	State VA	Zip Code 22901-3210					SA11AI. eceipt th	12176 his Peric	d	
	FEC ID number of contributing federal political committee.	С			15	0.00					
	Name of Employer (for Individual) USACS Medical Group, Ltd.		upation (for Individual) dical Director	\$50.	Me 00/M		ltem Iy				
	Receipt For: 2020 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 300.00]							
с.	Full Name of Individual (Last, First, Middle Initia Rihter, Sasha, , ,	al) or Full Or	rganization Name	Da	te of	Rec	ceipt				
	Mailing Address 1000 South Clark St. Unit 1614			M	06 ^M	1	D D D 30	/ Y	2020	Ŷ	
	City Chicago	State IL	Zip Code 60605-2194					SA11AI eceipt th	.11991 his Peric	od	
	FEC ID number of contributing federal political committee.	С			_		,	, y	15	0.00	
	Name of Employer (for Individual) USACS Medical Group, Ltd. Receipt For: 2020	Acce	upation (for Individual) elerated Firefighter	\$50	Ме .00/М		ltem nly				
	Primary General Vither (specify) Other	Aggregate	Year-to-Date ▼ 300.00]							
s	UBTOTAL of Receipts This Page (optional)						,	. ,	60	0.00	
т	OTAL This Period (last page this line number or	וy)		Ē			,-			-	

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 54 OF

17T		Use separate schedule(s)					ne)						
11	EMIZED RECEIPTS		for each category of the Detailed Summary Page	×	11a 13		11b 14	11c		2 6	17		
	ny information copied from such Reports and S for commercial purposes, other than using the				or the		pose of	soliciting	g cont	ributio	ons		
	NAME OF COMMITTEE (In Full)												
<u>к</u>	Full Name of Individual (Last, First, Middle Init Roberts, Sam, , ,	tial) or Full O	rganization Name	C	Date o	f Re	eceipt						
	Mailing Address 3806 Bonnell Drive				м м 06	/	D 30) / Y	y 202	20			
	City Austin	State TX	Zip Code 78731	A				SA11AI. Receipt th			_		
	FEC ID number of contributing federal political committee.	С			_		ар. I.	-	4	150.00)		
	Name of Employer (for Individual) Virtual Locations		upation (for Individual) If Medical Officer	\$1	M 50.00		ttem nthly						
	Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 900.00]									
B.	Full Name of Individual (Last, First, Middle Init Romano, Frederick, , , Mailing Address 4516 Tuscana Drive	tial) or Full O	rganization Name		Date o		eceipt		Ŷ	Y			
	City	State	Zip Code	- 1	06 30 2020 Transaction ID : SA11AI.11974								
	Sarasota	FL	34241-4201					Receipt th					
	FEC ID number of contributing federal political committee.	С	[4	150.00)							
	Name of Employer (for Individual) Virtual Locations		upation (for Individual) fighter	\$1	M 50.00		ttem hthly						
	Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 900.00]									
<u>с</u> .	Full Name of Individual (Last, First, Middle Init Rooks, James, , ,	tial) or Full O	rganization Name		Date o	f Re	eceipt						
	Mailing Address 1663 Parkdale Circle S.				^M 06	1	30		y 202				
	City Erie	State CO	Zip Code 80516	A				SA11AI. Receipt th					
	FEC ID number of contributing federal political committee.	С					,	, ,	3	300.00)		
	Name of Employer (for Individual) Colorado Emergency Service Physicians,		upation (for Individual) ical Director	\$1	N 00.00		o Item nthly						
	Receipt For: 2020 Primary General X Other (specify) Other	Aggregate	Year-to-Date ▼ 600.00]									
	UBTOTAL of Receipts This Page (optional)					-	, .		12	200.00)		

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 55 OF

Iт	EMIZED RECEIPTS	Use separate schedule(s) for each category of the					у о	ne)				
11				I category of the		X 11a 13		11b 14	11c	12	Г	17
	y information copied from such Reports and S for commercial purposes, other than using the					for the		pose of	soliciting	g contrib		ns
$\left \right\rangle$	NAME OF COMMITTEE (In Full) USACS PAC											
A.	Full Name of Individual (Last, First, Middle Ini Rosen, Nicholas, , ,	tial) or Full O	rganization	Name		Date o	f Re	eceipt				
	Mailing Address 1089 S. Williams St.					м м 06	/	D 30	D / Y	ү ү 2020	Y	1
	City Denver	State CO	Zip Co 8020						SA11AI. Receipt th		od	
	FEC ID number of contributing federal political committee.	С				<u> </u>		-		15	0.00	
	Name of Employer (for Individual) Colorado Emergency Service Physicians,		upation (for lical Directo	ndividual) n		M \$50.00/N		o Item thly				
	Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Da	te ▼ 300.00]							
B.	Full Name of Individual (Last, First, Middle Ini Roy, Neil, , , Mailing Address 6700 Applewood Place	tial) or Full O	rganization	Name		Date o		DI		2020	Y	1
	City Rockville	State MD	Zip Co 2085		_				SA11AI.			_
	FEC ID number of contributing federal political committee.	C	2000						Receipt th		0.00	
	Name of Employer (for Individual) MEP Health, LLC		upation (for dical Directo	r Individual) or		M		o Item thly				
	Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Da	te ▼ 300.00]							
с.	Full Name of Individual (Last, First, Middle Ini Russell Goman, Dacia, , ,	tial) or Full O	rganization	Name		Date o	f Re	eceipt				
	Mailing Address 2076 Atterbury Ave					^M 06	1	30		y y 2020	Y]
	City Columbus	State OH	Zip Co 4322						Receipt th		bd	
	FEC ID number of contributing federal political committee.	С				Ē		y	7	30	0.00	
	Name of Employer (for Individual) USACS Medical Group, LLC Receipt For: 2020	Eme	rgency Phy			M \$100.00		o Item nthly				
	Primary General Conter (specify) Other (specify)	Aggregate	Year-to-Da	te ▼ 500.00]							
	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number				•		-	, .	,	600	0.00	-

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 56 OF

17		Use separate schedule(s)					y or	ne)						
	EMIZED RECEIPTS		for each cated Detailed Sum			× 11a 13		11b 14	11c	12		17		
	y information copied from such Reports and S for commercial purposes, other than using the					for the		oose of	soliciting	g contri	ibutio	ns		
	NAME OF COMMITTEE (In Full) USACS PAC													
A.	Full Name of Individual (Last, First, Middle Ini Rutherford, David, , ,	tial) or Full O	rganization Name	9		Date o	f Re	ceipt						
	Mailing Address 3502 Quitman St.					м м 06	/	30) / Y	, 2020]		
	City Denver	State CO	Zip Code 80212						SA11AI. Receipt th		iod			
	FEC ID number of contributing federal political committee.	С				<u> </u>				3(00.00			
	Name of Employer (for Individual) Virtual Locations		upation (for Indivi	,		M \$100.00		ttem hthly						
	Receipt For: 2020 Primary General ✔ Other (specify) ♥ Other	Aggregate	Year-to-Date ▼	600.00]									
в.	Full Name of Individual (Last, First, Middle Ini Scheer, Ronald, , , Mailing Address 285 Elder View Drive	tial) or Full O	rganization Name	9		Date o	f Re	D D	/ Y	Y 2020		1		
	City Las Vegas	State NV		Trans			SA11AL	12027						
	FEC ID number of contributing federal political committee.	NV 89138					Amount of Each Receipt this Po							
	Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Indiv ergency Physiciar	,		M		Item hthly						
	Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼	350.00]									
с.	Full Name of Individual (Last, First, Middle Ini Scherer, Nathan, , ,	tial) or Full O	rganization Name	9		Date of	f Re	ceipt						
	Mailing Address 6286 E Long Circle N					м м 06	/	30) / Y	y 2020				
	City Centennial	State CO	Zip Code 80112						SA11AI. Receipt th					
	FEC ID number of contributing federal political committee.	С				Ľ.		y .	, ,	30	00.00			
	Name of Employer (for Individual) Colorado Emergency Service Physicians, Receipt For: 2020	Eme	upation (for Indivi rgency Physician	,		M \$100.00		ttem hthly						
	Primary General Conter (specify) Other (specify)	Aggregate	Year-to-Date ▼	600.00]									
s	UBTOTAL of Receipts This Page (optional)				•			y		80	00.00	-		
Т	OTAL This Period (last page this line number	only)			•				-		-			

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 57 OF

IT.	EMIZED RECEIPTS	RECEIPTS Use separate schedule(s) for each category of the					gory of the							
			Detailed Summary Page			11		1c 5	12 16	17				
Ar or	y information copied from such Reports and S for commercial purposes, other than using the	tatements ma name and a	y not be sold or used by any p ddress of any political committe	person	13 for the plicit co	purpos	e of solid	citing c	ontribut	ions				
	NAME OF COMMITTEE (In Full) USACS PAC													
Α.	Full Name of Individual (Last, First, Middle Ini Scott, David, , ,	tial) or Full O	rganization Name		Date of Receipt									
	Mailing Address 4733 North Ridge Drive				м м 06		30 J		y y 2020	Y				
	City Akron	State OH	Zip Code 44333				ID : SA1 ch Recei							
	FEC ID number of contributing federal political committee.	С			<u> </u>				300.0	00				
	Name of Employer (for Individual) USACS Management Group Receipt For: 2020	Chie	upation (for Individual) If Clinical Officer		M (150.00)	emo Ite 'Monthl								
	Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 300.00	1										
в.	Full Name of Individual (Last, First, Middle Ini Seaberg, David, , , Mailing Address 1221 1st St S Unit 3A	tial) or Full O	rganization Name		Date of		pt 30		Y Y Y	Ŷ				
	City Jacksonville Beach	State FL	Zip Code 32250-6446	_			ID : SA1 ch Recei							
	FEC ID number of contributing federal political committee.	С							450.0	00				
	Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) cutive Vice President		M 150.00/	emo Ite Monthl								
	Receipt For: 2020 Primary General ✓ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 900.00]										
с.	Full Name of Individual (Last, First, Middle Ini Shelat, Chandresh, , ,	tial) or Full O	rganization Name		Date of	Recei	pt							
	Mailing Address 2144 Grant Farm Court				06		30 /		2020	Y				
	City Marriottsville	State MD	Zip Code 21104				ID : SA1 ch Recei							
	FEC ID number of contributing federal political committee.	С			<u> </u>	. y		, .	450.0	00				
	Name of Employer (for Individual) USACS Medical Group, Ltd. Receipt For: 2020	Asso	upation (for Individual) ociate Medical Director		M \$150.00	emo Ite /Monthl								
	Primary General Conter (specify) Other	Aggregate	Year-to-Date ▼ 900.00]										
s	UBTOTAL of Receipts This Page (optional)					,			1200.0	00				
т	OTAL This Period (last page this line number	only)			L.									

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 58 OF

IТ		Use separate schedule(s) for each category of the		(cł	neck onl	y or	ne)				
Any information copied from such Reports an			Detailed Summary Page		× 11a 13		11b 14	11c 15	12	Г	17
Ar or	y information copied from such Reports and Si for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any p address of any political committe	erson e to s	for the	pur ntrib	pose of	soliciting	g contri	butio	ns
	NAME OF COMMITTEE (In Full) USACS PAC										
A.	Full Name of Individual (Last, First, Middle Init Shellenbarger, David, , ,	ial) or Full O	Organization Name		Date of	f Re	ceipt				
	Mailing Address 912 Camelot Dr.				м м 06	1	30	/ Y	2020]
	City Hermitage	State PA	Zip Code 16148-9100					SA11AI. eceipt th		od	
	FEC ID number of contributing federal political committee.	С			<u> </u>			 	45	50.00	
	Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) dical Director of Integrated Acute	c	M \$150.00		ttem hthly				
	Receipt For: 2020 Primary General X Other (specify) V Other	Aggregate	Year-to-Date ▼ 900.00	1							
в.	Full Name of Individual (Last, First, Middle Init Sinnott, Annie, , , Mailing Address 1335 N. Bosworth Ave.	ial) or Full O	organization Name		Date of	f Re	ceipt	/ Y	YY	Y Y	-
	#3	State	Zip Code					SA11AL			
	Chicago FEC ID number of contributing federal political committee.	C	60642-2341		Amount	t of	Each R	eceipt th		od 50.00	
	Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) dical Director		M \$150.00/		ttem hthly				
	Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 900.00]							
С.	Full Name of Individual (Last, First, Middle Init Slabinski, Mark, , ,	ial) or Full O	Organization Name		Date of	f Re	ceipt				
	Mailing Address 3004 Edison St. NW	1			^M 06		D D D 30	JL	2020]
	City Uniontown	State OH	Zip Code 44685-7212					SA11AI. eceipt th		od	
	FEC ID number of contributing federal political committee.	С			Ľ.		,	9	45	50.00	
	Name of Employer (for Individual) USACS Management Group Receipt For: 2020	Regi	upation (for Individual) ional Vice President		M \$150.00		ttem hthly				
	Primary General Vother (specify) Other	Aggregate	Year-to-Date ▼ 900.00	1							
s	UBTOTAL of Receipts This Page (optional)			<u> </u>			y .	y	135	50.00	
т	OTAL This Period (last page this line number of	only)	······]				-			-	

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 59 OF

	-	Use separate schedule(s)	(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 or for commercial purposes, other than using			erson for the purpose of soliciting contributions								
Full Name of Individual (Last, First, Middle A. Snyder, Aaron, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 9925 Silver Brook Drive			M M / D D / Y Y Y Y 06 30 2020								
City Rockville	State MD	Zip Code 20850	Transaction ID : SA11AI.12013 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		450.00								
Name of Employer (for Individual) Virtual Locations Receipt For: 2020 Primary General X Other (specify)	Reg	upation (for Individual) jional Vice President Year-to-Date ▼ 900.00	Memo Item \$150.00/Monthly								
Other Full Name of Individual (Last, First, Middle	Initial) or Full C	Prganization Name	-								
3. Snyder, Mary Jo, , , Mailing Address 1800 Gulf Drive N Unit # 111			Date of Receipt								
City Bradenton Beach	State FL	Zip Code 34217	Transaction ID : SA11AI.11977 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C		150.00								
Name of Employer (for Individual) Virtual Locations		upation (for Individual) sident Echo Consulting Group	Memo Item \$100.00/Monthly								
Receipt For: 2020 Primary General ★ Other (specify) ▼ Other	Aggregate	Year-to-Date ▼ 450.00]								
Full Name of Individual (Last, First, Middle C. Somers, Michael, , ,	Initial) or Full C	organization Name	Date of Receipt								
Mailing Address 503 Neuse Harbour Blvd			M M / D D / Y Y Y Y 06 30 2020								
City New Bern	State NC	Zip Code 28560-8958	Transaction ID : SA11AI.12060 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С		450.00								
Name of Employer (for Individual) USACS Medical Group, LTD Receipt For: 2020	Mec	upation (for Individual) lical Director	Memo Item \$150.00/Monthly								
Primary General Conter (specify) Other	Aggregate	Year-to-Date ▼ 750.00]								
SUBTOTAL of Receipts This Page (optional).			1050.00								
TOTAL This Period (last page this line numb	er only)	······									

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 60 OF

		Use separate schedule(s)	(check only one)									
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12									
Any information copied from such Reports and or for commercial purposes, other than using th												
NAME OF COMMITTEE (In Full) USACS PAC												
Full Name of Individual (Last, First, Middle Ir A. Sullivan, Richard, , ,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 117 James Place			06 30 2020									
City Pittsburgh	State PA	Zip Code 15228-1021	Transaction ID : SA11AI.12117 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	C											
Name of Employer (for Individual) USACS Medical Group, Ltd. Receipt For: 2020	Med	upation (for Individual) dical Director	Memo Item \$100.00/Monthly									
Primary General ✔ Other (specify) ♥ Other	Aggregate	Year-to-Date ▼ 600.00]									
Full Name of Individual (Last, First, Middle Ir Thompson, Donovan, , , Mailing Address 4408 Lake Shore Road North		rganization Name	Date of Receipt									
City Denver	State NC	Zip Code 28037-9198	Transaction ID : SA11AI.12061 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		300.00									
Name of Employer (for Individual) USACS Medical Group, LTD		upation (for Individual) dical Director	Memo Item \$100.00/Monthly									
Receipt For: 2020 Primary General ✔ Other (specify) ♥ Other	Aggregate	Year-to-Date ▼ 600.00]									
Full Name of Individual (Last, First, Middle Ir C. Tirheimer, Wenzel, , ,	nitial) or Full O	rganization Name	Date of Receipt									
Mailing Address 13404 Golf Crest Way			06 / D D / Y Y Y Y 2020									
City Tampa	State FL	Zip Code 33618	Transaction ID : SA11AI.11978 Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		450.00									
Name of Employer (for Individual) Tampa Bay Emergency Physicians, LLC Receipt For: 2020	Eme	upation (for Individual) ergency Physician Year-to-Date ▼	\$150.00/Monthly									
Primary General Conter (specify) Other	, iggi egale	900.00]									
SUBTOTAL of Receipts This Page (optional)			1050.00									
TOTAL This Period (last page this line number	r only)											

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 61 OF

ITEMIZED RECEIPTS		Use separate schedule(s)				(check only one)							
			for each category of the Detailed Summary Page		11a 13		11b	11c	12	17			
	y information copied from such Reports and Sta for commercial purposes, other than using the r			erson fo	r the		pose of	soliciting	g contribu	itions			
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full)												
A.	Full Name of Individual (Last, First, Middle Initia Townsend, Martha, , ,	al) or Full Or	ganization Name	D	ate o	f Re	eceipt						
	Mailing Address 16220 W 84th Drive				^M 06	1	D D D 30	/ Y	Y Y 2020	Ŷ			
	City Arvada	State CO	Zip Code 80007				ion ID : Each R		11953 his Period				
	FEC ID number of contributing federal political committee.	С							150.	.00			
	Name of Employer (for Individual) Colorado Emergency Service Physicians,		pation (for Individual) Lead	\$50	M 0.00/M		o Item thly						
	Receipt For: 2020 Primary General ✓ Other (specify) ▼ Other		Year-to-Date ▼ 300.00]									
в.	Full Name of Individual (Last, First, Middle Initia Trotter, David, , ,	al) or Full Or	ganization Name	D	ate o	f Re	eceipt						
	Mailing Address 5401 South Ingleside Avenue				м м 06	/	30	/ Y	2020	Y			
	City Chicago	State Zip Code IL 60615-5013					ion ID : : Each R	-	11993 his Period				
	FEC ID number of contributing federal political committee.					450.00							
	Name of Employer (for Individual) USACS Medical Group, LTD	Occupation (for Individual) Medical Director			Memo Item \$150.00/Monthly								
	Receipt For: 2020 Primary General X Other (specify) ▼ Other	Aggregate Y	Year-to-Date ▼ 900.00]									
С.	Full Name of Individual (Last, First, Middle Initia Tucker, Jeremy, , ,	al) or Full Or	ganization Name	D	ate o	f Re	eceipt						
	Mailing Address 23959 Meredith Court				06 ^M	/	D D D 30	/ Y	2020	Y			
	City Hollywood	State MD	Zip Code 20636				tion ID : Each R	-	.12014 his Period				
	FEC ID number of contributing federal political committee.	С					,	,	450.				
	Name of Employer (for Individual) Virtual Locations		pation (for Individual) nal Director of Patient Safety	\$1	M 50.00		o Item nthly						
	Receipt For: 2020 Primary General Conter (specify) Other	Aggregate	Year-to-Date ▼ 900.00]									
s	UBTOTAL of Receipts This Page (optional)						, ,		1050.	00			
т	OTAL This Period (last page this line number or	וy)					-						

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 62 OF

IТ			Use separate schedule(s)	(ch	neck onl	y or	ne)				
11			for each category of the Detailed Summary Page		X 11a 13		11b	11c 15	12	Г	17
ITEMIZED RECEIPTS for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee. NAME OF COMMITTEE (in Full) USACS PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Tucker, William, , , Maling Address 136 Hickory Flats Dr Oily Harrison State Zip Code Harrison Receipt For: 2020 Other State X Other (specify) Gity Receipt For: 2020 Other Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Tully, John, , , Maling Address 348 Rolling Acres Trail City B. Tully, John, , , Maling Address 348 Rolling Acres Trail City General X Other (specify) Other Maling Address 348 Rolling Acres Trail City Gararal Receipt For: 2020 Primary General X Other (specify) General </th <th>ns</th>					ns						
A.		ial) or Full O	organization Name		Date of	f Re	ceipt				
						1		/ Y]
										od	
	5	С			<u> </u>				30	0.00	_
			, ,								
	Receipt For: 2020 Primary General X Other (specify) ▼		Year-to-Date V]							
в.	Tully, John, , ,	ial) or Full O	organization Name		M M	f Re	D D	/ Y		Y	1
	•				Trans		on ID : :		12164		_
	FEC ID number of contributing	_								-	
			· · · /								
	Primary General	Aggregate]							
<u> </u>		ial) or Full O	Prganization Name		Date of	f Re	ceipt				
	Mailing Address 1240 Broadview Ave					/		/ Y			1
										od	-
	5	С			<u> </u>		y 1		45	0.00	
	Name of Employer (for Individual) USACS Management Group Receipt For: 2020	Vice	President of Marketing and Recr	·ui	M \$150.00						
	Primary General Conter (specify) Other	Aggregate	Year-to-Date ▼ 900.00]							
s	UBTOTAL of Receipts This Page (optional)			•		-	,	,	105	0.00	
т	OTAL This Period (last page this line number of	only)					_	-		-	

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 63 OF

T	EMIZED RECEIPTS	for each category of the Detailed Summary Page	K 11a 11b 11c 12 13 14 15 16 17	
Ar or	ny information copied from such Reports and Stat for commercial purposes, other than using the n	ements ma ame and a	y not be sold or used by any pe ddress of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) USACS PAC			
A.	Full Name of Individual (Last, First, Middle Initial Venkat, Arvind, , , Mailing Address 105 Breckenridge Dr.) or Full O	rganization Name	Date of Receipt
				06 30 2020
	City	State PA	Zip Code	Transaction ID : SA11AI.12118
	Wexford	PA	15090-9400	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		450.00
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
	AHN Medical Group, LLC	Natio	onal Director of Research	\$150.00/Monthly
		Aggregate	Year-to-Date 🔻	
	Primary General ★ Other (specify) ▼ Other		900.00	
B	Full Name of Individual (Last, First, Middle Initial Vock, Tracie, , ,) or Full O	rganization Name	Date of Receipt
	Mailing Address 1826 Free Terrace			06 30 2020
	City	State	Zip Code	Transaction ID : SA11AI.12015
	Frederick	MD	21702	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		150.00
	Name of Employer (for Individual) MEP Health, LLC		upation (for Individual) ctor of APPs, Observation and Ho	Memo Item s \$50.00/Monthly
	Receipt For: 2020 Primary General Cother (specify) The other	Aggregate	Year-to-Date ▼ , 300.00	
<u>с.</u>	Full Name of Individual (Last, First, Middle Initial Warwick-Heckman, Kelley, , ,) or Full O	rganization Name	Date of Receipt
	Mailing Address 303 Four T Ranch Rd			06 30 2020
	City	State	Zip Code	Transaction ID : SA11AI.12165
	Georgetown	TX	78633	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		300.00
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
	Emergency Service Partners, LLC	Eme	rgency Physician	\$100.00/Monthly
	Receipt For: 2020	Aggregate	Year-to-Date 🔻	
	Conter (specify) Other		600.00	
s	UBTOTAL of Receipts This Page (optional)		•••••••••	900.00
т	OTAL This Period (last page this line number on	ly)	•	· · · · · · · · · · · · · · · · · · ·

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 64 OF

80

			for each category of the Detailed Summary Page	X 11a		11c	12	
Any information copied	from such Reports and Sta	itements ma	ay not be sold or used by any pe	erson for th	e purpose d	15 of soliciting	16 contribu	17 tions
			ddress of any political committee					
NAME OF COMMIT	TEE (In Full)							
Full Name of Individ A. Watkins, Angela,	ual (Last, First, Middle Initia , ,	al) or Full Oi	rganization Name	Date	of Receipt			
	28 Persimmon Tree Ct			M 06		0 / Y	ү ү 2020	Y
City Woodstock		State MD	Zip Code 21163-1150			: SA11AI.1		
			21103-1150	Amou	int of Each	Receipt this	s Period	
FEC ID number of c federal political com	0	C					450.	00
Name of Employer ((for Individual)	Occu	upation (for Individual)		Memo Item			
MEP Health, LLC		Med	lical Director	\$150.0	0/Monthly			
Receipt For: 2020	General	Aggregate	Year-to-Date ▼					
Conter (specify)			900.00					
Full Name of Individ B. Watling, Bradle	ual (Last, First, Middle Initia y , , ,	al) or Full O	rganization Name	Date	of Receipt			
Mailing Address 109	Viewpoint Lane			M 06		D / Y	y y 2020	Y
City		State	Zip Code	Trar	nsaction ID	: SA11AI.1	2062	
Mooresville		NC	28117-7558	Amou	int of Each	Receipt this	s Period	
FEC ID number of c federal political com	0	С					450.	00
Name of Employer	(for Individual)		upation (for Individual) jional Vice President		Memo Item 0/Monthly			
Receipt For: 2020 Primary X Other (specify)	General) ▼ Other	Aggregate	Year-to-Date ▼ 900.00					
Full Name of Individ c. Watson, Jame	ual (Last, First, Middle Initia S, , ,	al) or Full O	rganization Name	Date	of Receipt			
Mailing Address 219 Up	58 W 5th Street Unit			M OE		D / Y	2020	Y
City		State	Zip Code) : SA11AI.1		
Cleveland		ОН	44113	Amou	int of Each	Receipt this	s Period	
FEC ID number of c federal political com	0	С					450.	00
Name of Employer ((for Individual)	Occu	upation (for Individual)		Memo Item			
USACS Managemen	t Group	Chie	f Development Officer	\$150.0	0/Monthly			
Receipt For: 2020	General	Aggregate	Year-to-Date 🔻	_				
Conter (specify)			900.00					
SUBTOTAL of Receip	ts This Page (optional)						1350.	00
TOTAL This Period (la	ast page this line number or	וy)						

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 65 OF

ıт			Use separate schedule(s)	(cł	neck onl	у о	ne)	L	-		
11			for each category of the Detailed Summary Page		X 11a 13		11b 14	11c 15		ſ	17
ITEMIZED RECEIPTS for each category of the Detailed Summary Page Interview of the Detailed Summary Page			ons								
Α.		ial) or Full O	Organization Name		Date o	f Re	eceipt				
						/		/ Y			
	•	С			<u> </u>				3	300.00)
	USACS Management Group	Chie	ef Accounting Officer								
	Primary General X Other (specify) ▼	Aggregate]							
в.	Wellock, Austin, , ,	ial) or Full O	Organization Name	_	M M	f Re	D D	/ Y			ſ
								-	12093	3	
	•	С)
			1 ()								
	Primary General X Other (specify) V	Aggregate									
<u>с</u> .		ial) or Full O	Organization Name		Date o	f Re	eceipt				
	Mailing Address 3430 Ashton Drive					/		/ Y			
	5	С			<u> </u>		, . ,	. ,	1	50.00)
	USACS Management Group	Vice	President, Account Management								
		Aggregate	Year-to-Date ▼ 300.00								
s	UBTOTAL of Receipts This Page (optional)		•••••	•		_	, .	. ,	6	600.00)
т	TOTAL This Period (last page this line number of	only)	••••••	•	L.,						

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 66 OF

80

			Detailed Summa		×	-		11b	11c	12		_				
Δn	y information copied from such Reports and Sta	atements ma	v not be sold or us	sed by any pe	erson fr	13 or the		14	15	16 1 contrib		17				
	for commercial purposes, other than using the											3				
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full)															
A.	Full Name of Individual (Last, First, Middle Initia Welsh, Ian, , ,	al) or Full O	rganization Name			Date of	Re	ceipt								
	Mailing Address 1027 Gardenia Street					м м 06	/	30	/ Y	y y 2020	Y					
	City	State	Zip Code		1	Trans	acti	ion ID : S	SA11AI.	12125						
	Fort Mill	SC	29708		A	mount	of	Each Re	eceipt th	is Peric	d					
	FEC ID number of contributing federal political committee.	С	450.00													
	Name of Employer (for Individual) Virtual Locations		pation (for Individu stant Medical Direct	,	\$1	Me 50.00/		ttem hthly								
	Receipt For: 2020	Aggregate	Year-to-Date 🔻					-								
	Primary General X Other (specify) V Other		g. 1 1 g. 1	900.00												
B.	Full Name of Individual (Last, First, Middle Initia West, Brian, , ,	al) or Full O	rganization Name			Date of	Re	ceipt								
	Mailing Address 441 Carnoustie					м м 06	/	30	/ Y	2020	Y					
	City	State	Zip Code			Trans	acti	on ID : S	A11AL	12020		_				
	Highland	MI	48357-4754		A	mount	of	Each Re	eceipt th	is Peric	d					
	FEC ID number of contributing federal political committee.	C					150.00									
	Name of Employer (for Individual) USACS Medical Group, LTD	Occupation (for Individual) Quality Director					Memo Item \$50.00/Monthly									
	Receipt For: 2020	Aggregate Year-to-Date ▼														
	Primary General Conter (specify) Conter		, , , ,	300.00												
С.	Full Name of Individual (Last, First, Middle Initia Wirtz, David, , ,	al) or Full O	rganization Name			Date of	Re	ceipt								
	Mailing Address 1 Highgate NE					^M 06	/	D D D 30	/ Y	2020	Y					
	City	State NY	Zip Code 14850					ion ID : S								
	Ithaca		14650	_	A	mount	of	Each Re	eceipt th	is Peric	d	_				
	FEC ID number of contributing federal political committee.	C						y	9	45	0.00					
	Name of Employer (for Individual)		pation (for Individu	al)				Item								
	USACS Medical Group, LTD Receipt For: 2020		cal Director		\$1	50.00/	Moi	nthly								
	Primary General	Aggregate	Year-to-Date 🔻													
Other (specify) Other																
s	UBTOTAL of Receipts This Page (optional)			•••••	[,	,	105	0.00					
т	OTAL This Period (last page this line number o	nly)						.			-					

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 67 OF

	-		(check only one)							
		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
ITEMIZED RECEIPTS for each category of the Detailed Summary Page Image: Detailed Summary Page										
NAME OF COMMITTEE (In Full)										
	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 2813 Elmira St.										
0	C		300.00							
Colorado Emergency Service Physicians, Receipt For: 2020 Primary General X Other (specify)	Eme	Year-to-Date ▼								
B. Wyatt, Cheryl, , ,	lle Initial) or Full O	rganization Name	M M / D D / Y Y Y Y							
•										
0	С									
Name of Employer (for Individual) MEP Health, LLC		, ,								
Primary General ★ Other (specify) ▼	Aggregate]							
	dle Initial) or Full O	rganization Name	Date of Receipt							
Mailing Address 5901 Velasco Ave										
0	С		300.00							
Virtual Locations Receipt For: 2020 Primary General	Firef	upation (for Individual) ighter Year-to-Date ▼ 600.00	Memo Item \$100.00/Monthly							
Conter (specify) Other SUBTOTAL of Receipts This Page (option	,		▶ 750.00							
TOTAL This Period (last page this line num	mber only)		I I I I I I I I I I I I I I I I I I I							

I

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 68 OF

		Detailed Summary Page	×	_		11b		11c	12					
Annu information in the second				13		14		15	16	17				
Any information copied from such Reports a or for commercial purposes, other than using														
NAME OF COMMITTEE (In Full)														
Full Name of Individual (Last, First, Middl Ziebell, Christopher, , ,	e Initial) or Full O	rganization Name		Date o	f Re	eceipt								
Mailing Address 4014 Greystone Drive				м м 06	/	3	BO	/ Y	ү ү 2020	Y				
City	State	Zip Code		Trans	sact	ion ID) : SA	11AI.1	2168					
Austin	ТХ	78731		Amoun	t of	Each	Rece	eipt thi	s Period					
FEC ID number of contributing federal political committee.	C			300.00										
Name of Employer (for Individual)		upation (for Individual)				o Item	ı							
Emergency Service Partners, LLC Receipt For: 2020		lical Director	\$	100.00	/Mo	nthly								
Primary General X Other (specify) ▼ Other	Primary General Aggregate real Other (specify) ▼													
Full Name of Individual (Last, First, Middl 3. Zimmerman, Michael, , ,	e Initial) or Full O	rganization Name		Date of Receipt										
Mailing Address 1913 Buffalo Speedway				м м 06	/	3	BO	/ Y	2020	Y				
City	State	Zip Code						11AI.1						
Leander	TX	78641		Amoun	t of	Each	Rece	eipt thi	s Period					
FEC ID number of contributing federal political committee.	C			300.00										
Name of Employer (for Individual) Emergency Service Partners, LLC		Occupation (for Individual) Emergency Physician					Memo Item \$100.00/Monthly							
Receipt For: 2020 Primary General ★ Other (specify) ▼ Other	Aggregate	Aggregate Year-to-Date ▼ 600.00												
Full Name of Individual (Last, First, Middl	e Initial) or Full O	rganization Name		Date o	f Re	eceipt								
Mailing Address				M M	1	D	D	/ Y	Y Y	Y				
City	State	Zip Code		Amoun	t of	Each	Rece	eipt thi	s Period	_				
FEC ID number of contributing federal political committee.	С					y		, ,						
Name of Employer (for Individual)	Осси	upation (for Individual)		М	lemo	o Item	ı							
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼]											
SUBTOTAL of Receipts This Page (optiona	l)		▶			5		9	600.0	00				
TOTAL This Period (last page this line num	nber only)		•			_		7	60548.	24				

SCHEDULE B (FEC Form 3X)												F 80	
IT	EMIZED DISBURSEMENTS	Use sepa for each	(check	only 21b	y one) 22 🗶 23 🗌 26 🗌 27								
		Detailed	Summary Page		28a	28b	H	28c		29		30b	
	y information copied from such Reports and Stater for commercial purposes, other than using the nar												
$\left \right\rangle$	NAME OF COMMITTEE (In Full)												
لا ۸.	Full Name (Last, First, Middle Initial)					Date of Disbursement							
	Mailing Address PO BOX 10313			M M 06	/	D 1		Y)20	Y		
	5	State	Zip Code			FEC Id	entif	icatio	n Num	nber			
	FLEMING ISLAND	FL	32006									-	
	Purpose of Disbursement					U		7338 07338		B23	5.113	90	
	Candidate Name			Category	//	Amount	t of	Each	Disbu	rsen	nent	this P	eriod
		ment For: 2		Туре				y		,	2	000.00)
	State: District:	Primary Other (spec	General cify) ▼			Ме	mo	Item					
	Full Name (Last, First, Middle Initial)												
В.	FRIENDS OF MCCORMICK					Date of	f Dis	sburse		Y	Y	Y	Y
	Mailing Address 4410 LAUREL GROVE TRACE	ress 4410 LAUREL GROVE TRACE				06 25 2020							
	SUWANEE	State GA		FEC Identification Number									
	Purpose of Disbursement					C C00706747 Transaction ID : SB23.11393							
				Category	//	Amount			-	-	-		eriod
	MCCORMICK, RICHARD DEAN D	ment For: 2	2020	Туре							F	6000.00)
	Office Sought: X House Disbursel	Primary	x General					,		7		000.01	
	State: GA District: 07	Other (spec	••			Ме	mo	Item					
с.	Full Name (Last, First, Middle Initial)					Date of	f Dis	sburse	ment				
	Mailing Address PO BOX 2165					м м 06	/	D 1		Y)20	Y
	City GASTONIA	State NC	Zip Code 28053			FEC Id	entif	icatio	n Num	nber			
	Purpose of Disbursement	NC	28053			С	COC)3936	29				
	Candidate Name McHenry, Patrick, , ,	Patrick, , ,				Transaction ID : SB23.11391 Amount of Each Disbursement this Period							
	Senate	ment For: 2 Primary	x General			L		<u>.</u>	_	7	5	5000.00)
	State: District:	Other (spec	cify) 🔻			Me	mo	ltem					
s	UBTOTAL of Disbursements This Page (optional)							,		-	1:	2000.0	0
т	OTAL This Period (last page this line number only)						,		,			

SCHEDULE B (FEC Form 3X)	Use ser	parate schedule(s)	-	NUMBER: PAGE 70 OF 80								
ITEMIZED DISBURSEMENTS	for each	a category of the I Summary Page	(check only 21b 28a	22 X 23 26 27 28b 28c 29 30b								
Any information copied from such Reports and S or for commercial purposes, other than using the												
NAME OF COMMITTEE (In Full)												
Full Name (Last, First, Middle Initial) A. SUSIE LEE FOR CONGRESS				Date of	Date of Disbursement							
Mailing Address 5130 S FORT APACHE RD STE. 215-382			06 11 2020									
City LAS VEGAS	State NV	Zip Code 89148		FEC Ide	entificati	on Nur	nber					
Purpose of Disbursement Candidate Name			Category/	Tra	C00655 nsactio of Eac	n ID : S		11392 ent this Pe	eriod			
LEE, SUSIE, , , Office Sought: X House Disb	ursement For:	2020	Туре			1.00	7	5000.00				
State: NV District: 03	Other (spe			Me	mo Item	1						
Full Name (Last, First, Middle Initial) B. TEAM MCHENRY				Date of	_	sement		Y Y Y				
Mailing Address 228 S WASHINGTON ST ST	E 115			06		11	Ľ	2020				
City ALEXANDRIA	State VA	Zip Code 22314		FEC Ide	entificati	on Nur	nber					
Purpose of Disbursement Void check 1226				U U	C00544 nsactio		SB23.1	2192				
Candidate Name McHenry, Patrick, , ,			Category/ Type	Amount	of Eac	h Disbi		ent this Pe	eriod			
Senate President	ursement For: Primary Other (spe	General ecify)		Me	mo Item		- 1	- 5000.00	-			
State: District: Full Name (Last, First, Middle Initial)												
C. Mailing Address				Date of				Y Y Y				
City	State	Zip Code		FEC Ide	entificati	on Nur	nber					
Purpose of Disbursement				С								
Candidate Name			Category/ Type	Amount	of Eac	h Disbi	urseme	ent this Pe	eriod			
Office Sought: House Disb Senate President	ursement For: Primary Other (spe	General					- 1	1 40	_			
State: District:		; , v		Me	mo Item	l 						
SUBTOTAL of Disbursements This Page (option	nal)		····· •		-gr.		- y	0.00				
TOTAL This Period (last page this line number	only)		•••••		,		9	12000.00)			

	EDULE B (FEC Form 3X)	Use sepa	arate schedule(s)	FOR LINE (check only						
	ILED DISDURSEIVIEN IS		category of the Summary Page	21b 28a	22 23 26 27 28b 28c x 29 30b					
or for	formation copied from such Reports and State commercial purposes, other than using the na									
\ \	ME OF COMMITTEE (In Full) SACS PAC									
-	Name (Last, First, Middle Initial) enninghoff for Representative Co	ommittee)		Date of Disbursement					
Mai	ling Address 225 State St 2nd Flr				06 11 2020					
	, risburg pose of Disbursement	State PA	Zip Code 17101		FEC Identification Number					
Re	bissue Check 1220				C Transaction ID : SB29.11359					
Be	enninghoff, Kerry, , ,	ement For: 2	2020	Category/ Type	Amount of Each Disbursement this Period 1000.00					
Charl	Senate X	Primary Other (spe	General cify) ▼		Memo Item					
_	te: District: Name (Last, First, Middle Initial) enninghoff for Representative C	ommittee)		Date of Disbursement					
Mai	ling Address 225 State St 2nd Flr		06 / 11 / Y Y Y Y 2020							
	, risburg pose of Disbursement	State PA	Zip Code 17101		FEC Identification Number					
Car	oid check 1220 Ididate Name enninghoff, Kerry, , ,			Category/ Type	Transaction ID : SB29.12185 Amount of Each Disbursement this Period					
		ement For: ; Primary Other (spec	General		- 1000.00					
Stat	te: District:	Other (spec			Memo Item					
	Name (Last, First, Middle Initial) allender for Ohio				Date of Disbursement					
Mai	ling Address 4679 Winterset Drive				06 / 25 / Y Y Y Y 2020					
	, umbus pose of Disbursement	State OH	Zip Code 43220		FEC Identification Number					
Car	allender, Jamie, , ,		Category/ Type	C Transaction ID : SB29.11368 Amount of Each Disbursement this Period						
Offi	ce Sought: House Disburse Senate President	ement For: 2 Primary Other (spe	x General		1000.00					
Stat	te: District:		-/ .		Memo Item					
SUBT	TOTAL of Disbursements This Page (optional)			····· ►	1000.00					
ΤΟΤΑ	L This Period (last page this line number only	/)		••••••						

I

SCHEDULE B (FEC Form 3X)			FOR	LINE NUMBER: PAGE 72 OF						
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	-	k only one)						
		Summary Page		21b 22 23 26 27 28a 28b 28a 4 20 20b						
	<u> </u>	and here the		28a 28b 28c x 29 30b						
Any information copied from such Reports and State or for commercial purposes, other than using the na										
Full Name (Last, First, Middle Initial)				Date of Dishursement						
A. Citizens for Blessing				Date of Disbursement						
Mailing Address 3378 Dolomar Drive	06 25 2020									
City	State	Zip Code		FEC Identification Number						
Cincinnati	ОН	45239								
Purpose of Disbursement			_ · · ·							
Candidate Name				Transaction ID : SB29.11369						
Blessing, Bill, , ,			Categor Type	y/ Amount of Each Disbursement this Period						
	ment For:	2020	71	500.00						
Senate	Primary	X General								
President	Other (spe	ecify) 🔻		Memo Item						
State: District: Full Name (Last, First, Middle Initial)										
B. Citizens for Gavarone				Date of Disbursement						
Mailing Address 1537 Cedar Lane	Mailing Address 1537 Cedar Lane									
City	FEC Identification Number									
Bowling Green Purpose of Disbursement										
r arpose or Dispursement	C									
Candidate Name	Categor	Transaction ID : SB29.11371 Amount of Each Disbursement this Period								
Gavarone, Theresa, , ,			Type							
	ment For:	2020		500.00						
Senate	Primary	General								
State: District:	Other (spe	ecify)		Memo Item						
Full Name (Last, First, Middle Initial)										
C. Citizens for Hottinger				Date of Disbursement						
				M = M / D = D / Y = Y = Y = Y						
Mailing Address 2135 Horns Hill Road				06 25 2020						
City	State	Zip Code		FEC Identification Number						
Newark	ОН	43055								
Purpose of Disbursement										
Candidate Name				Transaction ID : SB29.11372						
Hottinger, Jay, , ,			Categor Type	y/ Amount of Each Disbursement this Period						
	ement For:	2020	<u> </u>	500.00						
Senate	Primary	🗙 General								
President	Other (spe	ecify) 🔻		Memo Item						
State: District:										
SUBTOTAL of Disbursements This Page (optional).				1500.00						
TOTAL This Period (last page this line number only	/)			Image: A state of the state						

SCHEDULE B (FEC Form 3X)			Use separate schedule(s)			E NUMBER: PAGE 73 OF 80						
ITE	MIZED DISBURSEMENTS	for each	(che		y one)					7 97		
			Summary Page		21k		-	23 28c	× 29		30b	
	information copied from such Reports and State or commercial purposes, other than using the na				iny pei	son for th		pose d	of solici	ting co	ontribution	
	IAME OF COMMITTEE (In Full)											
V												
	ull Name (Last, First, Middle Initial) Citizens for Stephanie Kunze					Date of Disbursement						,
N	Aailing Address 865 Macon Alley					06		2			020	
	City	State	Zip Code			FEC	denti	ficatior	n Numb	er		
	Columbus	OH	43206								-	
F	Purpose of Disbursement					С	ransa	oction	ID : SE	29 11	373	
	Candidate Name			Categ	gory/						t this Per	iod
	Kunze, Stephanie, , ,			Тур							4000.00	
C	Office Sought: House Disburse Senate President	ement For: 2 Primary Other (spe	x General					-			1000.00	
S	State: District:		oliy) v			N	lemo	Item				
B	Full Name (Last, First, Middle Initial) Citizens to Elect Allison Russo Mailing Address 545 E. Town Street			Date	VI /	sburse	D /		2020	1		
_		State	Zin Codo					2	5	2	.020	
	Sity Columbus	OH	Zip Code 43215			FEC	denti	ficatior	n Numb	er		
F	Purpose of Disbursement					C Transaction ID : SB29.11374						
	Candidate Name			Categ		Amou	nt of	Each	Disburs	semen	t this Per	iod
	Russo, Allison, , ,			Тур	be						500.00	
C	Office Sought: House Disburse	ement For: ;	·				_	,			500.00	
c	President District:	Primary Other (spe	∡ General cify)			N	lemo	Item				
	Full Name (Last, First, Middle Initial)											
	Dr. Terry Johnson for Ohio					Date		sburse			Y Y	
N	Aailing Address 1609 Offnere Street PO Box 595					06		2			020	
	City	State	Zip Code			FEC	denti	ficatior	n Numb	er		
	Portsmouth	ОН	45662							-		
	Purpose of Disbursement					С	ransa	action	ID : SE	29.11	383	
	Candidate Name Johnson, Terry, , ,			Categ		Amou	nt of	Each	Disburs	semen	t this Per	iod
		ement For: 2	2020	Тур	Je						500.00	п.
	Senate President	Primary Other (spec	x General									
S	State: District:						lemo	nem				
	BTOTAL of Disbursements This Page (optional).				-						2000.00	-

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 74 OF 80
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check onl 21b 28a	22 23 26 27
Any information copied from such Reports and State or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full)				
Full Name (Last, First, Middle Initial) A. Friends of Beth Liston				Date of Disbursement
Mailing Address 2193 Stratingham Dr				06 25 2020
City Dublin	State OH	Zip Code 43016		FEC Identification Number
Purpose of Disbursement				C Transaction ID : SB29.11380
Liston, Beth, , ,	ement For:	2020	Category/ Type	Amount of Each Disbursement this Period 500.00
Senate President	Primary Other (spe	X General		Memo Item
State: District: Full Name (Last, First, Middle Initial) B. Friends of Bryan Cutler				Date of Disbursement
Mailing Address PO Box 412				06 / 11 / 2020
City Harrisburg Purpose of Disbursement	State Zip Code PA 17101			FEC Identification Number
Reissue Check 1221 Candidate Name Cutler, Bryan, , ,			Category/ Type	Transaction ID : SB29.11361 Amount of Each Disbursement this Period
Office Sought: X House Disburse Senate X	Primary	2020 General	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	5000.00
State: PA District:	Other (spe	ecity)		Memo Item
Full Name (Last, First, Middle Initial) C. Friends of Bryan Cutler				Date of Disbursement
Mailing Address PO Box 412				06 11 2020
City Harrisburg Purpose of Disbursement Void check 1221	State PA	Zip Code 17101	· · ·]	FEC Identification Number
Candidate Name Cutler, Bryan, , , Office Sought: x House Disburse	ement For:		Category/ Type	Transaction ID : SB29.12187 Amount of Each Disbursement this Period - 5000.00
Senate President State: PA District:	Primary Other (spe	General ecify) ▼		Memo Item
SUBTOTAL of Disbursements This Page (optional)			•••••	500.00
TOTAL This Period (last page this line number only	y)			

S	CHEDULE B (FEC Form 3X)	11		FOR LINE						
	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a	one) 22 23 26 27 28b 28c x 29 30b					
	y information copied from such Reports and State for commercial purposes, other than using the nar									
	NAME OF COMMITTEE (In Full)									
Α.	Full Name (Last, First, Middle Initial) FRIENDS OF FRANK DERMODY				Date of Disbursement					
	Mailing Address P.O. BOX 274				06 11 2020					
	City TARENTUM	State PA	Zip Code 15084		FEC Identification Number					
	Purpose of Disbursement Reissue Check 1222				C Transaction ID : SB29.11362					
	Candidate Name Dermody, Frank, , ,			Category/ Type	Amount of Each Disbursement this Period					
		ment For: 2 Primary Other (spe	General		1000.00					
	State: PA District: 33	Other (spec	city) V		Memo Item					
B.	Full Name (Last, First, Middle Initial) FRIENDS OF FRANK DERMODY Mailing Address P.O. BOX 274				Date of Disbursement					
	TARENTUM	State PA	Zip Code 15084		FEC Identification Number					
	Purpose of Disbursement Void check 1222 Candidate Name			Category/	Transaction ID : SB29.12188 Amount of Each Disbursement this Period					
	Senate		General	Туре	- 1000.00					
	State: PA District: 33	Other (spe	cify)		Memo Item					
C.	Full Name (Last, First, Middle Initial) Friends of Greg Rothman				Date of Disbursement					
	Mailing Address PO Box 412				06 11 2020					
	Harrisburg	State PA	Zip Code 17101		FEC Identification Number					
	Purpose of Disbursement Reissue Check 1223 Candidate Name			Category/	Transaction ID : SB29.11363 Amount of Each Disbursement this Period					
		ment For: 2 Primary	2020 General	Туре	1000.00					
	State: District:	Other (spe			Memo Item					
	UBTOTAL of Disbursements This Page (optional)				1000.00					
⊢	OTAL This Period (last page this line number only									

SCHEDULE	B (FEC Form 3X)			FC	OR LI	INE N	UMBER:				PAG	E 76	6 OF	80
ITEMIZED D	DISBURSEMENTS	Use separate schedule(s) for each category of the			heck	only	one)							
			Detailed Summary Page			21b	22	Щ	23	\square	26	2		
Any information of	copied from such Reports and Stat	ements mav	not be sold or use	d bv		28a Dersol	28b n for the	purr	28c		29 citing		0b ibutioi	าร
or for commercial	purposes, other than using the na													
	MMITTEE (In Full)													
USACS P														
	st, First, Middle Initial) f Greg Rothman						Date of	f Dis	burse	ement				
							M M	/	D		Y	Y	Y Y	1
Mailing Addres	s PO Box 412						06		1	1		2020)	
City Harrisburg		State PA	Zip Code 17101				FEC Id	entif	icatio	n Num	ber			
Purpose of Dis	sbursement			_			С						٦.	
Void check 12								nee	ction	ID : S	R20 -	12180		
Candidate Nar				Cate	egory/	/	Amount							riod
Rothman,					ype							400	0.00	- T
Office Sought:		ement For: Primary	2020 General						9		,	- 100	0.00	
	President	Other (spe					Mo	mo	ltem					
State:	District:							UIU	aoni					
_ ·	st, First, Middle Initial)								h					
Friends o	f Hearcel F. Craig						Date of	r Dis			_			
Mailing Addres	Mailing Address 545 E. Town Street									D /	Y	y 2020		
City		State	Zip Code				FEC Id	entif	icatio	n Num	ber			
Columbus Purpose of Dis	sbursement	OH	43215				C	-	-	-		-	٦.	
							C					4075		
Candidate Nar				Cate	egory/	/	Tra Amount			ID : S Disbu				riod
Craig, He					ype		-							· ·
Office Sought:	House Disburs	ement For:	·				<u> </u>		,		,	35	50.00	
	President	Other (spe	cify)											
State:	District:						Me	mo	Item					
	st, First, Middle Initial) f Jay Edwards					T	Date of	f Dis	burse	ement				
• Filenus o	i Jay Euwalus						M M	/		D /	Y	Y	Y Y	
Mailing Addres	s 35950 Union Ridge Rd						06			5	L	2020		
City		State	Zip Code				FEC Id	entif	icatio	n Num	ber			
Albany Purpose of Dis	shursement	OH	45710				_				-	-	1	
Fulpose of Dis	soursement						C	_	_					
Candidate Nar				Cate	egory/	/	Tra Amount			ID:S Disbu				riod
Edwards,					ype								-	
Office Sought:		ement For:					L.		,		,	35	50.00	
	Senate President	Other (spe	General											
State:	District:		icity) ▼				Me	mo	ltem					
							_	-		_		_	-	_
SUBTOTAL of D	Disbursements This Page (optional)))		L		-	_		- 3	00.00	
TOTAL This Per	iod (last page this line number on	ly)							,		,			

I

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 77 OF 80							
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a	v one) 22 23 26 27 28b 28c x 29 30b							
Any information copied from such Reports and Sta or for commercial purposes, other than using the r				on for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full)											
Full Name (Last, First, Middle Initial) A. Friends of Matt Dolan				Date of Disbursement							
Mailing Address 2226 Edgeview Drive				06 25 2020							
City Hudson	State OH	Zip Code 44236		FEC Identification Number							
Purpose of Disbursement				C Transaction ID : SB29.11376							
Dolan, Matt, , ,	sement For:	2020	Category/ Type	Amount of Each Disbursement this Period 1000.00							
Senate President	Primary Other (spe	x General		Memo Item							
State: District: Full Name (Last, First, Middle Initial) B. Friends of Scott Lipps				Date of Disbursement							
Mailing Address 3757 McLean Road				06 / 25 / 2020							
City Franklin Purpose of Disbursement	State OH	Zip Code 45005		FEC Identification Number							
Candidate Name			Category/	Transaction ID : SB29.11379 Amount of Each Disbursement this Period							
Lipps, Scott, , , Office Sought: House Disburs Senate	sement For: Primary	2020 X General	Туре	1000.00							
State: District:	Other (spe			Memo Item							
Full Name (Last, First, Middle Initial) C. Hackett for Ohio				Date of Disbursement							
Mailing Address 2050 Palouse Drive				06 / 25 / Y Y Y Y 2020							
City London Purpose of Disbursement	State OH	Zip Code 43140		FEC Identification Number							
Candidate Name	C Transaction ID : SB29.11381 Amount of Each Disbursement this Period										
Hackett, Bob, , , Office Sought: House Disburs Senate	sement For: Primary	2020 X General	Туре	1000.00							
State: District:	Other (spe			Memo Item							
SUBTOTAL of Disbursements This Page (optiona	l)			3000.00							
TOTAL This Period (last page this line number or											

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER PAGE 78 OF 80					
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only						
		Summary Page	21b	22 23 26 27 29b 20c 20 20					
			28a	28b 28c x 29 30b					
Any information copied from such Reports and State or for commercial purposes, other than using the na									
Full Name (Last, First, Middle Initial)									
A. KATHY RAPP FOR REP				Date of Disbursement					
Mailing Address 3780 FOLLETT RUN RD				06 / D D / Y Y Y Y Y 020					
City WARREN	State PA	Zip Code 16365		FEC Identification Number					
Purpose of Disbursement		10303		С					
Reissue Check 1225				Transaction ID : SB29.11367					
Candidate Name			Category/	Amount of Each Disbursement this Period					
Rapp, Kathy, , ,			Туре	1000.00					
	ement For: Primary	2020 General		1000.00					
President	Other (spe								
State: PA District: 65		<i>.,</i> .		Memo Item					
Full Name (Last, First, Middle Initial)									
B. KATHY RAPP FOR REP				Date of Disbursement					
Mailing Address and FOLLETT DUN DD									
Mailing Address 3780 FOLLETT RUN RD				06 11 2020					
City	State	Zip Code		FEC Identification Number					
WARREN	PA	16365							
Purpose of Disbursement Void check 1225				С					
Candidate Name			Category/	Transaction ID : SB29.12191 Amount of Each Disbursement this Period					
Rapp, Kathy, , ,			Type	Amount of Lach Disbursement this Feriod					
	ement For:			- 1000.00					
Senate x	-	General							
State: PA District: 65	Other (spe	ecity)		Memo Item					
Full Name (Last, First, Middle Initial)									
C. Kaufer Now Committee				Date of Disbursement					
Mailing Address PO Box 412				06 11 2020					
				2020					
City	State	Zip Code		FEC Identification Number					
Harrisburg Purpose of Disbursement	PA	17101		\mathbf{C}					
Reissue Check 1224				C Transaction ID : SB29.11365					
Candidate Name			Category/	Amount of Each Disbursement this Period					
Kaufer, Aaron, , ,	. –		Туре	1000.00					
	ement For: Primary	2020 General		1000.00					
President	Other (spe								
State: District:		····) •		Memo Item					
SUBTOTAL of Disbursements This Page (optional)			····· ►	1000.00					
TOTAL This Deviced (last many this line must	۵								
TOTAL This Period (last page this line number only	/)		••••••						

SCHEDULE B (FEC Form 3X)			FOR LINF	NUMBER: PAGE 79 OF 80					
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check onl 21b 28a	y one) 22 23 26 27 28b 28c x 29 30b					
Any information copied from such Reports and State or for commercial purposes, other than using the na									
NAME OF COMMITTEE (In Full) USACS PAC									
Full Name (Last, First, Middle Initial) A. Kaufer Now Committee				Date of Disbursement					
Mailing Address PO Box 412				06 11 2020					
City Harrisburg	State PA	Zip Code 17101		FEC Identification Number					
Purpose of Disbursement Void check 1224	·			C Transaction ID : SB29.12190					
Candidate Name Kaufer, Aaron, , ,			Category/ Type	Amount of Each Disbursement this Period					
	ement For: Primary Other (spe	General		- 1000.00					
State: District: Full Name (Last, First, Middle Initial)									
B. Lanese for Ohio Mailing Address 260 N Cassady Avenue	Lanese for Ohio								
City	State	Zip Code		06 25 2020					
Columbus Purpose of Disbursement	OH 43209			FEC Identification Number					
Candidate Name Lanese, Laura, , ,			Category/ Type	Transaction ID : SB29.11384 Amount of Each Disbursement this Period					
Senate	Primary	2020 Ceneral		350.00					
State: District:	Other (spe	ecify)		Memo Item					
Full Name (Last, First, Middle Initial) C. Matt Huffman for Ohio				Date of Disbursement					
Mailing Address 4679 Winterset Drive				06 25 2020					
City Columbus	State OH	Zip Code 43220		FEC Identification Number					
Purpose of Disbursement Candidate Name Huffman, Matt, , ,			Category/ Type	C Transaction ID : SB29.11385 Amount of Each Disbursement this Period					
Office Sought: House Disburse	ement For: Primary	x General		1000.00					
State: District:	Other (spe	ecity) 🔻		Memo Item					
SUBTOTAL of Disbursements This Page (optional)			····· •	350.00					
TOTAL This Period (last page this line number onl	y)		••••••						

SCHEDULE B (FEC Form 3X)		arate schedule(s)	FOR LINE						
TEMIZED DISBURSEMENTS	for each	category of the Summary Page	(check only 21b 28a	22 23 26 27					
Any information copied from such Reports and State or for commercial purposes, other than using the na	ments may me and add	not be sold or used ress of any political	d by any perso I committee to	on for the purpose of soliciting contributions solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)									
Full Name (Last, First, Middle Initial) A. Peterson for Good Government				Date of Disbursement					
Mailing Address 5564 Grassy Branch Road				06 25 2020					
City Sabina	State OH	Zip Code 45169		FEC Identification Number					
Purpose of Disbursement				C Transaction ID : SB29.11386					
Candidate Name Peterson, Bob, , ,			Category/ Type	Amount of Each Disbursement this Period					
	ment For: ; Primary Other (spe	x General		500.00					
State: District:		., .		Memo Item					
Full Name (Last, First, Middle Initial) B. Seitz for Ohio				Date of Disbursement					
Mailing Address 4401 Abby Court				06 25 2020					
Cincinnati	State OH	Zip Code 45248		FEC Identification Number					
Purpose of Disbursement				C Transaction ID : SB29.11387					
Candidate Name			Category/ Type	Amount of Each Disbursement this Period					
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	x General		1000.00					
State: District:				Memo Item					
Full Name (Last, First, Middle Initial)				Date of Disbursement					
Mailing Address									
City	State	Zip Code		FEC Identification Number					
Purpose of Disbursement		- 		C					
Candidate Name		L	Category/ Type	Amount of Each Disbursement this Period					
Office Sought: House Disburse Senate	ment For: Primary	General	2 F -						
State: District:	Other (spe	cify) 🔻		Memo Item					
SUBTOTAL of Disbursements This Page (optional).			I	1500.00					
TOTAL This Period (last page this line number only				11550.00					