04/16/2002 11 : 45

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) — **USE FEC MAILING LABEL OR TYPE OR PRINT** ▼ — Example: If typing, type over the lines

HCA Healthcare Good Government Fund

ADDRESS (number and street) ▼ One Park Plaza, PO Box 550

Check if different than previously reported. (ACC)

Nashville | TN | 37202 – 0550

CITY ▲ STATE ▲ ZIPCODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼

C00067231

3. IS THIS REPORT X NEW (N) **OR** AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

X April 15 Quarterly Report(Q1)

July 15 Quarterly Report(Q2)

October 15 Quarterly Report(Q3)

January 31 Quarterly Report(YE)

July 31 Mid-Year Report(Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (M13)

(c) 12-Day **PRE**-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12G)

Election on in the State of

(d) 30-Day **P**ost -Election Report for the: General (30G) Runoff (30R) Special (30S)

Election on in the State of

5. Covering Period 02 21 2002 through 03 31 2002

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. David Anderson

Signature of Treasurer Electronically Filed by Mr. David Anderson Date 04 15 2002

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only			**FEC FORM 3X** (Revised 1/2001)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Revised 1/2001)

Write or Type Committee Name
HCA Healthcare Good Government Fund

Report Covering the Period: From: 02 21 2002 To: 03 31 2002

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2002		239190.46
(b) Cash on Hand at Begining of Reporting Period	218902.71	
(c) Total Receipts (from Line 19)	258.20	1154.80
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	219160.91	240345.26
7. Total Disbursements (from Line 30)	21470.63	42655.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	197690.28	197690.28
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	

X 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

Write or Type Committee Name

HCA Healthcare Good Government Fund

Report Covering the Period: From: 02 21 2002 To: 03 31 2002

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	0.00	
(ii) Unitemized	0.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ▶	0.00	232.93
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 32, page 4) ..... ▶	0.00	232.93
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts Dividends, Interest, etc.)	258.20	921.87
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) ..... ▶	258.20	1154.80
20. Total Federal Receipts (subtract Line 16 from Line 19) ..... ▶	258.20	1154.80

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Revised 1/2001)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	15265.16	28740.30
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶	0.00	0.00
29. Other Disbursements	6205.47	13914.70
30. Total Disbursements (add Lines 21(c), 22, 23,24,25,26,27,28(d),and 29) ▶	21470.63	42655.00
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) ▶	21470.63	42655.00

III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3)	0.00	232.93
33. Total Contribution Refunds (from Line 28(d))	0.00	0.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	0.00	232.93
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	0.00	0.00
36. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35) ▶	0.00	0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 5 / 11

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
HCA Healthcare Good Government Fund

A.
Full Name (Last, First, Middle Initial)
SunTrust Bank

Mailing Address
PO Box 622227

City: Orlando
State: FL
Zip Code: 32862-2227

FEC ID number of contributing federal political committee.

Name of Employer:
Occupation: Suntrust Bank

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼ 921.87

Date of Receipt
M M D D Y Y Y Y
03 01 2002

Amount of Each Receipt this Period
258.20

Transaction ID: 10000007436600002

B.

C.

SUBTOTAL of Receipts This Page (optional) ..... ▶	**258.20**
TOTAL This Period (last page this line number only) ..... ▶	**258.20**

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
HCA Healthcare Good Government Fund

A.
Full Name (Last, First, Middle Initial): Cantor for Congress
Mailing Address: PO Box 28537
City: Richmond State: VA Zip Code: 23228
Purpose of Disbursement: YTD:$1000.00 Cantor , U.S. HOUSE 73rd VA
Candidate Name: Eric Cantor
24K Category/Type
Office Sought: X House / Senate / President
State: VA District: 73
Disbursement For: 2002 Primary X General Other (specify)
Date of Disbursement: 02 / 27 / 2002
Amount of Each Disbursement this Period: 1000.00
Transaction ID: 10000007433300002

B.
Full Name (Last, First, Middle Initial): Rockefeller for Senate
Mailing Address: 531 Senate Hart Building
City: Washington State: DC Zip Code: 20510-4802
Purpose of Disbursement: YTD:$5000.00 Rockefeller , U.S. SENATE W
Candidate Name: John D. Rockefeller
24K Category/Type
Office Sought: House / X Senate / President
State: WV District:
Disbursement For: 2002 X Primary General Other (specify)
Date of Disbursement: 02 / 28 / 2002
Amount of Each Disbursement this Period: 5000.00
Transaction ID: 10000007433400003

C.
Full Name (Last, First, Middle Initial): Karen Thurman for Congress
Mailing Address: 201 Cannon House Office Building
City: Washington State: DC Zip Code: 20515-0905
Purpose of Disbursement: YTD:$500.00 Karen L. Thurman, U.S. HOUS
Candidate Name: Karen L. Thurman
24K Category/Type
Office Sought: X House / Senate / President
State: FL District: 5
Disbursement For: 2002 X Primary General Other (specify)
Date of Disbursement: 03 / 07 / 2002
Amount of Each Disbursement this Period: 3500.00
Transaction ID: 10000007435800004

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **9500.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
HCA Healthcare Good Government Fund

A.
Full Name (Last, First, Middle Initial)
HCA, Inc.

Mailing Address
One Park Plaza P.O. Box 550
City: Nashville State: TN Zip Code: 37202-0550

Purpose of Disbursement
first class airfare - use of corporate j

Candidate Name

Category/Type: 24Z

Office Sought: House / Senate / President
State: District:

Disbursement For: 2002
Primary X General
Other (specify)

Date of Disbursement: 03 / 07 / 2002

Amount of Each Disbursement this Period: 886.50

(In-Kind)

Transaction ID: 10000007436100005

B.
Full Name (Last, First, Middle Initial)
Re-Elect Nancy Johnson to Congress Committee

Mailing Address
2113 Rayburn House Office Bldg
City: Washington State: DC Zip Code: 20515-0706

Purpose of Disbursement
YTD:51765.16 first class airfare - use o

Candidate Name
Nancy L. Johnson

Category/Type: 24Z

Office Sought: X House / Senate / President
State: CT District: 5

Disbursement For: 2002
Primary X General
Other (specify)

Date of Disbursement: 03 / 07 / 2002

Amount of Each Disbursement this Period: 886.50

[MEMO ITEM]
(Memo In-Kind)

Transaction ID: 10000007436100006

C.
Full Name (Last, First, Middle Initial)
Hilton Suites Downton

Mailing Address
121 Fourth Avenue South
City: Nashville State: TN Zip Code: 37201

Purpose of Disbursement
refreshments for fundraiser

Candidate Name

Category/Type: 24Z

Office Sought: House / Senate / President
State: District:

Disbursement For: 2002
Primary X General
Other (specify)

Date of Disbursement: 03 / 11 / 2002

Amount of Each Disbursement this Period: 898.68

(In-Kind)

Transaction ID: 10000007435900007

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **1765.16**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
HCA Healthcare Good Government Fund

A. Full Name (Last, First, Middle Initial)
Re-Elect Nancy Johnson to Congress Committee

Mailing Address
2113 Rayburn House Office Bldg
City: Washington State: DC Zip Code: 20515-0706

Purpose of Disbursement
YTD:$1765.16 refreshments for fundraiser

Candidate Name
Nancy L. Johnson

Category/Type: 24Z

Office Sought: X House / Senate / President
State: CT District: 6

Disbursement For: 2002 Primary X General / Other (specify)

Date of Disbursement: 03 / 11 / 2002

Amount of Each Disbursement this Period: 898.86

[MEMO ITEM]
(Memo In-Kind)

Transaction ID: 10000007435900008

B. Full Name (Last, First, Middle Initial)
Friends of Clay Shaw

Mailing Address
1512 E. Broward Blvd, Ste 101
City: Ft. Lauderdale State: FL Zip Code: 33301

Purpose of Disbursement
YTD:$1000.00 Clay Shaw, REPRESENTATIVE 2

Candidate Name
E Clay Shaw Jr

Category/Type: 24K

Office Sought: House / Senate / X President
State: FL District: 22

Disbursement For: 2002 X Primary General / Other (specify)

Date of Disbursement: 03 / 12 / 2002

Amount of Each Disbursement this Period: 1000.00

Transaction ID: 10000007436300009

C. Full Name (Last, First, Middle Initial)
Mike Bilirakis Re-Election Committee

Mailing Address
2269 Rayburn Office Bldg
City: Washington State: DC Zip Code: 20515

Purpose of Disbursement
YTD:$2000.00 Bilirakis. U.S. HOUSE 8th F

Candidate Name
Michael Bilirakis

Category/Type: 24K

Office Sought: X House / Senate / President
State: FL District: 8

Disbursement For: 2002 X Primary General / Other (specify)

Date of Disbursement: 03 / 15 / 2002

Amount of Each Disbursement this Period: 2000.00

Transaction ID: 10000007436700010

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **3000.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
HCA Healthcare Good Government Fund

A.
Full Name (Last, First, Middle Initial)
Georgia's Best PAC

Mailing Address
P.O. Box 499
City: Evans State: GA Zip Code: 30809

Purpose of Disbursement
YTD:$500.00 Norwood, REPRESENTATIVE 10th

Candidate Name
Charlie Norwood

24K
Category/ Type

Office Sought: House / Senate / X President
State: GA District: 10

Disbursement For: 2002
X Primary / General / Other (specify)

Date of Disbursement
03 18 2002

Amount of Each Disbursement this Period
500.00

Transaction ID: 1000D0074368000D11

B.
Full Name (Last, First, Middle Initial)
Randy Forbes for Congress

Mailing Address
2371 Rayburn House Office Building
City: Washington State: DC Zip Code: 20515

Purpose of Disbursement
YTD:$500.00 Randy Forbes, U.S. HOUSE 4th

Candidate Name
J. Randy Forbes

24K
Category/ Type

Office Sought: X House / Senate / President
State: VA District: 4

Disbursement For: 2002
X Primary / General / Other (specify)

Date of Disbursement
03 18 2002

Amount of Each Disbursement this Period
500.00

Transaction ID: 1000D0074368000D12

C.

SUBTOTAL of Disbursements This Page (optional) ..... ▶	**1000.00**
TOTAL This Period (last page this line number only) ..... ▶	**15265.16**

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
HCA Healthcare Good Government Fund

A.
Full Name (Last, First, Middle Initial)
Committee to Elect Rick Staton

Mailing Address
P.O. Box 357
City: Mullens | State: WV | Zip Code: 25882

Purpose of Disbursement
Rick Staton, HOUSE OF DELEGATES 23rd WV

Candidate Name
Rick Staton

Category/Type

Office Sought: X House / Senate / President
State: WV District: 23

Disbursement For: 2002
X Primary / General / Other (specify)

Date of Disbursement
03 / 07 / 2002

Amount of Each Disbursement this Period
300.00

Transaction ID: 10000007433800D13

B.
Full Name (Last, First, Middle Initial)
Committee to Elect Bob Kiss

Mailing Address
P.O. Box 2556
City: Beckley | State: WV | Zip Code: 25802

Purpose of Disbursement
Robert Kiss, HOUSE OF DELEGATES 27th WV

Candidate Name
Robert Kiss

Category/Type

Office Sought: X House / Senate / President
State: WV District: 27

Disbursement For: 2002
X Primary / General / Other (specify)

Date of Disbursement
03 / 07 / 2002

Amount of Each Disbursement this Period
500.00

Transaction ID: 10000007433800D14

C.
Full Name (Last, First, Middle Initial)
Internal Revenue Service

Mailing Address

City: Ogden | State: UT | Zip Code: 84201

Purpose of Disbursement
Form 1120-POL tax due

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement
03 / 12 / 2002

Amount of Each Disbursement this Period
2038.00

Transaction ID: 10000007436200D15

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2838.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
HCA Healthcare Good Government Fund

A.

Full Name (Last, First, Middle Initial)
SunTrust Bank

Mailing Address
PO Box 622227

City: Orlando
State: FL
Zip Code: 32862-2227

Purpose of Disbursement
account analysis fees

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement
03 19 2002

Amount of Each Disbursement this Period
167.47

Transaction ID: 10000007437000018

B.

C.

SUBTOTAL of Disbursements This Page (optional) ..... ▶	**167.47**
TOTAL This Period (last page this line number only) ..... ▶	**3005.47**