FEC FORM 3X	AN	PORT O ID DISBU Other Than A	JRSEM	ENTS	ee		Office Use Only	
1. NAME OF COMMITTEE (in fi		FEC MAILING LA		ample:If typing er the lines	, type			
PHYSICIAN HOSF		ERICA POLITICAI		MMITTEE				
Check if differ than previousl reported. (ACC	W C)	/ ashington					20024	
2. FEC IDENTIFICAT C00394163		¥ _	CITY A 3. IS THIS REPOR		NEW N) OR	X AMI (A)	ZIPCOE	
July 15 Quarterly October Quarterly January 3 Quarterly July 31 M Report(N Year Onl	orts: Report(Q1) Report(Q2) 15 Report(Q3) 31 Report(YE) Iid-Year on-election	b) Monthly Report Due On: (c) 12-Day PRE-Elec Report for (d) 30-Day Post -Ele Report for	Election on)	12C)	X Sep 2	2G) in the State of	Special (30S)
5. Covering Period I certify that I have exam Type or Print Name of T Signature of Treasurer NOTE : Submission of f	reasurer	John Richardson r Filed by John F	f my knowledge		Da	ate 06		2 0 1 1 S.C 437g.
Office Use Only							FEC FORI (Rev. 12/200	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name PHYSICIAN HOSPITALS OF AMERICA POLITICAL ACTION COMMITTEE мм DD Y Y Y ММ D Y D 01 31 08 2008 0.8 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 6. 2008[°] 190176.06 January 1 (b) Cash on Hand at 38210.44 Begining of Reporting Period 11500.00 48850.00 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 49710.44 239026.06 6(a) and 6(c) for Column B) 18542.58 207858.20 Total Disbursements (from Line 31) 7. Cash on Hand at Close of 8. **Reporting Period** 31167.86 31167.86 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed то the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed BY the committee (Itemize all on 0.00 Schedule C and/or Schedule D)

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

FE6AN026

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3 Write or Type Committee Name PHYSICIAN HOSPITALS OF AMERICA POLITICAL ACTION COMMITTEE м м 08 01 м м 08 3^D1 D 2008 D 2008 To: Report Covering the Period: From: **COLUMN A COLUMN B** I. Receipts **Total This Period Calendar Year-to-Date** 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 11500.00 46600.00 (i) Itemized (use Schedule A) 0.00 2250.00 (ii) Unitemized (iii) TOTAL (add 11500.00 48850.00 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees (C) 0.00 0.00 (such as PACs) (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 11500.00 48850.00 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 11500.00 48850.00 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 11500.00 48850.00 (subtract Line 18(c) from Line 19)

FE6AN026

DETAILED SUMMARY PAGE of Disbursements

COLUMN A

FEC Form 3X (Rev. 02/2003)

II DISBUBSEMENTS

		II. DISBURSEMENTS	
21.	Ope (a)	erating Expenditures: Shared Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share	
	(b)	(ii) Non-Federal Share Other Federal Operating	
	(c)	Expenditures Total Operating Expenditures	
22.	Tra	(add 21(a)(i), (a)(ii) and (b))	
23.	Cor Cor	nmittees tributions to leral Candidates/Committees Other Political Committees	
24.	Inde	ependent Expenditure	
25.	Coc	e Schedule E) ordinated Expenditures Made by Party nmittees (2 U.S.C. 441a(d)) e Schedule F)	
26.	Loa	n Repayments Made	
27. 28.		ns Made unds of Contributions To: Individuals/Persons Other Than Political Committees	
	(b) (c)	Political Party Committees Other Political Committees	
	(d)	(such as PACs) Total Contribution Refunds	

Total This Period				
	0.00			
	0.00			
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	42.58			
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COLUMN B						
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207858.20

Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..

29. Other Disbursements.....

30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6)

(i) Federal Share

(ii) "Levin" Share (b) Federal Election Activity Paid Entirely With Federal Funds (c) Total Federal Election Activity (add

32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....

FE6AN026

207858.20

Page 4

DETAILED SUMMARY PAGE

of Disbursements

	FEC Form 3X (Rev. 02/2003)	or Dispuisements	Page 5
	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	11500.00	48850.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	11500.00	48850.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	42.58	358.20
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	42.58	358.20

FE6AN026

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 14 (check only one) X 11a 11b 11c 12
	and Statements may not be sold or used by any perso	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	g the name and address of any political committee to ERICA POLITICAL ACTION COMMITTEE	Sonich Contributions from SUCN Committee.
Full Name (Last, First, Middle Initial) Timothy M. Dettmer		Date of Receipt
Mailing Address 250 South Crescer	nt Drive	M M / D D / Y Y Y Y 08 25 2008
City	State Zip Code	Transaction ID: SA11AI.5941
Mason City	IA 50402	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Mason City Clinic	Occupation Physician	- Contribution
Receipt For:	Aggregate Year-to-Date V	-
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Manuel G. Guajardo		Date of Receipt
Mailing Address 4740 North Expres	ssway	M M / D D / Y Y Y Y 08 25 2008
City	State Zip Code	Transaction ID: SA11AI.5939
Brownsville	TX 78526	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		1000.00
Name of Employer Obstetrics & Gynecology	Occupation Physician	- Contribution
Receipt For:	Aggregate Year-to-Date	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Donald Maschka		Date of Receipt
Mailing Address 250 South Crescer	nt	M M / D D / Y Y Y Y 08 20 2008
City	State Zip Code	Transaction ID: SA11AI.5938
Mason City FEC ID number of contributing	IA 50402	Amount of Each Receipt this Period
federal political committee.		250.00
Name of Employer Mason City Clinic	Occupation Physician	- Contribution
Receipt For:	Aggregate Year-to-Date V	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Respire This Page (artist		1500.00
	nal)	1500

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	SCHEDULE A (FEC Form 3X)		Use separate for each cate	e schedule(s)	FOR LINE NUMBER: PAGE 7 / 14 (check only one)
	ITEMIZED RECEIPTS		Detailed Sun		X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements may name and add	not be sold or u lress of any poli	used by any persor tical committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) PHYSICIAN HOSPITALS OF AMERIC	A POLITICA	L ACTION C	OMMITTEE	
Α.	Full Name (Last, First, Middle Initial) Oklahoma Heart Hospital LLC				Date of Receipt
	Mailing Address 4050 West Memorial				M M / D D / Y Y Y Y 08 27 2008
	City	State	Zip Code		Transaction ID: SA11AI.5943
	Oklahoma City	OK	73120		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			5000.00
	Name of Employer	Occupation	1		- See Void 9/11/2008
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date	5000.00	
в.	Full Name (Last, First, Middle Initial) Robert Sauers				Date of Receipt
	Mailing Address 2310 Highland Avenue				M M / D D / Y Y Y Y 08 27 2008
	City	State	Zip Code		Transaction ID: SA11AI.5942
	Bethlehem	PA	18020		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		· · ·	5000.00
	Name of Employer Surg Specialty Ctr Coord Hlth.	Occupation CEO	1		Contribution
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date	5000.00	

SUBTOTAL of Receipts This Page (optional)	►	10000.00
TOTAL This Period (last page this line number only)	►	11500.00

9	CHEDULE B (FEC Form	3X)			NUMBER: PAGE 8/14
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0	r for commercial purposes, other than usin	ng the name and addre	ss of any political	committee to so	licit contributions from such committee
	NAME OF COMMITTEE (In Full)				
	PHYSICIAN HOSPITALS OF AM	ERICA POLITICAL	ACTION COM	MITTEE	
Ľ	Full Name (Last, First, Middle Initial)				Transaction ID: SB21B.5944
Α.	Wells Fargo Bank				Date of Disbursement
					08 / D D / Y Y Y Y Y 08 / 12 / 2008
	Mailing Address P.O. Box 5128				08 12 2008
	City	State	Zip Code		Amount of Each Disbursement this Period
	Sioux Falls	SD	57117-5128		
	Purpose of Disbursement				38.50
	Bank Fee				
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	Senate	Primary	General		
	President	Other (spe	ecify) 🔻		
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в.	Full Name (Last, First, Middle Initial)				Transaction ID: SB21B.5945
р.	Wells Fargo Bank				Date of Disbursement
	Mailing Address P.O. Box 5128				08 ^M / 12 ^J / 2008 ^Y
	City Sioux Falls	State SD	Zip Code		Amount of Each Disbursement this Period
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	Purpose of Disbursement Bank Fee				
	Candidate Name			Category/	
				Туре	
	Office Sought: House	Disbursement For:			
	Senate	Primary	General		
	President	Other (spe	ecify) 🔻		
	State: District:				

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SUBTOTAL of Disbursements This Page (optional)	•	42.58

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r for commercial purposes, other than using the na	me and address of any politic	al committee to	solicit contributions from such committee									
NAME OF COMMITTEE (In Full) PHYSICIAN HOSPITALS OF AMERICA												
FITTSICIAN HOSFITALS OF AWIERICA												
Full Name (Last, First, Middle Initial)			Transaction ID: SB23.5951									
TEXANS FOR SENATOR JOHN CORNY	'N INC		Date of Disbursement									
Mailing Address 6850 AUSTIN CENTRE SUITE 180	BLVD											
City AUSTIN	StateZip CodeTX78731		Amount of Each Disbursement this Period									
Purpose of Disbursement			3000.00									
Contribution Candidate Name		Category/										
JOHN CORNYN		Type										
	sement For: 2008											
X Senate President	Primary X General Other (specify) ▼											
State: TX District:	· · · · · · · · · · · · · · · · · · ·											
Full Name (Last, First, Middle Initial)			Transaction ID: SB23.5969									
TIBERI FOR CONGRESS			Date of Disbursement									
Mailing Address 2021 E Dublin Granville Suite 2000	e Road		M M / D 2 6 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y									
City Columbus	StateZip CodeOH43229		Amount of Each Disbursement this Period									
Purpose of Disbursement Contribution			1000.00									
Candidate Name PATRICK J TIBERI		Category/ Type										
Office Sought: X House Disbur Senate President State: OH District: 12	sement For: 2008 Primary X General Other (specify) ▼											
Full Name (Last, First, Middle Initial)			Transaction ID: SB23,5979									
VOICE FOR FREEDOM			Date of Disbursement									
Mailing Address 2814 Spring Road Ste.	103		08 / 29 / ¥ Y									
City Atlanta	State Zip Code GA 30339		Amount of Each Disbursement this Period									
Purpose of Disbursement			1000.00									
Candidate Name		Category/ Type										
		1 78-5	—									
Senate President	sement For: Primary General Other (specify) ▼											
Senate	Primary General											
Senate President	Primary General Other (specify) V		5000.00									