

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED 2011 NOV -8 AM 10:40 FEC MAIL CENTER

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

HEALTH TEXAS MEDICAL GROUP FEDERAL PAC

ADDRESS (number and street)

6243 IH 10 WEST

SUITE 480

SAN ANTONIO

TX

78201

(Check if address is changed)

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

Jeannine.Ruffner@healthtexas.org

(Check if address is changed)

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE

10 / 27 / 2011

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT

X

NEW (N)

OR

AMENDED (A)

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

Type or Print Name of Treasurer

Jeannine Ruffner

Signature of Treasurer

Jeannine Ruffner

Date

11 / 02 / 2011

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

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only

For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 02/2009)

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5. TYPE OF COMMITTEE

Candidate Committee:

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate _____

Candidate Party Affiliation Office Sought: House Senate President State District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
 - Corporation Corporation w/o Capital Stock Labor Organization
 - Membership Organization Trade Association Cooperative
 - In addition, this committee is a Lobbyist/Registrant PAC.
- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
 - In addition, this committee is a Lobbyist/Registrant PAC.
 - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____ FEC ID number C _____
2. _____ FEC ID number C _____
3. _____ FEC ID number C _____
4. _____ FEC ID number C _____

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Write or Type Committee Name

HEALTH TEXAS MEDICAL GROUP FEDERAL PAC

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

HEALTH TEXAS MANAGEMENT COMPANY, LLC.

Mailing Address

6243 IH 10 WEST

SUITE 480

SAN ANTONIO TX 78201

CITY STATE ZIP CODE

Relationship: [X] Connected Organization [] Affiliated Committee [] Joint Fundraising Representative [] Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

JEANNINE RUFFNER

Mailing Address

6243 IH 10 WEST

SUITE 480

SAN ANTONIO TX 78201

Title or Position CITY STATE ZIP CODE

TREASURER

Telephone number 210 - 731 - 4848

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

JEANNINE RUFFNER

Mailing Address

6243 IH 10 WEST

SUITE 480

SAN ANTONIO TX 78201

CITY STATE ZIP CODE

Title or Position

TREASURER

Telephone number 210 - 731 - 4848

11030684567

Full Name of Designated Agent

ROWLAND REYNA, MD

Mailing Address

6243 IH 10 WEST

SUITE 480

SAN ANTONIO

TX

78201

CITY

STATE

ZIP CODE

Title or Position

ASSISTANT TREASURER

Telephone number

210

731

4824

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

IBC CENTRE

Mailing Address

130 E TRAVIS

SAN ANTONIO

TX

78205

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

11030684568

(Continuation Sheet for FEC FORM 1)

HEALTH TEXAS MEDICAL GROUP FEDERAL PAC

Line 6: HEALTH TEXAS MEDICAL GROUP PAC

Address: 6243 IH 10 WEST
SUITE 480
SAN ANTONIO, TX 78201

Relationship: AFFILIATED COMMITTEE

11030684569

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

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11/2/11

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 11/8/11
 PREPARER DATE PREPARED

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