

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

Fresenius Medical Care North America PAC

ADDRESS (number and street) 801 Pennsylvania Avenue, NW
 Suite 255
 Check if different than previously reported. (ACC)
 Washington DC 20004

2. **FEC IDENTIFICATION NUMBER** C00401299

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

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

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

(c) 12-Day **PRE-Election** Report for the:

- Primary (12P)
- Convention (12C)
- General (12G)
- Special (12S)
- Runoff (12R)

Election on _____ in the State of _____

(d) 30-Day **Post -Election** Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on _____ in the State of _____

5. Covering Period 07 01 2010 through 07 31 2010

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 Kathleen Smith

Signature of Treasurer Electronically Filed by Kathleen Smith Date 08 09 2010

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							
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Fresenius Medical Care North America PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		7329.72
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	5285.18									
(c) Total Receipts (from Line 19)	8652.27	54626.29								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	13937.45	61956.01								
7. Total Disbursements (from Line 31)	7530.00	55548.56								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	6407.45	6407.45								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Fresenius Medical Care North America PAC

Report Covering the Period: From: To:

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)	7764.62	45982.44
(ii) Unitemized	887.65	8643.85
(iii) TOTAL (add Lines 11(a)(i) and (ii)	8652.27	54626.29
(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 33, page 5)	8652.27	54626.29
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 37, page 5)	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.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (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)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	8652.27	54626.29
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	8652.27	54626.29

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	30.00	548.56
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	30.00	548.56
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7500.00	55000.00
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.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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
(c) Total Federal Election Activity (add 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))..	7530.00	55548.56
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7530.00	55548.56

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	8652.27	54626.29
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8652.27	54626.29
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	30.00	548.56
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	30.00	548.56

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 16
(check only one)
 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)
Fresenius Medical Care North America PAC

A. Full Name (Last, First, Middle Initial)
Charles E Brown

Mailing Address 4640 Glen Coe Street

City State Zip Code
Leesburg FL 34748-2304

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Fresenius Medical Care NA Clinical Manager

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 31 / 2010

Transaction ID: 00809.C2251

Amount of Each Receipt this Period 40.00

Receipt

Payroll Deduction: (40.00- /Monthly)

B. Full Name (Last, First, Middle Initial)
Claire Callahan

Mailing Address 920 Winter St

City State Zip Code
Waltham MA 02451-1521

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Fresenius Medical Care NA SVP Human Resources & Admin

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1815.00

Date of Receipt 07 / 31 / 2010

Transaction ID: 00809.C2203

Amount of Each Receipt this Period 330.00

Receipt

Payroll Deduction: (330.0-0 /Monthly)

C. Full Name (Last, First, Middle Initial)
David Carter

Mailing Address 5215 Wiltonwood Ct

City State Zip Code
Indianapolis IN 46254-9665

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Fresenius Medical Care NA VP Operations

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 975.00

Date of Receipt 07 / 31 / 2010

Transaction ID: 00809.C2265

Amount of Each Receipt this Period 130.00

Receipt

Payroll Deduction: (130.0-0 /Monthly)

SUBTOTAL of Receipts This Page (optional) 500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Fresenius Medical Care North America PAC

A. Full Name (Last, First, Middle Initial)
Simon D Castellanos

Mailing Address 2670 S Youngfield Ct

City State Zip Code
Denver CO 80228-4937

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Fresenius Medical Care NA Business Unit President

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1731.00

Date of Receipt M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 00809.C2205

Amount of Each Receipt this Period 230.80

Receipt

Payroll Deduction: (230.8-0/Monthly)

B. Full Name (Last, First, Middle Initial)
Steven P Covino

Mailing Address 6 Williams Street

City State Zip Code
Waltham MA 02453-4131

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Fresenius Medical Care NA Director of Benefits

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 288.45

Date of Receipt M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 00809.C2209

Amount of Each Receipt this Period 38.46

Receipt

Payroll Deduction: (38.46-/Monthly)

C. Full Name (Last, First, Middle Initial)
Nicole Devore

Mailing Address 801 Pennsylvania Ave NW
Suite 225

City State Zip Code
Washington DC 20004-2604

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Fresenius Medical Care NA Director

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 288.45

Date of Receipt M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 00809.C2217

Amount of Each Receipt this Period 38.46

Receipt

Payroll Deduction: (38.46-/Monthly)

SUBTOTAL of Receipts This Page (optional) 307.72

TOTAL This Period (last page this line number 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 8 / 16
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Fresenius Medical Care North America PAC

A.	Full Name (Last, First, Middle Initial) Carol A Ernst	Date of Receipt MM / DD / YYYY 07 / 31 / 2010
	Mailing Address 22370 N 64th Ave	Transaction ID: 00809.C2213
	City State Zip Code Glendale AZ 85310-4259	Amount of Each Receipt this Period 76.92
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Fresenius Medical Care NA Area Manager	Payroll Deduction: (76.92- /Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 576.90	

B.	Full Name (Last, First, Middle Initial) Mark R Fawcett	Date of Receipt MM / DD / YYYY 07 / 31 / 2010
	Mailing Address 100 Franklin Street	Transaction ID: 00809.C2268
	City State Zip Code Arlington MA 02474-3214	Amount of Each Receipt this Period 76.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Fresenius Medical Care NA Director	Payroll Deduction: (76.00- /Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1170.00	

C.	Full Name (Last, First, Middle Initial) James Freedman	Date of Receipt MM / DD / YYYY 07 / 31 / 2010
	Mailing Address 269 Rolling Meadow	Transaction ID: 00809.C2216
	City State Zip Code Holliston MA 01746-1521	Amount of Each Receipt this Period 80.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Fresenius Medical Care NA VP Leadership & Prof Dev	Payroll Deduction: (80.00- /Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional)	▶	232.92
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Fresenius Medical Care North America PAC

A. Full Name (Last, First, Middle Initial)
Balaji Gandhi

Mailing Address 920 Winter St

City State Zip Code
Waltham MA 02451-1521

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Fresenius Medical Care NA VP Govt & External Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 00809.C2291

Amount of Each Receipt this Period 100.00

Receipt

Payroll Deduction: (100.0-0/Monthly)

B. Full Name (Last, First, Middle Initial)
Kimberly Grelle-Swint

Mailing Address 6100 Bandera Rd Suite 600

City State Zip Code
San Antonio TX 78238-1667

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Fresenius Medical Care NA Regional Director of Education

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 288.45

Date of Receipt M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 00809.C2280

Amount of Each Receipt this Period 38.46

Receipt

Payroll Deduction: (38.46-/Monthly)

C. Full Name (Last, First, Middle Initial)
Susan Johnson

Mailing Address 1206 Oak Park Rd

City State Zip Code
Council Bluffs IA 51503-1358

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Fresenius Medical Care NA Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: 00809.C2290

Amount of Each Receipt this Period 50.00

Receipt

Payroll Deduction: (50.00-/Monthly)

SUBTOTAL of Receipts This Page (optional) 188.46

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Fresenius Medical Care North America PAC

A. Full Name (Last, First, Middle Initial)
Matthew D Kinser

Mailing Address 750 Old Hickory Blvd
Suite 230

City State Zip Code
Brentwood TN 37027-4528

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Fresenius Medical Care NA VP Managed Care

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 576.90

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 00809.C2226

Amount of Each Receipt this Period
76.92

Receipt

Payroll Deduction: (76.92-
/Monthly)

B. Full Name (Last, First, Middle Initial)
Douglas G. Kott

Mailing Address 211 Claybook Rd.

City State Zip Code
Dover MA 02030-2008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Fresenius Medical Care NA Director

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1923.10

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 00809.C2207

Amount of Each Receipt this Period
384.62

Receipt

Payroll Deduction: (384.6-
2/Monthly)

C. Full Name (Last, First, Middle Initial)
Carmen Maddocks

Mailing Address 4629 E Chandler Blvd #100

City State Zip Code
Phoenix AZ 85048-0429

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Fresenius Medical Care NA Clinical Manager

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 538.44

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 00809.C2225

Amount of Each Receipt this Period
38.46

Receipt

Payroll Deduction: (38.46-
/Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ **500.00**

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

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

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

FOR LINE NUMBER: PAGE 11 / 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Fresenius Medical Care North America PAC

A. Full Name (Last, First, Middle Initial)
Robert McGorty

Mailing Address 2 Walter Circle

City State Zip Code
Westford MA 01886-4533

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Fresenius Medical Care NA VP Finance & Admin

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1730.70

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: 00809.C2233

Amount of Each Receipt this Period
230.76

Receipt

Payroll Deduction: (230.7-6/Monthly)

B. Full Name (Last, First, Middle Initial)
Judith Moran

Mailing Address 2201 South Clinton Ave
2nd Floor

City State Zip Code
South Plainfield NJ 07080-1473

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Fresenius Medical Care NA Regional Vice President

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 288.45

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: 00809.C2208

Amount of Each Receipt this Period
38.46

Receipt

Payroll Deduction: (38.46-/Monthly)

C. Full Name (Last, First, Middle Initial)
Donna M Painter

Mailing Address 105 W 7th Avenue
Suite 1000

City State Zip Code
Corsicana TX 75110-6449

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Fresenius Medical Care NA Regional VP

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: 00809.C2235

Amount of Each Receipt this Period
30.00

Receipt

Payroll Deduction: (30.00-/Monthly)

SUBTOTAL of Receipts This Page (optional) ► **299.22**

TOTAL This Period (last page this line number 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 12 / 16
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Fresenius Medical Care North America PAC

A.

Full Name (Last, First, Middle Initial)
Brian Riddle

Mailing Address 8 Brookside Ct

City State Zip Code
Methuen MA 01844-1245

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Fresenius Medical Care NA Dir Compliance Audits

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 288.45

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 00809.C2240

Amount of Each Receipt this Period
38.46

Receipt

Payroll Deduction: (38.46- /Monthly)

B.

Full Name (Last, First, Middle Initial)
Robert Sepucha

Mailing Address 920 Winter St

City State Zip Code
Waltham MA 02451-1521

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Fresenius Medical Care NA SVP, Government Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
07 / 26 / 2010

Transaction ID: 00809.C2195

Amount of Each Receipt this Period
5000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Kim Sonnen

Mailing Address 240 S Madison St

City State Zip Code
Denver CO 80209-3010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Fresenius Medical Care NA SVP Marketing & Managed Care

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1950.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: 00809.C2243

Amount of Each Receipt this Period
260.00

Receipt

Payroll Deduction: (260.0-0 /Monthly)

SUBTOTAL of Receipts This Page (optional) ► **5298.46**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 16
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Fresenius Medical Care North America PAC

A.

Full Name (Last, First, Middle Initial)
Liam Walsh

Mailing Address 5809 Chatham Ln

City State Zip Code
The Colony TX 75056-7109

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Fresenius Medical Care NA VP Finance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1005.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: 00809.C2248

Amount of Each Receipt this Period
134.00

Receipt

Payroll Deduction: (134.0-0/Monthly)

B.

Full Name (Last, First, Middle Initial)
Deborah A. Wells

Mailing Address 100 Galleria Pkwy SE Suite 500

City State Zip Code
Atlanta GA 30339-3179

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Fresenius Medical Care NA Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1153.80

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: 00809.C2289

Amount of Each Receipt this Period
153.84

Receipt

Payroll Deduction: (153.8-4/Monthly)

C.

Full Name (Last, First, Middle Initial)
Jeffrey West

Mailing Address 401 Plymouth Road Suite 500

City State Zip Code
Plymouth Meeting PA 19462-1726

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Fresenius Medical Care NA VP Managed Care

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: 00809.C2293

Amount of Each Receipt this Period
150.00

Receipt

Payroll Deduction: (150.0-0/Monthly)

SUBTOTAL of Receipts This Page (optional)	437.84
TOTAL This Period (last page this line number only)	7764.62

**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)

PAGE 14 / 16

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
Fresenius Medical Care North America PAC

A.

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

Mailing Address PO Box 75000

City Detroit State MI Zip Code 48275-0001

Purpose of Disbursement
Bank Service Charge

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00713.E205

Date of Disbursement

/ /

Amount of Each Disbursement this Period

BANK SERVICE CHARGE

SUBTOTAL of Disbursements This Page (optional) ▶

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Fresenius Medical Care North America PAC

A. CONTINUING A MAJORITY PARTY ACTION COMMITTEE (CAM-PAC) Mailing Address 2501 Wisconsin Avenue, NW Number 304 City Washington State DC Zip Code 20007-6824 Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name CONTINUING A MAJORITY PARTY ACTION COMMITTEE (CAM-PAC) Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: annual/other	Transaction ID: 00809.E209 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00 DIRECT CONTRIBUTION
B. BLUE DOG POLITICAL ACTION COMMITTEE Mailing Address 236 Massachusetts Ave NE Suite 603 City Washington State DC Zip Code 20002-4980 Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name BLUE DOG POLITICAL ACTION COMMITTEE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: annual/other	Transaction ID: 00809.E210 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00 DIRECT CONTRIBUTION
C. Stephanie Herseth-Sandlin for S. Dakota Mailing Address PO Box 75214 City Washington State DC Zip Code 20013-0214 Purpose of Disbursement DIRECT CONTRIBUTION Candidate Name STEPHANIE HERSETH Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: SD District: 00	Transaction ID: 00809.E207 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00 DIRECT CONTRIBUTION

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Fresenius Medical Care North America PAC

A. Full Name (Last, First, Middle Initial)
Re-Elect Jim McGovern Committee

Mailing Address PO Box 60405

City Worcester State MA Zip Code 01606-0405

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name
JIM P MCGOVERN

Office Sought: House
 Senate
 President

State: MA District: 03

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: 00809.E211
Date of Disbursement

07 / 29 / 2010

Amount of Each Disbursement this Period

1000.00

DIRECT CONTRIBUTION

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

Mailing Address P.O. Box 75214

City Washington State DC Zip Code 20013-9336

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name
EARL RALPH POMEROY

Office Sought: House
 Senate
 President

State: ND District: 00

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: 00809.E206
Date of Disbursement

07 / 14 / 2010

Amount of Each Disbursement this Period

2500.00

DIRECT CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
Ciro D. Rodriguez for Congress

Mailing Address PO Box 14528

City San Antonio State TX Zip Code 78214-0528

Purpose of Disbursement
DIRECT CONTRIBUTION

Candidate Name
CIRO D. RODRIGUEZ

Office Sought: House
 Senate
 President

State: TX District: 23

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: 00809.E208
Date of Disbursement

07 / 14 / 2010

Amount of Each Disbursement this Period

1000.00

DIRECT CONTRIBUTION

SUBTOTAL of Disbursements This Page (optional) ►

4500.00

TOTAL This Period (last page this line number only) ►

7500.00