FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines AMERICAN SURGICAL HOSPITAL ASSOCIATION POLITICAL ACTION COMMITTEE 600 S. Cliff Ave. ADDRESS (number and street) Suite 106 Check if different than previously Sioux Falls SD 5355 57104 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. CITY A ZIPCODE A IS THIS **AMENDED** NEW C00394163 Х REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year Х (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 0 1 0 1 2007 06 30 2007 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Douglas Johnson Type or Print Name of Treasurer Electronically Filed by Douglas Johnson 07 3 1 2007 Signature of Treasurer Date 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 **FEC FORM 3X** Use (Rev. 02/2003) Only

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name AMERICAN SURGICAL HOSPITAL ASSOCIATION POLITICAL ACTION COMMITTEE D D [®] D 0 1 0 1 2007 0.6 3 0 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand [°]2007 13684.77 January 1 (b) Cash on Hand at 13684.77 Begining of Reporting Period 57440.00 57440.00 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 71124.77 71124.77 6(a) and 6(c) for Column B) 50110.55 50110.55 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 21014.22 21014.22 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 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. 02/2003) Page 3

Write or Type Committee Name

AMERICAN SURGICAL HOSPITAL ASSOCIATION POLITICAL ACTION COMMITTEE

0 1 м N 0 1 м ₆м 2007 3 0 2007 Report Covering the Period: From: To: **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 51240.00 51240.00 (i) Itemized (use Schedule A) 1200.00 1200.00 (ii) Unitemized (iii) TOTAL (add 52440.00 52440.00 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 52440.00 52440.00 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 5000.00 5000.00 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), 57440.00 57440.00 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 57440.00 57440.00 (subtract Line 18(c) from Line 19)

from Line 31).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4 **COLUMN A COLUMN B II. DISBURSEMENTS Total This Period** Calendar Year-to-Date 21. Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4) 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 110.55 110.55 Expenditures..... (c) Total Operating Expenditures 110.55 110.55 (add 21(a)(i), (a)(ii) and (b))............ 22. Transfers to Affiliated/Other Party 0.00 0.00 Committees..... Contributions to 23. Federal Candidates/Committees.....and Other Political Committees..... 50000.00 50000.00 24. Independent Expenditure 0.00 0.00 0.00 0.00 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 27. Loans Made..... 28. Refunds of Contributions To: Individuals/Persons Other 0.00 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs) (d) Total Contribution Refunds 0.00 0.00 (add Lines 28(a), (b), and (c)) 0.00 0.00 29. Other Disbursements..... 30. Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity (from Schedule H6) 0.00 0.00 (i) Federal Share 0.00 0.00 (ii) "Levin" Share (b) Federal Election Activity Paid Entirely 0.00 0.00 With Federal Funds (c) Total Federal Election Activity (add 0.00 0.00 Lines 30(a)(i), 30(a)(ii) and 30(b)).... 31. Total Disbursements (add Lines 21(c), 22, 50110.55 50110.55 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii)

50110.55

50110.55

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures			
33.	Total Contributions (other than loans) from Line 11(d), page 3)	52440.00	52440.00	
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00	
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	52440.00	52440.00	
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	110.55	110.55	
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00	
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	110.55	110.55	

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9							
SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS				FOR LINE NUMBER: PAGE 6 / 36 (check only one) X 11a 11b 11c 12			
				13 14 15 16 17			
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and ado	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
\rangle	NAME OF COMMITTEE (In Full) AMERICAN SURGICAL HOSPITAL ASS	SOCIATIO	N POLITICAL ACTION COM	MITTEE			
Α.	Full Name (Last, First, Middle Initial) Samir Abu-Ghazaleh			Date of Receipt			
	Mailing Address 8901 E. Hidden Valley R	oad		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City	State	Zip Code	Transaction ID: SA11A1.4701			
	Sioux Falls	SD	57110	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		1500.00			
	Name of Employer Sioux Falls Surgical Cent-	Occupation		7			
	er	Physiciar					
	Receipt For: Primary General	Aggregate	Year-to-Date ▼				
	Other (specify)		1500.00				
В.	Full Name (Last, First, Middle Initial) Carlos Acosta			Date of Receipt			
	Mailing Address 811 W I-20			M M / D D / Y Y Y Y			
	Suite 132			03 21 2007			
	City	State	Zip Code	Transaction ID: SA11A1.4675			
	Arlington	TX	76017	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		2000.00			
	Name of Employer Arlington Neurosurgical	Occupation					
	Assoc Receipt For:	Neurosur	geon • Year-to-Date ▼	_			
	Primary General	Aygregate	: Teal-10-Date V	1			
	Other (specify) ▼		2000.00				
<u> </u>	Full Name (Last, First, Middle Initial) Arlington Association of Neurological Surgeons, PA			Date of Receipt			
	Mailing Address 1001 N. Waldrop Drive #	‡801		03 16 2007			
	City	State	Zip Code	Transaction ID: SA11A1.4670			
	Arlington	TX	76012	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		1000.00			
	Name of Employer	Occupation	1				
	Receipt For:	Aggregate	e Year-to-Date ▼	-			
	Primary General	35 3		1			
	Other (specify)		1000.00				
6	URTOTAL of Receipts This Page (optional)			4500.00			

TOTAL This Period (last page this line number only)

PAGE 7/36 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 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) AMERICAN SURGICAL HOSPITAL ASSOCIATION POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) Date of Receipt Scott Becker Mailing Address 77 W. Wacker Dr., Suite 4100 05 23 2007 City State Zip Code Transaction ID: SA11A1.4699 Chicago IL 60601 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. Name of Employer McGuire Woods Occupation Attorney Aggregate Year-to-Date ▼ Receipt For: Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. James Case Date of Receipt Mailing Address 575 Sioux Point Road 0.4 30 2007 City State Zip Code Transaction ID: SA11A1.4691 **Dakota Dunes** SD 57049 Amount of Each Receipt this Period FEC ID number of contributing C 750.00 federal political committee. Name of Employer Ctr for Neuroscience Orth-Occupation Neurosurgeon opaed Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) C. Paula Formosa Date of Receipt Mailing Address 561 Prairie Passage 03 23 2007 Citv State Zip Code Transaction ID: SA11A1.4677 Dakota Dunes SD 57049 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer Self-Employed Occupation Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2250.00 SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

TOTAL This Period (last page this line number only)

PAGE 8/36 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 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) AMERICAN SURGICAL HOSPITAL ASSOCIATION POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) Date of Receipt Mark Fox Mailing Address 6401 E Quartzite Drive 06 29 2007 City State Zip Code Transaction ID: SA11A1.4714 Sioux Falls SD 57110 Amount of Each Receipt this Period FEC ID number of contributing 3500.00 C federal political committee. Name of Employer North Center Occupation Neurosurgeon Aggregate Year-to-Date ▼ Receipt For: Primary General 3500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Tom Hall Date of Receipt Mailing Address 409 Rivervalley Court 03 28 2007 City State Zip Code Transaction ID: SA11A1.4679 Arlington TX 76006 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Urology Associates of N. Occupation Chief Executive Officer Texas Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. Douglas Johnson Date of Receipt Mailing Address 600 S. Cliff Ave. 04 30 2007 Suite 106 Citv State Zip Code Transaction ID: SA11A1.4689 Sioux Falls SD 57104-5355 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer Surgical Mgmt. Profession-Occupation President Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 5000.00 SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

PAGE 9/36 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the ITEMIZED RECEIPTS 11a 11b 11c **Detailed Summary Page** 13 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) AMERICAN SURGICAL HOSPITAL ASSOCIATION POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) Date of Receipt J. Daniel Johnson, M.D., P.A. Mailing Address 1300 West Terrell Avenue #405 03 12 2007 City State Zip Code Transaction ID: SA11A1.4664 Fort Worth TX 76104 Amount of Each Receipt this Period FEC ID number of contributing 2000.00 C federal political committee. Name of Employer Urology Associates of N.T-Occupation Urologist exas Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Paul Johnson Date of Receipt Mailing Address 309 West Pinehurst Trail 0 6 04 2007 City State Zip Code Transaction ID: SA11A1.4703 **Dakota Dunes** SD 57049 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Midlands Clinic Occupation Surgeon Receipt For: Aggregate Year-to-Date V Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) C. Robert C. Johnson Date of Receipt Mailing Address 1200 S. Euclid 0.1 15 2007 Citv State Zip Code Transaction ID: SA11A1.4632 Sioux Falls SD 57105 Amount of Each Receipt this Period FEC ID number of contributing 2000.00 C federal political committee. Name of Employer Urology Associates Occupation Urologist Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) 5000.00 SUBTOTAL of Receipts This Page (optional)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

TOTAL This Period (last page this line number only)

PAGE 10/36 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 l 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) AMERICAN SURGICAL HOSPITAL ASSOCIATION POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) Date of Receipt William Katzenmeyer Mailing Address 3964 S. Ramsey 02 12 2007 City State Zip Code Transaction ID: SA11A1.4650 **Baton Rouge** 70808 Amount of Each Receipt this Period FEC ID number of contributing 250.00 C federal political committee. Name of Employer Baton Rouge Ear, Nose & Occupation Physician Throat Aggregate Year-to-Date ▼ Receipt For: Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Thomas Kenny Date of Receipt Mailing Address 956 Pebble Beach Drive 0.4 30 2007 City Zip Code State Transaction ID: SA11A1.4693 **Dakota Dunes** SD 57049 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer lowa Health System Occupation Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) C. Peter Looby Date of Receipt Mailing Address 5021 South Old Yankton Place 05 23 2007 Citv State Zip Code Transaction ID: SA11A1.4698 Sioux Falls SD 57108 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer Orthopedic Institute Occupation Orthopedic Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 2250.00 SUBTOTAL of Receipts This Page (optional)

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Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the	atements may name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.				
\rangle	NAME OF COMMITTEE (In Full) AMERICAN SURGICAL HOSPITAL AS	SOCIATIO	N POLITICAL ACTION COM	1MITTEE				
Α.	Full Name (Last, First, Middle Initial) Marius Maxwell			Date of Receipt				
	Mailing Address 4141 5th Street			03 16 2007				
	City	State	Zip Code	Transaction ID: SA11A1.4671				
	Rapid City FEC ID number of contributing federal political committee.	SD	57701	Amount of Each Receipt this Period 2000.00				
	Name of Employer The Spine Center	Occupation Neurosur						
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2000.00					
В.	Full Name (Last, First, Middle Initial) McIntodd Partners LP			Date of Receipt				
	Mailing Address 1335 Cecile Drive			03 / 16 / Y Y Y Y Y Y Y				
	City	State	Zip Code	Transaction ID: SA11A1.4668				
	Cedar Hill	TX	75104	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		2000.00				
	Name of Employer	Occupation	1					
	Receipt For:	Aggregate	Year-to-Date ▼	7				
	Primary General Other (specify) ▼		2000.00					
<u> </u>	Full Name (Last, First, Middle Initial) Douglas Neilson			Date of Receipt				
Ο.	Mailing Address 1000 West 4th Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	City	State	Zip Code	Transaction ID: SA11A1.4709				
	Yankton FEC ID number of contributing	SD	57078	Amount of Each Receipt this Period 1000.00				
	federal political committee.	C		1000.00				
	Name of Employer Self-Employed	Occupation Surgeon	1					
	Receipt For:		e Year-to-Date ▼					
	Primary General Other (specify) ▼		1000.00					
s	UBTOTAL of Receipts This Page (optional)			5000.00				

TOTAL This Period (last page this line number only)

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Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	atements may	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions				
\setminus	NAME OF COMMITTEE (In Full)							
$ \rangle$	AMERICAN SURGICAL HOSPITAL AS	SOCIATIO	N POLITICAL ACTION COM	1MITTEE				
_	Full Name (Last, First, Middle Initial)							
A.	Thorir Ragnarsson			Date of Receipt				
	Mailing Address 1375 Fox Ridge Tr.			M M / D D / Y Y Y Y Y				
	City	State	Zip Code	0 6 0 4 2 0 0 7 Transaction ID: SA11A1.4705				
	Sioux City	IA	51104	Amount of Each Receipt this Period				
	FEC ID number of contributing							
	federal political committee.	C		1000.00				
	Name of Employer Ctr for Neuroscience Orth-	Occupation	ı					
	.& Sp Receipt For:	Surgeon	Year-to-Date ▼	_				
	Primary General	Aggregate	rear-to-Date V	1				
	Other (specify) ▼	0 0	1000.00					
— В.	Full Name (Last, First, Middle Initial) Richard Ratino			Date of Receipt				
	Mailing Address 1583 Plum Creek Road			M M / D D / Y Y Y Y				
	011		7: 0 1	04 04 2007				
	City Sioux City	State IA	Zip Code	Transaction ID: SA11A1.4683				
		IA	51103	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		1000.00				
	Name of Employer Siouxland Women's Healthc-	Occupation	ı					
	are Receipt For:	OB/GYN	Year-to-Date ▼	_				
	Primary General	Aggregate	rear-to-Date V	1				
	Other (specify) ▼		1000.00					
<u> </u>	Full Name (Last, First, Middle Initial) Ralph Reeder			Date of Receipt				
	Mailing Address 675 Arrowhead Court			03 23 7 2007				
	City	State	Zip Code	Transaction ID: SA11A1.4676				
	<u>Dakota Dunes</u>	SD	57049	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		1000.00				
	Name of Employer	Occupation	1	7				
	Ctr. for Neurosciences & Orth.	Surgeon		_				
	Receipt For:	Aggregate	Year-to-Date ▼					
	Primary General Other (specify) ▼		1000.00					
	UBTOTAL of Receipts This Page (optional)			3000.00				

TOTAL This Period (last page this line number only)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar	ny information copied from such Reports and Statement for commercial purposes, other than using the name an	s may not be sold or used by any person ad address of any political committee to s	of for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) AMERICAN SURGICAL HOSPITAL ASSOCIA	•	
Α.	Full Name (Last, First, Middle Initial) Stuart Rice		Date of Receipt
	Mailing Address 2300 Skyline Ranch Road		03 16 2007
	City Star Rapid City SD	'	Transaction ID: SA11A1.4672
	FEC ID number of contributing federal political committee.	57701	Amount of Each Receipt this Period 2000.00
	The Spine Cenfer	pation rosurgeon	
	Receipt For: Primary General Other (specify)	egate Year-to-Date ▼ 2000.00	
В.	Full Name (Last, First, Middle Initial) William Rizk		Date of Receipt
	Mailing Address 457 Firethorn Tr.		04 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Star Dakota Dunes SD	te Zip Code 57049	Transaction ID: SA11A1.4695
	FEC ID number of contributing federal political committee.	37049	Amount of Each Receipt this Period 750.00
	Midlanda Clinia	pation sician	
	Receipt For: Primary General Other (specify) ▼	regate Year-to-Date ▼ 750.00	
<u>с</u> .	Full Name (Last, First, Middle Initial) Jacob Rosenstein		Date of Receipt
	Mailing Address 800 W. Arbrook Boulevard No. 150		03 12 2007
	City State Arlington TX	te Zip Code 76015	Transaction ID: SA11A1.4666 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		2000.00
	N. Tex. Neurosúrgical Consult.	pation rosurgeon regate Year-to-Date ▼ 2000.00	- -
s	UBTOTAL of Receipts This Page (optional)	<u></u>	4750.00
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			Detailed Summary Page	13 14 15 16 17							
Ar	ny information copied from such Reports and State for commercial purposes, other than using the nan	ements may me and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.							
\setminus	NAME OF COMMITTEE (In Full)										
	AMERICAN SURGICAL HOSPITAL ASSO	OCIATION	N POLITICAL ACTION COM	IMITTEE							
Α.	Full Name (Last, First, Middle Initial) Mary Schneider			Date of Receipt							
	Mailing Address 2233 Pueblo Court			04 04 2007							
	City	State	Zip Code	Transaction ID: SA11A1.4686							
	Sioux City	IA	51104	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		1000.00							
	Siouxland Women's Healthc-	Occupation OB/GYN		7							
	ale		Year-to-Date ▼								
	Primary General	199.59		1							
	Other (specify) ▼	0 0	1000.00								
В.	Full Name (Last, First, Middle Initial) Stephen Sessums			Date of Receipt							
	Mailing Address 7763 Copperfield Court			02 12 2007							
	City	State	Zip Code	Transaction ID: SA11A1.4653							
	Baton Rouge	LA	70808	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		1000.00							
	Children's Eve Center	Occupation Opthamo									
		•	Year-to-Date ▼	-							
	Primary General	riggrogato		1							
	Other (specify) ▼	0 0	1000.00								
<u> </u>	Full Name (Last, First, Middle Initial) Sioux Falls Surgical Center, L.L.P.			Date of Receipt							
	Mailing Address 910 E. 20th Street			M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O							
	City	State	Zip Code	Transaction ID: SA11A1.4634							
	Sioux Falls	SD	57105	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		10000.00							
	Name of Employer	Occupation		1							
		Aggregate	Year-to-Date ▼								
	Primary General	'''	10000.00] [
	Other (specify) ▼		1.5555.55	1							
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TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)		FOR LINE NUMBER: PAGE 15/36									
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Ar or	ly information copied from such Reports and State for commercial purposes, other than using the nar	ements may me and add	not be sold or used by any ped dress of any political committee	erson for erson for erson for the erson for	or the purpose of soliciting contributions licit contributions from such committee.									
\setminus	NAME OF COMMITTEE (In Full)													
\rangle	AMERICAN SURGICAL HOSPITAL ASSO	OCIATIO	N POLITICAL ACTION C	OMM	ITTEE									
Α.	Full Name (Last, First, Middle Initial) Anna Smither				Date of Receipt									
	Mailing Address 2945 Tradition Avenue				0 2 1 2 2 0 0 7									
	City	State	Zip Code		Transaction ID: SA11A1.4656									
	Baton Rouge	LA	70810		Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C			250.00									
	Louiciana Hrology	Occupation Urologist												
	Receipt For:		Year-to-Date ▼											
	Primary General	1 1												
	Other (specify) ▼		250.00											
В.	Full Name (Last, First, Middle Initial) Dean Spartz				Date of Receipt									
	Mailing Address 1000 Jackson Street				$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$									
	City	State	Zip Code		Transaction ID: SA11A1.4681									
	Sioux City	IA	51105		Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C			1000.00									
	Signivland Women's Healths.	Occupation	1											
	are	OB/GYN												
	Receipt For:	Aggregate	e Year-to-Date ▼											
	Primary General	' '	1000.00											
	Other (specify)	0 0	1000.00											
_	Full Name (Last, First, Middle Initial) Keith A. Vollstedt				Date of Receipt									
C.					·									
	Mailing Address 4511 Grayhawk Ridge Dri	ive			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$									
	City	State	Zip Code		Transaction ID: SA11A1.4684									
	Sioux City	IA	51106	ŀ	Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C		1000.00										
	General Surgery & Diagnos-	n Surgeon												
	tics Receipt For:		Year-to-Date ▼											
	Primary General	33 -3-110												
	Other (specify) ▼		1000.00	0										
Г					0050.00									
S	UBTOTAL of Receipts This Page (optional)			•	2250.00									

TOTAL This Period (last page this line number only)

C]		FOR LINE NUMBER: PAGE 16/36						
SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	(check only one)						
ITEMIZED RECEIPTS			or each category of the	X 11a 11b 11c 12						
			Detailed Summary Page	13 14 15 16 17						
۸r	y information copied from such Reports and Sta	tomonte may	y not be cold or used by any person							
or	for commercial purposes, other than using the n	ame and add	froit be sold of used by any personal stress of any political committee to	o solicit contributions from such committee.						
	NAME OF COMMITTEE (In Full)									
$ \rangle$	AMERICAN SURGICAL HOSPITAL AS	SOCIATIO	N POLITICAL ACTION COM	MMITTEE						
	AMERICAN SONGICAL NOSI TIAL AS	SOCIATIO	NT CEITICAL ACTION CON							
	Full Name (Last, First, Middle Initial)									
A.	Kirke Wheeler			Date of Receipt						
	Mailing Address 5000 S. Sweetbriar Drive	<u></u> е		M M / D D / Y Y Y Y						
				06 12 2007						
	City	State	Zip Code	Transaction ID: SA11A1.4713						
	Sioux Falls	SD	57108	Amount of Each Receipt this Period						
	FEC ID number of contributing			4500.00						
	federal political committee.	C		1500.00						
				_						
	Name of Employer Surgical Associates	Occupation	1							
		Surgeon								
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General	' '	1500.00] [
	U Other (specify) ▼	1 1	1000.00	J.						
В.	Full Name (Last, First, Middle Initial) Mark E. Wheeler			Date of Receipt						
Ь.				†						
	Mailing Address 32788 K22			04 10 2007						
	City	State	Zip Code	Transaction ID: SA11A1.4688						
	Sioux City	IA	51108	Amount of Each Receipt this Period						
	•	IA	31108	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		1000.00						
	rederal political committee.									
	Name of Employer Center for Neuroscience	Occupation	1	7						
	Center for Neuroscience	Neurosur	geon							
	Receipt For:	Aggregate	Year-to-Date 🔻	7						
	Primary General		100000	1						
	Other (specify) ▼		1000.00							
_	Full Name (Last, First, Middle Initial)									
C.	Carey Winder			Date of Receipt						
	Mailing Address 866 Woodgate Boulevar	rd		02 27 2007						
	City	Ctata	Zin Codo							
	City	State	Zip Code	Transaction ID: SA11A1.4662						
	Baton Rouge	LA	70808	Amount of Each Receipt this Period						
	FEC ID number of contributing	С		250.00						
	federal political committee.									
	Name of Employer	Occupation	า	┥						
	Baton Rouge Orthopaedic Clinic	Orthopae								
	Receipt For:	· · · · · · · · · · · · · · · · · · ·	Year-to-Date ▼	7						
	Primary General	33 -3-4		1						
	Other (specify) ▼		250.00							
				4						
	UBTOTAL of Receipts This Page (optional)		.	2750.00						
\vdash				-						

TOTAL This Period (last page this line number only)

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

NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial)

FEC ID number of contributing

federal political committee.

Name of Employer Siouxland Anesthesiology

Other (specify)

FEC ID number of contributing

federal political committee.

Other (specify)

Name of Employer Orthopedic Institute

Primary

Full Name (Last, First, Middle Initial)

Mailing Address 305 Pennbrook Circle

Mailing Address 915 Willow Circle

General

General

C

C

Occupation Orthopedics

Aggregate Year-to-Date ▼

990.00

Robert Zimmerman

Dakota Dunes

Receipt For:

B. Timothy Zoellner

Sioux Falls

Receipt For:

City

Primary

City

PAGE 17/36 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 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. AMERICAN SURGICAL HOSPITAL ASSOCIATION POLITICAL ACTION COMMITTEE Date of Receipt 0.4 3 0 2007 State Zip Code Transaction ID: SA11A1.4697 SD 57049 Amount of Each Receipt this Period 1500.00 Occupation Physician Aggregate Year-to-Date ▼ 1500.00 Date of Receipt 06 04 2007 Transaction ID: SA11A1.4707 State Zip Code SD 57106 Amount of Each Receipt this Period 990.00

SUBTOTAL of Receipts This Page (optional)	•	2490.00
TOTAL This Period (last page this line number only)	<u> </u>	51240.00

FOR LINE NUMBER: PAGE 18/36 Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c Detailed Summary Page 13 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) AMERICAN SURGICAL HOSPITAL ASSOCIATION POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) CONGRESSIONAL MAJORITY COMMITTEE Date of Receipt Mailing Address P.O. BOX 746 06 12 2007 City State Zip Code Transaction ID: SA16.4710 Bakersfield CA 93302 Amount of Each Receipt this Period FEC ID number of contributing 5000.00 C C00117721 federal political committee. Refund of Contribution Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	5000.00
TOTAL This Period (last page this line number only)	•	5000.00

	Use seperate schedule(s)		check or		ly one)						
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	<u></u>	´ –	X 23 28b	24 28c		25 29	П	26 30b
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or for commercial purposes, other than using the nam											
NAME OF COMMITTEE (In Full)											
/ AMERICAN SURGICAL HOSPITAL ASSO	CIATION POLITICAL ACT	ΠΟΝ	1 COM	MITT	EE						
Full Name (Last, First, Middle Initial)							: SB23.4	1911			
A. ABERCROMBIE FOR CONGRESS				_ D	ate of	Disburs		Y Y	Y	Υ	
Mailing Address c/o 1357 Kapiolani Blvd.	Ste. 1005				0 6	2	21 /	2	0 ŏ 7		
City Honolulu	State Zip Code HI 96814			А	mount	of Each	Disburse	emen	t this F	erio	d
Purpose of Disbursement	90014		_	+ [1	1000.0	00	П
Contribution				"					-		
Candidate Name NEIL ABERCROMBIE			egory/ vpe								
	ement For: 2008										
Senate X President	Primary General Other (specify) ▼										
State: HI District: 01	(-) , \										
Full Name (Last, First, Middle Initial)				Tı	ransad	ction ID	: SB23.4	1867			
BASS VICTORY COMMITTEE				_		Disburs		V - V	,	V	
Mailing Address PO Box 3451					0 3]	5 /	ž	0 ŏ 7	Y	
City Concord	State Zip Code NH 03302			A	mount	of Each	Disburs	emen	t this F	erio	d
Purpose of Disbursement Voided 11/3/2006 Contribution		-						-2	2000.0	00	
Candidate Name CHARLES F. BASS											
Office Sought: X House Disburse	ement For: 2006		•								
Senate	Primary X General										
State: NH District: 02	Other (specify)										
Full Name (Last, First, Middle Initial)				Tı	ransac	ction ID	: SB23.4	1886			
BEN CHANDLER FOR CONGRESS				D		Disburs		V . V		V	
Mailing Address P. O. Box 12678					04	/ D	9 /	ž	0 ŏ 7	Y	
City Lexington	State Zip Code KY 40508			A	mount	of Each	Disburse	emen	t this F	erio	d
Purpose of Disbursement Contribution		•	•					1	1000.0	00	
Candidate Name A.B. III CHANDLER	L		egory/								
Office Sought: X House Disburse	ement For: 2008	.,	11.5	1							
	Primary General										
State: KY District: 6	Other (specify)										
2.5							• • •			_	_
SUBTOTAL of Disbursements This Page (optional)			. •						0.0	0	
TOTAL This Period (last page this line number only)			•								

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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 28a	23 28b	24 28c	25 29	26 30b					
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NAME OF COMMITTEE (In Full)	and address of any political co	illillillee to soi	icit continbuti	10115 110111 5	uch com	muee						
AMERICAN SURGICAL HOSPITAL ASSOC	CIATION POLITICAL ACT	ION COMM	ITTEE									
Full Name (Last, First, Middle Initial) A. BLUE DOG POLITICAL ACTION COMMIT	ΓΕΕ			on ID: SB								
Mailing Address 6849 Old Dominion Drive Suite 222			0 1 M	25	/ Y 2	0 ŏ 7	Y					
	State Zip Code VA 22101		Amount of	f Each Disk			-					
Purpose of Disbursement Contribution	Г				į	5000.00	0					
Candidate Name		Category/ Type										
President	nent For: 2007 Primary General Other (specify)											
State: District: Other Full Name (Last, First, Middle Initial)				05								
3. CARDOZA FOR CONGRESS				on ID: SB	nt		v .					
Mailing Address 555 Capitol Mall Suite 143	failing Address 555 Capitol Mall Suite 1425						05 7 0 1 7 2 0 0 7					
•	State Zip Code CA 95814		Amount of	f Each Disk			-					
Purpose of Disbursement Contribution						1000.0	J					
Candidate Name DENNIS CARDOZA		Category/ Type										
President	nent For: 2008 Primary General Other (specify)											
State: CA District: 18												
Full Name (Last, First, Middle Initial) CATHY MCMORRIS FOR CONGRESS			Date of Di	on ID: SB: isbursemer	nt		-					
Mailing Address Box 137			0 3	15	/ L 2	0 0 7	Ť					
,	State Zip Code NA 99210		Amount of	f Each Disk			-					
Purpose of Disbursement Voided 11/3/2006 Contribution					-/2	2000.00	0					
Candidate Name CATHY ANN MCMORRIS		Category/ Type										
Office Sought: X House Disburser Senate President State: WA District: 05	nent For: 2006 Primary X General Other (specify)											
SUBTOTAL of Disbursements This Page (optional)				•	4	000.00	<u> </u>					
		······· <u>F</u>		• • • •	• •	• •	-					
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SCHEDOLL B (I LCI OIIII 37	Use seperate schedule(s) FOR LINE (check onl	NUMBER: PAGE 21/36
ITEMIZED DISBURSEMENT	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30
Any Information copied from such Reports an			
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and address of any politica	di committee to sc	oncit contributions from such committee
AMERICAN SURGICAL HOSPITAL	. ASSOCIATION POLITICAL A	CTION COMM	NITTEE
Full Name (Last, First, Middle Initial)			Transaction ID: SB23.4883
CHARLES BOUSTANY JR MD FO	R CONGRESS INC		Date of Disbursement
Mailing Address Post Office Box 8	0126		04 4 7 05 7 2007
City Lafayette	State Zip Code LA 70598		Amount of Each Disbursement this Period
Purpose of Disbursement	271 70000		1000.00
Contribution			
Candidate Name CHARLES DR. JR. BOUSTANY		Category/ Type	
Office Sought: X House Senate	Disbursement For: 2008 X Primary General		
President	Other (specify)		
State: LA District: 07			
Full Name (Last, First, Middle Initial)			Transaction ID: SB23.4862
CHARLIE DENT FOR CONGRESS			Date of Disbursement
Mailing Address PO Box 442			03 12 7 2007
City Allentown	State Zip Code PA 18105		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution			1000.00
Candidate Name CHARLES W DENT		Category/	
	Disbursement For: 2008	Туре	
Senate	X Primary General		
President	Other (specify)		
State: PA District: 15 Full Name (Last, First, Middle Initial)			
CITIZENS FOR HARKIN			Transaction ID: SB23.4888 Date of Disbursement
Mailing Address P O BOX 811			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & A \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & A \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & O & O & T \\ Y & D & O & O & T \end{bmatrix}$
City DES MOINES	State Zip Code IA 50304		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution			1000.00
Candidate Name THOMAS RICHARD HARKIN		Category/ Type	
Office Sought: House	Disbursement For: 2008		
X Senate	X Primary General		
State: IA District: 00	Other (specify)		
			3000.00
SUBTOTAL of Disbursements This Page (c	ptional)	······	3000.00
TOTAL This Period (last page this line num	ber only)	>	

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Any Information copied from such Reports and Statem or for commercial purposes, other than using the name							•
NAME OF COMMITTEE (In Full)	and address of any pointed oc				30011 0011		
AMERICAN SURGICAL HOSPITAL ASSO	CIATION POLITICAL ACT	ION COMM	ITTEE				
Full Name (Last, First, Middle Initial)					B23.485	8	
COBURN FOR SENATE 2010			Date of D			YY	Υ
Mailing Address POST OFFICE BOX 977			0,3	05		ž 0 ŏ 7	
	State Zip Code OK 74402		Amount o	f Each Di	sburseme		-
Purpose of Disbursement Contribution						5000.0	0
Candidate Name THOMAS A COBURN		Category/ Type					
	ment For: 2010						
X Senate President	Primary X General Other (specify) ▼						
State: OK District: 00							
Full Name (Last, First, Middle Initial) CONGRESSMAN JOE BARTON COMMIT	TEE TUE		Transact			4	
CONGRESSIMAN JOE BARTON COMMIT	ICC, INC		Date of D	/ D D		Y Y _	Υ
Mailing Address P.O. Box 1444			0 4	11		ž o ŏ 7	
,	State Zip Code TX 75120		Amount o	f Each Di	sburseme	nt this P	eriod
Purpose of Disbursement Contribution	Γ					1000.0	0
Candidate Name JOE LINUS BARTON	-	Category/ Type					
	ment For: 2008 Primary General Other (specify)						
State: TX District: 06							
Full Name (Last, First, Middle Initial) DAVE CAMP FOR CONGRESS 2008			Transact Date of D		B23.4880 ent	0	
Mailing Address 5915 EASTMAN AVE. S	UITE 100		0,3	16	/ Y	ž 0 ŏ 7	Y
•	State Zip Code MI 48640		Amount o	f Each Di	sburseme	nt this P	eriod
Purpose of Disbursement Contribution	Γ	• •				5000.0	0
Candidate Name DAVID LEE CAMP		Category/ Type					
	ment For: 2008 Primary General Other (specify)						
SUBTOTAL of Disbursements This Page (optional) .					1	1000.0	0
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	y Information copied from such Reports and State for commercial purposes, other than using the nar									3
\rangle	NAME OF COMMITTEE (In Full) AMERICAN SURGICAL HOSPITAL ASSO									
۹.	Full Name (Last, First, Middle Initial) EARL POMEROY FOR CONGRESS					f Disburs	SB23.4 ement		0 ŏ 7	Y
	Mailing Address P.O. Box 9336				0 2				007	
	City Fargo	State ND	Zip Code 58106		Amour	nt of Each	Disburse			-
	Purpose of Disbursement Contribution							- 1	0.000	00
	Candidate Name EARL RALPH POMEROY			ategory/ Type						
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	State: ND District: 00 Full Name (Last, First, Middle Initial)				Tuene	ation ID	CD00.4	001		
3.	EARL POMEROY FOR CONGRESS				Date o	f Disburs	SB23.4 ement		Υ	Y
	Mailing Address P.O. Box 9336				0 3		6	2	0 Ď 7	
	City Fargo	State ND	Zip Code 58106		Amour	nt of Each	Disburse			-
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	Candidate Name EARL RALPH POMEROY			ategory/ Type						
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Э.	Full Name (Last, First, Middle Initial) FREEDOM FUND					action ID: f Disburs	: SB23.4 ement	863		
	Mailing Address 1155 21st Street NW Suite 300				0,3	/ D 1	^D / Y	ž	0 ŏ 7	Y
	City Washington	State DC	Zip Code 20036		Amour	nt of Each	Disburse	ment	this P	eriod
	Purpose of Disbursement Contribution			•				5	000.0	00
	Candidate Name			ategory/ Type						
	Senate	Primary Other (spe	2007 General cify)							
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ITEMIZED DISBURS	EMENTS	for each catego Detailed Summ			21b 27	22 28		23 28b	24 28c	П	25 29	_	26 30b
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NAME OF COMMITTEE (In	<u>~</u>	e and address of a	ariy political col	111111	illee lo s	SOIICIL CC	munbu	uons m	JIII SUCII	COITIII	iiilee		_
AMERICAN SURGICAL	- /	CIATION POLI	TICAL ACTI	101	I COM	MITTE	E						
Full Name (Last, First, Middl	,					1			SB23.4	885			
FRIENDS OF BARBAR	A BOXER					Da	te of D)isburse		Y Y	· v	Y	
Mailing Address PO BC	X 641751					Ő	4	1	3 /	2	0 ŏ 7		
City LOS ANGELES		State Zip CA 900	Code 064			Am	ount c	of Each	Disburse	ement	this P	eriod	_
Purpose of Disbursement Contribution			Г	-	-	Ţ L				_ 1	0.000	0	_
Candidate Name BARBARA BOXER					egory/								
Office Sought: Hous	e Disburse	ment For:	2010	.,	P •	1							
χ Sena		Primary Other (specify)	General										
State: CA District:		Other (specify)	▼										
Full Name (Last, First, Middl	e Initial)					Tra	nsact	ion ID:	SB23.4	871			_
FRIENDS OF CLAY SH.	AW					Da	te of D	isburse	ement		* \		
	lox 2188 IE 14th. Street Ca	ıseway				0		1	5 /	ž	0 Ď 7	Y	
City Fort Lauderdale		State Zip G	Code 303			Am	ount o	of Each	Disburse	ement	this P	eriod	_
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Candidate Name E CLAY JR SHAW					egory/ rpe								
Office Sought: X Hous			2006										
Sena Presi		Primary X Other (specify)	General										
State: FL District:		[(-р))	V										
Full Name (Last, First, Middl FRIENDS OF GORDON	,							i on ID: Disburse	SB23.4 ement	906			
Mailing Address 228 S	WASHINGTON S	ΓE 115				o ^N	6 M	/ D 1	5 /	ž	0 ŏ 7	Y	
City ALEXANDRIA		State Zip (Code 314			Am	ount o	of Each	Disburse	ement	this Po	eriod	_
Purpose of Disbursement Contribution				_	-	L				1	0.000	0	
Candidate Name GORDON HAROLD SM	ITH				egory/								
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χ Sena Presi		Other (specify)	General ▼										
State: OR District:	00												
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	y Information copied from such Reports and Statem for commercial purposes, other than using the name										;	
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\rangle	AMERICAN SURGICAL HOSPITAL ASSO	CIATION POLITICAL A	CTIO	N COM	IMITTE	E						
	Full Name (Last, First, Middle Initial)							SB23.4	1872			
٦.	FRIENDS OF MAX BURNS						Disburse / D		y	· · ·	Y	
	Mailing Address P.O. Box 1965					3 M	1	5 /	2	0 ŏ 7		
	,	State Zip Code GA 30467			Ar	nount	of Each	Disburse	emen	t this P	eriod	
	Purpose of Disbursement	<u>un 50401</u>		•	$+$ Γ				-2	2000.0	0	
	Voided 11/3/2006 Contribution											
	Candidate Name O MAXIE BURNS			tegory/ Type								
	Office Sought: X House Disburse Senate	ement For: 2006 Primary X General										
	President	Other (specify)										
	State: GA District: 12											
3.	Full Name (Last, First, Middle Initial) FRIENDS OF MIKE FERGUSON							SB23.4	1874			
	- I AILINDS OF MIKE I ENGOSON					м м	Disburse / D		Y Y	Υ	Υ	
	Mailing Address c/o Ron Gravino P.O.	Box 225) 3	1	5 /	2	0 ŏ 7		
	,	State Zip Code NJ 07067			Ar	nount (of Each	Disburse	emen	t this P	eriod	
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	Voided 11/3/2006 Contribution Candidate Name			/								
	MIKE FERGUSON			tegory/ Γype								
	X	ement For: 2006										
	Senate President	Primary X General Other (specify)										
	State: NJ District: 07	Carlot (opcony)										
).	Full Name (Last, First, Middle Initial) FRIENDS OF MIKE SODREL						tion ID: Disburse	SB23.4	1873			
						M M		5 /	YYY	0 ŏ 7	Υ	
	Mailing Address 702 North Shore Drive St											
	,	State Zip Code IN 47130			Ar	nount	of Each	Disburse	emen	t this P	eriod	-
	Purpose of Disbursement Voided 11/3/2006 Contribution			•	1 L				-2	2000.0	0	
	Candidate Name MICHAEL E. SODREL			tegory/ Type								
	Office Sought: X House Disburse	ement For: 2006	ļ									
	Senate President	Primary X General Other (specify) ▼										
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AMERICAN SURGICAL HOSPITAL ASSO	CIATION POLITICAL ACT	ΓΙΟΝ (COMN	NITTEE					
Full Name (Last, First, Middle Initial)				Trans	action ID	: SB23.4	1870		
GEOFF DAVIS FOR CONGRESS					of Disburs				
Mailing Address 3161 Dixie Highway Suite F				0,3	M / D.	15	ž	ŏ7 [°]	
City	State Zip Code			Amou	nt of Each	n Disburs	ement t	his Pe	riod
Erlanger	KY 41018						-20	00.00	
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Candidate Name GEOFFREY C DAVIS		Catego Type	-						
Office Sought: X House Disburse Senate	ement For: 2006 Primary X General								
State: KY District: 04	Other (specify)								
Full Name (Last, First, Middle Initial)				_		0000	1001		
GINGREY FOR CONGRESS				Date of	action ID of Disburs	ement		V . V	7
Mailing Address PO Box U				0,3	W / 2	23 /	' 2 C	Ŏ7 [°]	
City Marietta	State Zip Code GA 30060			Amou	nt of Each	n Disburs			-
Purpose of Disbursement Contribution				L.			10	00.00) .
Candidate Name PHILLIP J. GINGREY		Catego Type	-						
Senate X President	ement For: 2008 Primary General Other (specify)								
State: GA District: 11									
Full Name (Last, First, Middle Initial) HEATHER WILSON FOR CONGRESS					action ID of Disburs	ement	1875		
Mailing Address P.O. BOX 14070				0 ^M 3	M / D.	15	Ý Ž C	δ7 [°]	
City ALBUQUERQUE	State Zip Code NM 87191			Amou	nt of Each	n Disburs	ement t	his Pe	riod
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Candidate Name HEATHER A. WILSON		Catego							
Office Sought: X House Disburse Senate President State: NM District: 01	ement For: 2006 Primary X General Other (specify)								
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AMERICAN SURGICAL HOSPITAL ASSO	CIATION POLITICAL ACT	ION COMM	IITTEE				
Full Name (Last, First, Middle Initial)				_	B23.488	32	
HEATH SHULER FOR CONGRESS				Disbursem		V	V
Mailing Address PO Box 8446			0 3	28	3 /	ž 0 ŏ 7	
City Asheville	State Zip Code NC 28814		Amount	of Each D	isbursem		
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Candidate Name JOSEPH H SHULER		Category/ Type					
A THE	ment For: 2008 Primary General						
State: NC District: 11	Other (specify)						
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HEATH SHULER FOR CONGRESS			Date of D	Disbursem	nent		Y
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Candidate Name JOSEPH H SHULER		Category/ Type					
9 🕺	ment For: 2008 Primary General Other (specify)						
State: NC District: 11	-						
Full Name (Last, First, Middle Initial) HERSETH FOR CONGRESS				t ion ID: S Disbursem	B23.485 nent	54	
Mailing Address PO Box 2009			0 2	1 2) / Y	ž 0 ŏ 7	Y
City Sioux Falls	State Zip Code SD 57101		Amount	of Each D	isbursem	ent this P	eriod
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Candidate Name STEPHANIE HERSETH		Category/ Type					
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Full Name (Last, First, Middle Initial)						SB23.4	1912		
HERSETH FOR CONGRESS					Disburs		Y Y	Υ	Y
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	State Zip Code SD 57101			Amoun	t of Each	Disburse	ement	this Pe	eriod
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Candidate Name STEPHANIE HERSETH		Category/ Type							
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President	Other (specify)								
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Full Name (Last, First, Middle Initial) JIM COSTA FOR CONGRESS					ction ID: Disburs	SB23.4	1855		
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Mailing Address 2037 W Bullard Avenue # 355				0 2		2	2 (J 0 7	
,	State Zip Code CA 93711			Amoun	t of Each	Disburs	ement	this Pe	eriod
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Candidate Name JIM MR COSTA		Category/ Type	-						
Office Sought: X House Disburse	ment For: 2008	1 300							
	Primary General								
State: CA District: 20	Other (specify) ▼								
Full Name (Last, First, Middle Initial) JIM RAMSTAD VOLUNTEER COMMITTEE	<u> </u>				ction ID:	: SB23.4	1859		
				0 3 M		5 /	YYY	0 ŏ 7	Y
Mailing Address 1809 Plymouth Road Sou				-					
,	State Zip Code MN 55305			Amoun	t of Each	Disburse	ement	this Pe	eriod
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Candidate Name JIM RAMSTAD	-	Category/ Type	-						
Office Sought: X House Disburse	ment For: 2008	71							
Senate X President	Primary General								
State: MN District: 03	Other (specify) ▼								
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	y Information copied from such Reports and Statem for commercial purposes, other than using the name								
\rangle	NAME OF COMMITTEE (In Full) AMERICAN SURGICAL HOSPITAL ASSO								
۹.	Full Name (Last, First, Middle Initial) JIM RAMSTAD VOLUNTEER COMMITTEE Mailing Address 1809 Plymouth Road Sou				Date of	action ID: of Disburse			Ď 7 [×]
	,	State Zip Code MN 55305			Amou	nt of Each	Disburse	ement th	is Period
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	Candidate Name JIM RAMSTAD Office Sought: X House Disburse	ment For: 2008		tegory/ ype					
		Primary General Other (specify) ▼							
3.	Full Name (Last, First, Middle Initial) JOHN D. DINGELL FOR CONGRESS COI	MMITTEE			Date	action ID: of Disburse	ement		
	Mailing Address 607 14th Street N.W. Suite 800		0 1	M / DO) 5 /	ž0	Ŏ 7 Y		
	Washington	State Zip Code DC 20005			Amou	nt of Each	Disburse		is Period
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	JOHN D MR. DINGELL			ype					
	X	ment For: 2008 Primary General Other (specify)							
Э.	Full Name (Last, First, Middle Initial) JON PORTER FOR CONGRESS COMMIT	TEE			Date of	action ID: of Disburse	ement	876	
	Mailing Address 1420 CYRESS CREEK R	RD STE 200-320			0,3	M / D	5 /	ž0	Ď 7 ^Y
	CÉDAR PARK	State Zip Code TX 78613			Amou	nt of Each	Disburse		is Period
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	Senate President State: TX District: 31	Primary X General Other (specify) ▼							
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ITEN	MIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
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\ NA	ME OF COMMITTEE (In Full) MERICAN SURGICAL HOSPITAL	· ·		
4. M	Il Name (Last, First, Middle Initial) AC COLLINS FOR CONGRESS uiling Address P.O. Box 962			Transaction ID: SB23.4877 Date of Disbursement O 3 M / D 5 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Cit Ja	y ckson	State Zip Code GA 30233		Amount of Each Disbursement this Period
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MI	ndidate Name CHAEL ALLEN COLLINS		Category/ Type	
	fice Sought: X House Senate President District: 08	Disbursement For: 2006 Primary X General Other (specify) ▼		
-	ll Name (Last, First, Middle Initial) ARION BERRY FOR CONGRESS			Transaction ID: SB23.4893 Date of Disbursement
Ma	iling Address P.O. BOX 8084			$\begin{bmatrix} \begin{smallmatrix} M & 5 & M \\ 0 & 5 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$
Cit JC	y NNESBORO	State Zip Code AR 72403		Amount of Each Disbursement this Period
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	fice Sought: X House Senate President ate: AR District: 01	Disbursement For: 2008 X Primary General Other (specify) ▼		
•	ll Name (Last, First, Middle Initial) ATHESON FOR CONGRESS			Transaction ID: SB23.4896 Date of Disbursement
Ma	iling Address PO Box 521048 Suite A			$\begin{bmatrix} M & M & M \\ O & G & M \end{bmatrix} / \begin{bmatrix} D & D \\ O & G \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ Z & O & O & T \end{bmatrix}$
Cit Sa	y ılt Lake City	State Zip Code UT 84152		Amount of Each Disbursement this Period
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	ndidate Name MES DAVID MATHESON		Category/ Type	
	fice Sought: X House Senate President District: 02	Disbursement For: 2008 X Primary General Other (specify) ▼		
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\rangle	NAME OF COMMITTEE (In Full) AMERICAN SURGICAL HOSPITAL ASSO							
۹.	Full Name (Last, First, Middle Initial) MCCONNELL SENATE COMMITTEE '08				Transaction II	sement		Y
	Mailing Address PO BOX 1496				03 / 0	1 2 Y	ž 0 ŏ 7	
		State Zip Code KY 40201	·		Amount of Eac	h Disbursen		-
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	Candidate Name MITCH MCCONNELL			Category/ Type				
		ment For: 2008 Primary Ger Other (specify)	8 neral					
3.	Full Name (Last, First, Middle Initial) MCCRERY FOR CONGRESS COMMITTE	E			Transaction II Date of Disburs	sement	-	
	Mailing Address Post Office Box 52956 333 Texas Street Suite 19	900			06 / 0	2 1 Y	ž 0 ŏ 7	, ^Y
	City	State Zip Code LA 71135)		Amount of Eac	h Disbursen	nent this F	Period
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	Candidate Name JAMES OTIS III MCCRERY			Category/ Type				
	9 1	ment For: 2008 Primary Ger Other (specify)	8 neral					
Э.	Full Name (Last, First, Middle Initial) MELISSA BEAN FOR CONGRESS				Transaction II Date of Disburs	sement		
	Mailing Address POST OFFICE BOX 306	8			06 / 0	1 3 Y	ž 0 ŏ 7	, ^Y
		State Zip Code)		Amount of Eac	h Disbursen	nent this F	Period
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	Candidate Name MELISSA LUBURICH BEAN			Category/ Type				
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Full Name (Last, First, Middle Initial)				1			SB23.4	1856			
MIKE ROSS FOR CONGRESS COMMITTE	:E					isburse		y y	ν ,	Y	
Mailing Address PO Box 360				0 ^M 2	2 "	2	1 /	2	0 ŏ 7		
	tate Zip Code AR 71857			Amo	ount c	f Each	Disburse	ement	this P	eriod	
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Candidate Name MICHAEL AVERY ROSS			egory/ vpe								
Office Sought: X House Disburser Senate X	nent For: 2008 Primary General										
President	Other (specify)										
State: AR District: 04											
Full Name (Last, First, Middle Initial) NIKE THOMPSON FOR CONGRESS							SB23.4	1860			
WIRE THOMPSON FOR CONGRESS				М	М	isburse		ΥΥ	Y	Υ	
Mailing Address 5429 Madison Avenue				0.3	3	0	5 /	2	0 ŏ 7		
,	tate Zip Code CA 95841			Amo	ount c	f Each	Disburse	ement	this P	eriod	
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Contribution											
Candidate Name MIKE THOMPSON			egory/ rpe								
Office Sought: X House Disburser											
Senate X President	Primary General Other (specify)										
State: CA District: 01	Carlor (oposity)										
Full Name (Last, First, Middle Initial)				-		-	SB23.4	1866			
MOORE FOR CONGRESS				M	М	isburse		ΥΥ	Υ	Υ	
Mailing Address PO BOX 14631				lo 3	3	1	2 /	2	0 ŏ 7		
	tate Zip Code (S 66285			Amo	ount c	f Each	Disburse	ement	this P	eriod	
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Candidate Name DENNIS MOORE	,		egory/ /pe								
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President State: KS District: 03	Other (specify) ▼										
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۹.	Full Name (Last, First, Middle Initial) PALLONE FOR CONGRESS Mailing Address PO BOX 3176				Da		Disburse	SB23.4 ement		0 ŏ 7	Y		
	City LONG BRANCH	State Zip Code NJ 07740			An	nount (of Each	Disburs			-	_	
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	Mailing Address PO BOX 3176					6 "	່	28 /	2	0 0 7			
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	Contribution Candidate Name FRANK JR PALLONE			egory/ ype									
		ement For: 2008 Primary General Other (specify)											
Э.	Full Name (Last, First, Middle Initial) PEOPLE WITH HART INC					te of D	Disburse						
	Mailing Address P.O. Box 435				O	3 M	/ D 1	5 /	ž	0 0 7	Y		
	City Wexford	State Zip Code PA 15090			An	nount (of Each	Disburs			-	7	
	Purpose of Disbursement Voided 11/3/2006 Contribution								-2	2000.0	0	_	
	Candidate Name MELISSA A. HART			egory/ ype									
	Office Sought: X House Senate President State: PA District: 04 Disburs	ement For: 2006 Primary X General Other (specify)		_		_	_	_		_			
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AMERICAN SURGICAL HOSE	PITAL ASSOC	CIATION	POLITICAL AC	CTIO	N COM	IMITT	EE						
Full Name (Last, First, Middle Initial									: SB23.4	1891			
PETE STARK RE-ELECTION COMMITTEE								Disburs		ΥΥ	Υ	Υ	
Mailing Address P.O. Box 833	31						0 5		2 /	2	0 ŏ 7		
City Fremont		state CA	Zip Code 94537			1	Amount	of Each	Disburs	emen	t this P	eriod	
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Candidate Name PETE STARK					egory/ ype								
Office Sought: X House Senate	Disburser	nent For: Primary	2008 General										
President		Other (spe											
State: CA District: 13													
Full Name (Last, First, Middle Initial) RANGEL FOR CONGRESS)								: SB23.4	1853			
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Mailing Address PO Box 5577 MANHATTANVILLE STA							0 1	3	3 1	2	007		
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Candidate Name CHARLES B RANGEL					egory/ ype								
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Senate President		Primary Other (spe	General										
State: NY District: 15		(-1	y , \										
Full Name (Last, First, Middle Initial) RANGEL FOR CONGRESS)					1 -		t ion ID : Disburs	: SB23.4 ement	1894			
Mailing Address PO Box 557	7					- 1	0 ^M 5 M	/ 02	29 /	Ý Ž	0 ŏ 7	Υ	
MANHATTAI	NVILLE STA						•						
City New York		state NY	Zip Code 10027				Amount	of Each	Disburs	-		-	7
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	y Information copied from such Reports and Staten for commercial purposes, other than using the nam												S
\rangle	NAME OF COMMITTEE (In Full) AMERICAN SURGICAL HOSPITAL ASSO												
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	Mailing Address PO Box 5577 MANHATTANVILLE STA						0 ^M 5	М	D 2	2 9 /	Y	ž o ŏ 7	7 ^Y
	City New York	State NY	Zip Code 10027				Amou	ınt of	Each	Disbu		nt this I	
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	Candidate Name CHARLES B RANGEL			С	Cate Ty	gory/ oe							
	Senate President	ement For: Primary Other (spe	2008 X General										
В.	State: NY District: 15 Full Name (Last, First, Middle Initial) SANFORD D. BISHOP JR. FOR CONGRE	ESS								: SB23	3.4898	3	
	Mailing Address P. O. Box 909							М	1	2 /	Y	ž o ŏ 7	7 ^Y
	City Columbus	State GA	Zip Code 31902				Amou	ınt of	Each	Disbu		nt this f	-
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	Candidate Name SANFORD D JR. BISHOP			С	Cate Ty	gory/ oe							
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	State: GA District: 02 Full Name (Last, First, Middle Initial)						Trans	sacti	on ID:	: SB23	3.4897	7	
C.	TEXANS FOR SENATOR JOHN CORNYN	N INC					Date		sburs	ement			Y
	Mailing Address 6850 AUSTIN CENTRE SUITE 180						0 6) 6 /	2	ž o ŏ 7	7
	City AUSTIN	State TX	Zip Code 78731				Amou	ınt of	Each	Disbu		nt this f	-
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	Candidate Name JOHN CORNYN			С	Cate Ty	gory/ oe							
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\rangle	NAME OF COMMITTEE (In Full) AMERICAN SURGICAL HOSPITAL AS:	SOCIATION PO	LITICAL AC	ГІОН СОММІ	TTEE				
۹.	Full Name (Last, First, Middle Initial) WALLY HERGER FOR CONGRESS CO	OMMITTEE			Transaction Date of Disk	oursemer	nt		V
	Mailing Address P.O. Box 1500		06						
	City Chico		p Code 5927		Amount of E	ach Disk			
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	Candidate Name WALLY HERGER			Category/ Type					
	Senate President	x Primary Other (specify	2008 General						
	State: CA District: 2								
3.	Full Name (Last, First, Middle Initial) WALSH FOR CONGRESS COMMITTE	E			Transaction ID: SB23.4879 Date of Disbursement				· ·
	Mailing Address 306 WINKWORTH PA		03	15	′	žoŏ	7 '		
	City SYRACUSE	State Zi NY 1	p Code 3215		Amount of E	ach Dist			
	Purpose of Disbursement Voided 11/3/2006 Contribution						2000	.00	
	Candidate Name JAMES T WALSH			Category/ Type					
	Office Sought: X House Senate President State: NY District: 25	Primary Other (specify	2006 X General						

SUBTOTAL of Disbursements This Page (optional)	•	0.00
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