

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

American Medical Response Inc Political Action Committee

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2011"/>		78646.94
(b) Cash on Hand at Beginning of Reporting Period.....	91799.08	
(c) Total Receipts (from Line 19)	2344.39	29746.53
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	94143.47	108393.47
7. Total Disbursements (from Line 31).....	500.00	14750.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	93643.47	93643.47
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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

American Medical Response Inc Political Action Committee

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).....	2278.39	22181.74
(ii) Unitemized	66.00	7564.79
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2344.39	29746.53
(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)	2344.39	29746.53
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 Transfers (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))..... ▶	2344.39	29746.53
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	2344.39	29746.53

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	500.00	14750.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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) Allocated 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)) ..	500.00	14750.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	500.00	14750.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	2344.39	29746.53
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2344.39	29746.53
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	0.00	0.00

**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 6 OF 18
<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

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 Medical Response Inc Political Action Committee

A. Robert Berschauer
 Full Name (Last, First, Middle Initial)
 Mailing Address 9807 Taylor St E
 City Edgewood State WA Zip Code 98371-1263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer American Medical Response Ambulance Se Occupation Director Government Relations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **807.66**

Date of Receipt **10 / 31 / 2011**
Transaction ID : PR1364352026768
 Amount of Each Receipt this Period **76.92**
 P/R Deduction (\$38.46 Bi-Weekly)

B. Philip H. Moyer
 Full Name (Last, First, Middle Initial)
 Mailing Address 37868 Green Mountain Street
 City Sandy State OR Zip Code 97055-6342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer American Medical Response Northwest, I Occupation Manager Operations I
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **210.00**

Date of Receipt **10 / 31 / 2011**
Transaction ID : PR1364376326768
 Amount of Each Receipt this Period **20.00**
 P/R Deduction (\$10.00 Bi-Weekly)

C. Randall J. Lauer
 Full Name (Last, First, Middle Initial)
 Mailing Address 11940 NW Tyler Court
 City Portland State OR Zip Code 97229-8572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer American Medical Response Northwest, I Occupation General Manager Oprns over 40MM
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **403.83**

Date of Receipt **10 / 31 / 2011**
Transaction ID : PR1364380126768
 Amount of Each Receipt this Period **38.46**
 P/R Deduction (\$19.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	135.38
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 7 OF 18
<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

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 Medical Response Inc Political Action Committee

A. Suzanne L. Robinson
Full Name (Last, First, Middle Initial)
Mailing Address 40010 Ne 74th Avenue
City La Center State WA Zip Code 98629-5238
FEC ID number of contributing federal political committee. **C**
Name of Employer American Medical Response Northwest, I Occupation Director PBS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 31 / 2011
Transaction ID : PR1364388926768
Amount of Each Receipt this Period 20.00
P/R Deduction (\$10.00 Bi-Weekly)

B. Tina M. Beeler
Full Name (Last, First, Middle Initial)
Mailing Address 10223 SE Bell Ave.
City Milwaukie State OR Zip Code 97222-2228
FEC ID number of contributing federal political committee. **C**
Name of Employer American Medical Response Northwest, I Occupation Specialist Clinical Education
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 31 / 2011
Transaction ID : PR1364394926768
Amount of Each Receipt this Period 20.00
P/R Deduction (\$10.00 Bi-Weekly)

C. Christopher Verkest
Full Name (Last, First, Middle Initial)
Mailing Address 17139 SW Sandhill Lane
City Sherwood State OR Zip Code 97140-8967
FEC ID number of contributing federal political committee. **C**
Name of Employer American Medical Response Northwest, I Occupation Specialist Clinical Education
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 31 / 2011
Transaction ID : PR1364395426768
Amount of Each Receipt this Period 20.00
P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶ 60.00
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 8 OF 18
(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)
American Medical Response Inc Political Action Committee

Full Name (Last, First, Middle Initial)
A. James L. Lemmon
 Mailing Address 13826 Meyers Dr. #2105
 City State Zip Code
 Oregon City OR 97045-7963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 American Medical Response Northwest, I Supervisor Operations E
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 403.83

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2011
Transaction ID : PR1364398326768
 Amount of Each Receipt this Period
 38.46
 P/R Deduction (\$19.23 Bi-Weekly)

Full Name (Last, First, Middle Initial)
B. Kevin J. Anderson
 Mailing Address 30251 S Dhooghe Rd
 City State Zip Code
 Colton OR 97017-9423
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 American Medical Response Northwest, I Director Comm Dispatch
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 403.83

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2011
Transaction ID : PR1364403426768
 Amount of Each Receipt this Period
 38.46
 P/R Deduction (\$19.23 Bi-Weekly)

Full Name (Last, First, Middle Initial)
C. Ronald F. Dire-Day
 Mailing Address 8004 Kenton Lane S.E.
 City State Zip Code
 Olympia WA 98501-6884
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 American Medical Response Ambulance Se Paramedic Basic
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 403.83

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2011
Transaction ID : PR1364405026768
 Amount of Each Receipt this Period
 38.46
 P/R Deduction (\$19.23 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 115.38
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 9 OF 18
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 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 Medical Response Inc Political Action Committee

Full Name (Last, First, Middle Initial) A. Kurt W. Williams		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2011
Mailing Address Po Box 420400		Transaction ID : PR1364670726768
City San Diego	State CA	Zip Code 92142-0400
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 115.38
Name of Employer American Medical Response of Southern	Occupation CEO - AMR Regional	P/R Deduction (\$57.69 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1211.49	

Full Name (Last, First, Middle Initial) B. David L. Tice		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2011
Mailing Address 1900 Clark St.		Transaction ID : PR1364805726768
City Charles City	State IA	Zip Code 50616-3826
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer Tek, Inc.	Occupation Paramedic Basic	P/R Deduction (\$19.23 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 384.60	

Full Name (Last, First, Middle Initial) C. Dale R. Feldhauser		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2011
Mailing Address 3580 Diamond Ridge NE		Transaction ID : PR1364814526768
City Rockford	State MI	Zip Code 49341-7935
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer Paramed, Inc	Occupation General Manager Oprns under 40MM	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 846.12	

SUBTOTAL of Receipts This Page (optional).....▶	211.53
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 10 OF 18
<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

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 Medical Response Inc Political Action Committee

A. Valerie A. Gaither
Full Name (Last, First, Middle Initial)

Mailing Address 834 Southeast Avenue

City Tallmadge State OH Zip Code 44278-2844

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

Name of Employer Physician's & Surgeon's Ambulance Serv Occupation VP Purchasing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 31 / 2011**

Transaction ID : PR1364852326768

Amount of Each Receipt this Period **20.00**

P/R Deduction (\$10.00 Bi-Weekly)

B. Sean Piendel
Full Name (Last, First, Middle Initial)

Mailing Address 84 Henry St.

City Manchester State CT Zip Code 06042-3525

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

Name of Employer American Medical Response of Connectic Occupation General Manager Oprns under 40MM

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **430.00**

Date of Receipt **10 / 31 / 2011**

Transaction ID : PR1364983326768

Amount of Each Receipt this Period **40.00**

P/R Deduction (\$10.00 Weekly)

C. Daniel W. O'Brien
Full Name (Last, First, Middle Initial)

Mailing Address 1005 Dunbar Hill Rd

City Hamden State CT Zip Code 06514-1409

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

Name of Employer American Medical Response of Connectic Occupation CEO - AMR Regional

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1075.00**

Date of Receipt **10 / 31 / 2011**

Transaction ID : PR1364985226768

Amount of Each Receipt this Period **100.00**

P/R Deduction (\$25.00 Weekly)

SUBTOTAL of Receipts This Page (optional)..... **160.00**

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: (check only one)	PAGE 11 OF 18
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 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 Medical Response Inc Political Action Committee

Full Name (Last, First, Middle Initial) A. Alfred Dellavalle		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2011
Mailing Address 43 Oakwood Drive		Transaction ID : PR1364986326768
City North Haven	State CT	Zip Code 06473-1938
FEC ID number of contributing federal political committee.	C	
Name of Employer American Medical Response of Connectic	Occupation VP Government Relations	Amount of Each Receipt this Period 80.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 860.00	P/R Deduction (\$20.00 Weekly)

Full Name (Last, First, Middle Initial) B. John Eagle		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2011
Mailing Address 267 Jennings Way		Transaction ID : PR1365042526768
City Mickleton	State NJ	Zip Code 08056-1029
FEC ID number of contributing federal political committee.	C	
Name of Employer American Medical Response Mid-Atlantic	Occupation Director Business Development	Amount of Each Receipt this Period 38.46
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 423.06	P/R Deduction (\$19.23 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. Steven J. Delahousey		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2011
Mailing Address 2580 Rue Palafox		Transaction ID : PR1365131526768
City Biloxi	State MS	Zip Code 39531-3733
FEC ID number of contributing federal political committee.	C	
Name of Employer Mobile Medic Ambulance Service, Inc	Occupation VP Emergency Preparedness	Amount of Each Receipt this Period 76.92
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 807.66	P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	195.38
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 OF 18
<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

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 Medical Response Inc Political Action Committee

A. John J. Connolly
Full Name (Last, First, Middle Initial)

Mailing Address 11166 Glenmoor Cir

City Parker State CO Zip Code 80138-3155

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

Name of Employer American Medical Response of Colorado, Occupation VP PBS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt **10 / 31 / 2011**

Transaction ID : PR1365143526768

Amount of Each Receipt this Period **50.00**

P/R Deduction (\$25.00 Bi-Weekly)

B. Debora Gault
Full Name (Last, First, Middle Initial)

Mailing Address 5502 Northwest Highway

City Waterford State WI Zip Code 53185-2829

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

Name of Employer EMS MGMT LLC, Occupation VP Reimbursement (Federal)

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **807.66**

Date of Receipt **10 / 31 / 2011**

Transaction ID : PR1365144226768

Amount of Each Receipt this Period **76.92**

P/R Deduction (\$38.46 Bi-Weekly)

C. Ronald W. Thackery
Full Name (Last, First, Middle Initial)

Mailing Address 9922 S. Silver Maple Rd.

City Highlands Ranch State CO Zip Code 80129-5460

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

Name of Employer American Medical Response, Inc, Occupation VP Senior Professional Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **807.66**

Date of Receipt **10 / 31 / 2011**

Transaction ID : PR1365144626768

Amount of Each Receipt this Period **76.92**

P/R Deduction (\$38.46 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	203.84
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 13 OF 18
<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

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 Medical Response Inc Political Action Committee

A. Mark Kalevik
Full Name (Last, First, Middle Initial)

Mailing Address 24764 E. Dry Creek Pl.

City Aurora State CO Zip Code 80016-2581

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

Name of Employer EMS MGMT LLC Occupation Manager Project Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 31 / 2011**

Transaction ID : PR1365146326768

Amount of Each Receipt this Period **20.00**

P/R Deduction (\$10.00 Bi-Weekly)

B. Gregg M. Chiasson
Full Name (Last, First, Middle Initial)

Mailing Address 3858 Mallard Lane

City Highlands Ranch State CO Zip Code 80126-2960

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

Name of Employer EMS MGMT LLC Occupation VP Client Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt **10 / 31 / 2011**

Transaction ID : PR1365147726768

Amount of Each Receipt this Period **40.00**

P/R Deduction (\$20.00 Bi-Weekly)

C. Steven G. Murphy
Full Name (Last, First, Middle Initial)

Mailing Address 100 S Birch Road # 901a

City Fort Lauderdale State FL Zip Code 33316-1540

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

Name of Employer EMS MGMT LLC Occupation VP Senior Government & National Serv

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **2019.15**

Date of Receipt **10 / 31 / 2011**

Transaction ID : PR1365147926768

Amount of Each Receipt this Period **192.30**

P/R Deduction (\$96.15 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... **252.30**

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 14 OF 18
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 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 Medical Response Inc Political Action Committee

A. Randall L. Strozyk
Full Name (Last, First, Middle Initial)

Mailing Address 9209 181st Ave E

City Bonney Lake State WA Zip Code 98391-7187

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

Name of Employer American Medical Response Ambulance Se Occupation CEO - AASI / AMR Air

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1211.49

Date of Receipt 10 / 31 / 2011
Transaction ID : PR1365275526768

Amount of Each Receipt this Period 115.38

P/R Deduction (\$57.69 Bi-Weekly)

B. David J. Buckley
Full Name (Last, First, Middle Initial)

Mailing Address 10350 Dahlberg Rd

City Franktown State CO Zip Code 80116-8249

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

Name of Employer EMS MGMT LLC Occupation Director Business Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 807.66

Date of Receipt 10 / 31 / 2011
Transaction ID : PR1365322026768

Amount of Each Receipt this Period 76.92

P/R Deduction (\$38.46 Bi-Weekly)

C. Paul Priest
Full Name (Last, First, Middle Initial)

Mailing Address 3798 NE 206th Ave

City Fairview State OR Zip Code 97024-6742

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

Name of Employer American Medical Response Northwest, I Occupation Manager Operations I

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 31 / 2011
Transaction ID : PR1365382426768

Amount of Each Receipt this Period 20.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 212.30

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 15 OF 18
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 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 Medical Response Inc Political Action Committee

Full Name (Last, First, Middle Initial) A. Scott S. Bourn		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2011
Mailing Address 10617 Stone Creek Ct.		Transaction ID : PR1365585326768
City Parker	State CO	Zip Code 80134-2536
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer American Medical Response, Inc	Occupation VP Clinical Education	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 807.66	

Full Name (Last, First, Middle Initial) B. Edward B Van Horne		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2011
Mailing Address 4520 Alexandra Drive		Transaction ID : PR1365962826768
City Colleyville	State TX	Zip Code 76034-4256
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer American Medical Response Ambulance Se	Occupation CEO - AMR Regional	P/R Deduction (\$38.46 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 846.12	

Full Name (Last, First, Middle Initial) C. Mark E. Bruning		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2011
Mailing Address 725 Forest View Way		Transaction ID : PR1542685626768
City Monument	State CO	Zip Code 80132-8227
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 384.60
Name of Employer American Medical Response, Inc	Occupation President - AMR	P/R Deduction (\$192.30 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2473.00	

SUBTOTAL of Receipts This Page (optional).....▶	538.44
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 16 OF 18
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 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 Medical Response Inc Political Action Committee

A. Tamara L. Billings
Full Name (Last, First, Middle Initial)

Mailing Address 5810 Sw Candletree Dr #14

City Topeka State KS Zip Code 66614-1848

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

Name of Employer Medevac Medical Response, Inc. Occupation Project Manager Senior

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **403.83**

Date of Receipt **10 / 31 / 2011**

Transaction ID : PR1542687526768

Amount of Each Receipt this Period **38.46**

P/R Deduction (\$19.23 Bi-Weekly)

B. George White
Full Name (Last, First, Middle Initial)

Mailing Address 10499 Cheetah Winds

City Littleton State CO Zip Code 80124-9542

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

Name of Employer EMS MGMT LLC Occupation Manager Business Integration

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 31 / 2011**

Transaction ID : PR2209934026768

Amount of Each Receipt this Period **20.00**

P/R Deduction (\$10.00 Bi-Weekly)

C. George Matthew McCormick
Full Name (Last, First, Middle Initial)

Mailing Address 326 Demun

City Clayton State MO Zip Code 63105-2208

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

Name of Employer Access2Care, LLC Occupation VP Commercial Managed Transportation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **10 / 31 / 2011**

Transaction ID : PR2243823826768

Amount of Each Receipt this Period **20.00**

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional).....▶	78.46
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 17 OF 18
(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)
American Medical Response Inc Political Action Committee

A. Namon J Huddleston Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 3361 S. Elm St
 City State Zip Code
 Denver CO 80222-7312
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 EMS MGMT LLC Director Client Services
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 403.83

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2011
Transaction ID : PR2270584526768
 Amount of Each Receipt this Period
 38.46
 P/R Deduction (\$19.23 Bi-Weekly)

B. Thomas R. Wagner
 Full Name (Last, First, Middle Initial)
 Mailing Address 303 Peppertree Rd.
 City State Zip Code
 Walnut Creek CA 94598-2701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 American Medical Response West CEO - AMR Regional
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 807.66

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2011
Transaction ID : PR2388846826768
 Amount of Each Receipt this Period
 76.92
 P/R Deduction (\$38.46 Bi-Weekly)

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	115.38
TOTAL This Period (last page this line number only).....▶	2278.39

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

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 Medical Response Inc Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mike Thompson For Congress

Mailing Address 5429 Madison Avenue.

City Sacramento State CA Zip Code 95841

Purpose of Disbursement

011

Candidate Name

Rep. Michael Thompson

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2011
 Primary General
 Other (specify) ▼

State: CA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2011

Transaction ID : 33954705

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

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

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

500.00

500.00
