FEC FORM 3X	AI	EPORT O ND DISBU r Other Than Ar	JRSEM	ENTS	ee		Office Use Only	
1. NAME OF COMMITTEE (in f		E FEC MAILING LA TYPE OR PRINT		ample:If typing r the lines	, type			
	cil Political Acti	ion Committee						
ADDRESS (number and	street)	The Atlantic Building						
Check if differ than previous reported. (AC	rent L	950 F Street, NW					20004	1404
2. FEC IDENTIFICAT		r ¥	CITY 🛋		S	STATE	ZIPCOE	DE 🔺
C00326736			3. IS THIS REPORT		NEW N) <b>OR</b>	AM (A)	ENDED	
July 15QuarterlyOctoberQuarterlyXJanuaryQuarterlyJuly 31 MReport(NYear Onl	orts: r Report(Q1) r Report(Q2) 15 r Report(Q3) 31 r Report(YE) Mid-Year on-election	(b) Monthly Report Due On: (c) 12-Day <b>PRE</b> -Elect Report for (d) 30-Day <b>Post</b> -Elec Report for	the:		12C)	Sep 2	2G) in the State of	Special (30S)
5. Covering Period				through and belief it is	1 2 true, correct a	3 1 and complete.	2007	
Type or Print Name of T Signature of Treasurer	reasurer Ele <u>ctronical</u>	Robert Foreman	Foreman		Da	ate 01	30	2008
NOTE : Submission of	false, erroneou	is, or incomplete info	rmation may su	bject the pers	on signing this	Report to the	penalties of 2 U.S	S.C 437g.
Office Use Only							FEC FORI (Rev. 12/200	

Image	e# 28930170594	SUMMARY PAGE	
	FEC Form 3X (Rev. 02/2003)	OF RECEIPTS AND DISBURSEMENTS	Page 2
١	Nrite or Type Committee Name Kidney Care Council Political Actior	n Committee	
F	Report Covering the Period: From:	M M         D D         Y Y W Y           0 7         0 1         2 0 0 7	To: M M D D Z V Y Y Y Y 3 1 2 0 0 7
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 2007 Y Y		-123.97
	(b) Cash on Hand at Begining of Reporting Period	. 28982.14	]
	(c) Total Receipts (from Line 19)		56055.32
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	. 35761.00	55931.35
7.	Total Disbursements (from Line 31)		48590.23
8.	Cash on Hand at Close of		
	Reporting Period (subtract Line 7 from Line 6(d))	7341.12	7341.12
9.	Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D)	. 0.00	]
10.	Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D)		]

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

FE6AN026

FEC Form 3X (Rev. 06/2004)	OF RECEIPTS	Page 3
Write or Type Committee Name Kidney Care Council Political Action C	ommittee	
Report Covering the Period: From:	0 7 0 1 Y Y W Y 0 7 0 1 2 0 0 7	-o: <sup>M M</sup> <sup>D D</sup> 31 <sup>Y Y Y</sup> 200
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
<ol> <li>Contributions (other than loans) From:         <ul> <li>(a) Individuals/Persons Other</li> </ul> </li> </ol>		
(i) Itemized (use Schedule A)	6750.00	55550.00
(ii) Unitemized	0.00	350.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ▶	6750.00	55900.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
<ul> <li>(d) Total Contributions (add Lines</li> <li>11(a)(iii),(b) and (c)) (Carry</li> <li>Totals to Line 33, page 5)</li> </ul>	6750.00	55900.00
2. Transfers From Affiliated/Other Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
<ol> <li>Loan Repayments Received</li> <li>Offsets To Operating Expenditures</li> </ol>	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
<ol> <li>Refunds of Contributions Made to Federal candidates and Other Political Committees</li> </ol>	0.00	0.00
<ol> <li>Other Federal Receipts (Dividends, Interest, etc.)</li> </ol>	28.86	155.32
3. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
<ol> <li>Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))</li> </ol>	6778.86	56055.32
<ol> <li>Total Federal Receipts (subtract Line 18(c) from Line 19)</li> </ol>	6778.86	56055.32

### Image# 28930170595

## DETAILED SUMMARY PAGE OF RECEIPTS

Image# 28930170596

# **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003) of Disbursements Page 4							
II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date					
1. Operating Expenditures:							
<ul> <li>(a) Shared Federal/Non-Federal Activity (from Schedule H4)</li> </ul>	0.00	0.00					
(i) Federal Share		0.00					
(ii) Non-Federal Share	0.00	0.00					
(b) Other Federal Operating							
Expenditures	169.88	340.23					
(c) Total Operating Expenditures	169.88	340.23					
(add 21(a)(i), (a)(ii) and (b)) 2. Transfers to Affiliated/Other Party	169.88	540.25					
Committees		0.00					
<ol> <li>Contributions to Federal Candidates/Committees</li> </ol>							
and Other Political Committees	28000.00	48000.00					
(use Schedule E)	0.00	0.00					
<ol> <li>Coordinated Expenditures Made by P Committees (2 U.S.C. 441a(d))</li> </ol>	arty						
(use Schedule F)	0.00	0.00					
6. Loan Repayments Made	0.00	0.00					
7. Loans Made		0.00					
<ol> <li>Refunds of Contributions To: (a) Individuals/Persons Other</li> </ol>	0.00	0.00					
Than Political Committees		0.00					
(b) Political Party Committees	0.00	0.00					
(c) Other Political Committees	0.00	0.00					
(such as PACs) (d) Total Contribution Refunds		0.00					
(add Lines 28(a), (b), and (c))	🕨 0.00	0.00					
	050.00	050.00					
9. Other Disbursements		250.00					
0. Federal Election Activity (2 U.S.C 43	1(20))						
(a) Shared Federal Election Activity							
(from Schedule H6)	0.00	0.00					
(i) Federal Share							
(ii) "Levin" Share	0.00	0.00					
(b) Federal Election Activity Paid En		0.00					
With Federal Funds		0.00					
(c) Total Federal Election Activity (ac	0.00	0.00					
Lines 30(a)(i), 30(a)(ii) and 30(b	J))						
1. Total Disbursements (add Lines 21(c	b), 22,						
23, 24, 25, 26, 27, 28(d), 29 and 30(	00.110.00	48590.23					
. Total Federal Disbursements							
(subtract Line 21(a)(ii) and Line 30(a	)(ii)	49500.00					

28419.88

48590.23

from Line 31).....

#### Image# 28930170597

# DETAILED SUMMARY PAGE

	III. Net Contributions/Operating	COLUMN A	COLUMN B
	Expenditures	Total This Period	Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	6750.00	55900.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	6750.00	55900.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	169.88	340.23
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	169.88	340.23

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	SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS Any information copied from such Reports and or for commercial purposes, other than using t	d Statements ma	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any persident of the sold or used by any persident solution.	FOR LINE NUMBER:       PAGE 6 / 14         (check only one)       11a         X       11a       11b         13       14       15       16         0       for the purpose of soliciting contributions policit contributions from such committee.
	NAME OF COMMITTEE (In Full)           Kidney Care Council Political Action			
<b>A</b> .	Full Name (Last, First, Middle Initial) Clay Bittner Mailing Address 19207 Wyndchase (	Circle		Date of Receipt
	City	State	Zip Code	07 10 2007 Transaction ID: SA11AI.4580
	Franklin	TN	37067	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		650.00
	Name of Employer Renal Advantage	Occupatio VP, Man	n aged Care	individual contribution
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date 650.00	]
- B.	Full Name (Last, First, Middle Initial) Marc Branson Mailing Address 401 Castro Street			Date of Receipt
	City	State	Zip Code	0 7 0 3 2 0 0 7 Transaction ID: SA11AI.4474
	Mountain View	CA	94041	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Satellite Healthcare, Inc.	Occupatio Vice Pres		PAC contribution
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	]
- C.	Full Name (Last, First, Middle Initial) Mark Burke	1		Date of Receipt
	Mailing Address 401 Castro Street			07 / D D / Y Y Y Y 03 / 2007
	City	State	Zip Code	Transaction ID: SA11AI.4472
	Mountain View FEC ID number of contributing federal political committee.	CA	94041	Amount of Each Receipt this Period 1500.00
	Name of Employer Satellite Healthcare, Inc.	Occupatio	n	PAC contribution
	Receipt For: Primary General Other (specify) ▼	I	e Year-to-Date ▼ 1500.00	]
ſ	SUBTOTAL of Receipts This Page (optional)	)		3150.00
	TOTAL This Period (last page this line numb		•	

;	SCHEDULE A (FEC Form 3X	)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 7/14
	TEMIZED RECEIPTS	-	for each category of the	(check only one)
			Detailed Summary Page	$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$
	Any information copied from such Reports and or for commercial purposes, other than using t	d Statements ma the name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Γ	NAME OF COMMITTEE (In Full)			
	Kidney Care Council Political Action	Committee		
A.	Full Name (Last, First, Middle Initial) Derrick Byl			Date of Receipt
	Mailing Address 115 East Park Drive	, Suite 300		M         M         /         D         D         /         Y
	City	State	Zip Code	Transaction ID: SA11AI.4583
	Brentwood	TN	37027	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Renal Advantage, Inc.	Occupatio		individual contribution
	Receipt For:			_
	Primary General	Aggregate	e Year-to-Date	1
	Other (specify)	0 0	300.00	
- В.	Full Name (Last, First, Middle Initial) Susan L. Del Bene			Date of Receipt
	Mailing Address 401 Castro Street			M M / D D / Y Y Y Y 07 03 2007
	City	State	Zip Code	Transaction ID: SA11AI.4480
	Mountain View	CA	94041	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1500.00
	Name of Employer Satellite Healthcare, Inc.	Occupatio Chief Fir	on nancial Officer	<ul> <li>PAC contribution</li> </ul>
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify) ▼		1500.00	]
- C.	Full Name (Last, First, Middle Initial) Rosemary Toshi Fox			Date of Receipt
•	Mailing Address 401 Castro Street			07 03 2007
	City	State	Zip Code	Transaction ID: SA11AI.4478
	Mountain View	CA	94041	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Satellite Healthcare, Inc.	Occupatio Chief Op	on Derating Officer	<ul> <li>PAC contribution</li> </ul>
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary     General       Other (specify)     ▼	0 0	1000.00	]
ſ	SUBTOTAL of Receipts This Page (optional)	 )		2800.00
⊦				
	TOTAL This Period (last page this line numb	er only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any pers dress of any political committee to	FOR LINE NUMBER:       PAGE 8 / 14         (check only one)       11a         X       11a       11b         13       14       15       16         0       10       17         0       10       17       16         0       11       15       16       17         0       10       17       17       16       17
	NAME OF COMMITTEE (In Full) Kidney Care Council Political Action C	ommittee		
Α.	Full Name (Last, First, Middle Initial) Celine McGill Mailing Address 115 East Park Drive, S	Guite 300		Date of Receipt
	City Brentwood FEC ID number of contributing federal political committee.	State TN	Zip Code 37027	Transaction ID: SA11AI.4581 Amount of Each Receipt this Period 300.00
	Name of Employer         Renal Advantage         Receipt For:         Primary         General         Other (specify)	, <b>-</b>	on I Director e Year-to-Date ▼ 300.00	individual contribution
В.	Full Name (Last, First, Middle Initial) Paul Queally Mailing Address 102 Woodmont Bouley	vard		Date of Receipt
	City <u>Nashville</u> FEC ID number of contributing federal political committee.	State TN	Zip Code 37205	Transaction ID: SA11AI.4476 Amount of Each Receipt this Period 500.00
	Name of Employer Renal Advantage Inc. Receipt For: Primary General Other (specify)	Occupatio Director Aggregate	e Year-to-Date ▼ 500.00	PAC contribution

SUBTOTAL of Receipts This Page (optional)	►	800.00
TOTAL This Period (last page this line number only)	►	6750.00

Ċ	SCHEDULE B (FEC Form 3X)			
	· · · ·	Use separate schedule(s	(check onl	NUMBER: PAGE 9 / 14
I	TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b	22 $23$ $24$ $25$ $26$
		Detailed Summary rage	27	28a 28b 28c 29 30b
	Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam			
	NAME OF COMMITTEE (In Full)			
	Kidney Care Council Political Action Comr	nittee		
	Full Name (Last, First, Middle Initial)			Transaction ID: SB21B.4628
Α.	United Bank			Date of Disbursement
	Mailing Address 8251 Greensboro Drive			0 8 <sup>M</sup> / 1 5 / Y 2 0 0 7 Y
	City McLean	State Zip Code VA 22102		Amount of Each Disbursement this Period
	Purpose of Disbursement bank service charge			85.00
	Candidate Name		Category/ Type	
	Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)		
	State: District:	_		
в.	Full Name (Last, First, Middle Initial) United Bank			Transaction ID: SB21B.4629 Date of Disbursement
	Mailing Address 8251 Greensboro Drive			$\begin{array}{c} \begin{array}{c} M \\ 0 \\ 8 \end{array} \begin{array}{c} M \\ \end{array} \begin{array}{c} I \\ 0 \\ \end{array} \begin{array}{c} D \\ 1 \\ 6 \end{array} \begin{array}{c} D \\ 1 \\ 6 \end{array} \begin{array}{c} I \\ \end{array} \begin{array}{c} D \\ 1 \\ \end{array} \begin{array}{c} D \\ 2 \\ 0 \\ 0 \\ 7 \end{array} \begin{array}{c} Y \\ Y \\ 2 \\ 0 \\ 0 \\ 7 \end{array} \begin{array}{c} Y \\ Y $
	City McLean	StateZip CodeVA22102		Amount of Each Disbursement this Period
	Purpose of Disbursement bank service charge			75.00
	Candidate Name		Category/ Type	
	Senate	ement For: Primary General		
	State: District:	Other (specify)		

	SUBTOTAL of Disbursements This Page (optional)	•	160.00
	TOTAL This Period (last page this line number only)	►	160.00
i	FE6AN026		FEC Schedule B ( Form 3X) (Revised 02/2003)

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		-		NUMBE	R:			PA	GE	10 /	14
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		<u>`</u>	eck only 21b 27	22 28a	X	23 28b	F	24 28c	$\square$	25 29	<b>H</b>
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam							se of s					5
NAME OF COMMITTEE (In Full) Kidney Care Council Political Action Comr												
Full Name (Last, First, Middle Initial) ANNA ESHOO FOR CONGRESS									28c       29         Sitting contributions         such committee         B23.4603         ent         /       Ý Ž 0 Č 7 Ý         isbursement this Period         1000.00			
Mailing Address 555 Capitol Mall Suite 14	25				0 <sup>M</sup> 9	9 12 2007 ount of Each Disbursement this Pe	7 <sup>Y</sup>					
City Sacramento	State Zip Code CA 95814				Amou	Amount of Each Disbursement this Period						
Purpose of Disbursement political contribution					L.					10	00.0	0
Candidate Name ANNA ESHOO			atego Type	-								
	Primary General Other (specify) ▼											
Full Name (Last, First, Middle Initial) CONTINUING A MAJORITY PARTY ACTI PAC)	ON COMMITTEE (C	AM-			Date	of Di	sburs	2 3 2 0 0 7 h Disbursement this Peri	X			
Mailing Address 5915 Eastman Avenue	Mailing Address 5915 Eastman Avenue Suite 100						$\begin{array}{c} \begin{array}{c} M \\ 1 \\ 0 \end{array} \end{array} $					
City Midland	State Zip Code MI 48640				Amou	ount of Each Disbursement this Period						
Purpose of Disbursement political contribution					L					10	00.0	0
Candidate Name			atego Type	-								
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) <b>V</b>											
Full Name (Last, First, Middle Initial) DONNA CHRISTENSEN CAMPAIGN							on ID sburs			ch committee         3.4603         Y       2       0       7         ursement this Period         1000.00         3.4620         Y       2       0       7         ursement this Period         1000.00         3.4620         Y       2       0       7         ursement this Period         1000.00         3.4599         Y       2       0       7         ursement this Period         1000.00       3.4599		
Mailing Address PO Box 5197					0 <sup>M</sup> 7	М	D (	3 <sup>1</sup>	28c       29         Disciting contributions om such committee         SB23.4603 ement         2       /       Y       Y       0       7         Disbursement this Per 1000.00         SB23.4620 ement         3       /       Y       Y       0       7         Disbursement this Per 1000.00         SB23.4620 ement         3       /       Y       Y       0       7         Disbursement this Per 1000.00         SB23.4599 ement         1       /       Y       Y       0       7         Disbursement this Per 1000.00	7 <sup>Y</sup>		
City St. Croix	State Zip Code VI 00823				Amou	int of	f Each	h Dis	sburse	ment	this I	Period
Purpose of Disbursement political contribution					L.					10	00.0	0
Candidate Name DONNA M CHRISTENSEN			atego Type									
° /	Primary General Other (specify) ▼											
SUBTOTAL of Disbursements This Page (optional)				•						30	00.0	0
TOTAL This Period (last page this line number only)				►								

	CHEDULE B (FEC Form 3X EMIZED DISBURSEMENTS	Use separate schedule(s)			OR LINE neck on	E NUMBE ly one)	R:			PA	GE	11 /	14
_		Detailed Summary Page			21b 27	22 28a	X	23 28b		24 28c		25 29	2 3
	y Information copied from such Reports and for commercial purposes, other than using the												5
K	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)												
$ \rangle$	Kidney Care Council Political Action	Committee											
	Full Name (Last, First, Middle Initial) FRIENDS OF GORDON SMITH		Transaction ID: SB23.4611 Date of Disbursement										
	Mailing Address 228 S WASHINGT			M 9 M / D 2 0 / Y 2 0 0 7									
	City ALEXANDRIA	State Zip Code VA 22314				Amount of Each Disbursement this Period							
	Purpose of Disbursement political contribution Candidate Name										20	0.00	0
	GORDON HAROLD SMITH	ichursement Fari 2009		ateg Typ	jory/ e	-							
	Office Sought: House D X Senate President State: OR District: 00	isbursement For: 2008 X Primary General Other (specify) ▼											
	Full Name (Last, First, Middle Initial) FRIENDS OF JAY ROCKEFELLER						i <b>on ID</b> isburs	-	B23.4 ent	585			
	Mailing Address PO BOX 1909			0 <sup>M</sup> 7	М	/ D	1 <sup>1</sup>	/ Y	ž	o ð 7	<b>,</b> Y		
	City CHARLESTON	State Zip Code WV 25327				Amount of Each Disbursement this Perio							
	Purpose of Disbursement political contribution										20	0.00	0
	Candidate Name JOHN DAVISON IV ROCKEFELLER		С	ateg Typ	iory/ e								
	Office Sought: House D X Senate President	isbursement For: 2008 X Primary General Other (specify) ▼											
	State: WV District: 00												
	Full Name (Last, First, Middle Initial) FRIENDS OF KENT CONRAD					Date	of D	isburs	sem		609		
	Mailing Address PO BOX 812					0 <sup>™</sup> 9	М	/ D	20	/ Y	ž	0 ð 7	, <sup>Y</sup>
	City BISMARCK	State Zip Code ND 58502				Amou	unt o	f Eacl	h Di	sburse	-		
	Purpose of Disbursement political contribution					] L.					50	0.00	0
	Candidate Name GAYLORD KENT CONRAD		Categ Typ										
	Office Sought: House D X Senate President	isbursement For: 2012 X Primary General Other (specify) ▼											
_	State: ND District: 00	_							_				
s	UBTOTAL of Disbursements This Page (op	tional)			►						90	00.0	0
т	OTAL This Period (last page this line number	er only)			►								
	41/000						~ ~				-	n /=	

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Any Information copied from such Reports and Statements may not be sold or used by any person for t or for commercial purposes, other than using the name and address of any political committee to solicit       NAME OF COMMITTEE (In Full)         Kidney Care Council Political Action Committee       Full Name (Last, First, Middle Initial)       OHN LEWIS FOR CONGRESS         Mailing Address       303 Peachtree Street NE Suite 5300       State       Zip Code         City       State       Zip Code         Atlanta       GA       30308         Purpose of Disbursement political contribution       Category/ Type         Office Sought:       X House       Disbursement For:       2008         Y Primary       General       Other (specify) ▼       Full Name (Last, First, Middle Initial)         KENDRICK MEEK CAMPAIGN FOR CONGRESS       Mailing Address       111 NW 183rd Street       State       Zip Code         Mailing Address       111 NW 183rd Street       State       Zip Code       Mailing Address       111 NW 183rd Street	Image: space of solution in the purpose of soliciting contributions it contributions from such committee         Transaction ID: SB23.4595         Date of Disbursement         M       /         Date of Disbursement this Period         5000.00				
Any Information copied from such Reports and Statements may not be sold or used by any person for t or for commercial purposes, other than using the name and address of any political committee to solicit         NAME OF COMMITTEE (In Full)         Kidney Care Council Political Action Committee         Full Name (Last, First, Middle Initial)         JOHN LEWIS FOR CONGRESS         Mailing Address       303 Peachtree Street NE         Suite 5300         City       State         Atlanta       GA         Purpose of Disbursement         political contribution         Candidate Name         Office Sought:       X         Senate       President         President       Other (specify)         State: GA       Disbursement For: 2008         KenDRICK MEEK CAMPAIGN FOR CONGRESS         Mailing Address       111 NW 183rd Street         Suite 325       State       Zip Code         Mailing Address       111 NW 183rd Street         State       Zip Code         Mailing Address       111 NW 183rd Street         State       Zip Code         Miami       FL       33169	the purpose of soliciting contributions it contributions from such committee <b>Transaction ID:</b> SB23.4595 Date of Disbursement				
NAME OF COMMITTEE (In Full)         Kidney Care Council Political Action Committee         Full Name (Last, First, Middle Initial)         JOHN LEWIS FOR CONGRESS         Mailing Address       303 Peachtree Street NE         Suite 5300         City       State         Atlanta       GA         Purpose of Disbursement         political contribution         Candidate Name         JOHN MR. LEWIS         Office Sought:         X       House         Senate       Disbursement For:         President         State: GA       District: 05         Full Name (Last, First, Middle Initial)         KENDRICK MEEK CAMPAIGN FOR CONGRESS         Mailing Address       111 NW 183rd Street         Suite 325       State         City       State         Mailing Address       111 NW 183rd Street         Suite 325       State         City       State         Miami       FL	Transaction ID: SB23.4595         Date of Disbursement $0^{M} 7^{M}$ $^{I}$ $0^{D} 7^{M}$ $1^{V}$ $2^{V} 0^{V} 7^{V}$ Amount of Each Disbursement this Period $5000.00$ Transaction ID: SB23.4592 Date of Disbursement $0^{M} 7^{M}$ $1^{V}$ $2^{V} 0^{V} 7^{V}$				
Full Name (Last, First, Middle Initial)         JOHN LEWIS FOR CONGRESS         Mailing Address       303 Peachtree Street NE         Suite 5300         City       State       Zip Code         Atlanta       GA       30308         Purpose of Disbursement	Date of Disbursement $07^{M}$ / $031$ / $2007^{Y}$ Amount of Each Disbursement this Period 5000.00 Transaction ID: SB23.4592 Date of Disbursement $07^{M}$ / $024$ / $2007^{Y}$				
JOHN LEWIS FOR CONGRESS         Mailing Address       303 Peachtree Street NE         Suite 5300         City       State       Zip Code         Atlanta       GA       30308         Purpose of Disbursement	Date of Disbursement $0^{M} 7^{M}$ / $0^{D} 3^{D} 7^{V}$ / $2^{V} 0^{V} 7^{V}$ Amount of Each Disbursement this Period 5000.00 Transaction ID: SB23.4592 Date of Disbursement $0^{M} 7^{M}$ / $0^{D} 2^{D} 7^{V}$ / $2^{V} 0^{V} 7^{V}$				
Suite 5300         City       State       Zip Code         Atlanta       GA       30308         Purpose of Disbursement       Category/         political contribution       Category/         Candidate Name       Category/         JOHN MR. LEWIS       Disbursement For:       2008         Senate       President       Other (specify)       ▼         State: GA       District: 05       Other (specify)       ▼         Full Name (Last, First, Middle Initial)       KENDRICK MEEK CAMPAIGN FOR CONGRESS           Mailing Address       111 NW 183rd Street       State       Zip Code          City       State       Zip Code           Miami       FL       33169	Amount of Each Disbursement this Period 5000.00 Transaction ID: SB23.4592 Date of Disbursement M 7 M / D 2 4 / Y 2 0 0 7 Y				
Atlanta       GA       30308         Purpose of Disbursement political contribution       Category/ Category/ Type         Candidate Name JOHN MR. LEWIS       Category/ Type         Office Sought:       X         House Senate       Disbursement For:       2008         Y       Primary       General         President       Other (specify)       ▼         State:       GA       30308         Full Name (Last, First, Middle Initial)       KENDRICK MEEK CAMPAIGN FOR CONGRESS         Mailing Address       111 NW 183rd Street Suite 325       State       Zip Code         City       State       Zip Code       Mailing         Miami       FL       33169       State	5000.00Transaction ID: SB23.4592Date of Disbursement $0 7 \ ^{\text{M}}$ / $^{\text{D}}$ 2 4/ $^{\text{Y}}$ 2 0 0 7 $^{\text{Y}}$				
political contribution       Category/ Type         Candidate Name JOHN MR. LEWIS       Category/ Type         Office Sought:       X         Senate       X         President       Other (specify)         State: GA       District: 05         Full Name (Last, First, Middle Initial)       KENDRICK MEEK CAMPAIGN FOR CONGRESS         Mailing Address       111 NW 183rd Street Suite 325         City       State         Kampi       FL	<b>Transaction ID:</b> SB23.4592 Date of Disbursement $0^{M} 7^{M}$ / $0^{D} 2 4$ / $2^{V} 0 0 7^{V}$				
JOHN MR. LEWIS     Type       Office Sought:     X     House     Disbursement For:     2008       Senate     President     Other (specify)     ▼       State: GA     District: 05     Other (specify)     ▼       Full Name (Last, First, Middle Initial)     KENDRICK MEEK CAMPAIGN FOR CONGRESS     -       Mailing Address     111 NW 183rd Street     State     Zip Code       City     State     Zip Code       Miami     FL     33169	Date of Disbursement				
Senate       X       Primary       General         President       Other (specify)       ▼         State: GA       District: 05       ●         Full Name (Last, First, Middle Initial)       KENDRICK MEEK CAMPAIGN FOR CONGRESS       ●         Mailing Address       111 NW 183rd Street Suite 325       ●         City       State       Zip Code         Miami       FL       33169	Date of Disbursement				
KENDRICK MEEK CAMPAIGN FOR CONGRESS         Mailing Address       111 NW 183rd Street         Suite 325         City       State       Zip Code         Miami       FL       33169	Date of Disbursement				
Suite 325CityStateZip CodeMiamiFL33169					
City State Zip Code Miami FL 33169	Amount of Each Disbursement this Period				
	Amount of Each Disbursement this Period				
Purpose of Disbursement political contribution	2000.00				
Candidate Name Category/ KENDRICK B MEEK Type					
Office Sought:       X       House       Disbursement For:       2008         Senate       X       Primary       General         President       Other (specify)       ▼					
	Transaction ID: SB23.4606 Date of Disbursement				
Mailing Address PO Box 682185	09 <sup>M</sup> /14 <sup>V</sup> /2007 <sup>V</sup>				
City State Zip Code Franklin TN 37068	Amount of Each Disbursement this Period				
Purpose of Disbursement political contribution	1500.00				
Candidate Name MARSHA MRS. BLACKBURN Category/ Type					
Office Sought:     X     House     Disbursement For:     2008       Senate     X     Primary     General       President     Other (specify)     ▼					
State: TN District. 07 SUBTOTAL of Disbursements This Page (optional)	8500.00				
TOTAL This Period (last page this line number only)					

ç	SCHEDULE B (FEC Form 3	SX)		NUMBER: PAGE 13/14							
		Use separate schedule(s)	(check onl								
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	Any Information copied from such Reports a or for commercial purposes, other than using										
- K		g the name and address of any political	committee to so								
		<b>O</b>									
	Kidney Care Council Political Action	on Committee									
Ľ	Full Name (Last, First, Middle Initial)			Transaction ID: SB23,4613							
Α.	RANGEL FOR CONGRESS		Date of Disbursement								
				$12^{M}$ / $12^{V}$ / $2007^{V}$							
	Mailing Address PO Box 5577 MANHATTANVII	LE STA									
	City	State Zip Code		Amount of Each Disbursement this Period							
	New York	NY 10027									
	Purpose of Disbursement			5000.00							
	political contribution										
	Candidate Name CHARLES B RANGEL		Category/ Type								
	Office Sought: X House	Disbursement For: 2008	туре								
	Senate	X Primary General									
	President	Other (specify)									
	State: NY District: 15	hannad i i i i i i i i									
	Full Name (Last, First, Middle Initial)			Transaction ID: SB23,4588							
В.	STEPHANIE TUBBS JONES FOR	US CONGRESS		Date of Disbursement							
	Mailing Address 3729 SILSBY RI			07 <sup>M</sup> / <sup>D</sup> 19 <sup>/</sup> <sup>Y</sup> 2007 <sup>Y</sup>							
	Maning Address 3729 SILOBT RI										
	City	State Zip Code		Amount of Each Disbursement this Period							
	UNIVERSITY HEIGHTS	OH 44118		2500.00							
	Purpose of Disbursement political contribution			2300.00							
	Candidate Name		Category/								
	STEPHANIE TUBBS JONES		Туре								
	Office Sought: X House	Disbursement For: 2008									
	Senate	X Primary General									
	President	Other (specify)									
	State: OH District: 11										

TOTAL This Period (last page this line number only)	►	28000.00
SUBTOTAL of Disbursements This Page (optional)	•	7500.00

FE6AN026

	SCHEDULE B (FEC Form 3X)			Use separate schedule(s) (check of						IE NUMBER: PAGE 14 / 14								4	
	IT		NTS	for each Detailed				P	21b 27		22 28a		23 28b	$\square$	24 28c	X	25 29		26 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																		
	$\rangle$	NAME OF COMMITTEE (In Full) Kidney Care Council Political Ac	ction Comm	iittee															
Α.		Full Name (Last, First, Middle Initial) Citizens for Grassley Mailing Address 30496 Union Avenue								Transaction ID: SB29.4636 Date of Disbursement									
		City New Hartford		State IA	Zip C 506						Amou	nt of	f Each	Dis	bursen				d
		Purpose of Disbursement non-federal contribution									L.					2	50.00	)	
		Candidate Name	_					ateg Typ	ory/ e										
		Office Sought: House Senate President	Disburser	ment For: Primary Other (sp		General													
		State: IA District: 17																	

SUBTOTAL of Disbursements This Page (optional)	►	250.00
TOTAL This Period (last page this line number only)	►	250.00
FE6AN026		FEC Schedule B ( Form 3X) (Revised 02/2003)