Image# 12951655602		PAGE 1 / 6
	EPORT OF RECEIPTS ND DISBURSEMENTS Other Than An Authorized Committee	Office Use Only
	E OR PRINT ▼ Example: If typing, type	12FE4M5
COMMITTEE (in full)	over the lines.	
ADDRESS (number and street)	341 MCCALLIE AVE SUITE 402	
▼ IF	PO BOX 3549	
Check if different than previously reported. (ACC)		TN 37404 –
2. FEC IDENTIFICATION NUME	BER V CITY	STATE ZIP CODE
C C00491969	3. IS THIS REPORT (N) OR	× AMENDED (A)
<ul> <li><b>4. TYPE OF REPORT</b> (Choose One)</li> <li>(a) Quarterly Reports:</li> </ul>	Monthly Report Due On:         Feb 20 (M2)         May 20 (M5)           Mar 20 (M3)         Jun 20 (M6)           Apr 20 (M4)         Jul 20 (M7)	Aug 20 (M8)         Nov 20 (M11) (Non-Election Year Only)           Sep 20 (M9)         Dec 20 (M12) (Non-Election Year Only)           Oct 20 (M10)         Jan 31 (YE)
April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3)	(c) 12-Day PRE-Election Report for the: Convention (12C)	General (12G) Runoff (12R) Special (12S)
X January 31 Year-End Report (YE)	Election on	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day <b>POST</b> -Election General (30G) Report for the:	Runoff (30R) Special (30S)
Termination Report (TER)	Election on	in the State of
5. Covering Period 07	01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	/         D         D         /         Y
-	Report and to the best of my knowledge and belief it is tru Mr. Steven Edward McGraw	ie, correct and complete.
Signature of Treasurer	n Edward McGraw [Electronically Filed] [	Date 05 08 2012
NOTE: Submission of false, erroneous	s, or incomplete information may subject the person signing th	nis Report to the penalties of 2 U.S.C. §437g.
Office Use Only		FEC FORM 3X Rev. 12/2004

### 05/08/2012 16 : 19

#### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

FEC Form 3X (Rev. 02/2003)

## ANESTHESIOLOGISTS ASSOCIATED, PC POLITICAL ACTION COMMITTEE

R	eport Covering the Period: From:	7 01 2011 To	b: 12 / D D / Y Y Y Y Y 31 2011
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2011		0.00
	(b) Cash on Hand at Beginning of Reporting Period	21900.00	
	(c) Total Receipts (from Line 19)	0.00	25000.00
	<ul> <li>(d) Subtotal (add Lines 6(b) and</li> <li>6(c) for Column A and Lines</li> <li>6(a) and 6(c) for Column B)</li> </ul>	21900.00	25000.00
7.	Total Disbursements (from Line 31)	7500.00	10600.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	14400.00	14400.00
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)	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

X

DETAILED SUMMARY PAGE       of Receipts         FEC Form 3X (Rev. 06/2004)       Page 3				
Write or Type Committee Name		. 490 🗸		
ANESTHESIOLOGISTS ASSOCIATE	ED, PC POLITICAL ACTION CC	DMMITTEE		
Report Covering the Period: From: 07	/         D         D         /         Y	12 / D D / Y Y Y Y 12 31 2011		
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)	0.00	25000.00		
		7 7		
(ii) Unitemized	0.00	0.00		
(iii) TOTAL (add				
Lines 11(a)(i) and (ii)▶	, 0.00	25000.00		
	0.00	0.00		
(b) Political Party Committees				
(such as PACs)	0.00	0.00		
(d) Total Contributions (add Lines	7			
11(a)(iii), (b), and (c)) (Carry				
Totals to Line 33, page 5)	0.00	25000.00		
12. Transfers From Affiliated/Other				
Party Committees	0.00	0.00		
13. All Loans Received	0.00	0.00		
13. All Loans Received	· · · · · · · · · · · · · · · · · · ·			
14 Lean Denouments Received	0.00	0.00		
<ol> <li>Loan Repayments Received</li> <li>Offsets To Operating Expenditures</li> </ol>		0.00		
(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.) 18. Transfers from Non-Federal and Levin Funds	0.00	0.00		
(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))►	0.00	25000.00		
L		7 7 7		
20. Total Federal Receipts				
(subtract Line 18(c) from Line 19)►	0.00	25000.00		

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# DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2	2003)	of Disbursements	Page 4
II. Disbursements		COLUMN A Total This Period	COLUMN B
Operating Expenditures: (a) Allocated Federal/Non-F Activity (from Schedule			Calendar Year-to-Date
(i) Federal Share		0.00	0.00
(ii) Non-Federal Share.		0.00	100.00
(b) Other Federal Operating Expenditures		0.00	0.00
(c) Total Operating Expendit (add 21(a)(i), (a)(ii), and		0.00	100.00
Transfers to Affiliated/Other F Committees	Party	0.00	0.00
Contributions to Federal Candidates/Committe	ees		
and Other Political Committe Independent Expenditures		7500.00	10500.00
(use Schedule E) Coordinated Party Expenditue	res	0.00	0.00
(2 U.S.C. §441a(d)) (use Schedule F)	L	0.00	0.00
Loan Repayments Made		0.00	0.00
Loans Made Refunds of Contributions To:		0.00	0.00
(a) Individuals/Persons Other Than Political Committees	er	0.00	0.00
(b) Political Party Committee	es	0.00	0.00
(c) Other Political Committe (such as PACs)	es	0.00	0.00
		7 1 7 1 6 1	
(d) Total Contribution Refun (add Lines 28(a), (b), ar		0.00	0.00
Other Disbursements		0.00	0.00
Federal Election Activity (2 U (a) Allocated Federal Election (from Schedule H6)	<b>o</b> ( <i>)</i> /		
(i) Federal Share	L	0.00	0.00
(ii) "Levin" Share		0.00	0.00
(b) Federal Election Activity With Federal Funds		0.00	0.00
(c) Total Federal Election Ad Lines 30(a)(i), 30(a)(ii)		0.00	0.00
Total Disbursements (add Lir 23, 24, 25, 26, 27, 28(d), 29		7500.00	10600.00
Total Federal Disbursements			
(subtract Line 21(a)(ii) and L from Line 31)		7500.00	10500.00

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## DETAILED SUMMARY PAGE

of Disbursements

II. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
3. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	25000.00	
I. Total Contribution Refunds (from Line 28(d))	0.00	0.00	
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	25000.00	
. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00	
. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00	
. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00	

SCHEDULE B (FEC Form 3)	()	FOR LINE	NUMBER: PAGE 6 OF 6	
ITEMIZED DISBURSEMENTS	Use separate schedule	e(s) (check only		
	for each category of the Detailed Summary Page		22 X 23 24 25 26	
[		27	28a 28b 28c 29 30b	
Any information copied from such Reports ar or for commercial purposes, other than using				
NAME OF COMMITTEE (In Full)	and and and address of any p			
	SOCIATED, PC POLITI	CAL ACTION	COMMITTEE	
	,			
Full Name (Last, First, Middle Initial)			Date of Disbursement	
AMERICAN SOCIETY OF ANESTHESIOLOGISTS				
Mailing Address 520 N NORTHWEST HIG	HWAY		11 09 2011	
City PARK RIDGE	State Zip Code IL 60068		Transaction ID : SB23.4102	
Purpose of Disbursement	12 00000			
Political Contribution			Amount of Each Disbursement this Period	
Candidate Name		Category/	5000.00	
Office Sought: House [	Disbursement For: 2012	Туре		
Office Sought: House [	Disbursement For: 2012	al		
President	Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial)				
B. BOB CORKER FOR SENAT	E 2012		Date of Disbursement	
Mailing Address 1910 21ST AVENUE SO	ІТН		11 09 2011	
City	State Zip Code		Transaction ID : SB23.4100	
NASHVILLE Purpose of Disbursement	TN 37212			
			Amount of Each Disbursement this Period	
Candidate Name		Category/	0500.00	
BOB CORKER FOR SENAT		Туре	2500.00	
Office Sought: House [	Disbursement For: 2012			
President	Other (specify)			
State: TN District: 00				
Full Name (Last, First, Middle Initial)				
С.				
Mailing Address				
Mailing Address				
City	State Zip Code			
Purpasa of Dichursoment				
Purpose of Disbursement			Amount of Each Disbursement this Period	
Candidate Name		Category/	Amount of Each Disbursement this Period	
		Туре		
•	Disbursement For:			
Senate President	Other (specify)	ai		
State: District:				
SUBTOTAL of Disbursements This Page (o	otional)	••••••	7500.00	
			7500.00	
TOTAL This Period (last page this line num	ber only)	••••••	/ 300.00	