

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Baxter Healthcare Political Action Committee

ADDRESS (number and street) 1501 K Street, NW
Suite 375
 Check if different than previously reported. (ACC)
Washington DC 20005

2. **FEC IDENTIFICATION NUMBER** C00117838
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 03 01 2009 through 03 31 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Sarah Creviston

Signature of Treasurer Electronically Filed by Sarah Creviston Date 04 20 2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only									
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FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Baxter Healthcare Political Action Committee

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		71894.25
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	93656.21									
(c) Total Receipts (from Line 19)	11035.96	32797.92								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	104692.17	104692.17								
7. Total Disbursements (from Line 31)	74000.00	74000.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	30692.17	30692.17								
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
Baxter Healthcare Political Action Committee

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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	9058.69	19433.23
(i) Itemized (use Schedule A)	1977.27	13364.69
(ii) Unitemized	11035.96	32797.92
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	11035.96	32797.92
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	11035.96	32797.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	11035.96	32797.92

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	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.....	74000.00	74000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	74000.00	74000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	74000.00	74000.00

DETAILED SUMMARY PAGE
of Disbursements

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	11035.96	32797.92
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11035.96	32797.92
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: PAGE 6 / 47
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	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)
Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Joy A. Amundson

Mailing Address 110 W. Onwentsia Road

City State Zip Code
Lake Forest IL 60045

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

Name of Employer Occupation
Baxter International, Inc. CVP, President BioScience

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1307.68

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 20090417164825-39

Amount of Each Receipt this Period
223.08

B.

Full Name (Last, First, Middle Initial)
Joy A. Amundson

Mailing Address 110 W. Onwentsia Road

City State Zip Code
Lake Forest IL 60045

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

Name of Employer Occupation
Baxter International, Inc. CVP, President BioScience

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1307.68

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 20090417161940-39

Amount of Each Receipt this Period
223.08

C.

Full Name (Last, First, Middle Initial)
Peter J. Arduini

Mailing Address 1059 Warrington Road

City State Zip Code
Deerfield IL 60015

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

Name of Employer Occupation
Baxter International, Inc. CVP, Pres Medication Delivery

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 20090417164825-41

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **546.16**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 47

(check only one)

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

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Peter J. Arduini

Mailing Address 1059 Warrington Road

City State Zip Code
Deerfield IL 60015

FEC ID number of contributing federal political committee. C

Name of Employer
Baxter International, Inc.

Occupation
CVP, Pres Medication Delivery

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	0		2	0	0	9

Transaction ID: 20090417161940-41

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Robert H. Armstrong

Mailing Address 133 Manchester Drive

City State Zip Code
Waukesha WI 53188

FEC ID number of contributing federal political committee. C

Name of Employer
Baxter International, Inc.

Occupation
VP, R&D Medical Devices

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	0	9

Transaction ID: 20090417164825-44

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Robert H. Armstrong

Mailing Address 133 Manchester Drive

City State Zip Code
Waukesha WI 53188

FEC ID number of contributing federal political committee. C

Name of Employer
Baxter International, Inc.

Occupation
VP, R&D Medical Devices

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	0		2	0	0	9

Transaction ID: 20090417161940-44

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) 200.00

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 / 47
(check only one)

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

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Donald Arthur Baker

Mailing Address 286 Whitworth

City State Zip Code
Thousand Oaks CA 91360

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

Name of Employer Occupation
Baxter International, Inc. VP II, Quality

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 402.60

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 20090417164825-88

Amount of Each Receipt this Period
67.10

B.

Full Name (Last, First, Middle Initial)
Donald Arthur Baker

Mailing Address 286 Whitworth

City State Zip Code
Thousand Oaks CA 91360

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

Name of Employer Occupation
Baxter International, Inc. VP II, Quality

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 402.60

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 20090417161940-89

Amount of Each Receipt this Period
67.10

C.

Full Name (Last, First, Middle Initial)
Michael J. Baughman

Mailing Address 5343 N Lakewood Avenue

City State Zip Code
Chicago IL 60640

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

Name of Employer Occupation
Baxter International, Inc. CVP, Controller

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 20090417164825-95

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **234.20**

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 / 47
(check only one)

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

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial)
Michael J. Baughman

Mailing Address 5343 N Lakewood Avenue

City State Zip Code
Chicago IL 60640

FEC ID number of contributing federal political committee. C

Name of Employer: Baxter International, Inc. Occupation: CVP, Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 20090417161940-97

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Edwin A. Betancourt-Morales

Mailing Address 101 N E 3rd Avenue, Ste 1600

City State Zip Code
Ft Lauderdale FL 33301

FEC ID number of contributing federal political committee. C

Name of Employer: Baxter International, Inc. Occupation: VP, Mfg Latin America

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.84

Date of Receipt MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 20090417164825-115

Amount of Each Receipt this Period 42.64

C. Full Name (Last, First, Middle Initial)
Edwin A. Betancourt-Morales

Mailing Address 101 N E 3rd Avenue, Ste 1600

City State Zip Code
Ft Lauderdale FL 33301

FEC ID number of contributing federal political committee. C

Name of Employer: Baxter International, Inc. Occupation: VP, Mfg Latin America

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.84

Date of Receipt MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 20090417161940-117

Amount of Each Receipt this Period 42.64

SUBTOTAL of Receipts This Page (optional) 185.28

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 10 / 47

(check only one)

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

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Susan K. Brown

Mailing Address 7707 Wisconsin Ave #412
#412

City State Zip Code
Bethesda MD 20814

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

Name of Employer Occupation
Baxter International, Inc. Mgr II, Plant

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 334.38

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 06 / 2009

Transaction ID: 20090417164825-14

Amount of Each Receipt this Period
55.73

B.

Full Name (Last, First, Middle Initial)
Susan K. Brown

Mailing Address 7707 Wisconsin Ave #412
#412

City State Zip Code
Bethesda MD 20814

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

Name of Employer Occupation
Baxter International, Inc. Mgr II, Plant

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 334.38

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 20 / 2009

Transaction ID: 20090417161940-14

Amount of Each Receipt this Period
55.73

C.

Full Name (Last, First, Middle Initial)
Sebastian J. Bufalino

Mailing Address 1091 Pine Meadow Ct

City State Zip Code
Vernon Hills IL 60061

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

Name of Employer Occupation
Baxter International, Inc. VP, Corporate Audit

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 302.64

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 06 / 2009

Transaction ID: 20090417164825-108

Amount of Each Receipt this Period
50.44

SUBTOTAL of Receipts This Page (optional) ▶

161.90

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 47
(check only one)

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

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Sebastian J. Bufalino

Mailing Address 1091 Pine Meadow Ct

City State Zip Code
Vernon Hills IL 60061

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

Name of Employer Occupation
Baxter International, Inc. VP, Corporate Audit

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 302.64

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 0 / 2 0 0 9

Transaction ID: 20090417161940-110

Amount of Each Receipt this Period
50.44

B.

Full Name (Last, First, Middle Initial)
Edward M. Conrad

Mailing Address 113 S Waverly Pl

City State Zip Code
Mt Prospect IL 60056

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

Name of Employer Occupation
Baxter International, Inc. Dir, Tax

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 377.52

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 0 6 / 2 0 0 9

Transaction ID: 20090417164825-92

Amount of Each Receipt this Period
62.92

C.

Full Name (Last, First, Middle Initial)
Edward M. Conrad

Mailing Address 113 S Waverly Pl

City State Zip Code
Mt Prospect IL 60056

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

Name of Employer Occupation
Baxter International, Inc. Dir, Tax

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 377.52

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 0 / 2 0 0 9

Transaction ID: 20090417161940-94

Amount of Each Receipt this Period
62.92

SUBTOTAL of Receipts This Page (optional) ► **176.28**

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 12 / 47
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Sarah L. Creviston

Mailing Address 717 North Maple Ave.

City Palatine State IL Zip Code 60067

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

Name of Employer Baxter International, Inc. Occupation VP, Government Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 594.06

Date of Receipt 03 / 06 / 2009

Transaction ID: 20090417164825-84

Amount of Each Receipt this Period 99.01

B.

Full Name (Last, First, Middle Initial)
Sarah L. Creviston

Mailing Address 23 Wynstone Way

City North Barrington State IL Zip Code 60010

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

Name of Employer Baxter International, Inc. Occupation VP, Government Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 594.06

Date of Receipt 03 / 20 / 2009

Transaction ID: 20090417161940-85

Amount of Each Receipt this Period 99.01

C.

Full Name (Last, First, Middle Initial)
Margarita Cruz-casse

Mailing Address Calle Guama #70 Mansiones Los Cedr

City Cayey State PR Zip Code 00736

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

Name of Employer Baxter Occupation Dir, Logistics

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 286.20

Date of Receipt 03 / 06 / 2009

Transaction ID: 20090417164825-118

Amount of Each Receipt this Period 47.70

SUBTOTAL of Receipts This Page (optional) ► 245.72

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 47
(check only one)

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

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Margarita Cruz-casse

Mailing Address Calle Guama #70 Mansiones Los Cedr

City State Zip Code
Cayey PR 00736

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

Name of Employer Occupation
Baxter Dir, Logistics

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 286.20

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 20090417161940-120

Amount of Each Receipt this Period
47.70

B.

Full Name (Last, First, Middle Initial)
Robert M. Davis

Mailing Address 21515 Hummingbird Court

City State Zip Code
Kildeer IL 60047

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

Name of Employer Occupation
Baxter International, Inc. CVP, CFO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 980.78

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 20090417164825-96

Amount of Each Receipt this Period
167.31

C.

Full Name (Last, First, Middle Initial)
Robert M. Davis

Mailing Address 21515 Hummingbird Court

City State Zip Code
Kildeer IL 60047

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

Name of Employer Occupation
Baxter International, Inc. CVP, CFO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 980.78

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 20090417161940-98

Amount of Each Receipt this Period
167.31

SUBTOTAL of Receipts This Page (optional) ► **382.32**

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 14 / 47
(check only one)

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

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Scot J. Deathos

Mailing Address 28461 Hidden Hills Blvd

City State Zip Code
Saugus CA 91390

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

Name of Employer Baxter International, Inc. Occupation Plant Mgr II

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.58

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 20090417161940-62

Amount of Each Receipt this Period
35.93

B.

Full Name (Last, First, Middle Initial)
Paul D. Estrem

Mailing Address 325 Clarewood Circle

City State Zip Code
Grayslake IL 60030

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

Name of Employer Baxter International, Inc. Occupation VP, Fin & Strat Initiatives

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 20090417164825-35

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Paul D. Estrem

Mailing Address 325 Clarewood Circle

City State Zip Code
Grayslake IL 60030

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

Name of Employer Baxter International, Inc. Occupation VP, Fin & Strat Initiatives

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 20090417161940-35

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **135.93**

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 15 / 47

(check only one)

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

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Camille I. Farhat

Mailing Address 1052 Warrington Road

City State Zip Code
Deerfield IL 60015

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

Name of Employer Occupation
Baxter International, Inc. GM, BPT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 6 / 2 0 0 9

Transaction ID: 20090417164825-46

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
Camille I. Farhat

Mailing Address 1052 Warrington Road

City State Zip Code
Deerfield IL 60015

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

Name of Employer Occupation
Baxter International, Inc. GM, BPT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 0 / 2 0 0 9

Transaction ID: 20090417161940-46

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
Valery E. Gallagher

Mailing Address 14334 Spring Meadow Court

City State Zip Code
Green Oaks IL 60048

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

Name of Employer Occupation
Baxter International, Inc. Dir, State Government Affairs

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 410.22

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 6 / 2 0 0 9

Transaction ID: 20090417164825-49

Amount of Each Receipt this Period

68.37

SUBTOTAL of Receipts This Page (optional)

168.37

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 16 / 47
(check only one)

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

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Valery E. Gallagher

Mailing Address 14334 Spring Meadow Court

City State Zip Code
Green Oaks IL 60048

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

Name of Employer Occupation
Baxter International, Inc. Dir, State Government Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 410.22

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 20090417161940-49

Amount of Each Receipt this Period
68.37

B.

Full Name (Last, First, Middle Initial)
James M. Gatling

Mailing Address 3704 Lindsay Ln

City State Zip Code
Crystal Lake IL 60014

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

Name of Employer Occupation
Baxter International, Inc. CVP, Global Manufacturing Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 919.24

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 20090417164825-13

Amount of Each Receipt this Period
156.54

C.

Full Name (Last, First, Middle Initial)
James M. Gatling

Mailing Address 3704 Lindsay Ln

City State Zip Code
Crystal Lake IL 60014

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

Name of Employer Occupation
Baxter International, Inc. CVP, Global Manufacturing Ops

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 919.24

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 20090417161940-13

Amount of Each Receipt this Period
156.54

SUBTOTAL of Receipts This Page (optional) ► **381.45**

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 17 / 47
	<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)
Baxter Healthcare Political Action Committee

A.	Full Name (Last, First, Middle Initial) Arthur J. Gibson		Date of Receipt
	Mailing Address 3775 Riverly Trace		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Marietta	GA	30067
	FEC ID number of contributing federal political committee. C		Transaction ID: 20090417164825-45
Name of Employer Baxter International, Inc.		Occupation VP, Environ, Health & Safety	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="303.84"/>	<input type="text" value="50.64"/>

B.	Full Name (Last, First, Middle Initial) Arthur J. Gibson		Date of Receipt
	Mailing Address 3775 Riverly Trace		<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Marietta	GA	30067
	FEC ID number of contributing federal political committee. C		Transaction ID: 20090417161940-45
Name of Employer Baxter International, Inc.		Occupation VP, Environ, Health & Safety	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="303.84"/>	<input type="text" value="50.64"/>

C.	Full Name (Last, First, Middle Initial) John Greisch		Date of Receipt
	Mailing Address 1310 Wildwood Lane		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Northbrook	IL	60062
	FEC ID number of contributing federal political committee. C		Transaction ID: 20090417164825-111
Name of Employer Baxter International, Inc.		Occupation CVP, President - International	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1433.86"/>	<input type="text" value="242.31"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="343.59"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 47
(check only one)

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

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)
John Greisch

Mailing Address 1310 Wildwood Lane

City State Zip Code
Northbrook IL 60062

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

Name of Employer
Baxter International, Inc. Occupation
CVP, President - International

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1433.86

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 20090417161940-113

Amount of Each Receipt this Period
242.31

B.

Full Name (Last, First, Middle Initial)
Lawrence P. Guiheen

Mailing Address 1653 Vista Oaks Way

City State Zip Code
Westlake Vilage CA 91361

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

Name of Employer
Baxter International, Inc. Occupation
President, BioPharmaceuticals

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 20090417161940-5

Amount of Each Receipt this Period
35.00

C.

Full Name (Last, First, Middle Initial)
Andrew C. Hayes

Mailing Address 1620 Timber Woods Lane

City State Zip Code
Libertyville IL 60048

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

Name of Employer
Baxter International, Inc. Occupation
Sr Dir, Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
373.74

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 20090417164825-53

Amount of Each Receipt this Period
62.29

SUBTOTAL of Receipts This Page (optional) ► **339.60**

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 19 / 47
(check only one)

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

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Andrew C. Hayes

Mailing Address 1620 Timber Woods Lane

City State Zip Code
Libertyville IL 60048

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

Name of Employer
Baxter International, Inc.

Occupation
Sr Dir, Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
373.74

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 20090417161940-53

Amount of Each Receipt this Period
62.29

B.

Full Name (Last, First, Middle Initial)
Irene P. Jakimcius

Mailing Address 2208 Wesley Ave.

City State Zip Code
Evanston IL 60201

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

Name of Employer
Baxter International, Inc.

Occupation
Assoc General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
474.18

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 20090417164825-100

Amount of Each Receipt this Period
79.03

C.

Full Name (Last, First, Middle Initial)
Irene P. Jakimcius

Mailing Address 2208 Wesley Ave.

City State Zip Code
Evanston IL 60201

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

Name of Employer
Baxter International, Inc.

Occupation
Assoc General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
474.18

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 20090417161940-102

Amount of Each Receipt this Period
79.03

SUBTOTAL of Receipts This Page (optional) ► **220.35**

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 20 / 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

A.	Full Name (Last, First, Middle Initial) Robert C. Keeley		Date of Receipt MM / DD / YYYY 03 / 06 / 2009		
	Mailing Address 22606 Bridle		Transaction ID: 20090417164825-73		
	City Kildeer	State IL	Zip Code 60047	Amount of Each Receipt this Period 49.02	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Baxter International, Inc.	Occupation VP, HD/CRRT Marketing			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 294.12			

B.	Full Name (Last, First, Middle Initial) Robert C. Keeley		Date of Receipt MM / DD / YYYY 03 / 20 / 2009		
	Mailing Address 22606 Bridle		Transaction ID: 20090417161940-74		
	City Kildeer	State IL	Zip Code 60047	Amount of Each Receipt this Period 49.02	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Baxter International, Inc.	Occupation VP, HD/CRRT Marketing			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 294.12			

C.	Full Name (Last, First, Middle Initial) Jane E. Kiernan		Date of Receipt MM / DD / YYYY 03 / 20 / 2009		
	Mailing Address 525 West Roscoe , #3W		Transaction ID: 20090417161940-28		
	City Chicago	State IL	Zip Code 60657-3540	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Baxter International, Inc.	Occupation General Manager, IV Therapy			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00			

SUBTOTAL of Receipts This Page (optional)	138.04
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 21 / 47
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial)
Marie G. Kissel

Mailing Address 1 Baxter Pkwy c/o Gerald Lema
C/O Gerald Lema

City State Zip Code
Deerfield IL 60015

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

Name of Employer Occupation
Baxter International, Inc. Dir, Gov. Affairs & Public Policy

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 447.54

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 20090417164825-112

Amount of Each Receipt this Period
74.59

B. Full Name (Last, First, Middle Initial)
Marie G. Kissel

Mailing Address 1 Baxter Pkwy c/o Gerald Lema
C/O Gerald Lema

City State Zip Code
Deerfield IL 60015

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

Name of Employer Occupation
Baxter International, Inc. Dir, Gov. Affairs & Public Policy

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 447.54

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 20090417161940-114

Amount of Each Receipt this Period
74.59

C. Full Name (Last, First, Middle Initial)
Edward (Ted) A. Langan

Mailing Address 450 East Waterside Drive Unit 1702
Unit 1702

City State Zip Code
Chicago IL 60601

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

Name of Employer Occupation
Baxter International, Inc. VP II, Sales

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 20090417164825-3

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional) ► 224.18

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 22 / 47
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial)
Edward (Ted) A. Langan

Mailing Address 450 East Waterside Drive Unit 1702
Unit 1702

City State Zip Code
Chicago IL 60601

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

Name of Employer Occupation
Baxter International, Inc. VP II, Sales

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 20 / 2009

Transaction ID: 20090417161940-3

Amount of Each Receipt this Period
75.00

B. Full Name (Last, First, Middle Initial)
Timothy P. Lawrence

Mailing Address 876 Writer CT

City State Zip Code
Vernon Hills IL 60061

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

Name of Employer Occupation
Baxter International, Inc. VP Manufacturing Med Delivery

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 328.86

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 06 / 2009

Transaction ID: 20090417164825-81

Amount of Each Receipt this Period
54.81

C. Full Name (Last, First, Middle Initial)
Timothy P. Lawrence

Mailing Address 876 Writer CT

City State Zip Code
Vernon Hills IL 60061

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

Name of Employer Occupation
Baxter International, Inc. VP Manufacturing Med Delivery

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 328.86

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 20 / 2009

Transaction ID: 20090417161940-82

Amount of Each Receipt this Period
54.81

SUBTOTAL of Receipts This Page (optional) ► **184.62**

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 23 / 47
(check only one)

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

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial) Susan R. Lichtenstein		Date of Receipt MM / DD / YYYY 03 / 06 / 2009
Mailing Address 1257 W Wrightwood Ave		Transaction ID: 20090417164825-97
City Chicago	State IL	Zip Code 60614
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 209.62
Name of Employer Baxter International, Inc.	Occupation CVP, General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1233.08	

B.

Full Name (Last, First, Middle Initial) Susan R. Lichtenstein		Date of Receipt MM / DD / YYYY 03 / 20 / 2009
Mailing Address 1257 W Wrightwood Ave		Transaction ID: 20090417161940-99
City Chicago	State IL	Zip Code 60614
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 209.62
Name of Employer Baxter International, Inc.	Occupation CVP, General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1233.08	

C.

Full Name (Last, First, Middle Initial) Raymond J. Linder		Date of Receipt MM / DD / YYYY 03 / 06 / 2009
Mailing Address 246 Montclair Road		Transaction ID: 20090417164825-34
City Vernon Hills	State IL	Zip Code 60061
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 44.04
Name of Employer Baxter International, Inc.	Occupation VP, HR - Mfg/Supply Chain	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 264.24	

SUBTOTAL of Receipts This Page (optional)	463.28
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 24 / 47
(check only one)

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

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Raymond J. Linder

Mailing Address 246 Montclair Road

City State Zip Code
Vernon Hills IL 60061

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

Name of Employer Occupation
Baxter International, Inc. VP, HR - Mfg/Supply Chain

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 264.24

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 20090417161940-34

Amount of Each Receipt this Period
44.04

B.

Full Name (Last, First, Middle Initial)
Ronald K. Lloyd

Mailing Address 1694 Falling Star Ave.

City State Zip Code
Westlake Village CA 91362

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

Name of Employer Occupation
Baxter International, Inc. VPGM BioTherapeutic & Regn Med

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 20090417164825-32

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Ronald K. Lloyd

Mailing Address 1694 Falling Star Ave.

City State Zip Code
Westlake Village CA 91362

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

Name of Employer Occupation
Baxter International, Inc. VPGM BioTherapeutic & Regn Med

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 20090417161940-32

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **144.04**

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 25 / 47
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	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)
Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Michael E. Martin

Mailing Address 10680 Red Leaf Circle

City State Zip Code
Lakewood IL 60014

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

Name of Employer
Baxter International, Inc.

Occupation
VP I, Mfg Strategic Planning

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
454.50

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 20090417164825-18

Amount of Each Receipt this Period
75.75

B.

Full Name (Last, First, Middle Initial)
Michael E. Martin

Mailing Address 10680 Red Leaf Circle

City State Zip Code
Lakewood IL 60014

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

Name of Employer
Baxter International, Inc.

Occupation
VP I, Mfg Strategic Planning

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
454.50

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 20090417161940-18

Amount of Each Receipt this Period
75.75

C.

Full Name (Last, First, Middle Initial)
Teresita Martinez-santini

Mailing Address A-1 Atenas St Repto Flamingo

City State Zip Code
Bayamon PR 00959

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

Name of Employer
Baxter

Occupation
Dir, Quality

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
286.14

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 20090417164825-117

Amount of Each Receipt this Period
47.69

SUBTOTAL of Receipts This Page (optional) ► **199.19**

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 26 / 47
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							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)
Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial)
Teresita Martinez-santini

Mailing Address A-1 Atenas St Repto Flamingo

City Bayamon State PR Zip Code 00959

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

Name of Employer Baxter Occupation Dir, Quality

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 286.14

Date of Receipt: 03 / 20 / 2009
Transaction ID: 20090417161940-119
 Amount of Each Receipt this Period: 47.69

B. Full Name (Last, First, Middle Initial)
Jeanne K. Mason

Mailing Address 1760 Duffy Lane

City Bannockburn State IL Zip Code 60015

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

Name of Employer Baxter International, Inc. Occupation CVP, Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1004.62

Date of Receipt: 03 / 06 / 2009
Transaction ID: 20090417164825-103
 Amount of Each Receipt this Period: 170.77

C. Full Name (Last, First, Middle Initial)
Jeanne K. Mason

Mailing Address 1760 Duffy Lane

City Bannockburn State IL Zip Code 60015

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

Name of Employer Baxter International, Inc. Occupation CVP, Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1004.62

Date of Receipt: 03 / 20 / 2009
Transaction ID: 20090417161940-105
 Amount of Each Receipt this Period: 170.77

SUBTOTAL of Receipts This Page (optional) ► 389.23

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 27 / 47
	<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)
Baxter Healthcare Political Action Committee

A.	Full Name (Last, First, Middle Initial) Michael J. McAndrew	Date of Receipt MM / DD / YYYY 03 / 20 / 2009
	Mailing Address 795 Foxmoor	Transaction ID: 20090417161940-61
	City State Zip Code Lake Zurich IL 60047	Amount of Each Receipt this Period 34.64
	FEC ID number of contributing federal political committee. C	
Name of Employer Baxter International, Inc.	Occupation Dir, Quality	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.84	

B.	Full Name (Last, First, Middle Initial) Bruce McGillivray	Date of Receipt MM / DD / YYYY 03 / 06 / 2009
	Mailing Address 151 Ridge Lane	Transaction ID: 20090417164825-74
	City State Zip Code Lake Forest IL 60045	Amount of Each Receipt this Period 163.08
	FEC ID number of contributing federal political committee. C	
Name of Employer Baxter International, Inc.	Occupation CVP, Pres Renal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 964.64	

C.	Full Name (Last, First, Middle Initial) Bruce McGillivray	Date of Receipt MM / DD / YYYY 03 / 20 / 2009
	Mailing Address 151 Ridge Lane	Transaction ID: 20090417161940-75
	City State Zip Code Lake Forest IL 60045	Amount of Each Receipt this Period 163.08
	FEC ID number of contributing federal political committee. C	
Name of Employer Baxter International, Inc.	Occupation CVP, Pres Renal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 964.64	

SUBTOTAL of Receipts This Page (optional)	360.80
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 28 / 47
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 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)
Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Peter J. O'Malley

Mailing Address 791 Summit Avenue

City State Zip Code
Lake Forest IL 60045

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

Name of Employer
Baxter International, Inc.

Occupation
VP, Business Alliances

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 20090417164825-87

Amount of Each Receipt this Period
45.00

B.

Full Name (Last, First, Middle Initial)
Peter J. O'Malley

Mailing Address 791 Summit Avenue

City State Zip Code
Lake Forest IL 60045

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

Name of Employer
Baxter International, Inc.

Occupation
VP, Business Alliances

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 20090417161940-88

Amount of Each Receipt this Period
45.00

C.

Full Name (Last, First, Middle Initial)
Robert L. Parkinson

Mailing Address 1332 Edgewood Lane

City State Zip Code
Northbrook IL 60062

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

Name of Employer
Baxter International, Inc.

Occupation
Chairman, President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3096.90

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 20090417164825-106

Amount of Each Receipt this Period
516.15

SUBTOTAL of Receipts This Page (optional) ► **606.15**

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 29 / 47
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

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

Mailing Address 1332 Edgewood Lane

City State Zip Code
Northbrook IL 60062

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

Name of Employer: Baxter International, Inc. Occupation: Chairman, President & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3096.90

Date of Receipt: MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 20090417161940-108

Amount of Each Receipt this Period: 516.15

B. Full Name (Last, First, Middle Initial)
Carla D. Pittman

Mailing Address 3933 Kenway Avenue

City State Zip Code
Los Angeles CA 90008

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

Name of Employer: Baxter International, Inc. Occupation: Sr Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 327.84

Date of Receipt: MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 20090417164825-75

Amount of Each Receipt this Period: 54.64

C. Full Name (Last, First, Middle Initial)
Carla D. Pittman

Mailing Address 3933 Kenway Avenue

City State Zip Code
Los Angeles CA 90008

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

Name of Employer: Baxter International, Inc. Occupation: Sr Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 327.84

Date of Receipt: MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 20090417161940-76

Amount of Each Receipt this Period: 54.64

SUBTOTAL of Receipts This Page (optional) ▶ **625.43**

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 30 / 47
	<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	

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial)
Janet L. Raciti

Mailing Address 19 Wimbledon Court

City State Zip Code
Lincolnshire IL 60069

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

Name of Employer Occupation
Baxter International, Inc. Dir, Strategic Reimbursement

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 20 / 2009

Transaction ID: 20090417161940-26

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
David H. Resnicoff

Mailing Address 926 Valley Road

City State Zip Code
Glencoe IL 60022

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

Name of Employer Occupation
Baxter International, Inc. Assoc Gen Coun/VP Compliance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.24

Date of Receipt
M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 20090417164825-104

Amount of Each Receipt this Period
55.04

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

Mailing Address 926 Valley Road

City State Zip Code
Glencoe IL 60022

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

Name of Employer Occupation
Baxter International, Inc. Assoc Gen Coun/VP Compliance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.24

Date of Receipt
M M / D D / Y Y Y Y
03 / 20 / 2009

Transaction ID: 20090417161940-106

Amount of Each Receipt this Period
55.04

SUBTOTAL of Receipts This Page (optional) ► 150.08

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 31 / 47
(check only one)

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

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Roibin Ryan

Mailing Address 1419 W Berteau

City State Zip Code
Chicago IL 60613

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

Name of Employer
Baxter International, Inc.

Occupation
Deputy Gen Counsel, Lit & Empl

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
576.24

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 20090417164825-101

Amount of Each Receipt this Period
96.04

B.

Full Name (Last, First, Middle Initial)
Roibin Ryan

Mailing Address 1419 W Berteau

City State Zip Code
Chicago IL 60613

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

Name of Employer
Baxter International, Inc.

Occupation
Deputy Gen Counsel, Lit & Empl

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
576.24

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 20090417161940-103

Amount of Each Receipt this Period
96.04

C.

Full Name (Last, First, Middle Initial)
James K. Saccaro

Mailing Address Baxter Expat Admin PO Box 747
PO Box 747

City State Zip Code
Deerfield IL 60015

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

Name of Employer
Baxter International, Inc.

Occupation
Vice President Finance Europe

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
311.64

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 20090417164825-114

Amount of Each Receipt this Period
51.94

SUBTOTAL of Receipts This Page (optional) ► **244.02**

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 32 / 47
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial)
James K. Saccaro

Mailing Address Baxter Expat Admin PO Box 747
PO Box 747

City State Zip Code
Deerfield IL 60015

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

Name of Employer Occupation
Baxter International, Inc. Vice President Finance Europe

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 311.64

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 20 / 2009

Transaction ID: 20090417161940-116

Amount of Each Receipt this Period
51.94

B. Full Name (Last, First, Middle Initial)
David P. Scharf

Mailing Address 931 Oak Street

City State Zip Code
Winnetka IL 60093

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

Name of Employer Occupation
Baxter International, Inc. CVP, Corp Secretary, Deputy GC

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 386.14

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 06 / 2009

Transaction ID: 20090417164825-98

Amount of Each Receipt this Period
66.15

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

Mailing Address 931 Oak Street

City State Zip Code
Winnetka IL 60093

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

Name of Employer Occupation
Baxter International, Inc. CVP, Corp Secretary, Deputy GC

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 386.14

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 20 / 2009

Transaction ID: 20090417161940-100

Amount of Each Receipt this Period
66.15

SUBTOTAL of Receipts This Page (optional) ► **184.24**

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 33 / 47
	<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

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

A.	Full Name (Last, First, Middle Initial) Chandra Sekhar		Date of Receipt	
	Mailing Address 1621 Mission Hills Rd Unit 211 Unit 211		M M / D D / Y Y Y Y Y 03 / 06 / 2009	
	City	State	Zip Code	Transaction ID: 20090417164825-4
	Northbrook	IL	60062	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		55.98	
	Name of Employer Baxter International, Inc.		Occupation VP II, Mfg Strategic Planning	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 335.88		

B.	Full Name (Last, First, Middle Initial) Chandra Sekhar		Date of Receipt	
	Mailing Address 1621 Mission Hills Rd Unit 211 Unit 211		M M / D D / Y Y Y Y Y 03 / 20 / 2009	
	City	State	Zip Code	Transaction ID: 20090417161940-4
	Northbrook	IL	60062	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		55.98	
	Name of Employer Baxter International, Inc.		Occupation VP II, Mfg Strategic Planning	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 335.88		

C.	Full Name (Last, First, Middle Initial) John P. Shannon		Date of Receipt	
	Mailing Address 432 Utley		M M / D D / Y Y Y Y Y 03 / 06 / 2009	
	City	State	Zip Code	Transaction ID: 20090417164825-86
	Elmhurst	IL	60126	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		52.50	
	Name of Employer Baxter International, Inc.		Occupation VP II, Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 315.00		

SUBTOTAL of Receipts This Page (optional)	164.46
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: (check only one)	PAGE 34 / 47
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

A.	Full Name (Last, First, Middle Initial) John P. Shannon		Date of Receipt MM / DD / YYYY 03 / 20 / 2009		
	Mailing Address 432 Utley		Transaction ID: 20090417161940-87		
	City Elmhurst	State IL	Zip Code 60126	Amount of Each Receipt this Period 52.50	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Baxter International, Inc.	Occupation VP II, Marketing			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 315.00			

B.	Full Name (Last, First, Middle Initial) Donald J. Sullivan		Date of Receipt MM / DD / YYYY 03 / 20 / 2009		
	Mailing Address 910 W Cypress Drive		Transaction ID: 20090417161940-92		
	City Arlington Heights	State IL	Zip Code 60005	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Baxter International, Inc.	Occupation VP, Risk Management			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00			

C.	Full Name (Last, First, Middle Initial) Karenann Terrell		Date of Receipt MM / DD / YYYY 03 / 06 / 2009		
	Mailing Address 914 Queens Lanes		Transaction ID: 20090417164825-102		
	City Glenview	State IL	Zip Code 60025	Amount of Each Receipt this Period 192.31	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Baxter International, Inc.	Occupation CVP, Chief Information Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1153.86			

SUBTOTAL of Receipts This Page (optional)	▶	284.81
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 35 / 47
	<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)
Baxter Healthcare Political Action Committee

A.	Full Name (Last, First, Middle Initial) Karenann Terrell		Date of Receipt MM / DD / YYYY 03 / 20 / 2009		
	Mailing Address 914 Queens Lanes		Transaction ID: 20090417161940-104		
	City Glenview	State IL	Zip Code 60025	Amount of Each Receipt this Period 192.31	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Baxter International, Inc.	Occupation CVP, Chief Information Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1153.86			

B.	Full Name (Last, First, Middle Initial) Onelia A. Vera-Littrell		Date of Receipt MM / DD / YYYY 03 / 06 / 2009		
	Mailing Address 619 Oleander Drive		Transaction ID: 20090417164825-83		
	City Hallandale	State FL	Zip Code 33009	Amount of Each Receipt this Period 97.57	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Baxter International, Inc.	Occupation Assistant General Counsel			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 585.42			

C.	Full Name (Last, First, Middle Initial) Onelia A. Vera-Littrell		Date of Receipt MM / DD / YYYY 03 / 20 / 2009		
	Mailing Address 619 Oleander Drive		Transaction ID: 20090417161940-84		
	City Hallandale	State FL	Zip Code 33009	Amount of Each Receipt this Period 97.57	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Baxter International, Inc.	Occupation Assistant General Counsel			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 585.42			

SUBTOTAL of Receipts This Page (optional)	387.45
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 36 / 47
(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)
Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial)
Cheryl L. White

Mailing Address 4069 Mayfield Street

City State Zip Code
Newbury Park CA 91320

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

Name of Employer: Baxter International, Inc. Occupation: CVP, Quality

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 874.62

Date of Receipt: 03 / 06 / 2009
Transaction ID: 20090417164825-89
Amount of Each Receipt this Period: 148.85

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

Mailing Address 4069 Mayfield Street

City State Zip Code
Newbury Park CA 91320

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

Name of Employer: Baxter International, Inc. Occupation: CVP, Quality

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 874.62

Date of Receipt: 03 / 20 / 2009
Transaction ID: 20090417161940-91
Amount of Each Receipt this Period: 148.85

C. Full Name (Last, First, Middle Initial)
Deborah K. Williams

Mailing Address 3805 Fenchurch Rd

City State Zip Code
Baltimore MD 21218

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

Name of Employer: Baxter International, Inc. Occupation: Dir, Public Policy

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 06 / 2009
Transaction ID: 20090417164825-56
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► 347.70

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 37 / 47
	<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	

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

A.	Full Name (Last, First, Middle Initial) Deborah K. Williams		Date of Receipt
	Mailing Address 3805 Fenchurch Rd		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 20 / 2009
	City	State	Zip Code
	Baltimore	MD	21218
	FEC ID number of contributing federal political committee. C		Transaction ID: 20090417161940-56
Name of Employer Baxter International, Inc.		Occupation Dir, Public Policy	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 300.00	<input type="text"/> 50.00

B.	Full Name (Last, First, Middle Initial) Vernon E. Williams		Date of Receipt
	Mailing Address 1601 Wyndham Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 06 / 2009
	City	State	Zip Code
	Santa Ana	CA	92705
	FEC ID number of contributing federal political committee. C		Transaction ID: 20090417164825-77
Name of Employer Baxter International, Inc.		Occupation VP, Information Technology	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 300.00	<input type="text"/> 50.00

C.	Full Name (Last, First, Middle Initial) Vernon E. Williams		Date of Receipt
	Mailing Address 1601 Wyndham Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 20 / 2009
	City	State	Zip Code
	Santa Ana	CA	92705
	FEC ID number of contributing federal political committee. C		Transaction ID: 20090417161940-78
Name of Employer Baxter International, Inc.		Occupation VP, Information Technology	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 300.00	<input type="text"/> 50.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 150.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 38 / 47

(check only one)

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

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Subramaniam Yogendran

Mailing Address Baxter Expatriate Admin PO Box 747
PO Box 747

City State Zip Code
Deerfield IL 60015

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

Name of Employer Occupation
Baxter International, Inc. VP, Finance Asia Pacific

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 269.46

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	0	9

Transaction ID: 20090417164825-113

Amount of Each Receipt this Period

44.91

B.

Full Name (Last, First, Middle Initial)
Subramaniam Yogendran

Mailing Address Baxter Expatriate Admin PO Box 747
PO Box 747

City State Zip Code
Deerfield IL 60015

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

Name of Employer Occupation
Baxter International, Inc. VP, Finance Asia Pacific

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼ 269.46

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	0		2	0	0	9

Transaction ID: 20090417161940-115

Amount of Each Receipt this Period

44.91

SUBTOTAL of Receipts This Page (optional)

89.82

TOTAL This Period (last page this line number only)

9058.69

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 39 / 47

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

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial) Anna Eshoo for Congress <hr/> Mailing Address 555 Capitol Mall, Suite 1425 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement 2010 Primary Candidate Name Anna G. Eshoo <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 14	Transaction ID: 77f26dde28553bd7cfb Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 0 9
	Amount of Each Disbursement this Period 1500.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Cantor for Congress <hr/> Mailing Address PO Box 17813 <hr/> City Richmond State VA Zip Code 23226 <hr/> Purpose of Disbursement 2010 Primary Candidate Name Eric I. Cantor <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: VA District: 07	Transaction ID: 5dd16d6ea559b5b1c89 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Citizens for Arlen Specter <hr/> Mailing Address 255 South 17th Street Suite 603 <hr/> City Philadelphia State PA Zip Code 19103 <hr/> Purpose of Disbursement 2010 Primary Candidate Name Arlen Specter <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District:	Transaction ID: 6ccbb11e5e0c2797295 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	7500.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

A.	Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee	Transaction ID: efed57595a4e3eddb7
	Mailing Address 430 South Capitol Street, SE 2nd Floor	Date of Disbursement MM / DD / YYYY 03 / 04 / 2009
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period 10000.00
	Purpose of Disbursement 2009 Contribution Candidate Name Democratic Congressional Campaign Committee	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Contribution	

B.	Full Name (Last, First, Middle Initial) Donna Christensen Campaign	Transaction ID: 936acf69767bc131a05
	Mailing Address PO Box 5197	Date of Disbursement MM / DD / YYYY 03 / 04 / 2009
	City St. Croix State VI Zip Code 00823	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement 2010 Primary Candidate Name Donna Marie Christian-Christensen	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: VI District: 01 Contribution	

C.	Full Name (Last, First, Middle Initial) Every Republican Is Crucial (ERICPAC)	Transaction ID: f3ceab11a00b592a0a1
	Mailing Address 25 East Main Street, Suite 200	Date of Disbursement MM / DD / YYYY 03 / 04 / 2009
	City Richmond State VA Zip Code 23219	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement 2009 Contribution Candidate Name Every Republican Is Crucial (ERICPAC)	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Contribution	

SUBTOTAL of Disbursements This Page (optional)	▶	17000.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

A.	Full Name (Last, First, Middle Initial) Hoosiers for Hill Mailing Address PO Box 1071 City Seymour State IN Zip Code 47274 Purpose of Disbursement 2010 Primary Candidate Name Baron P. Hill Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 09 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: efaabdd46db5d23f7c1 Date of Disbursement 03 / 31 / 2009 Amount of Each Disbursement this Period 2000.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Hoyer for Congress Mailing Address 4201 Northview Dr, Ste 307 City Bowie State MD Zip Code 20716 Purpose of Disbursement 2010 Primary Candidate Name Steny H. Hoyer Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 05 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5c10a541248c46f361b Date of Disbursement 03 / 31 / 2009 Amount of Each Disbursement this Period 5000.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Kevin McCarthy for Congress Mailing Address PO Box 12667 City Bakersfield State CA Zip Code 93389 Purpose of Disbursement 2010 Primary Candidate Name Kevin McCarthy Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 22 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 4d6f5658ccb512f7cff Date of Disbursement 03 / 04 / 2009 Amount of Each Disbursement this Period 1000.00 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

8000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 42 / 47

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

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Kirk for Congress</p> <p>Mailing Address PO Box 8</p> <p>City Winnetka State IL Zip Code 60093</p> <p>Purpose of Disbursement 2010 Primary</p> <p>Candidate Name Mark Steven Kirk</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 10</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 67b5eb79be75eb0c039</p> <p>Date of Disbursement 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Kirk for Congress</p> <p>Mailing Address PO Box 8</p> <p>City Winnetka State IL Zip Code 60093</p> <p>Purpose of Disbursement 2010 General</p> <p>Candidate Name Mark Steven Kirk</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 10</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01993cc0644ea475bc7</p> <p>Date of Disbursement 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Matheson for Congress</p> <p>Mailing Address PO Box 521048 Suite A</p> <p>City Salt Lake City State UT Zip Code 84152</p> <p>Purpose of Disbursement 2010 Primary</p> <p>Candidate Name Jim Matheson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: UT District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 8adbf6c0dd51485f9c</p> <p>Date of Disbursement 03 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

11500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 43 / 47

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

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

A.	Full Name (Last, First, Middle Initial) Matsui for Congress	Transaction ID: fb9ac9602bdd8acfb4 Date of Disbursement																			
	Mailing Address PO Box 1738	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	4		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	4		2	0	0	9												
	City Sacramento State CA Zip Code 95812	Amount of Each Disbursement this Period																			
	Purpose of Disbursement 2010 Primary	<table border="1"><tr><td>2000.00</td></tr></table>	2000.00																		
2000.00																					
	Candidate Name Doris O. Matsui	011 Category/ Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: CA District: 05																				

B.	Full Name (Last, First, Middle Initial) National Republican Senatorial Committee	Transaction ID: cfe7b4b87625662a9fc Date of Disbursement																			
	Mailing Address 425 Second Street NE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	4		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	4		2	0	0	9												
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period																			
	Purpose of Disbursement 2009 Contribution	<table border="1"><tr><td>15000.00</td></tr></table>	15000.00																		
15000.00																					
	Candidate Name National Republican Senatorial Committee	011 Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																			
	State: District: Contribution																				

C.	Full Name (Last, First, Middle Initial) New Democrat Coalition Political Action Committee Aka Ndc Pac	Transaction ID: ce7e7b41c4ac21a67cc Date of Disbursement																			
	Mailing Address 607 14th Street NW Suite 800	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	4		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	4		2	0	0	9												
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement 2009 Contribution	<table border="1"><tr><td>5000.00</td></tr></table>	5000.00																		
5000.00																					
	Candidate Name New Democrat Coalition Political Action Committee Aka Ndc Pac	011 Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																			
	State: District: Contribution																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>22000.00</td></tr></table>	22000.00
22000.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

A.	Full Name (Last, First, Middle Initial) Pallone for Congress	Transaction ID: 7ee9b5fec4342817ac5 Date of Disbursement
	Mailing Address PO Box 3176	<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City Long Branch State NJ Zip Code 07740	Amount of Each Disbursement this Period
	Purpose of Disbursement 2010 Primary	<input type="text" value="1000.00"/>
	Candidate Name Frank Pallone, Jr.	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 06	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Pete Stark Re-Election Committee	Transaction ID: 65e1243704ac0be485f Date of Disbursement
	Mailing Address PO Box 8331	<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City Fremont State CA Zip Code 94537	Amount of Each Disbursement this Period
	Purpose of Disbursement 2010 Primary	<input type="text" value="1000.00"/>
	Candidate Name Fortney H. Pete Stark	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 13	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Richard Burr Committee	Transaction ID: 8b4bb7c1e2ed10ee020 Date of Disbursement
	Mailing Address Post Office Box 5928	<input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2009"/>
	City Winston-Salem State NC Zip Code 27113	Amount of Each Disbursement this Period
	Purpose of Disbursement 2010 Primary	<input type="text" value="1000.00"/>
	Candidate Name Richard M. Burr	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial) Richard Burr Committee <hr/> Mailing Address Post Office Box 5928 <hr/> City Winston-Salem State NC Zip Code 27113 <hr/> Purpose of Disbursement 2010 Primary Candidate Name Richard M. Burr <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1c75f5c48e383d60332 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Roskam for Congress Committee <hr/> Mailing Address PO Box 713 <hr/> City Wheaton State IL Zip Code 60187 <hr/> Purpose of Disbursement 2010 Primary Candidate Name Peter J. Roskam <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 06 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 3fe42c38221ae3fce95 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Schiff for Congress <hr/> Mailing Address 777 S. Figueroa St. Suite 4050 <hr/> City Los Angeles State CA Zip Code 90017 <hr/> Purpose of Disbursement 2010 Primary Candidate Name Adam B. Schiff <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 29 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 8db4696dec3bbe52137 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ►

3000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 46 / 47

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

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NAME OF COMMITTEE (In Full)
Baxter Healthcare Political Action Committee

A. Full Name (Last, First, Middle Initial) Volunteers for Shimkus Mailing Address PO Box 5458 PO Box 5458 City Springfield State IL Zip Code 62705 Purpose of Disbursement 2010 Primary Candidate Name John M. Shimkus Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 19 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 8d8a233d66245b9a1c3 Date of Disbursement 03 / 31 / 2009
	Amount of Each Disbursement this Period 1000.00 Category/Type 011
B. Full Name (Last, First, Middle Initial) Wyden for Senate Mailing Address PO Box 3498 City Portland State OR Zip Code 97208 Purpose of Disbursement 2010 Primary Candidate Name Ron Wyden Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 86372dc9901ec586ff2 Date of Disbursement 03 / 31 / 2009
	Amount of Each Disbursement this Period 1000.00 Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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

74000.00

Image# 29933573715

Form/Schedule: **F3X**

Transaction ID:
