

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
2011 JAN 14 AM 8:20
FEC MAIL CENTER
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

T. A. Healthcare Pte

ADDRESS (number and street) 1339 Horton

Check if different than previously reported. (ACC) T. Jackson 49203

FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C00388025

3. IS THIS REPORT NEW (N) OR AMENDED (A)

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 Year-End 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 (12S)

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 04 16 2010 through 07 19 2010

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 Anthony F. RADUARO

Signature of Treasurer [Signature] Date 12 23 2010

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

T. W. Healthcare PAC

Report Covering the Period:

From:

04 / 16 / 2010

To:

07 / 19 / 2010

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

11030540705

- 6. (a) Cash on Hand
January 1,
- (b) Cash on Hand at
Beginning of Reporting Period.....
- (c) Total Receipts (from Line 19)
- (d) Subtotal (add Lines 6(b) and
6(c) for Column A and Lines
6(a) and 6(c) for Column B).....
- 7. Total Disbursements (from Line 31).....
- 8. Cash on Hand at Close of
Reporting Period
(subtract Line 7 from Line 6(d)).....
- 9. Debts and Obligations Owed **TO**
the Committee (itemize all on
Schedule C and/or Schedule D)
- 10. Debts and Obligations Owed **BY**
the Committee (itemize all on
Schedule C and/or Schedule D)

<input type="text" value="0"/>	<input type="text" value=""/>
<input type="text" value="0"/>	<input type="text" value=""/>
<input type="text" value="—"/>	<input type="text" value="5000 00"/>
<input type="text" value="—"/>	<input type="text" value="5000 00"/>
<input type="text" value="—"/>	<input type="text" value="5000 00"/>
<input type="text" value="0"/>	<input type="text" value="0"/>
<input type="text" value="—"/>	<input type="text" value=""/>
<input type="text" value="0"/>	<input type="text" value=""/>
<input type="text" value="—"/>	<input type="text" value=""/>
<input type="text" value="—"/>	<input type="text" value=""/>

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 Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

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

/

5000.00
5000.00
-
-
0

11030540798

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

11030540709

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked <i>1/4/11</i>
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

Am (0)
 PREPARER
 (3/2005)

1/14/11
 DATE PREPARED