10/15/2010 13:35

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines American Hospital Association PAC 325 Seventh Street, NW ADDRESS (number and street) Suite 700 Check if different than previously Washington DC 20004 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00106146 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Χ Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12S) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 09 0 1 2010 09 30 2010 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Ms. Melinda Hatton Type or Print Name of Treasurer Electronically Filed by Ms. Melinda Hatton 10 15 2010 Signature of Treasurer Date 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 **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

2/144 FEC Form 3X (Rev. 02/2003)

	Vrite or Type Committee Name American Hospital Association PAC		
ı	Report Covering the Period: From:	0 1 Y Y Y Y Y 2 0 1 0	To: 0 9 3 0 2 0 1 0
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 $20^{^{Y}}10^{^{Y}}$		2190847.18
	(b) Cash on Hand at Begining of Reporting Period	2140117.39	
	(c) Total Receipts (from Line 19)	112772.35	1246773.45
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	2252889.74	3437620.63
7.	Total Disbursements (from Line 31)	279055.72	1463786.61
8.	Cash on Hand at Close of		
	Reporting Period (subtract Line 7 from Line 6(d))	1973834.02	1973834.02
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	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 144

Write or Type Committee Name
American Hospital Association PAC

Report Covering the Period:

From:

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Y Y Y Y 2 0 1 0

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) From: a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	63923.88	507427.36
	(ii) Unitemized	33560.79	228172.45
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	97484.67	735599.81
(I	b) Political Party Committees	0.00	0.00
`	c) Other Political Committees (such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	97484.67	735599.81
	Fransfers From Affiliated/Other Party Committees	12100.00	478832.61
3. A	All Loans Received	0.00	0.00
	oan Repayments Received Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.) Carry Totals to Line 37, page 5)	0.00	14637.54
to	o Federal candidates and Other Political Committees	3000.00	15750.00
	Other Federal Receipts Dividends, Interest, etc.)	187.68	1953.49
	ransfers from Non-Federal and Levin Funds		
(;	a) Non-Federal Account (from Schedule H3)	0.00	0.00
(I	b) Levin Funds (from Schedule H5)	0.00	0.00
(0	c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
	Otal Receipts (add Lines 11(d), 2, 13, 14, 15, 16, 17, and 18(c))	112772.35	1246773.45
	otal Federal Receipts subtract Line 18(c) from Line 19)	112772.35	1246773.45

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Shared Federal/Non-Federal		
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	180.72	12038.26
Expenditures(c) Total Operating Expenditures	180.72	12036.26
(add 21(a)(i), (a)(ii) and (b))	180.72	12038.26
2. Transfers to Affiliated/Other Party	0.00	0.00
Committees	0.00	0.00
Federal Candidates/Committeesand Other Political Committees	278500.00	1199375.31
Independent Expenditure	0.00	251455.54
(use Schedule E)	3.00	201400.04
Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6. Loan Repayments Made	0.00	0.00
7. Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other	375.00	725.00
Than Political Committees	373.00	725.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)(d) Total Contribution Refunds	0.00	0.00
(add Lines 28(a), (b), and (c)) ▶	375.00	725.00
Other Disbursements	0.00	192.50
D. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity		
(from Schedule H6)	0.00	0.00
(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
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	279055.72	1463786.61
2. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)	070077 70	/ / 22
from Line 31)	279055.72	1463786.61

DETAILED SUMMARY PAGE

of Disbursements

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	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)	97484.67	735599.81
34.	Total Contribution Refunds (from Line 28(d))	375.00	725.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	97109.67	734874.81
86.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	180.72	12038.26
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	14637.54
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	180.72	-2599.28

FE6AN026

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 6 / 144
ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 X 16 17	
	y information copied from such Reports and St for commercial purposes, other than using the			
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)			
\rangle	American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Upton For All Of Us			Date of Receipt
	Mailing Address P.O. Box 490			09 07 7 2010
	City	State	Zip Code	Transaction ID: 18564737
	St. Joseph	MI	49085	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C00)200584	3000.00
	Name of Employer	Occupatio	n	
	Receipt For: 2010 X Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 3000.00	Refund of 7/10 TRUST PAC contribution, misdeposited into Upton account

SUBTOTAL of Receipts This Page (optional)	•	3000.00
TOTAL This Period (last page this line number only)	•	3000.00

City Spearfish SD 57783-1505 FEC ID number of contributing federal political committee. Name of Employer Spearlish Regional Hospit- all Receipt For: Primary General Other (specify) ▼ FEC ID number of contributing federal Political committee. Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins Mailing Address 6180 Lower Mountain Road City State Zip Code PA 18938 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼ State Zip Code PA 18938 FEC ID number of contributing federal political committee. C Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Beth Berry Mailing Address 500 Interstate Boulevard South City State Zip Code Primary General Other (specify) ▼ Date of Receipt Transaction ID: 18572854 Amount of Each Receipt this Peric Transaction ID: 18572854 Amount of Each Receipt this Peric	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 144 (check only one) X
A. Mr. Larry W Veitz Mailling Address 3333 Eagle Ridge Rd City State Zip Code Spearfish SD 57783-1505 FEC ID number of contributing tederal political committee. Name of Employer Spearfish Regional Hospit Amount of Each Receipt Tor: Primary General Other (specify) ▼ Chief Executive Officer and Receipt For: Primary General Other (specify) ▼ State Zip Code PA 18938 B. Full Name (Last, First, Middle Initial) Mr. Saan J. Hopkins Mailing Address 6180 Lower Mountain Road City State Zip Code PA 18938 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼ Date of Receipt Transaction ID: 18570646 Amount of Each Receipt Transaction ID: 18572654 Amount of Eac	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any person name and address of any political committee to so	for the purpose of soliciting contributions olicit contributions from such committee.
al Receipt For:	Mr. Larry W Veitz Mailing Address 3333 Eagle Ridge Rd City Spearfish FEC ID number of contributing federal political committee.	SD 57783-1505	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mr. Sean J. Hopkins Mailing Address 6180 Lower Mountain Road City State Zip Code New Hope PA 18938 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼ C. Mr. Sean J. Hopkins Mailing Address 6180 Lower Mountain Road C. Date of Receipt Transaction ID: 18570646 Amount of Each Receipt this Peric St. VP., Health Economics Aggregate Year-to-Date ▼ Transaction ID: 18570646 Amount of Each Receipt this Peric St. VP., Health Economics Aggregate Year-to-Date ▼ Transaction ID: 18570846 Amount of Each Receipt this Peric Transaction ID: 18570846 Amount of Each Receipt this Peric St. VP., Health Economics Aggregate Year-to-Date ▼ Transaction ID: 18572854 Amount of Each Receipt this Peric St. Vice President, Government Affairs Aggregate Year-to-Date ▼	al Receipt For: Primary General	Aggregate Year-to-Date ▼ 250.00	
City State Zip Code New Hope PA 18938 FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼ City State Zip Code Transaction ID: 18570646 Amount of Each Receipt this Peric St. VP., Health Economics Aggregate Year-to-Date ▼ Path Name (Last, First, Middle Initial) Ms. Beth Berry Mailing Address 500 Interstate Boulevard South City State Zip Code Nashville TN 37210-4634 FEC ID number of contributing federal political committee. Name of Employer Tennessee Hospital Association Receipt For: Primary General Occupation Sr. Vice President, Government Affairs Aggregate Year-to-Date ▼ Primary General Foo on	Mr. Sean J. Hopkins	Road	M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer New Jersey Hospital Association Sr. VP., Health Economics	City	State Zip Code	
Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Beth Berry Mailing Address 500 Interstate Boulevard South City State Zip Code Transaction ID: 18572854 Nashville TN 37210-4634 Name of Employer Tennessee Hospital Association Receipt For: Primary General Occupation Sr. VP., Health Economics Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 18572854 Amount of Each Receipt this Peric Source Source Transaction ID: 18572854 Amount of Each Receipt this Peric Source Tennessee Hospital Association Sr. Vice President, Government Affairs Receipt For: Primary General	New Hope	PA 18938	Amount of Each Receipt this Period
New Jersey Hośpital Association Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Beth Berry Mailing Address 500 Interstate Boulevard South City State Zip Code Nashville TN 37210-4634 FEC ID number of contributing federal political committee. Name of Employer Tennessee Hospital Association Receipt For: Primary General Sr. VP., Health Economics Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 18572854 Amount of Each Receipt this Perice 500.		C	5.00
Receipt For: Primary	New Jersey Hośpital Assoc-	· '	
Ms. Beth Berry Mailing Address 500 Interstate Boulevard South City State Zip Code Nashville TN 37210-4634 FEC ID number of contributing federal political committee. Name of Employer Tennessee Hospital Association Receipt M M M M O 9 0 9 7 2 0 0 0 9 7 2 0 0 0 9 7 2 0 0 0 9 7 2 0 0 0 9 7 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Receipt For: Primary General		
Mailing Address 500 Interstate Boulevard South City State Zip Code Nashville TN 37210-4634 FEC ID number of contributing federal political committee. Name of Employer Tennessee Hospital Association Receipt For: Primary General State Zip Code Transaction ID: 18572854 Amount of Each Receipt this Period State Zip Code Transaction ID: 18572854 Amount of Each Receipt this Period State Zip Code Transaction ID: 18572854 Amount of Each Receipt this Period State Zip Code Transaction ID: 18572854 Amount of Each Receipt this Period State Zip Code Transaction ID: 18572854 Amount of Each Receipt this Period State Zip Code Transaction ID: 18572854 Amount of Each Receipt this Period State Zip Code Transaction ID: 18572854 Amount of Each Receipt this Period State Zip Code Transaction ID: 18572854 Amount of Each Receipt this Period State Zip Code Transaction ID: 18572854 Amount of Each Receipt this Period State Zip Code Transaction ID: 18572854 Amount of Each Receipt this Period State Zip Code Transaction ID: 18572854 Amount of Each Receipt this Period State Zip Code Transaction ID: 18572854 Amount of Each Receipt this Period State Zip Code Transaction ID: 18572854 Amount of Each Receipt this Period State Zip Code Transaction ID: 18572854 Amount of Each Receipt this Period State Zip Code Transaction ID: 18572854 Amount of Each Receipt this Period State Zip Code Transaction ID: 18572854 Amount of Each Receipt this Period State Zip Code Transaction ID: 18572854 Amount of Each Receipt this Period State Zip Code Transaction ID: 18572854 Amount of Each Receipt this Period State Zip Code Transaction ID: 18572854 Tr	,		Date of Receipt
Nashville TN 37210-4634 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C Name of Employer Tennessee Hospital Association Receipt For: Primary General Amount of Each Receipt this Period Foo Oo		d South	M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Tennessee Hospital Association Receipt For: Primary General C C 500.00	City	State Zip Code	
Name of Employer Tennessee Hospital Association Receipt For: Primary General Occupation Sr. Vice President, Government Affairs Aggregate Year-to-Date FOO.00	Nashville	TN 37210-4634	Amount of Each Receipt this Period
ation Sr. Vice President, Government Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General Foo open		C	500.00
Primary General 500 00	<u>ation</u>	Sr. Vice President, Government Affairs	
	Primary General		
SUBTOTAL of Receipts This Page (optional)	SUBTOTAL of Receipts This Page (optional)		755.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 144 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association PA	g the name and ado	r not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Chris Clarke Mailing Address 500 Interstate Blvd	d. South		Date of Receipt
City Nashville FEC ID number of contributing	State TN	Zip Code 37210-4634	Transaction ID: 18572855 Amount of Each Receipt this Period
Name of Employer Tennessee Hospital Association Receipt For: Primary General Other (specify)		oce President, Center for Pat Year-to-Date 250.00	i 250.00
Full Name (Last, First, Middle Initial) Ms. Linda Crawford Mailing Address 142 West 5th Stre	Date of Receipt 0 9 0 9 2 0 1 0		
City	State	Zip Code	Transaction ID: 18572856
Cookeville FEC ID number of contributing federal political committee. Name of Employer Cookeville Regional Medical Center		Administrator, Nursing Serv	Amount of Each Receipt this Period 350.00
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	Aggregate	Year-to-Date ▼ 350.00]
Mr. Michael A. Dietrich Mailing Address 500 Interstate Bou	levard South		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 18572857
Nashville FEC ID number of contributing federal political committee.	C	37210-4634	Amount of Each Receipt this Period 250.00
Name of Employer Tennessee Hospital Associ- ation Receipt For:		Note President Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	250.00	
SUBTOTAL of Receipts This Page (option	al)		850.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS Any information copied from such Reports an	nd Statements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 144 (check only one) X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions		
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC		dress of any political committee to	solicit contributions from such committee.		
Full Name (Last, First, Middle Initial) Mr Gregory M. Duckett Mailing Address 350 North Humphre	Mr Gregory M. Duckett				
City	State	Zip Code	0 9 0 9 2 0 1 0 Transaction ID: 18572858		
Memphis	TN	38120-2177	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		500.00		
Name of Employer Baptist Memorial Health Care Corporati Receipt For: Primary General Other (specify) ▼		n ice President/ Corporate Cou e Year-to-Date ▼ 500.00	uns		
Full Name (Last, First, Middle Initial) Mr. James L. Goodloe			Date of Receipt		
Mailing Address 500 Interstate Blvd.	09 / 09 / 2010				
City	State	Zip Code	Transaction ID: 18572859		
<u>Nashville</u>	TN	37210-4634	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		500.00		
Name of Employer Tennessee Hospital Associ- ation	Occupation Senior V	n ice President			
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00			
Full Name (Last, First, Middle Initial) Ms. Susan Heath			Date of Receipt		
Mailing Address 2201 Childrens Way	у		09 09 2010		
City Nashville	State TN	Zip Code 37212-3164	Transaction ID: 18572865 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		350.00		
Name of Employer Vanderbilt Stallworth Reh- abilitation H	Occupation Chief Ex	n ecutive Officer			
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00			
SUBTOTAL of Receipts This Page (optional	l))	1350.00		

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 144 (check only one) X 11a 11b 11c 12 13 14 15 16 17
,	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may a name and addr	not be sold or used by any persess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
۷.	Full Name (Last, First, Middle Initial) Mr. Michael Huggins			Date of Receipt
	Mailing Address 500 Interstate Bouleva	09 / 09 / 2010		
	City	State	Zip Code	Transaction ID: 18572866
	Nashville FEC ID number of contributing federal political committee.	C	37210-4634	Amount of Each Receipt this Period 500.00
	Name of Employer Tennessee Hospital Association	Occupation Executive	Vice President & COO	
	Receipt For: Primary General Other (specify)	Aggregate \	Year-to-Date ▼ 500.00	
- 3.	Full Name (Last, First, Middle Initial) Mr. David Jimenez	Date of Receipt		
	Mailing Address 900 E. Oak Hill Ave	0 9 0 9 2 0 1 0		
	City	State	Zip Code	Transaction ID: 18572867
	Knoxville	TN	37917-4505	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Mercy Health Partners	Occupation Chief Exec	cutive Officer	
	Receipt For:	Aggregate \	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	500.00	
- :.	Full Name (Last, First, Middle Initial) Mr. Bill Jolley			Date of Receipt
	Mailing Address 500 Interstate Blvd., S	outh		0 9 0 9 2 0 1 0
	City	State	Zip Code	Transaction ID: 18572868
	Nashville FEC ID number of contributing federal political committee.	C	37210-4634	Amount of Each Receipt this Period 250.00
	Name of Employer Tennessee Hospital Association	Occupation Vice-Presi	dent-Rural Health Issues	
	Receipt For: Primary General Other (specify)	, '	Year-to-Date ▼ 250.00	
Γ				1250.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 144 (check only one) X 11a
,	Any information copied from such Reports and Sor for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
∠ A .	Full Name (Last, First, Middle Initial) Mr. Bernard L Mattingly			Date of Receipt
	Mailing Address 1 Medical Center Boule	09 / 09 / 2010		
	City	State	Zip Code	Transaction ID: 18572869
	Cookeville FEC ID number of contributing federal political committee.	C	38501-4294	Amount of Each Receipt this Period 1000.00
	Name of Employer Cookeville Regional Medic- al Center Receipt For:		n ecutive Officer e Year-to-Date ▼	
_	Primary General Other (specify) ▼		1000.00	
В.	Full Name (Last, First, Middle Initial) Mr. Robert Otwell	Date of Receipt		
	Mailing Address 1224 Trotwood Avenue	09 09 2010		
	City	State	Zip Code	Transaction ID: 18572870
	Columbia	TN	38401-4802	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Maury Regional Hospital	Occupation Chief Ex	n ecutive Officer	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
_ C.	Full Name (Last, First, Middle Initial) Mr. Scott Raynes			Date of Receipt
	Mailing Address 100 North Crest Drive	0 9 0 9 2 0 1 0		
	City	State	Zip Code	Transaction ID: 18572887
	Springfield	TN	37172-3927	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Northcrest Medical Center	Occupatio Presiden	n t and Chief Executive Office	r
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional)			2500.00
r	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X)

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for each	parate schedule(s) n category of the d Summary Page	FOR LINE NUMBER: PAGE 12 / 144 (check only one) X 11a 11b 11c 12 13 14 15 16 17
\	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sol name and address of an	d or used by any persor y political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Ms. Darlene Swart Mailing Address 500 Interstate Blvd. S			Date of Receipt O 9 D 0 9 D 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	City	State Zip Co		Transaction ID: 18572888
	Nashville FEC ID number of contributing federal political committee.	TN 37210	0-4634	Amount of Each Receipt this Period 500.00
	Name of Employer Tennessee Hospital Association Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Vice President and Aggregate Year-to-Da	·	
_ 3.	Full Name (Last, First, Middle Initial) Ms. Jill Talbert Mailing Address 500 Interstate Boulevar	d South		Date of Receipt
	City	State Zip Co	nde	0 9 0 9 2 0 1 0 Transaction ID: 18572889
	Nashville		0-4634	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Tennessee Hospital Associ- ation	-	acy and Grassroots	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Da	ate ▼ 250.00	
- :.	Full Name (Last, First, Middle Initial) Ms. Leticia Towns			Date of Receipt
	Mailing Address 877 Jefferson Avenue			M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip C	ode	Transaction ID: 18572890
	Memphis	TN 38103	3-2807	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		350.00
	Name of Employer Regional Medical Center at Memphis	+ '	Relations & Public P	oli
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Da	350.00	
Γ	SUBTOTAL of Receipts This Page (optional)			1100.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate sche for each category o Detailed Summary	f the	
0	r for commercial purposes, other than using the	tatements may not be sold or used b name and address of any political co	y any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
۸.	Full Name (Last, First, Middle Initial) Ms. Mary Layne Van Cleave		Date of Receipt	
	Mailing Address 1208 Brookview Drive		09 / 09 / 2010	
	City	State Zip Code TN 37027-8424	Transaction ID: 18572891	
	Brentwood FEC ID number of contributing federal political committee.	TN 37027-8424	Amount of Each Receipt this Period 1000.00	
	Name of Employer Tennessee Hospital Associ- ation	Occupation Executive VP & COO		
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	00.00	
	Full Name (Last, First, Middle Initial) Mr Rick Wagers	Date of Receipt		
	Mailing Address 877 Jefferson Avenue	09 09 2010		
	City	Transaction ID: 18572892		
	Memphis	TN 38103-2807	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	c	500.00	
	Name of Employer Regional Medical Center	Occupation Chief Financial Officer		
	at Memphis Receipt For:	Aggregate Year-to-Date ▼		
	Primary General Other (specify) ▼		00.00	
	Full Name (Last, First, Middle Initial) Ms. Shelly Dunham		Date of Receipt	
	Mailing Address P O Box 489	09 13 2010		
	City	State Zip Code	Transaction ID: 18572925	
	Okeene	OK 73763-0489	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.			
	Name of Employer Okeene Municipal Hospital	Name of Employer Okeene Municipal Hospital Occupation Chief Executive Officer		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	16.00	
Г				

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 144 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any person g the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. James Shmerling		Date of Receipt
Mailing Address 13123 E. 16th Ave	nue	09 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18575170
<u>Aurora</u>	CO 80045-7106	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Children's Hospital, The	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Carmelo J Moceri	Date of Receipt	
Mailing Address 1400 East Boulder	09 07 2010	
City	State Zip Code	Transaction ID: 18575501
Colorado Springs	CO 80909-5533	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Memorial Health System	Occupation Chief Strategy Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Gary Campbell		Date of Receipt
Mailing Address 188 Inverness Driv	re West #500	0 9 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18575503
Englewood	CO 80112-5204	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Centura Health	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (option	al)	1000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS Any information copied from such Reports an	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 144 (check only one) X				
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	g the name and address of any political committee to s	solicit contributions from such committee.				
Full Name (Last, First, Middle Initial) Ms. Pamela A. Nicholson Mailing Address 5570 DTC Parkway						
City	State Zip Code	0 9 0 7 2 0 1 0 Transaction ID: 18575504				
Greenwood Village	CO 80111-3043	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	250.00				
Name of Employer Centura Health	Occupation Senior Vice President]				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00					
Full Name (Last, First, Middle Initial) Mr. Michael McBride		Date of Receipt				
Mailing Address 2635 N. 7th St.		09 07 2010				
City	State Zip Code	Transaction ID: 18575578				
Grand Junction	CO 81501-8209	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	500.00				
Name of Employer St. Mary's Hospital and Medical Center	Occupation CEO					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00					
Full Name (Last, First, Middle Initial) Mr. Sean T. Barden		Date of Receipt				
Mailing Address 11422 Bluff's Ridge	9	0 9 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City Spotsylvania	State Zip Code VA 22551-8915	Transaction ID: 18578709 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	350.00				
Name of Employer Mary Washington Healthcare	Occupation Executive VP & CFO	1				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00					
SUBTOTAL of Receipts This Page (optional	al)	1100.00				

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 144 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	nd Statements may not be sold or used by any person the name and address of any political committee to s	for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Ms. Sharon M. Bass, Jr. Mailing Address 2619 Blue Hernon	Circle	Date of Receipt
City Roanoke FEC ID number of contributing	State Zip Code VA 24018-5133	Transaction ID: 18578710 Amount of Each Receipt this Period 350.00
Receipt For: Primary Other (specify) ▼	Occupation Vice President Imaging & Pharmacy Aggregate Year-to-Date 350.00	
Full Name (Last, First, Middle Initial) Mr J Michael Burris Mailing Address 1105 River Oaks La	Date of Receipt 0 9 0 7 2 0 1 0	
City Charlottesville FEC ID number of contributing federal political committee.	State Zip Code VA 22901-0637	Transaction ID: 18578775 Amount of Each Receipt this Period 350.00
Name of Employer Martha Jefferson Hospital Receipt For: Primary General Other (specify) ▼	Occupation Vice President/Chief Financial Officer Aggregate Year-to-Date 350.00	
Full Name (Last, First, Middle Initial) Mr. Patrick L. Christiansen Mailing Address 8377 Pedigrue Ct		Date of Receipt
City Gainesville FEC ID number of contributing federal political committee.	State Zip Code VA 20155-3240	Transaction ID: 18578782 Amount of Each Receipt this Period 350.00
Name of Employer Inova Health System Receipt For: Primary General Other (specify) ▼	Occupation Vice President Aggregate Year-to-Date 350.00	
SUBTOTAL of Receipts This Page (options)	1050.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 144 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. John Fick Mailing Address PO Box 7567 City Fredericksburg FEC ID number of contributing	State Zip Code VA 22404-7567	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary Other (specify)	C Occupation Trustee Aggregate Year-to-Date ▼ 350.00	350.00
Full Name (Last, First, Middle Initial) Ms. Marie Fredrick Mailing Address 11104 Trinity Lane City	State Zip Code	Date of Receipt M
Fredericksburg FEC ID number of contributing federal political committee. Name of Employer Mary Washington Healthcare	VA 22407-3712 C Occupation Administrative Director	Amount of Each Receipt this Period 350.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Shirley Holland Mailing Address 161 Lila Lane	·	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Boones Mill</u>	State Zip Code VA 24065-3749	Transaction ID: 18578892 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Carilion Clinic Receipt For:	Occupation Vice President/Strategic Development	t
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
) >	1050.00

SCHEDULE A (FEC Form 3X)

Mailing Address 7911 Madison Plantation Way State Zip Code Transaction ID: 18578928 Amount of Each Receipt this Period		SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 144 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Mailing Address 7911 Madison Plantation Way City Fredericksburg FC ID number of contributing federal political committee. Mailing Address 7911 Madison Plantation Way City Fredericksburg FC ID number of contributing federal political committee. Name of Employer Mary Washington Healthcare Name of Employer Mailing Address 10704 Ellies Court City Fairfax Station City State Cip Code VA 22039-1876 FEC ID number of contributing federal political committee. Name of Employer Innov Health System Chief Financial Officer Receipt For: Primary General Other (specify) ▼ State Cip Code VA 22039-1876 FEC ID number of contributing federal political committee. Name of Employer Chief Financial Officer Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Dr. J. Thomas Ryan, M.D. Mailing Address 7 Steeplechase Road City Fredericksburg FC ID number of contributing federal political committee. City State Cip Code Fredericksburg FC ID number of contributing federal political committee. City Fredericksburg FC ID number of contributing federal political committee. City Fredericksburg FC ID number of contributing federal political committee. City Fredericksburg FC ID number of contributing federal political committee. City Fredericksburg FC ID number of contributing federal political committee. City Fredericksburg FC ID number of contributing federal political committee. City Fredericksburg FC ID number of contributing federal political committee. Aggregate Year-to-Date VA 22405-3313 FC ID number of contributing federal political committee. Aggregate Year-to-Date FT Aggregate Year-to-Date FC ID number of contributing federal political committee. Aggregate Year-to-Date FC ID number of contributing federal political committee. Aggregate Year-to-Date FC ID number of contributing federal political committee. Aggregate Year-to-Date FC ID number of contributing federal political committee. Aggregate Year-to-Date FC ID number of contributing federal political committee. Aggregate Year-to-Date FC ID numbe		or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements ma name and ad	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Mailing Address 10704 Ellies Court City State Zip Code Transaction ID: 18578945 Fairfax Station VA 22039-1876 FEC ID number of contributing federal political committee. Name of Employer Inva State Zip Code Transaction ID: 18578945 Full Name (Last, First, Middle Initial) Dr. J. Thomas Ryan, M.D. Mailing Address 7 Steeplechase Road City State Zip Code Transaction ID: 18578945 Amount of Each Receipt this Period Date of Receipt Appregate Year-to-Date ▼ Date of Receipt Amount of Each Receipt this Period Date of Receipt Transaction ID: 18578968 Amount of Each Receipt Date of Receipt Transaction ID: 18578968 Amount of Each Receipt Date of Receipt Amount of Each Receipt this Period Date of Receipt Transaction ID: 18578968 Amount of Each Receipt this Period EC J. J. Thomas Ryan, M.D. Name of Employer Aggregate Year-to-Date ▼ Name of Employer Aggregate Year-to-Date ▼ Docupation Vice President/ Chief Medical Officer Receipt For: Primary General Other (specify) ▼ Apgregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼	λ.	Ms. Barbara Kane Mailing Address 7911 Madison Plantation City Fredericksburg FEC ID number of contributing federal political committee. Name of Employer Mary Washington Healthcare Receipt For: Primary General	State VA C Occupation Senior V	22407-8751 on fice President/ Chief Nursing e Year-to-Date ▼ 350.00	Transaction ID: 18578928 Amount of Each Receipt this Period 350.00
Dr. J. Thomas Ryan, , M.D. Mailing Address 7 Steeplechase Road City State Zip Code Fredericksburg VA 22405-3313 FEC ID number of contributing federal political committee. Name of Employer Mary Washington Healthcare Receipt For: Primary General Other (specify) ▼ Date of Receipt M M M O 9 / 0 7 / 2 0 1 0 Transaction ID: 18578968 Amount of Each Receipt this Period 350.00	33.	Mr Richard Magenheimer Mailing Address 10704 Ellies Court City Fairfax Station FEC ID number of contributing federal political committee. Name of Employer Inova Health System Receipt For: Primary General	VA C Occupation Chief Fir	22039-1876 on nancial Officer e Year-to-Date ▼	Transaction ID: 18578945 Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)	- D.	Dr. J. Thomas Ryan, , M.D. Mailing Address 7 Steeplechase Road City Fredericksburg FEC ID number of contributing federal political committee. Name of Employer Mary Washington Healthcare Receipt For: Primary General	C Occupation Vice Pre	22405-3313 on sident/ Chief Medical Officer e Year-to-Date ▼	Transaction ID: 18578968 Amount of Each Receipt this Period 350.00
		SUBTOTAL of Receipts This Page (optional)			1050.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 144 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC	io namo ana addicese en any poniosa committee te	
Full Name (Last, First, Middle Initial) Mr. Adrian Stanton		Date of Receipt
Mailing Address 5013 Fleming Drive		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18578971
<u>Annandale</u>	VA 22003-4110	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Virginia Hospital Center - Arlington	Occupation Vice President/CMO	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Mr. R Patrick Stewart	Date of Receipt	
Mailing Address 5 Oak Crest Ct	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State Zip Code	Transaction ID: 18578972
Fredericksburg	VA 22405-2440	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Mary Washington Healthcare	Occupation Senior Vice President/CIO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Dr. Mark Werner, M.D.	<u> </u>	Date of Receipt
Mailing Address 809 Pendleton Drive		09 / 07 / 7 2010
City	State Zip Code	Transaction ID: 18578973
Salem	VA 24153-2648	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Carilion Clinic	Occupation SVP for Medical Affairs	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
		1050.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 144 (check only one) X 11a 11b 11c 12 13 14 15 16
A 0	ny information copied from such Reports and r for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Judith C Waterston, , MS		Date of Receipt
	Mailing Address 150 York Street	7.01	0 9 0 7 2 0 1 0
	City Stoughton	State Zip Code MA 02072-1829	Transaction ID: 18579247 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Name of Employer New England Sinai Hospital and Rehabil Receipt For: Primary General Other (specify) ▼	Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 350.00	
	Full Name (Last, First, Middle Initial) Ms. Mary Shaughnessy Mailing Address 800 Boylston Street,	Date of Receipt	
	City	State Zip Code	0 9 1 7 2 0 1 0 Transaction ID: 18579251
	Boston	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Partners HealthCare Syste- m, Inc.	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Mr. Robert G Norton, , CHE		Date of Receipt
	Mailing Address 81 Highland Avenue		0 9 1 7 2 0 1 0
	City	State Zip Code	Transaction ID: 18579253
	Salem	MA 01970-2768	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Name of Employer North Shore Medical Center	Occupation President and Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)		1200.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 144 (check only one) X
A 0	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	statements may not be sold or used by any personance and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC		
۱.	Full Name (Last, First, Middle Initial) Mr David E Storto		Date of Receipt
	Mailing Address 357 Caterina Hts.	State Zip Code	09 16 2010
	City Concord	State Zip Code MA 01742-4750	Transaction ID: 18579254 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Spaulding Rehabilitation Hospital	Occupation President	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	1
	Other (specify)	500.00	
. –	Full Name (Last, First, Middle Initial) Dr. Richard Aubut	Date of Receipt	
	Mailing Address 55 Fogg Road	09 14 2010	
	City	State Zip Code	Transaction ID: 18579256
	South Weymouth	MA 02190-2432	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Name of Employer South Shore Hospital	Occupation President and Chief Executive Office	ır
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	350.00	
	Full Name (Last, First, Middle Initial) Mr. Gary Lapidas		Date of Receipt
	Mailing Address 33 Christine St.		09 17 2010
	City	State Zip Code	Transaction ID: 18579258
	Worcester	MA 01606-2306	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer UMass Memorial Health Car- e, Inc.	Occupation Senior Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Γ	NIDTOTAL of Descirts This Desc (entired)		1350.00

ITEMIZED RI	A (FEC Form 3X ECEIPTS	• /	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a
Any information cop	ied from such Reports an	d Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COM	MITTEE (In Full)		areas or any pointed committee to	o solicit contributions from such committee.
/ American Hos	pital Association PAC	,		
Full Name (Last, Mr. John Fernand	First, Middle Initial) ez	Date of Receipt		
Mailing Address	5 Otis Street	09 27 2010		
City		State	Zip Code	Transaction ID: 18579259
<u>Needham</u>		MA	02492-3403	Amount of Each Receipt this Period
FEC ID number federal political o		C		350.00
Name of Employ Brigham and Wo	er omen's Hospi-	Occupatio Vice Pres		
Receipt For: Primary Other (spe	General	Aggregate	e Year-to-Date ▼ 350.00	
Full Name (Last, Ms. Maureen A Br	First, Middle Initial)	Date of Receipt		
Mailing Address 26 Usher Terrace				0 9 2 4 2 0 1 0
City		State	Zip Code	Transaction ID: 18579268
<u>Bristol</u>		RI	02809-1709	Amount of Each Receipt this Period
FEC ID number federal political c		C		350.00
Name of Employ Morton Hospital al Center	er and Medic-	Occupatio Presiden	n t and CEO	
Receipt For:		Aggregate	e Year-to-Date ▼	
Primary Other (spe	☐ General cify) ▼		350.00	
Full Name (Last, Mr. Steve M. Ahno	First, Middle Initial)			Date of Receipt
Mailing Address	125 Airport Road			09 13 2010
City		State	Zip Code	Transaction ID: 18579281
Concord		NH	03301-7300	Amount of Each Receipt this Period
FEC ID number federal political c		C		83.33
Name of Employ New Hampshire sociation	er Hospital As-	Occupatio Presiden	n t and CEO	
Receipt For:		- ' '	e Year-to-Date ▼	
Primary Other (spe	General cify) ▼		250.03	
				783.33

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 144 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Kathy A. Bizarro, FACHE		Date of Receipt
Mailing Address 544 Upper Straw Rd		0 9 1 0 2 0 1 0
City	State Zip Code	Transaction ID: 18579298
Hopkinton	NH 03229-2023	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer New Hampshire Hospital As-	Occupation Executive Vice President	
sociation Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. Arthur W Nichols		Date of Receipt
Mailing Address 580 Court Street	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State Zip Code	Transaction ID: 18579299
Keene	NH 03431-1718	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Cheshire Medical Center	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. David W Tower, , FACHE		Date of Receipt
Mailing Address P O Box 912		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18579307
Wolfeboro	NH 03894-0912	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Huggins Hospital	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)		1200.00

A. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) A. Miling Address 80 Highland Street City State Zip Code Name of Employer LRGhealthcare Director, Contracting & Corp. Complian Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Martha Enriquez Mailing Address 1501 North Campbell Avenue City State Zip Code Transaction ID: 18579313 Amount of Each Receipt this Period Food on Transaction ID: 18579313 Amount of Each Receipt this Period Food on Transaction ID: 18579313 Amount of Each Receipt this Period Food on Transaction ID: 18579313 Amount of Each Receipt this Period Full Name (Last, First, Middle Initial) Ms. Martha Enriquez Mailing Address 1501 North Campbell Avenue City State Zip Code AZ 85724-0001 FEC ID number of contributing federal political committee. Curversity Medical Center Vice President & Chief Nursing Officer Receipt For: Primary General Occupation Vice President & Chief Nursing Officer Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial)	I	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS Any information copied from such Reports and Si	tatements may no	Use separate schedule(s) for each category of the Detailed Summary Page to be sold or used by any person	FOR LINE NUMBER: PAGE 24 / 144 (check only one) X
A. Mr. Andrew Patresson Mailing Address 80 Highland Street City Laconia NH 03246-3235 FEC ID number of contributing federal political committee. Name of Employer Primary General Other (specify) ▼ City Tussen Carpolitical committee. Name of Employer Lines First, Middle Initial) Az 85724-0001 FEC ID number of contributing federal political committee. Date of Receipt Tipe First, Middle Initial) Az 85724-0001 FEC ID number of contributing federal political committee. Name of Employer Lines First, Middle Initial) Az 85724-0001 FEC ID number of contributing federal political committee. Name of Employer University Medical Center Vice President & Chief Nursing Officer Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Date of Receipt Tipe First, Middle Initial) Amount of Each Receipt this Period Transaction ID: 18579318 Amount of Each Receipt this Period Date of Receipt Transaction ID: 18579318 Amount of Each Receipt Tipe First, Middle Initial) Date of Receipt Transaction ID: 18579337 Amount of Each Receipt Tipe First, Middle Initial) Amount of Each Receipt Tipe First, Middle Initial Tipe First, Middle Initial Tipe First, Middle Initial Tipe First, Middle Initial T		or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and addres	s of any political cómmíttee to	solicit contributions from such committee.
City State Zip Code NH 03246-3235 FEC ID number of contributing federal political committee. Name of Employer LRGhealthcare Creaming the Committee Creaming the Comm	∠ A .	Mr. Andrew Patterson			-
Laconia NH 03246-3235 FEC ID number of contributing tederal political committee. Name of Employer LRGhealthcare Director, Contracting & Corp. Complian Receipt For: Primary General Other (specify) ▼ Sou.00 Full Name (Last, First, Middle Initial) Mis. Martha Enriquez Mailing Address 1501 North Campbell Avenue City State Zip Code AZ 85724-0001 FEC ID number of contributing tederal political committee. Name of Employer University Medical Center Primary General Other (specify) ▼ Sou.00 Date of Receipt M			Otata	7:- Oada	09 15 2010
Second Committee C		-		•	
Receipt For:		FEC ID number of contributing		1 1 1 1 1	
Primary General Other (specify) ▼ 500.00 Pull Name (Last, First, Middle Initial) Ms. Martha Enriquez Malling Address 1501 North Campbell Avenue Date of Receipt O 9		Name of Employer LRGhealthcare		ntracting & Corp. Complia	ur .
Ms. Martha Enriquez Mailing Address 1501 North Campbell Avenue City State Zip Code AZ 85724-0001 FEC ID number of contributing federal political committee. Name of Employer University Medical Center Primary General Other (specify) ▼ State Zip Code City State Zip Code AZ 85724-0001 Full Name (Last, First, Middle Initial) Mr. Steve M. Ahnen Mailing Address 125 Airport Road City State Zip Code NH 03301-7300 FC ID number of contributing federal political committee. Name of Employer New Hampshire Hospital Association Receipt For: PC ID number of contributing federal political committee. Name of Employer New Hampshire Hospital Association Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Occupation President and CEO Aggregate Year-to-Date ▼		Primary General	Aggregate Yea		
City Tucson FEC ID number of contributing federal political committee. Name of Employer University Medical Center Receipt For: Primary General Other (specify) ▼ State Zip Code AZ 85724-0001 C. Mr. Steve M. Ahnen Mailing Address 125 Airport Road City Concord FEC ID number of contributing federal political committee. C. Mr. Steve M. Ahnen Mailing Address 125 Airport Road City Concord FEC ID number of contributing federal political committee. Name of Employer New Hampshire Hospital Association Receipt For: Primary General Other (specify) ▼ Occupation President and CEO Aggregate Year-to-Date ▼ Occupation President and CEO Aggregate Year-to-Date ▼	- В.	Ms. Martha Enriquez	Date of Receipt		
Tucson AZ 85724-0001 FEC ID number of contributing federal political committee. C Name of Employer University Medical Center Name of Employer University Medical Center Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) C: Full Name (Last, First, Middle Initial) City State Zip Code NH 03301-7300 FEC ID number of contributing federal political committee. Name of Employer New Hampshire Hospital Association Receipt For: Primary General Occupation Name of Employer New Hampshire Hospital Association Receipt For: Primary General Other (specify) ▼ AZ 85724-0001 Amount of Each Receipt this Period Date of Receipt M M M D D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		Mailing Address 1501 North Campbell A			
FEC ID number of contributing federal political committee. Name of Employer University Medical Center Name of Employer University Medical Center Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Steve M. Ahnen Mailing Address 125 Airport Road City State Zip Code NH 03301-7300 FEC ID number of contributing federal political committee. Name of Employer New Hampshire Hospital Association Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Code Transaction ID: 18579337 Amount of Each Receipt this Period Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼		City		Zip Code	Transaction ID: 18579318
Name of Employer University Medical Center Name of Employer University Medical Center		Tucson	AZ	85724-0001	Amount of Each Receipt this Period
University Medical Center Vice President & Chief Nursing Officer			С		500.00
Primary		University Medical Center	Vice Preside		
Mailing Address 125 Airport Road City State Zip Code Transaction ID: 18579337 Concord NH 03301-7300 FEC ID number of contributing federal political committee. Name of Employer New Hampshire Hospital Association Receipt For: Primary General Other (specify) ▼ Answer of Employer New Hampshire Hospital Association President and CEO Aggregate Year-to-Date ▼ 1082-22		Primary General	Aggregate Ye		
City Concord State Zip Code NH 03301-7300 FEC ID number of contributing federal political committee. Name of Employer New Hampshire Hospital Association Receipt For: Primary General Other (specify) Occupation President and CEO Aggregate Year-to-Date 333.36	- C.				Date of Receipt
Concord NH 03301-7300 Amount of Each Receipt this Period EC		Mailing Address 125 Airport Road			
FEC ID number of contributing federal political committee. Name of Employer New Hampshire Hospital Association Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 333.36		•	State	Zip Code	Transaction ID: 18579337
Name of Employer New Hampshire Hospital Association Receipt For: Primary Other (specify) ▼ Occupation President and CEO Aggregate Year-to-Date 333.36		Concord	NH	03301-7300	Amount of Each Receipt this Period
New Hampshiré Hospital Association Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 333.36			C		83.33
Primary General Other (specify) ▼ 333.36		New Hampshiré Hospital Association	President ar		
SUBTOTAL of Receipts This Page (optional)		Primary General	Aggregate Yea		
		SUBTOTAL of Receipts This Page (optional)		·····	1083.33

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 144 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Steven A. Godfrey Mailing Address Post Office Box 100 City New Britain FEC ID number of contributing federal political committee. Name of Employer Central Connecticut Health Alliance Receipt For: Primary General Other (specify)	State Zip Code CT 06050-4000 C Occupation VP Payer Relations/ Gov Affairs Aggregate Year-to-Date 500.00	Date of Receipt M M M / D D / Y Y Y Y Y O 9 2 3 2 0 1 0 Transaction ID: 18579407 Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Dr. Steven D Hanks Mailing Address P O Box 100 City New Britain FEC ID number of contributing federal political committee. Name of Employer New Britain General Hospital Receipt For: Primary General Other (specify)	State Zip Code CT 06050-0100 C Occupation Senior Vice President Medical Affairs Aggregate Year-to-Date 500.00	Date of Receipt M M M / D D / Y Y Y Y Y O 9
Full Name (Last, First, Middle Initial) Mr. Clarence J Silvia Mailing Address 81 Meriden Avenue City Southington FEC ID number of contributing federal political committee. Name of Employer Bradley Memorial Receipt For: Primary General Other (specify)	State Zip Code CT 06489-3268 C Occupation President and Chief Executive Officer Aggregate Year-to-Date 500.00	Date of Receipt M M C 23 2010 Transaction ID: 18579409 Amount of Each Receipt this Period 500.00
SUBTOTAL of Receipts This Page (optional)	• • • • • • • • • • • • • • • • • • •	1500.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 144 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any persor the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Thomas J Gryzbek		Date of Receipt
Mailing Address 1335 Capri Lane	State 7in Code	09 09 2010
City Dyer	State Zip Code IN 46311-1324	Transaction ID: 18579815 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Saint Margaret Mercy Heal- thcare Center	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Kevin D Leahy		Date of Receipt
Mailing Address 51015 Shamrock Hi	lls Court	09 / 09 / 2010
City	State Zip Code	Transaction ID: 18579823
Granger	IN 46530-7830	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Sisters of St. Francis He- alth Services	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. James J. Myers		Date of Receipt
Mailing Address 2626 Windermere W	loods Drive	09 / 09 / 2010
City	State Zip Code	Transaction ID: 18579833
Bloomington	IN 47401-5451	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Bloomington Hospital	Occupation CFO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line numb	<u> </u>	

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 144 (check only one) X 11a 11b 11c 12 13 14 15 16 17
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements ma name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) Ms. Linda E White Mailing Address 5505 Timberlake Court City Evansville FEC ID number of contributing federal political committee. Name of Employer Deaconess Health System	State IN C Occupation Hospital	Zip Code 47710-4134 on System President and CEO	Date of Receipt M M M / D D / Y Y Y Y Y O 9 / 2 0 1 0 Transaction ID: 18579849 Amount of Each Receipt this Period 500.00
_	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) Mr. Al J. Wleklinski Mailing Address 802 E 9th St City	State	Zip Code	Date of Receipt M M
	Auburn FEC ID number of contributing federal political committee. Name of Employer	C Occupatio	46706-2428 on	Amount of Each Receipt this Period 250.00
	DeKalb Memorial Hospital Receipt For: Primary General Other (specify) ▼	Dir. Supp	port Services e Year-to-Date ▼ 250.00	
С.	Full Name (Last, First, Middle Initial) Mr. Steven G Littleson, , FACHE Mailing Address 55 Fair Haven Road			Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Fair Haven	State NJ	Zip Code 07704-3305	Transaction ID: 18579998 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Meridian Health Receipt For:	Occupation Presiden	nt	
	Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			1000.00
	TOTAL This Period (last page this line number of	nnlv)		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 144 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any persor g the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins Mailing Address 6180 Lower Mount	tain Road	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City New Hope	State Zip Code PA 18938	Transaction ID: 18579999 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.42
Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify) ▼	Occupation Sr. VP., Health Economics Aggregate Year-to-Date 273.78	
Full Name (Last, First, Middle Initial) Ms. Patricia R Recupero, , JD, M.D. Mailing Address 345 Blackstone Bo	pulevard	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18580003
Providence	RI 02906-4800	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Butler Hospital	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Fred Hipp, Jr.	•	Date of Receipt
Mailing Address 1011 Deacon Roa	d	09 17 2010
City	State Zip Code	Transaction ID: 18580016
Hainesport FEC ID number of contributing federal political committee.	NJ 08036-3610	Amount of Each Receipt this Period 500.00
Name of Employer Virtua Health	Occupation Vice President	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SURTOTAL of Receipts This Page (entire	nal)	770.42

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 144 (check only one) X
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any person name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins		Date of Receipt
Mailing Address 6180 Lower Mountain F	Road	0 9 1 7 2 0 1 0
City	State Zip Code	Transaction ID: 18580017
New Hope	PA 18938	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5.00
Name of Employer New Jersey Hospital Assoc-	Occupation Sr. VP., Health Economics	
iation Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	253.36	
Full Name (Last, First, Middle Initial) Mr. Richard P Miller		Date of Receipt
Mailing Address 122 Bainbridge Street		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18580028
<u>Philadelphia</u>	PA 19147-2402	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer Virtua Health	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) Ms. Patricia Ostaszewski, MS, CRRN,		Date of Receipt
Mailing Address 54 Bay Way		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18580032
Brick	NJ 08723-7361	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer HEALTHSOUTH Rehabilitation Hospital of	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1255.00

Any information copied from such Reports and Statements may not be sold or used by or for commercial purposes, other than using the name and address of any political cor NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Ms. Mary C. Becker Mailing Address 7800 South Eagle Road City State Zip Code Columbia MO 65203-9017 FEC ID number of contributing federal political committee. Name of Employer Missouri Hospital Association Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Daniel R. Landon Mailing Address 1811 Forest Park Court City State Zip Code Jefferson City State Zip Code Jefferson City MO 65109-9782 FEC ID number of contributing federal political committee. Name of Employer Missouri Hospital Association Receipt For: Name of Employer Missouri Hospital Association Receipt For: Primary General Occupation State Zip Code MO 65109-9782 C	Date of Receipt M M M
Ms. Mary C. Becker Mailing Address 7800 South Eagle Road City State Zip Code	Transaction ID: 18580616 Amount of Each Receipt this Period 48.13 Improvement
City State Zip Code Columbia MO 65203-9017 FEC ID number of contributing federal political committee. Name of Employer Missouri Hospital Association Senior VP, Commc. & Health Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Daniel R. Landon Mailing Address 1811 Forest Park Court City State Zip Code Jefferson City MO 65109-9782 FEC ID number of contributing federal political committee. Name of Employer Missouri Hospital Association Receipt For: Aggregate Year-to-Date ▼ C Occupation Sr. Vice President, Governm Aggregate Year-to-Date ▼	Transaction ID: 18580616 Amount of Each Receipt this Period 48.13 Improvement
Columbia MO 65203-9017 FEC ID number of contributing federal political committee. Name of Employer Missouri Hospital Association Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Daniel R. Landon Mailing Address 1811 Forest Park Court City State Zip Code Jefferson City MO 65109-9782 FEC ID number of contributing federal political committee. Name of Employer Missouri Hospital Association Receipt For: Aggregate Year-to-Date ▼ C Coccupation State Zip Code MO 65109-9782 C Occupation Sr. Vice President, Governm Aggregate Year-to-Date ▼	Amount of Each Receipt this Period 48.13 Improvement 0.65
FEC ID number of contributing federal political committee. Name of Employer Missouri Hospital Association Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Daniel R. Landon Mailing Address 1811 Forest Park Court City State Zip Code MO 65109-9782 FEC ID number of contributing federal political committee. Name of Employer Missouri Hospital Association Receipt For: Aggregate Year-to-Date ▼ Cuty State Zip Code MO 65109-9782 C C Occupation Sr. Vice President, Governm Aggregate Year-to-Date ▼	Improvement 0.65
Full Name (Last, First, Middle Initial) Mr. Daniel R. Landon Mailing Address 1811 Forest Park Court City State Zip Code Jefferson City MO 65109-9782 FEC ID number of contributing federal political committee. Name of Employer Missouri Hospital Association Receipt For: Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Cuty State Zip Code MO 65109-9782 C C C C C C C C C C C C C	Improvement 0.65
tion Receipt For: Primary	0.65
Receipt For: Primary Other (specify) ▼ Pull Name (Last, First, Middle Initial) Mr. Daniel R. Landon Mailing Address 1811 Forest Park Court City State Zip Code MO 65109-9782 FEC ID number of contributing federal political committee. Name of Employer Missouri Hospital Association Receipt For: Aggregate Year-to-Date C	
Tull Name (Last, First, Middle Initial) Mr. Daniel R. Landon Mailing Address 1811 Forest Park Court City State Zip Code Jefferson City MO 65109-9782 FEC ID number of contributing federal political committee. Name of Employer Missouri Hospital Association Receipt For: Occupation Sr. Vice President, Governm Aggregate Year-to-Date ▼	
Mr. Daniel R. Landon Mailing Address 1811 Forest Park Court City State Zip Code Jefferson City MO 65109-9782 FEC ID number of contributing federal political committee. Name of Employer Missouri Hospital Association Receipt For: Occupation Sr. Vice President, Governm Aggregate Year-to-Date ▼	
Mailing Address 1811 Forest Park Court City State Zip Code Jefferson City MO 65109-9782 FEC ID number of contributing federal political committee. Name of Employer Missouri Hospital Association Receipt For: Occupation Sr. Vice President, Governm Aggregate Year-to-Date ▼	Date of Receipt
Jefferson City MO 65109-9782 FEC ID number of contributing federal political committee. C Name of Employer Missouri Hospital Association Occupation Sr. Vice President, Governm Aggregate Year-to-Date ▼	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Missouri Hospital Association Receipt For: Occupation Sr. Vice President, Governm Aggregate Year-to-Date ▼	Transaction ID: 18580624
Federal political committee. Name of Employer Missouri Hospital Association Receipt For: Occupation Sr. Vice President, Governm Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
tion Receipt For: Aggregate Year-to-Date ▼	62.50
Receipt For: Aggregate Year-to-Date ▼	ental Relat
	2.50
Full Name (Last, First, Middle Initial) Ms. Kathleen C. Poff	Date of Receipt
Mailing Address 5119 Coventry Waye	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Zip Code	Transaction ID: 18580628
Jefferson City MO 65101-8284	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	48.13
Name of Employer Missouri Hospital Association Senior Vice President & CFC	
Receipt For: Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼ 24	0.65
SUBTOTAL of Receipts This Page (optional)	158.76

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS Any information copied from such Reports an	Use separate schedule(s) for each category of the Detailed Summary Page d Statements may not be sold or used by any persor	FOR LINE NUMBER: PAGE 31 / 144 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and address of any political committee to s	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Jerry M. Sill		Date of Receipt
Mailing Address 2906 Valley View Te	errace	0 9 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18580630
Jefferson City	MO 65109-1069	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	48.13
Name of Employer Missouri Hospital Associa- tion	Occupation Senior Vice President & General Coun	nse
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	240.65	
Full Name (Last, First, Middle Initial) Mr. Thomas H Rockers		Date of Receipt
Mailing Address 153 Gay Avenue		09 07 2010
City	State Zip Code	Transaction ID: 18580644
Clayton	MO 63105-3665	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	176.00
Name of Employer St. Anthony's Medical Cen- ter	Occupation President and Chief Executive Officer	1
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 376.00	
Full Name (Last, First, Middle Initial) Ms. Crystal Martin		Date of Receipt
Mailing Address 4501 Orchard Trail	Court	09 15 2010
City	State Zip Code	Transaction ID: 18580676
Orchard Lake	MI 48324-3040	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	225.00
Name of Employer Harper University Hospita- I/Hutzel Wome	Occupation Assistant VP	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	225.00	
)	449.13

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 144 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements ma	up not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
∠ A .	Full Name (Last, First, Middle Initial) Mr. David R Molmen			Date of Receipt
	Mailing Address 1000 South Columbia	Road		09 08 2010
	City	State	Zip Code	Transaction ID: 18580694
	Grand Forks	ND	58201-4032	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Altru Health System	Occupation Chief Ex	n ecutive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
— В.	Full Name (Last, First, Middle Initial) Mr. M Kenneth Posey, , FACHE	l		Date of Receipt
	Mailing Address P O Box 527			0 9 0 7 2 0 1 0
	City	State	Zip Code	Transaction ID: 18581845
	Bay Springs	MS	39422-0527	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		400.00
	Name of Employer Jasper General Hospital	Occupation Administ		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 410.00	
_ С.	Full Name (Last, First, Middle Initial) Mr. Richard G Hilton			Date of Receipt
-	Mailing Address Drawer 1506			0 9 0 7 2 0 1 0
	City Starkville	State MS	Zip Code 39760-1506	Transaction ID: 18581846 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer OCH Regional Medical Cent- er	Occupation Associat	n e Administrator and Chief Fir	na
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 220.00	
[SUBTOTAL of Receipts This Page (optional)	l	·····	750.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 144 (check only one) X
Any information copied from such Reports or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	and Statements may not be sold or used by any persong the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Sam W. Cameron Mailing Address 28 Waterford Place City Jackson	ce State Zip Code MS 39211-2945	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Mississippi Hospital Association Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation President & Chief Executive Officer Aggregate Year-to-Date 960.00	87.50
Full Name (Last, First, Middle Initial) Mr. Thomas G Bartlett, III, M.D. Mailing Address 25117 Highway 15		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Union FEC ID number of contributing federal political committee.	State Zip Code MS 39365-9088	Amount of Each Receipt this Period 275.00
Name of Employer Laird Hospital Receipt For: Primary General Other (specify) ▼	Occupation Administrator Aggregate Year-to-Date 280.00	
Full Name (Last, First, Middle Initial) Ms Patty Crowley Mailing Address Five New England	I Executive Park	Date of Receipt
City Burlington	State Zip Code MA 01803-5010	Transaction ID: 18615481 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Massachusetts Hospital Assaciation	Occupation Vice President, Governance & Memel	350.00 ber B
sociation Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (option	nal)	712.50

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	(cricial oring oring)
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association PA	g the name and address of any political commit	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Gary L Gottlieb, , M.D. Mailing Address 800 Boylston Street	et, Ste 1150	Date of Receipt
City Boston FEC ID number of contributing	State Zip Code MA 02199-8123	Transaction ID: 18615488 Amount of Each Receipt this Period 500.00
Name of Employer Partners HealthCare Syste- m, Inc. Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation President and Chief Executive Off Aggregate Year-to-Date 500.00	fficer
Full Name (Last, First, Middle Initial) Mr. Mark R Tolosky, , FACHE, J Mailing Address 759 Chestnut Street	et	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City Springfield FEC ID number of contributing federal political committee.	State Zip Code MA 01199-1001	Transaction ID: 18616521 Amount of Each Receipt this Period 500.00
Name of Employer Baystate Medical Center Receipt For: Primary General Other (specify) ▼	Occupation President and Chief Executive Of Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Edward H Moore Mailing Address 100 South Street		Date of Receipt
City Southbridge FEC ID number of contributing federal political committee.	State Zip Code MA 01550-4051	Transaction ID: 18616539 Amount of Each Receipt this Period 350.00
Name of Employer Harrington Memorial Hospital Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation President and Chief Executive Of Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (option	al)	1350.00

SCHEDULE A (FEC Form 3X)

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 144 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any person name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Mr Kevin Smith Mailing Address 41 Highland Avenue City Winchester FEC ID number of contributing federal political committee. Name of Employer Winchester Hospital Receipt For: Primary General Other (specify)	State Zip Code MA 01890-1496 C Occupation Vice President Finance & Administration Aggregate Year-to-Date 350.00	Date of Receipt M M M D D D Z 8 Z 0 1 0 Transaction ID: 18616541 Amount of Each Receipt this Period 350.00
В.	Full Name (Last, First, Middle Initial) Dr. Richard Iseke Mailing Address P O Box 189 City Lawrence FEC ID number of contributing federal political committee. Name of Employer Winchester Hospital Receipt For: Primary General	State Zip Code MA 01842-0389 C Occupation Vice President, Medical Affairs & CMO Aggregate Year-to-Date ▼	Date of Receipt M M
_ C.	Other (specify) Full Name (Last, First, Middle Initial) Ms. Kathy Schuler Mailing Address 1 Alpine Circle City Wakefield FEC ID number of contributing federal political committee. Name of Employer Winchester Hospital	State Zip Code MA 01880-1544 C Occupation Chief Nursing Officer	Date of Receipt M M M
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	850.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 144 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any pe name and address of any political committee	
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Howard E Rohleder		Date of Receipt
Mailing Address 1995 East State Street		09 07 2010
City	State Zip Code	Transaction ID: 18617724
Salem	OH 44460-0121	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Salem Community Hospital	Occupation President and Chief Executive Office	cer
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial)	0 0 0 0 0 0 0 0	
Mr. Raymond M Chorey		Date of Receipt
Mailing Address P O Box 610		09 / 07 / 4 9 9
City	State Zip Code	Transaction ID: 18617726
Cambridge	OH 43725-0610	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Southeastern Ohio Regional Medical Cen	Occupation President and Chief Executive Office	cer
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Victoria Gluckman		Date of Receipt
Mailing Address 3 Grandin Ln		09 07 2010
City	State Zip Code	Transaction ID: 18617727
Cincinnati	OH 45208-3358	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Christ Hospital	Occupation Board Member	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC	2	
Full Name (Last, First, Middle Initial) Mr. James Akers		Date of Receipt
Mailing Address 430 Thorn Hill Lane	•	0 9 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18617729
Middletown	OH 45042-3664	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Atrium Medical Center	Occupation Trustee	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Thomas G. Breitenbach		Date of Receipt
Mailing Address 250 Southview Roa	d	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18617730
Dayton	OH 45419-3326	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Miami Valley Hospital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. James R Pancoast		Date of Receipt
Mailing Address 40 West Fourth Stro	eet	09 07 2010
City	State Zip Code	Transaction ID: 18617734
Dayton	OH 45402-1840	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Premier Health Partners	Occupation President and Chief Operating Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	ı)	1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 144 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. John S Prout		Date of Receipt
Mailing Address 375 Dixmyth Avenue		M M / D D / Y Y Y Y Y O D O O O O O O O O O O O O O
City	State Zip Code	Transaction ID: 18620140
Cincinnati	OH 45220-2475	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	175.00
Name of Employer Good Samaritan Hospital	Occupation President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Ms. Andrea Nenzel		Date of Receipt
Mailing Address 14432 SE Eastgate V	Vay	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18621044
Bellevue	WA 98007-6493	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer PeaceHealth	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Kathleen Paul		Date of Receipt
Mailing Address 1100 Ninth Avenue		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18621045
Seattle	WA 98101-2756	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Virginia Mason Medical Ce- nter	Occupation Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
		675.00

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 39 / 144 (check only one) X
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any persol ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Mr. Dennis A Popp			Date of Receipt
	Mailing Address P O Box 218			09 07 2010
	City Enumclaw	State WA	Zip Code 98022-0218	Transaction ID: 18621046 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33322 32.0	350.00
	Name of Employer Enumclaw Regional Hospital	Occupation Administr	ator and Chief Executive O	 ffi
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
В.	Full Name (Last, First, Middle Initial) Mr. Gregory C Reed, , FACHE	<u> </u>		Date of Receipt
	Mailing Address 2000 Hospital Drive			09 07 2010
	City Sedro Woolley	State WA	Zip Code 98284-4327	Transaction ID: 18621047
	FEC ID number of contributing federal political committee.	C	30204-4321	Amount of Each Receipt this Period 325.00
	Name of Employer United General Hospital	Occupation Chief Exe	n ecutive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00	
C.	Full Name (Last, First, Middle Initial) Mr. Scott W Bosch			Date of Receipt
	Mailing Address 2520 Cherry Avenue			0 9 0 7 2 0 1 0
	City	State WA	Zip Code	Transaction ID: 18621048
	Bremerton FEC ID number of contributing federal political committee.	C	98310-4270	Amount of Each Receipt this Period 500.00
	Name of Employer Harrison Medical Center	Occupation President	and Chief Executive Office	r
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			1175.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 144 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Diane Cecchettini, RN, MS Mailing Address 40700 54th August A	DA/	Date of Receipt
Mailing Address 12709 54th Avenue, N City	State Zip Code	0 9 0 7 2 0 1 0 Transaction ID: 18621050
Gig Harbor	WA 98332-8853	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer MultiCare Health System	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. John Fletcher	I	Date of Receipt
Mailing Address 506 Second Avenue Suite 1200		09 / 07 / 2010
City	State Zip Code	Transaction ID: 18621051
Seattle	WA 98104-2343	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Providence Health & Servi- ces	Occupation Vice President&Chief Executive Office	r
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Rodney F Hochman, , M.D.		Date of Receipt
Mailing Address 747 Broadway Avenue	9	09 / 07 / 4 4 4 4
City	State Zip Code	Transaction ID: 18621052
<u>Seattle</u>	WA 98122-4379	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer Swedish Health Services	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1500.00
TOTAL This Period (last page this line number		

	ULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 144 (check only one) X
or for comm	tion copied from such Reports and St ercial purposes, other than using the PF COMMITTEE (In Full) an Hospital Association PAC	atements mand add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	ne (Last, First, Middle Initial) n K Knight nddress 747 Broadway Avenue			Date of Receipt
City Seattle		State WA	Zip Code 98122-4307	Transaction ID: 18621053 Amount of Each Receipt this Period
FEC ID	number of contributing olitical committee.	C		500.00
Receipt	Employer Health Services For: mary General ner (specify) The services		erating Officer Year-to-Date ▼ 500.00	1
Full Nam	te (Last, First, Middle Initial) ard W Linneweh, , Jr. address 2811 Tieton Drive	0 0		Date of Receipt
City		State	Zip Code	0 9 0 7 2 0 1 0 Transaction ID: 18621054
	number of contributing olitical committee.	C	98902-3799	Amount of Each Receipt this Period 500.00
spital Receipt Pri	Employer Valley Memorial Ho- For: mary General ner (specify) •		n t and Chief Executive Office e Year-to-Date ▼ 500.00	r
	ne (Last, First, Middle Initial) h Patterson			Date of Receipt
Mailing A				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Seattle		State WA	Zip Code 98101-2756	Transaction ID: 18621055 Amount of Each Receipt this Period
FEC ID	number of contributing olitical committee.	С		500.00
nter	Employer Mason Medical Ce-	Occupatio Executive	n e VP/Chief Operating Office	r
	For: mary General ner (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTA	L of Receipts This Page (optional))	1500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 144 (check only one) X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using t	d Statements may not be sold or used by any persor the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Gary V Peck		Date of Receipt
Mailing Address P O Box 197 City	State Zip Code	0 9 0 7 2 0 1 0 Transaction ID: 18621056
Chewelah	WA 99109-0197	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Providence St. Joseph's Hospital Receipt For:	Occupation President Aggregate Year-to-Date	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Ms. Nancy Steiger	•	Date of Receipt
Mailing Address 2901 Squalicum Par	kway	09 07 2010
City	State Zip Code	Transaction ID: 18621057
Bellingham	WA 98225-1851	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer St. Joseph Hospital	Occupation Chief Executive Officer and Chief Miss	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Joseph W. Wilczek		Date of Receipt
Mailing Address 1175 SW 296th Stre	eet	09 07 2010
City	State Zip Code	Transaction ID: 18621058
Federal Way	WA 98023-8251	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Franciscan Health System	Occupation President & CEO	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	500.00	
SUBTOTAL of Receipts This Page (optional)		1500.00
TOTAL This Period (last page this line numb		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 144 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Roger E Green Mailing Address 559 Capitol Boulevar		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18621084
Saint Paul FEC ID number of contributing federal political committee.	MN 55103-0000	Amount of Each Receipt this Period 20.83
Name of Employer HealthEast Care System Receipt For: Primary General Other (specify) ▼	Occupation Vice President Strategy, Policy and C Aggregate Year-to-Date ▼ 208.32	0
Full Name (Last, First, Middle Initial) Mr. Lawrence J Massa Mailing Address 2550 University Aver	nue W.	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18621085
Saint Paul	MN 55114-1052	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	225.00
Name of Employer Minnesota Hospital Associ- ation	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	
Full Name (Last, First, Middle Initial) Mr. Mark Benninghoff		Date of Receipt
Mailing Address 505 S Linden Ave		0 9 1 4 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18621305
Pittsburgh	PA 15208-2846	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Valley Health System	Occupation Chief Operating Officer/ Valley Physic	,
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)	·	595.83
TOTAL This Period (last page this line number	er only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 144 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PA	g the name and add	I y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Ms. Sally Nan Barber Mailing Address P O Box 800809			Date of Receipt
City Charlottesville FEC ID number of contributing	State VA	Zip Code 22908-0809	0 9 1 6 2 0 1 0 Transaction ID: 18621321 Amount of Each Receipt this Period 350.00
Name of Employer University of Virginia Medical Center Receipt For: Primary Other (specify) ▼	Occupatio Special A	n Advisor for Federal Relations Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Edward Caldwell Mailing Address 6642 Sugar Ridge	Drive SW		Date of Receipt 0 9 1 6 2 0 1 0
City Roanoke	State VA	Zip Code 24018-7632	Transaction ID: 18621324 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer Carilion Clinic	Occupatio Executive	n e Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Wayne A. Diewald	l		Date of Receipt
Mailing Address 12187 Chacery Sta	ation Cir		09 / 16 / Y Y Y Y Y
City Reston	State VA	Zip Code 20190-5802	Transaction ID: 18621325 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00 0002	350.00
Name of Employer Inova Health System		sident AMBCare & Growth	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (option	al)		1050.00
TOTAL This Period (last page this line nun	nber only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 144 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Michael Dudley			Date of Receipt
Mailing Address 4417 Corporation Lane	e State	Zip Code	0 9 1 6 2 0 1 0
City Virginia Beach	VA	23462-3162	Transaction ID: 18621326 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		350.00
Name of Employer Sentara Healthcare	Occupation President		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr. Ray Gandee	1		Date of Receipt
Mailing Address 3271 Allendale St SW			09 16 2010
City	State	Zip Code	Transaction ID: 18621339
Roanoke	VA	24014-3120	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer Carilion Clinic	Occupation Chair & N	n Medical Director	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Connie Garnett	1		Date of Receipt
Mailing Address 1505 Powhatan Ct			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Norfolk	State VA	Zip Code	Transaction ID: 18621340
FEC ID number of contributing federal political committee.	C	23508-1021	Amount of Each Receipt this Period 350.00
Name of Employer Sentara Healthcare	Occupation Vice Pres	n Sident of Operations	
Receipt For: Primary General		Year-to-Date ▼	1
Other (specify) ▼		350.00	
SUBTOTAL of Receipts This Page (optional)			1050.00
TOTAL This Period (last page this line number	only)		

Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	d Statements may not be sold or used by any i	13 14 15 16 1
		person for the purpose of soliciting contributions ee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Steve Julian Mailing Address 506 Founders Point	e Trail	Date of Receipt M M M / D D / Y Y Y Y Y 0 9 1 6 2 0 1 0
City Carrollton FEC ID number of contributing	State Zip Code VA 23314-2740	Amount of Each Receipt this Period
federal political committee. Name of Employer Sentara Obici Hospital Receipt For: Primary General Other (specify)	Occupation Vice President Medical Affairs Aggregate Year-to-Date ▼ 350.00	350.00
Full Name (Last, First, Middle Initial) Ms. Patti Jurkus Mailing Address 207 Springhill Circle		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Bedford FEC ID number of contributing federal political committee.	State Zip Code VA 24523-5458	Transaction ID: 18621343 Amount of Each Receipt this Period 350.00
Name of Employer Bedford Memorial Hospital Receipt For: Primary General Other (specify) ▼	Occupation President & Chief Executive Office Aggregate Year-to-Date 350.00	
Full Name (Last, First, Middle Initial) Mr. David Maizel Mailing Address 1281 Hebden Cove	1	Date of Receipt Date of Receipt D D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Virginia Bch FEC ID number of contributing	State Zip Code VA 23452-4607	Transaction ID: 18621351 Amount of Each Receipt this Period 350.00
federal political committee. Name of Employer Sentara Healthcare	Occupation Vice President, Medical Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)	1050.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 144 (check only one) X 11a
	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Mr Xavier Richardson Mailing Address 8121 Lee Jackson Circ	le		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18621353
	<u>Spotsylvania</u>	VA	22553-3819	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		350.00
	Name of Employer Medicorp Health System	Occupation Vice Pres	on sident Corporate Developme	ent
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00]
- В.	Full Name (Last, First, Middle Initial) Ms. Elizabeth Savage-Tracy			Date of Receipt
	Mailing Address 361 Dyckman Street			09 16 2010
	City	State	Zip Code	Transaction ID: 18621355
	Peekskill	NY	10566-4631	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		350.00
	Name of Employer Bon Secours Charity Health System		President, Human Resource	s
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00]
-).	Full Name (Last, First, Middle Initial) Mr. Briggs W Andrews			Date of Receipt
	Mailing Address P O Box 13367			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	State	Zip Code	Transaction ID: 18621921
	Roanoke	VA	24033-3367	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		350.00
	Name of Employer Carilion Clinic	Occupation Senior V	on lice President Legal Services	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)			1050.00
-	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number of			1050.0

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 144 (check only one) X 11a 11b 11c 12
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC Full Name (Last, First, Middle Initial)		
Mr. Wynn Dixon, Jr. Mailing Address P.O. Box 2028		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City Chesapeake	State Zip Code VA 23327-2028	Transaction ID: 18621934 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Chesapeake Géneral Hospit- al	Occupation Vice President Quality & Human Res	ourc
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Jeff Goldsmith Mailing Address 3377 Lonesome Mor	untain Rd	Date of Receipt
		09 24 2010
Charletteeville	State Zip Code	Transaction ID: 18621948
Charlottesville FEC ID number of contributing federal political committee.	VA 22911-6012	Amount of Each Receipt this Period 350.00
Name of Employer Bon Secours-Richmond Comm- unity Hospita	Occupation Trustee	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Dougal Hewitt	•	Date of Receipt
Mailing Address 8260 Atlee Road		09 24 2010
City	State Zip Code	Transaction ID: 18621949
Mechanicsville	VA 23116-1844	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer Memorial Regional Medical Center Receipt For:	Occupation Vice President	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
	·	900.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 144 (check only one) X 11a 11b 11c 12 13 14 15 16 17
(Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any personame and address of any political committee to	son for the purpose of soliciting contributions to solicit contributions from such committee.
	American Hospital Association PAC		
Α.	Full Name (Last, First, Middle Initial) Ms. Kay Hix		Date of Receipt
	Mailing Address 2784 Lakeview Road	7. 0. 1	09 24 2010
	City Troutville	State Zip Code VA 24175-2750	Transaction ID: 18621950
	FEC ID number of contributing federal political committee.	C 24175-2750	Amount of Each Receipt this Period 350.00
	Name of Employer Carilion Clinic	Occupation Executive Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
– В.	Full Name (Last, First, Middle Initial) Mr. Dena Kent		Date of Receipt
	Mailing Address 193 Robinson Drive		09 / 24 / 2010
	City	State Zip Code	Transaction ID: 18621957
	Winchester FEC ID number of contributing federal political committee.	VA 22602-2340	Amount of Each Receipt this Period 350.00
	Name of Employer Winchester Medical Center	Occupation Executive Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
_ С.	Full Name (Last, First, Middle Initial) Ms. Gail D. Russell		Date of Receipt
	Mailing Address 11531 Gunner Court		09 24 2010
	City Woodbridge	State Zip Code VA 22192-5745	Transaction ID: 18621969 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Name of Employer Sentara Potomac Hospital	Occupation Vice President Nursing	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)		1050.00
	TOTAL This Period (last page this line number		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 144 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the	Statements may not be sold or used by any persore name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. James D Krauss		Date of Receipt
Mailing Address 235 Cantrell Avenue City	State Zip Code	09 24 2010
Harrisonburg	VA 22801-3293	Transaction ID: 18621987 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Rockingham Memorial Hospi- tal	Occupation President and Chief Executive Officer]
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Albert Counselman		Date of Receipt
Mailing Address 12313 Michaelsford R		09 / 20 / Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18622044
Cockeysville	MD 21030-2248	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	255.00
Name of Employer Saint Agnes Hospital	Occupation Board Chair	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 255.00	
Full Name (Last, First, Middle Initial) Mr. Jim Reiter		Date of Receipt
Mailing Address 580 Wayward Court		09 20 YYYY 2010
City	State Zip Code	Transaction ID: 18622136
<u>Annapolis</u>	MD 21401-6746	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	255.00
Name of Employer Maryland Hospital Associa- tion	Occupation Senior Vice President Communication	s
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	255.00	
SUBTOTAL of Receipts This Page (optional)		860.00
TOTAL This Period (last page this line number		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 144 (check only one) X 11a 11b 11c 12
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC	;	
Full Name (Last, First, Middle Initial) Mr. Michael B Robbins		Date of Receipt
Mailing Address P.O. Box 8207		0 9 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Elkridge	State Zip Code MD 21075-8207	Transaction ID: 18622138 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	510.00
Name of Employer Maryland Hospital Associa- tion	Occupation Senior Vice President	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 510.00	
Full Name (Last, First, Middle Initial) Mr. James V. Ferando		Date of Receipt
Mailing Address P O Box 25489		09 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18622214
Phoenix	AZ 85002-5489	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Northern Colorado Long Te- rm Acute Hosp	Occupation President Western Region	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Russell Johnson		Date of Receipt
Mailing Address 106 Blanca Avenue		0 9 1 7 2 0 1 0
City	State Zip Code	Transaction ID: 18622304
Alamosa	CO 81101-2393	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer San Luis Valley Regional Medical Cente	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
)	1260.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS Any information copied from such Benorts a	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 144 (check only one) X
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American Hospital Association PA	g the name and address of any political committee to s	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms Stephanie Doughty		Date of Receipt
Mailing Address 1024 South Lemay	y Avenue	09 17 2010
City	State Zip Code	Transaction ID: 18622305
Fort Collins	CO 80524-3998	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Poudre Valley Health Syst- em	Occupation Chief Financial Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr Randy Haffner		Date of Receipt
Mailing Address 2525 South Downi	ng Street	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18622312
Denver	CO 80210-5817	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Porter Adventist Hospital	Occupation CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. John Sackett		Date of Receipt
Mailing Address 100 Health Park D	rive	0 9 1 7 2 0 1 0
City	State Zip Code	Transaction ID: 18622328
Louisville	CO 80027-9583	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Avista Adventist Hospital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SURTOTAL of Receipts This Page (option	al)	1000.00

TOTAL This Period (last page this line number only)

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 144 (check only one) X
7	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Mr. Larry McEvoy Mailing Address 1400 East Boulder Stre	eet		Date of Receipt 0 9 1 7 2 0 1 0
	City	State	Zip Code	Transaction ID: 18624457
	Colorado Springs	CO	80909-5533	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Memorial Health System	Occupatio CEO	n	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
- 3.	Full Name (Last, First, Middle Initial) Mr. Michael Baxter			Date of Receipt
	Mailing Address 400 West 16th Street			0 9 1 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18624460
	Pueblo	CO	81003-2781	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Parkview Medical Center	Occupatio Chief Ex	n ecutive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00]
_ ;.	Full Name (Last, First, Middle Initial) Ms. Dana Moore			Date of Receipt
	Mailing Address 5111 DTC Parkway			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18624569
	Greenwood Village FEC ID number of contributing federal political committee.	CO	80111-2601	Amount of Each Receipt this Period 250.00
	Name of Employer Centura Health	Occupatio Senior V	n ice President	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 250.00	
Γ	SUBTOTAL of Receipts This Page (optional)	<u> </u>		750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 144 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American Hospital Association PAC	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Hoyt J Burdick, M.D. Mailing Address 251 High Drive			Date of Receipt 0 9 2 1 2 0 1 0
City Huntington FEC ID number of contributing federal political committee.	State WV	Zip Code 25705-3527	Transaction ID: 18624579 Amount of Each Receipt this Period 250.00
Name of Employer Cabell Huntington Hospital Receipt For: Primary General Other (specify) ▼		n sident Medical Affairs e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Glenn Crotty, Jr., M.D. Mailing Address 36E Coventry Road			Date of Receipt 0 9 2 1 2 0 1 0
City South Charleston FEC ID number of contributing federal political committee.	State WV	Zip Code 25309	Transaction ID: 18624580 Amount of Each Receipt this Period 250.00
Name of Employer Charleston Area Medical Center Receipt For: Primary General Other (specify)		n e VP & COO e Year-to-Date ▼ 250.00]
Full Name (Last, First, Middle Initial) Mr. Mark Doak Mailing Address RR 1 Box 180			Date of Receipt
City Beverly FEC ID number of contributing federal political committee.	State WV	Zip Code 26253-9753	Transaction ID: 18624581 Amount of Each Receipt this Period 500.00
Name of Employer Davis Memorial Hospital Receipt For: Primary General Other (specify) ▼	 	n t and Chief Executive Officer Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional))	1000.00

Mailing Address 362 Hudson Hill Road City State Zip Code Weirton WV 26062-5582 FEC ID number of contributing federal political committee. Name of Employer Weirton Medical Center Receipt For: Occupation President and Chief Executive Officer Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Tony J. Gregory Mailing Address 1158 Creekstone Ridge City State Zip Code Tr	ate of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
A. Dr. Joseph Endrich, , M.D. Mailing Address 362 Hudson Hill Road City State Zip Code WV 26062-5582 FEC ID number of contributing federal political committee. Name of Employer Weirton Medical Center Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Tony J. Gregory Mailing Address 1158 Creekstone Ridge City State Zip Code Trrescout South Charleston FEC ID number of contributing federal political committee. Name of Employer WV 25309 FEC ID number of contributing federal political committee. Name of Employer West Virginia Hospital Association VP Legislative Affairs	ansaction ID: 18624582 mount of Each Receipt this Period
Weirton FEC ID number of contributing federal political committee. Name of Employer Weirton Medical Center Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Tony J. Gregory Mailing Address 1158 Creekstone Ridge City State Zip Code Treeded Note In South Charleston FEC ID number of contributing federal political committee. Name of Employer West Virginia Hospital Association VP Legislative Affairs	mount of Each Receipt this Period
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Tony J. Gregory Mailing Address 1158 Creekstone Ridge City State Zip Code South Charleston WV 25309 FEC ID number of contributing federal political committee. Name of Employer West Virginia Hospital Association President and Chief Executive Officer Aggregate Year-to-Date ▼ South Charleston D C City State Zip Code WV 25309 C C C C C C C C C C C C C	
Mr. Tony J. Gregory Mailing Address 1158 Creekstone Ridge City State Zip Code South Charleston WV 25309 FEC ID number of contributing federal political committee. Name of Employer West Virginia Hospital Association Occupation VP Legislative Affairs	
City State Zip Code South Charleston WV 25309 FEC ID number of contributing federal political committee. Name of Employer West Virginia Hospital Association VP Legislative Affairs	ate of Receipt 0 9 2 1 2 0 1 0
FEC ID number of contributing federal political committee. Name of Employer West Virginia Hospital Association VP Legislative Affairs	ansaction ID: 18624589
sociation VF Legislative Arians	mount of Each Receipt this Period 500.00
Primary General Other (specify) ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr Larry C Hudson D	ate of Receipt
	M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O
	ansaction ID: 18624591
Cross Lanes WV 25313-2055 A FEC ID number of contributing federal political committee.	mount of Each Receipt this Period 250.00
Name of Employer Charleston Area Medical Center Executive VP & CFO	
Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date 250.00	
SUBTOTAL of Receipts This Page (optional)	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 144 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Michael A King		Date of Receipt
Mailing Address 1503 Greenmont Hil	State Zip Code	0 9 2 1 2 0 1 0 Transaction ID: 18624758
<u>Vienna</u>	WV 26105-3282	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Camden-Clark Memorial Hospital Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Brent A Marsteller Mailing Address 2010 Military Road		Date of Receipt
		09 21 2010
City Huntington	State Zip Code WV 25701-5339	Transaction ID: 18624760
FEC ID number of contributing federal political committee.	WV 25701-5339	Amount of Each Receipt this Period 500.00
Name of Employer Cabell Huntington Hospital	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Timothy M. Parnell		Date of Receipt
Mailing Address 1412 North 4th Stree	et	09 / 21 / Y Y Y Y
City	State Zip Code	Transaction ID: 18624764
Ironton FEC ID number of contributing federal political committee.	OH 45638-1151	Amount of Each Receipt this Period 125.00
Name of Employer St. Mary's Medical Center	Occupation VP Support Services	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	1125.00
TOTAL This Period (last page this line numb	per only)	

Morgantown WV 26508-8064 Amount of FEC ID number of contributing federal political committee. Name of Employer Monongalia General Hospit- al Receipt For: Primary General Other (specify) ▼ City State Zip Code Huntington FEC ID number of contributing federal political committee. Name of Employer Aggregate Year-to-Date ▼ Transactio Date of Re WV 25705-3866 Amount of C City State Zip Code Huntington FEC ID number of contributing federal political committee. Name of Employer St. Mary's Medical Center Name of Employer St. Mary's Medical Center Primary General Other (specify) ▼ Coccupation Vice President Medical Affairs Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. David Sheils Mailing Address 124 Brady Drive City State Zip Code Transactio	JMBER: PAGE 57 / 144 ne) 11b 11c 12 14 15 16 1
Min. David J Robertson Mailing Address 2052 Iron Bridge Circle City Morgantown FEC ID number of contributing federal political committee. Name of Employer Monongalia General Hospital City Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Vera Rose, M.D. Mailing Address 25 Kensington Lane City Huntington FEC ID number of contributing federal political committee. City State Zip Code WV 25705-3866 Transactio Amount of Date of Re My 25705-3866 City Huntington FEC ID number of contributing federal political committee. Name of Employer St. Mary's Medical Center Primary General Other (specify) ▼ City State Zip Code WV 25705-3866 City Huntington City State Zip Code WV 25705-3866 City Vice President Medical Affairs Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Date of Re Mailing Address 124 Brady Drive City State Zip Code WV 25504-2220 Date of Re Mailing Address 124 Brady Drive City State Zip Code WV 25504-2220 FEC ID number of contributing federal political committee. City State Zip Code Minimal	e of soliciting contributions ons from such committee.
Primary	·
Dr. Vera Rose, , M.D. Mailing Address 25 Kensington Lane City State Zip Code Transactio Huntington WV 25705-3866 FEC ID number of contributing federal political committee. Name of Employer St. Mary's Medical Center Vice President Medical Affairs Receipt For: Aggregate Year-to-Date ▼ City State Zip Code Transactio Amount of Date of Re M M M O 9 Transactio Amount of C Date of Re M M M O 9 Transactio Amount of Date of Re M M M O 9 Transactio Amount of Date of Re M M M O 9 Transactio Date of Re M M M O 9 Transactio Amount of C C Date of Re M M M O 9 Transactio Amount of C Transactio Aggregate Year-to-Date ▼ Transactio Amount of Date of Re M M M O 9 Transactio Amount of C Name of Employer St. Mary's Medical Center Receipt For: Aggregate Year-to-Date ▼ Primary General Primary General	
Huntington WV 25705-3866 Amount of FEC ID number of contributing federal political committee. Name of Employer St. Mary's Medical Center Primary General Other (specify) ▼ City State Zip Code Marboursville Barboursville WV 25504-2220 Transactio PEC ID number of contributing federal political committee. Name of Employer St. Mary's Medical Center C Name of Employer St. Mary's Medical Center Receipt For: Occupation FUIL Name (Last, First, Middle Initial) Mr. David Sheils Mailing Address 124 Brady Drive City State Zip Code Transactio WV 25504-2220 Amount of C Name of Employer St. Mary's Medical Center Receipt For: Aggregate Year-to-Date ▼ Primary General	eceipt 2 1 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer St. Mary's Medical Center Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. David Sheils Mailing Address 124 Brady Drive City State Zip Code Barboursville WV 25504-2220 Transactio FEC ID number of contributing federal political committee. Name of Employer St. Mary's Medical Center Receipt For: Name of Employer St. Mary's Medical Center Receipt For: Primary General Aggregate Year-to-Date ▼ Occupation Foundation President Aggregate Year-to-Date ▼	on ID: 18624920
Receipt For: Primary Other (specify) Full Name (Last, First, Middle Initial) Mr. David Sheils Mailing Address 124 Brady Drive City Barboursville FEC ID number of contributing federal political committee. Name of Employer St. Mary's Medical Center Receipt For: Primary General Aggregate Year-to-Date Table 1 Aggregate Year-to-Date Occupation Foundation President Aggregate Year-to-Date Aggregate Year-to-Date Aggregate Year-to-Date	Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. David Sheils Mailing Address 124 Brady Drive City State Zip Code Transactio Barboursville WV 25504-2220 FEC ID number of contributing federal political committee. Name of Employer St. Mary's Medical Center Receipt For: Aggregate Year-to-Date Primary General	
Mr. David Sheils Mailing Address 124 Brady Drive City Barboursville FEC ID number of contributing federal political committee. Name of Employer St. Mary's Medical Center Receipt For: Primary General Date of Re My 25504-2220 Amount of C C Aggregate Year-to-Date Aggregate Year-to-Date	
Barboursville WV 25504-2220 Amount of FEC ID number of contributing federal political committee. C Name of Employer St. Mary's Medical Center Receipt For: Primary General Aggregate Year-to-Date 750.00	eceipt 2 1 2 0 1 0
FEC ID number of contributing federal political committee. Name of Employer St. Mary's Medical Center Receipt For: Primary General C Occupation Foundation President Aggregate Year-to-Date ▼	on ID: 18624921
Name of Employer St. Mary's Medical Center Receipt For: Primary General Occupation Foundation President Aggregate Year-to-Date 250.00	Each Receipt this Period
Receipt For: Primary General Aggregate Year-to-Date ▼	250.00
Primary General 350.00	
(-p)/ •	
SUBTOTAL of Receipts This Page (optional)	1000.00

TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using t	d Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Ms. Angie Swearingen			Date of Receipt
Mailing Address 2 Riverwalk Drive			09 21 2010
City Ona	State WV	Zip Code 25545-9587	Transaction ID: 18624925 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer St. Mary's Medical Center	Occupation VP Finar	n nce / CFO	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Glen A. Washington Mailing Address 14267 St. Rt. 243	'		Date of Receipt
City	State	Zip Code	0 9 2 1 2 0 1 0 Transaction ID: 18624927
Chesapeake	OH	45619	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Cabell Huntington Hospital	Occupation Senior V		
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr Robert D Whitler			Date of Receipt
Mailing Address 5 Evergreen Drive			0 9 2 1 2 0 1 0
City	State	Zip Code	Transaction ID: 18624928
Elkview	WV	25071-9314	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Charleston Area Medical Center		sident Government and Com	nmunit
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
Other (specify) ▼		250.00	
SUBTOTAL of Receipts This Page (optional)	_		1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 144 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Michael Englehart		Date of Receipt
Mailing Address 12840 Sycamore	7'- 0-4-	09 24 2010
City <u>Palos Heights</u>	State Zip Code IL 60463-1939	Transaction ID: 18624937 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Advocate South Suburban Hospital Receipt For:	Occupation President	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Jonathan R. Bruss		Date of Receipt
Mailing Address 30 W 061 Kensington	Drive	09 24 2010
City	State Zip Code	Transaction ID: 18624939
Warrenville	IL 60555	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer Advocate Good Samaritan Hospital	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Danny Chun	1	Date of Receipt
Mailing Address 303 North Oak Park A	Avenue	09 24 2010
City	State Zip Code	Transaction ID: 18624941
Oak Park	IL 60302-2189	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Illinois Hospital Associa- tion	Occupation Vice President, Communications	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	750.00	
SUBTOTAL of Receipts This Page (optional) .		1000.00
TOTAL This Period (last page this line number	·	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 60 / 144 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Ar	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perso ename and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC		
۱.	Full Name (Last, First, Middle Initial) Mr. Charles Derus Mailing Address 2025 Windsor Drive		Date of Receipt
		7: 0 1	09 24 2010
	City Oak Brook	State Zip Code IL 60523-1586	Transaction ID: 18624942 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Advocate Health Care	Occupation Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Mr. Richard S Kowalski Mailing Address 3333 North Seminary	Street	Date of Receipt
	Walling Address 3533 NOITH Seminary	Street	09 24 2010
	City Galesburg	State Zip Code IL 61401-1299	Transaction ID: 18624947
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00
	Name of Employer OSF St. Mary Medical Cent- er	Occupation Administrator and Chief Executive Off	fi
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Ms. Karen A Lambert		Date of Receipt
	Mailing Address 450 West Highway 22		09 24 7 2010
	City	State Zip Code	Transaction ID: 18624948
	Barrington FEC ID number of contributing federal political committee.	IL 60010-1919	Amount of Each Receipt this Period 500.00
	Name of Employer Advocate Good Shepherd Ho- spital	Occupation President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
	UIDTOTAL of Descripts This Descriptoral)		1250.00

Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Dominic Nakis Mailing Address 2268 River Woods Driv	name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee. Date of Receipt
Full Name (Last, First, Middle Initial) Mr. Dominic Nakis Mailing Address 2268 River Woods Driv			Date of Receipt
Mr. Dominic Nakis Mailing Address 2268 River Woods Driv			Date of Receipt
			M M / D D / Y Y Y Y
(`itv		Zip Code	09 24 2010
City <u>Naperville</u>	IL	60565-6351	Transaction ID: 18624950 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Advocate Health Care	Occupatio Vice Pres	n sident, Finance	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Scott Powder			Date of Receipt
Mailing Address 1775 Dempster	09 24 2010		
City	State	Zip Code	Transaction ID: 18624951
Park Ridge FEC ID number of contributing federal political committee.	C	60068-1143	Amount of Each Receipt this Period 500.00
Name of Employer Advocate Lutheran General Hospital	Occupatio SVP, Str	n ategic Planning & Growth	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Lee Sacks			Date of Receipt
Mailing Address 2025 Windsor Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 18624952
Oak Brook FEC ID number of contributing federal political committee.	C	60523-1586	Amount of Each Receipt this Period 500.00
Name of Employer Advocate Health Care	Occupatio Executive	n e Vice President and Chief M	— e¢l
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)			1500.00

	EDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 144 (check only one) X
Any inf	formation copied from such Reports and commercial purposes, other than using the	Statements may	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NA	ME OF COMMITTEE (In Full) nerican Hospital Association PAC			
	Name (Last, First, Middle Initial) James E Ross, , FACHE			Date of Receipt
	illing Address 100 Brown Street			0 9 2 9 2 0 1 0
City	/	State	Zip Code	Transaction ID: 18624954
<u>Ch</u>	estertown	MD	21620-1435	Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	C		500.00
Nar Cho em	me of Employer ester River Health Syst-	Occupation Presiden	n t and Chief Executive Officer	
	ceipt For:	- ' '	Year-to-Date ▼	7
	Primary General Other (specify) ▼	0 0	500.00	
	Name (Last, First, Middle Initial) Donald J Babb	1		Date of Receipt
Mai	ling Address 951 Oak Terrace			09 29 2010
City		State	Zip Code	Transaction ID: 18624969
<u>Bo</u>	livar	MO	65613-3011	Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	С		600.00
Nar Citi	ne of Employer zens Memorial Hospital	Occupation Chief Exe	n ecutive Officer	
Red	ceipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		600.00	
	Name (Last, First, Middle Initial) Charles H Whitfield, , Jr.			Date of Receipt
Mai	ling Address 1420 Tusculum Boule	evard		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	/	State	Zip Code	Transaction ID: 18678802
<u>Gr</u>	eeneville	TN	37745-5825	Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	С		0.00
	ne of Employer ughlin Memorial Hospital	Occupation Presiden	n t and Chief Executive Officer	
Rec	ceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 875.00	[MEMO ITEM] Refund(s) on Schedule B Totaling \$125.00 This changes the YTD Total to \$87-5.00
OUDT	OTAL of Receipts This Page (optional)			1100.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(for each category of the Detailed Summary Page	(crieck drily drie)
A	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may not be sold or used by any name and address of any political commi	person for the purpose of soliciting contributions ttee to solicit contributions from such committee.
. <u>/</u>	Full Name (Last, First, Middle Initial) Mr. G Douglas Higginbotham Mailing Address P O Box 607		Date of Receipt
	City	State Zip Code	0 9 28 2010 Transaction ID: 18678803
	Laurel	MS 39441-0607	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	0.00
	Name of Employer South Central Regional Me- dical Center	Occupation Executive Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	[MEMO ITEM] Refund(s) on Schedule B Totaling \$250.00 This changes the YTD Total to \$67-5.00
. –	Full Name (Last, First, Middle Initial) Ms. Katie Vaughan		Date of Receipt
	Mailing Address 506A East Howell Ave	09 / 30 / 2010	
	City	State Zip Code	Transaction ID: PR1034595124183
	Alexandria	VA 22301-1216	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Associate Director	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 380.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Melinda Reid Hatton		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700		09 / 30 / Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR1045726224183
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	80.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Vice President & General	l Counse
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 760.00	P/R Deduction (\$40.00 Bi- Weekly)
T,	SUBTOTAL of Receipts This Page (optional)		120.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 64 / 144 (check only one) X 11a 11b 11c 12 13 14 15 16 11
4	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any persor name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
. ∠ \.	Full Name (Last, First, Middle Initial) Mr. David Schulke		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700		09 / 30 / Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR1057462124183
	Washington FEC ID number of contributing	DC 20004-2801	Amount of Each Receipt this Period
	federal political committee.		_
	Name of Employer American Hospital Associa- tion-Washingt	Occupation VP Research Programs	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	647.02	P/R Deduction (\$58.82 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Sarah Berk		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	V	09 30 7 2010
	City	State Zip Code	Transaction ID: PR1082532724183
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Director	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	266.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Barbara Jellen		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	V	0 9 3 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR1113464224183
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Section Director, Constituency Section	1
	Receipt For: Primary General	Aggregate Year-to-Date ▼	D/D D
	Other (specify)	266.00	P/R Deduction (\$14.00 Bi- Weekly)
Γ	OUDTOTAL of Descript This Description		173.64

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 144 (check only one) X 11a 11b 11c 12 13 14 15 16 11
7	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any person name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC		
۱.	Full Name (Last, First, Middle Initial) Ms. Lisa Allen		Date of Receipt
	Mailing Address One North Franklin City	State Zip Code	0 9 3 0 2 0 1 0 Transaction ID: PR1118928224183
	<u>Chicago</u>	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	41.16
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Sr. Vice President, Chief Human Reso	our
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 226.38	P/R Deduction (\$20.58 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Mary Meadows		Date of Receipt
	Mailing Address One North Franklin		09 30 7 2010
	City	State Zip Code	Transaction ID: PR1260472924183
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Director of Professional Practice, AON	1
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi- Weekly)
. –	Full Name (Last, First, Middle Initial) Ms. Elizabeth Baskett		Date of Receipt
	Mailing Address 325 Seventh Street, NV	V	0 9
	City	State Zip Code	Transaction ID: PR1332167424183
	Washington FEC ID number of contributing	DC 20004-2802	Amount of Each Receipt this Period
	federal political committee.	C	31.82
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Associate Director, Policy	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 254.56	P/R Deduction (\$15.91 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		100.98

ITE	HEDULE A (FEC Form 3X) MIZED RECEIPTS	totomonto mo	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 66 / 144 (check only one) X 11a
or for	nformation copied from such Reports and Stockmercial purposes, other than using the AME OF COMMITTEE (In Full) merican Hospital Association PAC	name and add	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Fu	ull Name (Last, First, Middle Initial)			Date of Receipt
	ailing Address One North Franklin			0 9 3 0 2 0 1 0
Ci <u>C</u>	ity hicago	State IL	Zip Code 60606-3436	Transaction ID: PR1347703424183 Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		40.00
<u>tic</u>	ame of Employer merican Hospital Associa- on-Chicago eceipt For: Primary General Other (specify) ▼		n sident Account Services • Year-to-Date ▼ 380.00	P/R Deduction (\$20.00 Bi-Weekly)
B. <u>M</u>	ull Name (Last, First, Middle Initial) r. Jack A. Mackay ailing Address One North Franklin			Date of Receipt 0 9 3 0 2 0 1 0
Ci		State	Zip Code	Transaction ID: PR1347703624183
FE	hicago EC ID number of contributing deral political committee.	C	60606-3436	Amount of Each Receipt this Period 40.00
Aı <u>tic</u>	ame of Employer merican Hospital Associa- on-Chicago eceipt For: Primary General Other (specify)		n sident & CIO • Year-to-Date ▼ 380.00	P/R Deduction (\$20.00 Bi-Weekly)
<u>M</u>	ull Name (Last, First, Middle Initial) s. Susan Gergely ailing Address One North Franklin			Date of Receipt 0 9 3 0 2 0 1 0
Ci	•	State	Zip Code	Transaction ID: PR1347791024183
FE	hicago EC ID number of contributing deral political committee.	C	60606-3436	Amount of Each Receipt this Period 28.00
<u>tic</u>	ame of Employer merican Hospital Associa- on-Chicago eceipt For: Primary General Other (specify)		of Operations, AONE e Year-to-Date 266.00	P/R Deduction (\$14.00 Bi-Weekly)
CIID	STOTAL of Receipts This Page (optional)	<u> </u>		108.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 67 / 144 (check only one) X 11a
,	ny information copied from such Reports and Si r for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Mr. John Slotman		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	N	09 / 30 / 2010
	City Washington	State Zip Code DC 20004-2802	Transaction ID: PR1384065324183 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Associate Director, Federal Relations	5
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 380.00	P/R Deduction (\$20.00 Bi- Weekly)
_ 3.	Full Name (Last, First, Middle Initial) Ms. Sharon Allen		Date of Receipt
	Mailing Address 155 North Wacker Driv	09 / 30 / 2010	
	City	State Zip Code	Transaction ID: PR1474886224183
	Chicago FEC ID number of contributing federal political committee.	IL 60606-1709	Amount of Each Receipt this Period 35.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Membership and Marketing Manager	- ASHHR
	Primary General Other (specify)	Aggregate Year-to-Date ▼ 245.00	P/R Deduction (\$17.50 Bi- Weekly)
_).	Full Name (Last, First, Middle Initial) Mr. Mark Colucci		Date of Receipt
	Mailing Address 1061 N Penny Ln		0 9 3 0 2 0 1 0
	City	State Zip Code	Transaction ID: PR1475133724183
	Palatine	IL 60067-1821	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation National Director Sponsorship and U Aggregate Year-to-Date ▼	inde
	Primary General Other (specify) ▼	380.00	P/R Deduction (\$20.00 Bi- Weekly)
Γ	SURTOTAL of Receipts This Page (optional)		115.00

Γ	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 144 (check only one) X 11a 11b 11c 12 13 14 15 16 11
4	Any information copied from such Reports and Stor for commercial purposes, other than using the	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
۷.	Full Name (Last, First, Middle Initial) Ms. Stephanie H. Drake			Date of Receipt
	Mailing Address One North Franklin			09 30 2010
	City	State IL	Zip Code	Transaction ID: PR1492459924183
	Chicago FEC ID number of contributing federal political committee.	C	60606-3436	Amount of Each Receipt this Period 40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation	n e Executive Director - ASHH	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 380.00	P/R Deduction (\$20.00 Bi- Weekly)
_ 3.	Full Name (Last, First, Middle Initial) Ms. Monica D Day			Date of Receipt
	Mailing Address 10224 Prince Place #205			0 9 3 0 2 0 1 0
	City	State	Zip Code	Transaction ID: PR1516850624183
	Largo FEC ID number of contributing	MD	20774-1210	Amount of Each Receipt this Period
	federal political committee.	C		28.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:		Affairs Coordinator	
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Elisa Arespacochaga	<u> </u>		Date of Receipt
•	Mailing Address One North Franklin			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1555656224183
	Chicago	IL	60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:		e Director, Constituency Sec	ti
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)	l		96.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 69 / 144 (check only one) X 11a 11b 11c 12 15 16 11
, C	ny information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
. ∠ \.	Full Name (Last, First, Middle Initial) Mr. Clinton S. Manning		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700		09 / 30 / 2010
	City Washington	State Zip Code DC 20004-2802	Transaction ID: PR1555656524183 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Asst. Director Advocacy & Member Co	mmu
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi- Weekly)
-	Full Name (Last, First, Middle Initial) Ms. Kathy Poole		Date of Receipt
	Mailing Address One North Franklin		09 30 7 2010
	City	State Zip Code	Transaction ID: PR1589439924183
	Chicago FEC ID number of contributing federal political committee.	IL 60606-3436	Amount of Each Receipt this Period 28.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Director, Governance Projects	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Robert Kehoe		Date of Receipt
	Mailing Address One North Franklin		09 30 2010
	City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR1625368324183 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33.34
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Associate Publisher Vertical Magazine	<u>-</u> s
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.05	P/R Deduction (\$16.67 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		89.34

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 / 144 (check only one) X 11a 11b 11c 12 13 14 15 16 11
4	Any information copied from such Reports and Stor for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
۷.	Full Name (Last, First, Middle Initial) Ms. Kelly Redmond			Date of Receipt
	Mailing Address 155 North Wacker Driv			09 / 30 / Y Y Y Y Y
	City <u>Chicago</u>	State IL	Zip Code 60606-1709	Transaction ID: PR1625588824183 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00000-1709	28.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Director	n Operations	_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi- Weekly)
- 3.	Full Name (Last, First, Middle Initial) Mr. Stephen Hines			Date of Receipt
	Mailing Address 155 North Wacker Drive			0 9 3 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1648726624183
	Chicago	<u>IL</u>	60606-1709	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		33.34
	Name of Employer American Hospital Associa- tion-Chicago		earch HRET	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.05	P/R Deduction (\$16.67 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Lisa Grabert			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	N		09 30 7 2010
	City	State	Zip Code	Transaction ID: PR1671258624183
	Washington FEC ID number of contributing federal political committee.	C	20004-2801	Amount of Each Receipt this Period 90.90
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior A	n ssociate Director, Policy	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 727.20	P/R Deduction (\$45.45 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)			152.24

SCHEDULE A (FI	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 71 / 144 (check only one) X 11a
Any information copied from or for commercial purposes	n such Reports and Statements , other than using the name and	may not be sold or used by any persaddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTED American Hospital A	,		
Full Name (Last, First, N Mr Robert P David	fiddle Initial)		Date of Receipt
Mailing Address One	North Franklin		09 30 2010
City	State	'	Transaction ID: PR1677512424183
Chicago	İL	60606-3436	Amount of Each Receipt this Period
FEC ID number of contr federal political committee			90.90
Name of Employer American Hospital Asso	Occup	ation nal Executive	
tion-Chicago Receipt For:	negio	gate Year-to-Date	
	General	727.20	P/R Deduction (\$45.45 Bi- Weekly)
Full Name (Last, First, Ms. Linda Fishman	/liddle Initial)		Date of Receipt
Mailing Address 325 Suite	Seventh Street, NW e 700		09 30 7 2010
City	State	'	Transaction ID: PR327629124183
Washington	DC	20004-2818	Amount of Each Receipt this Period
FEC ID number of contr federal political committee			80.00
Name of Employer American Hospital Asso	Occup cia-	ation r Vice President, Public Policy	
tion-Washingt Receipt For:		gate Year-to-Date	
Primary Other (specify)	General	760.00	P/R Deduction (\$40.00 Bi- Weekly)
Full Name (Last, First, M Ms. Debbie F. Weiner	Middle Initial)		Date of Receipt
)4 Petersborough Drive		M M / D D / Y Y Y Y Y Y O D O O O O O O O O O O O O
City	State	Zip Code	Transaction ID: PR327745924183
Rockville	MD	20852-3249	Amount of Each Receipt this Period
FEC ID number of contr federal political committee			80.00
Name of Employer American Hospital Asso tion-Washingt	Direct	or, Grassroots Advocacy	
Receipt For: Primary Other (specify) ▼	General Aggree	gate Year-to-Date ▼ 760.00	P/R Deduction (\$40.00 Bi- Weekly)
			250.90

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 / 144 (check only one) X 11a
<i>A</i>	ny information copied from such Reports and St r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any perso name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Michael P. McCue		Date of Receipt
	Mailing Address 122 N. Greenwood Ave	nue	09 / 30 / 4 9 9
	City	State Zip Code	Transaction ID: PR327771624183
	Park Ridge	IL 60068-3227	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa-	Occupation Associate Director	
	tion-Chicago Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	380.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Suzanne R. Sonik		Date of Receipt
	Mailing Address One North Franklin		09 30 7 2010
	City	State Zip Code	Transaction ID: PR327777224183
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Director, Long-Term Care	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify)	266.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Debra J. Stock		Date of Receipt
	Mailing Address 1022 S. Harvey Avenue)	0 9 3 0 2 0 1 0
	City	State Zip Code	Transaction ID: PR327777824183
	Oak Park	IL 60304-2132	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	80.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Member Relations	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 760.00	P/R Deduction (\$40.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		148.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 73 / 144 (check only one) X 11a 11b 11c 12 13 14 15 16 1
0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any pers lress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
/ _	Full Name (Last, First, Middle Initial) Mr. Neil J. Jesuele			Date of Receipt
	Mailing Address 1003 Kimberly Place			09 / 30 / Y Y Y Y Y
	City <u>Great Falls</u>	State VA	Zip Code 22066-1546	Transaction ID: PR327801724183 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation	e Vice President	
	Receipt For: Primary Other (specify)	Aggregate	Year-to-Date ▼ 380.00	P/R Deduction (\$20.00 Bi-Weekly)
_	Full Name (Last, First, Middle Initial)	0 0		7
	Ms. Pamela Austin Thompson, RN, MSN Mailing Address 325 Seventh Street, N Suite 700	IW		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR327812024183
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		80.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Chief Exe	n ecutive Officer, AONE & Sr.	Vi
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 760.00	P/R Deduction (\$40.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Joan H. Lewis			Date of Receipt
	Mailing Address 6034 North 22nd Street	et		09 30 7 4 4 4 4
	City	State	Zip Code	Transaction ID: PR327831724183
	Arlington	VA	22205-3408	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Associa- tion-Washingt	- · · · · · · · · · · · · · · · · · · ·	Executive	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 380.00	P/R Deduction (\$20.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional) .	1		160.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 / 144 (check only one) X
4	nny information copied from such Reports and r for commercial purposes, other than using th	Statements may e name and add	not be sold or used by any personness of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Mr. Robert J. Donovan			Date of Receipt
-	Mailing Address One North Franklin S	treet		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Chicago	State IL	Zip Code 60606	Transaction ID: PR327846224183 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Association-Chicago Receipt For: Primary General Other (specify) ▼	- '	n sident, Meetings & Travel Se Year-to-Date ▼ 380.00	P/R Deduction (\$20.00 Bi-Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Ellen A. Pryga			Date of Receipt
	Mailing Address 2401 Calvert Street, N Apt. 1008	١W		09 / 30 / 2010
	City	State	Zip Code	Transaction ID: PR327851924183
	Washington FEC ID number of contributing federal political committee.	C	20008-2614	Amount of Each Receipt this Period 40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director,	n Policy Development	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 380.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Mark Seklecki	1		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	1W		09 30 2010
	City	State	Zip Code	Transaction ID: PR327858024183
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		80.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:	_ '	n sident, Political Affairs Year-to-Date ▼	
	Primary General Other (specify) ▼	Aggregate	760.00	P/R Deduction (\$40.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional) .			160.00

	EDULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 75 / 144 (check only one) X 11a
or for co	rmation copied from such Reports and St mmercial purposes, other than using the E OF COMMITTEE (In Full) erican Hospital Association PAC	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full 1 Mr. J	Name (Last, First, Middle Initial) ohn F. Barry			Date of Receipt
City	ng Address One North Franklin	State	Zip Code	0 9 3 0 2 0 1 0 Transaction ID: PR327877824183
<u>Milli</u>	S	MA	60606-3436	Amount of Each Receipt this Period
	ID number of contributing al political committee.	C		80.00
tion-0	e of Employer rican Hospital Associa- Chicago ipt For: Primary General Other (specify)	_ <u> </u>	Executive Year-to-Date 760.00	P/R Deduction (\$40.00 Bi-Weekly)
Mr. G	Name (Last, First, Middle Initial) leorge F. Bergstrom			Date of Receipt
	ng Address 130 North Garland Cou #3002			09 / 30 / 2010
City		State	Zip Code	Transaction ID: PR327895724183
	ago ID number of contributing al political committee.	C	60602-4750	Amount of Each Receipt this Period 90.00
tion-(e of Employer rican Hospital Associa- Chicago	Occupation Vice Pre-	sident	
Rece	ipt For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 730.00	P/R Deduction (\$45.00 Bi- Weekly)
	Name (Last, First, Middle Initial) Eileen M. Collins Offner			Date of Receipt
	ng Address 325 Seventh Street, NV Suite 700			09 / 30 / 4 9 9
City		State	Zip Code	Transaction ID: PR327906124183
FEC	Shington ID number of contributing al political committee.	C	20004-2818	Amount of Each Receipt this Period 28.00
Name Ame tion-	e of Employer rican Hospital Associa- Washingt	Occupation	n Policy Development	
Rece	ipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi- Weekly)
SURTO	TAL of Receipts This Page (optional)	<u> </u>		198.00

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 76 / 144 (check only one) X 11a 11b 11c 12 13 14 15 16 17
(Any information copied from such Reports and Stor for commercial purposes, other than using the	tatements may r name and addre	not be sold or used by any perso ess of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
۷.	Full Name (Last, First, Middle Initial) Ms. Judy Williams			Date of Receipt
	Mailing Address One North Franklin Str	reet		09 30 2010
	City	State	Zip Code	Transaction ID: PR327918924183
	Chicago	IL	60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Director M	embership	7
	Receipt For:	Aggregate Y	rear-to-Date ▼	
	Primary General Other (specify) ▼	0 0	266.00	P/R Deduction (\$14.00 Bi- Weekly)
_ 3.	Full Name (Last, First, Middle Initial) Mr. Richard J. Umbdenstock	l		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	W		09 / 30 / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR328132824183
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		80.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation President	and Chief Executive Office	r
	Receipt For:	Aggregate Y	/ear-to-Date ▼	
	Primary General Other (specify) ▼		760.00	P/R Deduction (\$40.00 Bi- Weekly)
_ ;.	Full Name (Last, First, Middle Initial) Ms. Barbara Lorsbach			Date of Receipt
-	Mailing Address 204 7th Ave			M M / D D / Y Y Y Y Y O D D / 2010
	City	State	Zip Code	Transaction ID: PR328136924183
	<u>La Grange</u>	<u>IL</u>	60525-6406	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		80.00
	Name of Employer American Hospital Associa- tion-Chicago		resident, Member Relations	s
	Receipt For: Primary General	Aggregate Y	/ear-to-Date ▼	B/B B L
	Other (specify)		760.00	P/R Deduction (\$40.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)			188.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 77 / 144 (check only one) X
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any pename and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Lauren A. Barnett		Date of Receipt
	Mailing Address One North Franklin Str		09 / 30 / 2010
	Chicago	State Zip Code IL 60606	Transaction ID: PR328174924183
	Chicago FEC ID number of contributing federal political committee.	IL 60606	Amount of Each Receipt this Period 28.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Executive Director, SHSMD	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi-Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Donna J. Melkonian		Date of Receipt
	Mailing Address 5545 North Wayne		09 30 2010
	City	State Zip Code	Transaction ID: PR328223824183
	Chicago FEC ID number of contributing federal political committee.	IL 60640-1318	Amount of Each Receipt this Period 80.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 760.00	P/R Deduction (\$40.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Ron O. Purcell		Date of Receipt
	Mailing Address 1093 N. Faldo Way		0 9 3 0 2 0 1 0
	City	State Zip Code	Transaction ID: PR328241424183
	Eagle	ID 83616-5369	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	P/R Deduction (\$20.00 Bi- Weekly)
Γ,	SUBTOTAL of Receipts This Page (optional)		148.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 78 / 144 (check only one) X
A C	any information copied from such Reports and S r for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Z	Full Name (Last, First, Middle Initial) Mr. Richard J. Pollack			Date of Receipt
	Mailing Address 3475 North Venice Str	reet		0 9 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Arlington	State VA	Zip Code 22207-4446	Transaction ID: PR328260924183 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		80.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Executive	n e Vice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 760.00	P/R Deduction (\$40.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Lori M. Schor			Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W		09 30 2010
	City	State	Zip Code	Transaction ID: PR328341824183
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		80.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director,	n Political Action & Grassroot	:
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		770.00	P/R Deduction (\$40.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Carolyn Forcina	<u> </u>		Date of Receipt
	Mailing Address 200 Clover Hill Court			09 30 2010
	City	State	Zip Code	Transaction ID: PR328511824183
	Yardley	PA	19067-5736	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		80.00
	Name of Employer American Hospital Associa- tion-Chicago	, ' 	Executive	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 760.00	P/R Deduction (\$40.00 Bi- Weekly)
Г	SUBTOTAL of Receipts This Page (optional)	1		240.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 79 / 144 (check only one) X
Ai or	ny information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\angle	American Hospital Association PAC Full Name (Last, First, Middle Initial)			
۱.	Ms. Alicia N. Mitchell Mailing Address 1501 N. Harrison Stree	t .		Date of Receipt
	City	State	Zip Code	0 9 3 0 2 0 1 0 Transaction ID: PR328512024183
	Arlington	VA	22205-2726	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Vi	n ice President, Communicatio	ons
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 380.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. George Arges			Date of Receipt
	Mailing Address One North Franklin St.			09 30 7 9 10
	City	State	Zip Code	Transaction ID: PR328641124183
	Chicago	<u> </u>	60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Associa- tion-Chicago		irector, Health Data Manage	em en
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 380.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Anthony J. Burke			Date of Receipt
	Mailing Address One North Franklin Ave	Э.		09 / 30 / 2010
	City	State	Zip Code	Transaction ID: PR328913324183
	Chicago	IL	60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		80.00
	Name of Employer American Hospital Associa- tion-Chicago		t & CEO, AHA Solutions, Inc	c. &
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 760.00	P/R Deduction (\$40.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)			160.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule for each category of the Detailed Summary Pag	e (check only one)
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by an name and address of any political comm	ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
/	American Hospital Association PAC		
۱.	Full Name (Last, First, Middle Initial) Ms. Rebecca Chickey		Date of Receipt
	Mailing Address One North Franklin Stre		09 30 2010
	City Chicago	State Zip Code IL 60606	Transaction ID: PR329013424183 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation SPSA Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 380.0	P/R Deduction (\$20.00 Bi- Weekly)
. –	Full Name (Last, First, Middle Initial) Dr. John R. Combes		Date of Receipt
	Mailing Address One North Franklin		09 30 2010
	City	State Zip Code	Transaction ID: PR329071324183
	Chicago FEC ID number of contributing federal political committee.	IL 60606-3436	Amount of Each Receipt this Period 80.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation President & Chief Operating Of	ficer, C
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 760.0	P/R Deduction (\$40.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Robyn Cooke		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	I	09 30 7 2010
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR329084424183
	FEC ID number of contributing federal political committee.	C 20004-2818	Amount of Each Receipt this Period 40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Director	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 380.0	P/R Deduction (\$20.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		160.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 81 / 144 (check only one) X
0	ony information copied from such Reports and St r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may name and add	y not be sold or used by any persoderess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\angle	American Hospital Association PAC			
۱.	Full Name (Last, First, Middle Initial) Mr. W. Thomas Deweese Mailing Address 500 Interstate Boulevar	rd Couth		Date of Receipt
	City	State	Zip Code	09 30 2010
	Nashville	TN	37210-4634	Transaction ID: PR329215724183 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		80.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation AHA Reg	n jional Executive	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 760.00	P/R Deduction (\$40.00 Bi- Weekly)
. –	Full Name (Last, First, Middle Initial) Mr. John Evans			Date of Receipt
	Mailing Address One North Franklin Str	eet		0 9 3 0 2 0 1 0
	City	State	Zip Code	Transaction ID: PR329342624183
	Chicago FEC ID number of contributing federal political committee.	C	60606	Amount of Each Receipt this Period 28.00
	Name of Employer American Hospital Associa-	Occupation	n	
	tion-Chicago		ice President & CFO	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Audrey L. Harris			Date of Receipt
	Mailing Address 1136 W. Farwell Ave.			09 30 YYYYY
	City	State	Zip Code	Transaction ID: PR329654224183
	Chicago FEC ID number of contributing federal political committee.	C	60626-3861	Amount of Each Receipt this Period 28.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Executive	n e Director, ASDVS	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)	1		136.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 82 / 144 (check only one) X
A	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may not be sold or used by any person ename and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
. ∠ \.	Full Name (Last, First, Middle Initial) Ms. Patricia Meersman		Date of Receipt
	Mailing Address One North Franklin		09 / 30 / Y Y Y Y
	City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR330343324183 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Senior Director Member Relations	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 380.00	P/R Deduction (\$20.00 Bi- Weekly)
- 3.	Full Name (Last, First, Middle Initial) Mr. Thomas Misfeldt		Date of Receipt
	Mailing Address One North Franklin		0 9 3 0 / Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR330411624183
	Chicago FEC ID number of contributing	IL 60606-3436	Amount of Each Receipt this Period
	federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Associate Regional Executive	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	380.00	P/R Deduction (\$20.00 Bi- Weekly)
. –	Full Name (Last, First, Middle Initial) Ms. Maureen D. Mudron		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W	09 30 / Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR330465224183
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Deputy General Counsel	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		108.00

ITE	HEDULE A (FEC Form 3X) MIZED RECEIPTS	totomonto mo	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 83 / 144 (check only one) X 11a
or for	nformation copied from such Reports and St commercial purposes, other than using the AME OF COMMITTEE (In Full) merican Hospital Association PAC	name and add	y not be sold or used by any perst dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	ull Name (Last, First, Middle Initial)			
· —	r. Paul N. Muraca ailing Address 4960 138th Circle Wes	st		Date of Receipt 0 9 3 0 2 0 1 0
Cit	ty pple Valley	State MN	Zip Code 55124-9229	Transaction ID: PR330475424183 Amount of Each Receipt this Period
FE	EC ID number of contributing deral political committee.	C		80.00
<u>tio</u>	ame of Employer merican Hospital Associa- n-Chicago eceipt For: Primary General Other (specify) ▼		Executive Year-to-Date 760.00	P/R Deduction (\$40.00 Bi-Weekly)
B. Ms	ull Name (Last, First, Middle Initial) s. Jennifer E. Mallard ailing Address 6109 North 9th Road			Date of Receipt 0 9 3 0 2 0 1 0
Cit		State	Zip Code	Transaction ID: PR330534324183
FE	rlington EC ID number of contributing deral political committee.	C	22205-1609	Amount of Each Receipt this Period 40.00
<u>tio</u>	eme of Employer merican Hospital Associa- on-Washingt eceipt For: Primary Other (specify)		ssociate Director Year-to-Date 380.00	P/R Deduction (\$20.00 Bi-Weekly)
. <u>M</u> r	ull Name (Last, First, Middle Initial) r. Gene O'Dell ailing Address One North Franklin			Date of Receipt
_	<u> </u>			09 30 2010
Cit <u>Cl</u>	ty hicago	State IL	Zip Code 60606-3436	Transaction ID: PR330547724183 Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		40.00
<u>tio</u>	ame of Employer merican Hospital Associa- on-Chicago eceipt For: Primary General Other (specify) ▼	. '	n sident, Strategic Planning Year-to-Date ▼ 380.00	P/R Deduction (\$20.00 Bi-Weekly)
SUR	TOTAL of Receipts This Page (optional)			160.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 84 / 144 (check only one) X
A 0	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persole name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Eileen O'Keefe Mailing Address 172 Atterioge		Date of Receipt
	Mailing Address 172 Atteridge City	State Zip Code	0 9 3 0 2 0 1 0 Transaction ID: PR330549224183
	Lake Forest	IL 60045-1715	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	80.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Constituency Section	1
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	760.00	P/R Deduction (\$40.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Anthony Spohn		Date of Receipt
	Mailing Address 3219 N. Oriole		09 / 30 / 2010
	City	State Zip Code	Transaction ID: PR331098324183
	Chicago	IL 60634-3232	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Executive Director, Associate Member	ersh
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼	380.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Debi H. Tucker, Esq.		Date of Receipt
	Mailing Address 1101 N. Kentucky Str		09 30 7 2010
	City	State Zip Code	Transaction ID: PR331278824183
	Arlington	VA 22205-3515	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, State Issues Forum	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	P/R Deduction (\$14.00 Bi-
	Other (specify) ▼	266.00	Weekly)
	DUDTOTAL of Descripto This Descriptorally		148.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 85 / 144 (check only one) X 11a 11b 11c 12 13 14 15 16 17
4	any information copied from such Reports and S or for commercial purposes, other than using the	statements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
∠ 4.	Full Name (Last, First, Middle Initial) Ms. Darlene S. Vanderbush		Date of Receipt
	Mailing Address 26 West Glendale Ave		09 30 2010
	City Alexandria	State Zip Code VA 22301-2402	Transaction ID: PR331304224183
	FEC ID number of contributing federal political committee.	C 22301-2402	Amount of Each Receipt this Period 106.66
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:	Occupation Director Advocacy and Public Policy C Aggregate Year-to-Date ▼	Dp
	Primary General Other (specify) ▼	679.97	P/R Deduction (\$53.33 Bi- Weekly)
_ 3.	Full Name (Last, First, Middle Initial) Ms. Jo Ann Webb		Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700	W	09 / 30 / Y Y Y Y Y
	City	State Zip Code DC 20004-2818	Transaction ID: PR331379124183
	Washington FEC ID number of contributing federal political committee.	DC 20004-2818	Amount of Each Receipt this Period 28.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Sr. Director Federal Relations & Polic	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi- Weekly)
- ;.	Full Name (Last, First, Middle Initial) Ms. Judy Weinsheimer		Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700		09 / 09 / 2010
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR331386924183 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 20004-2018	28.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Director	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		162.66

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 86 / 144 (check only one) X
A	ny information copied from such Reports and Stror commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
. <u>/</u>	Full Name (Last, First, Middle Initial) Mr. Alex R. White, Sr.		Date of Receipt
	Mailing Address 6225 US Hwy 290 E		09 / 30 / 2010
	City Austin	State Zip Code TX 78761-5587	Transaction ID: PR331416024183 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	120.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For: Primary General Other (specify) ▼	Occupation AHA Regional Executive for TX Aggregate Year-to-Date ▼ 1140.00	P/R Deduction (\$60.00 Bi-Weekly)
	Full Name (Last, First, Middle Initial) Mr. Woodin Dale		Date of Receipt
	Mailing Address 800 W. Central Road		09 30 7 2010
	City	State Zip Code	Transaction ID: PR331481324183
	Arlington Heights FEC ID number of contributing federal political committee.	IL 60005-2349	Amount of Each Receipt this Period 28.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Executive Director, ASHE Aggregate Year-to-Date	
	Primary General Other (specify) ▼	266.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Donald May		Date of Receipt
	Mailing Address 521 Great Falls St.		09 30 YYYYY 2010
	City	State Zip Code	Transaction ID: PR331533224183
	Falls Church	VA 22046-2613	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	80.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President, Policy	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 760.00	P/R Deduction (\$40.00 Bi- Weekly)
5	SUBTOTAL of Receipts This Page (optional)		228.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 87 / 144 (check only one) X 11a 11b 11c 12 15 16 11
A C	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
∠ 4 .	Full Name (Last, First, Middle Initial) Ms. Elizabeth Summy		Date of Receipt
	Mailing Address One North Franklin		09 30 2010
	City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR346168124183 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	80.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, PMG	-
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	760.00	P/R Deduction (\$40.00 Bi- Weekly)
- 3.	Full Name (Last, First, Middle Initial) Ms. Kristin Welsh		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W	09 / 30 / 2010
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR517619724183
	FEC ID number of contributing federal political committee.	DC 20004-2818	Amount of Each Receipt this Period 80.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President Executive Branch Relat	<u></u>
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 760.00	P/R Deduction (\$40.00 Bi- Weekly)
. –	Full Name (Last, First, Middle Initial) Ms. Megan Cundari		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700		09 30 2010
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR518031924183
	FEC ID number of contributing federal political committee.	C 20004-2618	Amount of Each Receipt this Period 60.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Director	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 570.00	P/R Deduction (\$30.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional) .	1	220.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 88 / 144 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A	ny information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	not be sold or used by any perso ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
. <u>/</u>	Full Name (Last, First, Middle Initial) Ms. Laura M. Werner			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	N		09 / 30 / Y Y Y Y
	City Washington	State DC	Zip Code 20004-2818	Transaction ID: PR560101524183 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	233012313	28.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Project M		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi- Weekly)
- 3.	Full Name (Last, First, Middle Initial) Mr. Carlos Jackson			Date of Receipt
	Mailing Address 325 Seventh Street, NV	N		09 30 7 2010
	City	State	Zip Code	Transaction ID: PR566280924183
	Washington FEC ID number of contributing federal political committee.	C	20004-2802	Amount of Each Receipt this Period 40.00
	Name of Employer American Hospital Associa- tion-Washingt	, '	Director, Federal Relations	3
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 380.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Ashley B. Thompson			Date of Receipt
	Mailing Address 606 S. Royal St.			0 9 3 0 2 0 1 0
	City	State	Zip Code	Transaction ID: PR766023724183
	Alexandria FEC ID number of contributing federal political committee.	C	22314-4142	Amount of Each Receipt this Period 40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director,	Policy	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 380.00	P/R Deduction (\$20.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)			108.00

	HEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 89 / 144 (check only one) X 11a
or fo	information copied from such Reports and St or commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements ma name and ad	y not be sold or used by any persoderess of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC Full Name (Last, First, Middle Initial)			
١. ا	Ms. Rochelle M. Archuleta Mailing Address 325 Seventh Street, NV	V		Date of Receipt 0 9 3 0 2 0 1 0
-	Suite 700 Dity	State	Zip Code	0 9 3 0 2 0 1 0 Transaction ID: PR801366324183
	Washington	DC	20004-2818	Amount of Each Receipt this Period
ı	FEC ID number of contributing ederal political committee.	C	20004 2010	28.00
	Name of Employer American Hospital Associa- ion-Washingt	Occupatio Senior A	n ssociate Director Policy	
I	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Lisa Kidder Hrobsky			Date of Receipt
_	Mailing Address 325 Seventh Street, NV Suite 700			09 / 30 / 4 9 9
	City	State	Zip Code	Transaction ID: PR876637224183
- I	Washington FEC ID number of contributing ederal political committee.	C	20004-2818	Amount of Each Receipt this Period 40.00
!	Name of Employer American Hospital Associa- ion-Washingt	Occupatio Vice Pres	n sident, Legislative Affairs	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 380.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Jennifer Armstrong Gay			Date of Receipt
1	Mailing Address 10702 Benning Way			09 / 30 / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR928186524183
-	Spotsylvania	VA	22551-4670	Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	С		31.82
	Name of Employer American Hospital Associa- tion-Washingt		Communication Strategies	
1	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 254.56	P/R Deduction (\$15.91 Bi- Weekly)
SU	BTOTAL of Receipts This Page (optional)			99.82

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 90 / 144 (check only one) X
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Ms. Sheila R. Meadows			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	N		09 30 7 2010
	City	State	Zip Code	Transaction ID: PR936292324183
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		28.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior D	on Director of Operations	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 266.00	P/R Deduction (\$14.00 Bi- Weekly)
В.	Full Name (Last, First, Middle Initial) Mr. David A. Strickland			Date of Receipt
	Mailing Address One N. Franklin Street			0 9 3 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR939603924183
	Chicago	IL	60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Executiv	on e Director Quality Center	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		266.00	P/R Deduction (\$14.00 Bi- Weekly)

SUBTOTAL of Receipts This Page (optional)	•	56.00
TOTAL This Period (last page this line number only)	•	63923.88

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 91 / 144 (check only one) 11a 11b 11c X 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	statements may not be sold or used by any person r name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Texas Hospital Association HOSPAC - Federal Mailing Address P.O. Box 15587 City Austin FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code TX 78761-5587 C C00301325 Occupation Aggregate Year-to-Date ▼ 64800.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Montana Hospital Association PAC - Federal Fur Mailing Address P.O. Box 5119 City Helena FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code MT 59604-5119 C C00238782 Occupation Aggregate Year-to-Date 8600.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Wisconsin Hospital Association Federal PAC Mailing Address 5510 Research Park D City Madison FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code WI 53725-9038 C C00359455 Occupation Aggregate Year-to-Date 7332.61	Date of Receipt M M C 28 2010 Transaction ID: 18580612 Amount of Each Receipt this Period 500.00
SUBTOTAL of Receipts This Page (optional)		12100.00
TOTAL This Period (last page this line number	only)	12100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for	e separate schedule(s) each category of the tailed Summary Page	FOR LINE NUMBER: PAGE 92 / 144 (check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Citibank, F.S.B. Mailing Address 1400 G Street, NW			Date of Receipt 0 9 3 0 2 0 1 0
City	State Z	lip Code	Transaction ID: 18622194
Washington	DC 2	20005	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		187.68
Name of Employer	Occupation		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-	to-Date ▼ 1953.49	Interest Earned

SUBTOTAL of Receipts This Page (optional)	<u> </u>	187.68
TOTAL This Period (last page this line number only)	•	187.68

IT	CHEDULE B (FEC Form 3)	Use separate sch	hedule(s)	-	NUMBER: PAGE 93 / 144
	EMIZED DISBURSEMENT		y of the É	(check only 21b 27	7 one) 22
	y Information copied from such Reports ar for commercial purposes, other than using				
	NAME OF COMMITTEE (In Full) American Hospital Association PAG		<u>, </u>		
<u>/</u>	Full Name (Last, First, Middle Initial) Denham For Congress				Transaction ID: 18559917 Date of Disbursement
	Mailing Address 2150 River Plaza	Dr #150			$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ 0 & 9 & M \end{smallmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 0 & 0 \\ 0 & 0 & 9 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
	City Sacramento	State Zip Co CA 9583			Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name			011	1500.00
	Mr. Jeff Denham	Disbursement For: 2		tegory/ Type	
	Senate President State: CA District: 19		General		Contribution
	Full Name (Last, First, Middle Initial) Zack Space For Congress Commit	ee			Transaction ID: 18559976 Date of Disbursement
	Mailing Address 726 Sixteenth Str		$\begin{bmatrix}\begin{smallmatrix}M\\O\end{smallmatrix}9^{M}\end{smallmatrix} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $		
	City Massillon	State Zip Co			Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution			011	2000.00
	Candidate Name Rep. Zachary T. Space			tegory/ Γype	
			2010		Contribution
	Office Sought: X House Senate President State: OH District: 18		General		
	Senate President	Primary X 0	General		Transaction ID: 18560158 Date of Disbursement
	State: OH District: 18 Full Name (Last, First, Middle Initial)	Primary X 0	General		
	Senate President State: OH District: 18 Full Name (Last, First, Middle Initial) Pete Sessions For Congress	Primary X 0	General		Date of Disbursement M 9 M / D 0 9 / Y 2 0 1 0 Y Amount of Each Disbursement this Perio
	Senate President State: OH District: 18 Full Name (Last, First, Middle Initial) Pete Sessions For Congress Mailing Address PO Box 823047 City Dallas Purpose of Disbursement Contribution	Primary X Other (specify)	General ode 32	011	Date of Disbursement
	Senate President State: OH District: 18 Full Name (Last, First, Middle Initial) Pete Sessions For Congress Mailing Address PO Box 823047 City Dallas Purpose of Disbursement Contribution Candidate Name Rep. Pete Sessions	Primary X Other (specify) State Zip Co	ode 32	011 tegory/	Date of Disbursement M 9 M / D 0 9 / Y 2 0 1 0 Y Amount of Each Disbursement this Perior
	Senate President State: OH District: 18 Full Name (Last, First, Middle Initial) Pete Sessions For Congress Mailing Address PO Box 823047 City Dallas Purpose of Disbursement Contribution Candidate Name Rep. Pete Sessions	Primary X Other (specify) ▼ State Zip Co TX 7538 Disbursement For: 2	ode 32 Ca 7010 General	tegory/	Date of Disbursement M 9 M / D 0 9 / Y 2 0 1 0 Y Amount of Each Disbursement this Period

TEMIZED DISBURSEMENTS To ceach categopy of the Detailed Summary Page 21	SCHEDULE B (FEC FOIII 3X)	Use separate schedul	e(s) (check o	IE NUMBER: PAGE 94 / 144
NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Silvers For Congress Mailing Address 4679 Winterset Drive City Culumbus OH 43220 Purpose of Disbursement Contribution Candidate Name Mr. Steve Sitvers Sitate: OH District: 15 Full Name (Last, First, Middle Initial) Friends Of Schumer Mailing Address 509 Madison Ave Suite 1902 City New York NY 10022 Purpose of Disbursement Contribution Office Sought: X House President State: NY District: Full Name (Last, First, Middle Initial) State: NY District: Full Name (Last,	TEMIZED DISBURSEMENTS	Detailed Summary Pa	ge 21b 27	22 X 23 24 25 28a 28b 28c 29
American Hospital Association PAC Full Name (Last, First, Middle Initial) Stivers For Congress Mailing Address 4679 Winterset Drive City State Zip Code OH 43220 Purpose of Disbursement Contribution Candidate Name Mr. Steve Stivers State: OH District: 15 Full Name (Last, First, Middle Initial) Friends Of Schumer Mailing Address 509 Madison Ave Suite 1902 City State Zip Code Other (specify) ▼ State Zip Code Primary X General Other (specify) ▼ Transaction ID: 18560162 Date of Disbursement this Peric Contribution Contribution Transaction ID: 18560162 Date of Disbursement Transaction ID: 18560166 Date of	or for commercial purposes, other than using the na			
Stivers For Congress Mailing Address 4679 Winterset Drive City Columbus OH 43220 Purpose of Disbursement Contribution Candidate Name Mailing Address 509 Madison Ave Suite 1902 City New York Office Sought: City New York Nea	` '			
City Columbus State Zip Code OH 43220 Purpose of Disbursement Contribution Candidate Name Mr. Steve Stivers Office Sought: X House Senate Primary X General Primary X Gen	,			Date of Disbursement
Columbus OH 43220 Purpose of Disbursement Contribution Candidate Name Mr. Steve Stivers Office Sought: Senate President State: OH District: 15 Full Name (Last, First, Middle Initial) Friends Of Schumer City New York NY Office Sought: Versident State: NY Office Sought: Versident State: NY District: Full Name (Last, First, Middle Initial) Friends Of Schumer City New York NY Office Sought: Versident State: Versident Versident State: Versident Ver	Mailing Address 4679 Winterset Drive			09 7 09 7 2010
Contribution Candidate Name Mailing Address Sonate Purpose of Disbursement Cantidate Name Note Sought: Value Clast, First, Middle Initial) Friends Of Schumer Mailing Address Son Madison Ave Suite 1902 City New York				
Mr. Steve Stivers Office Sought:	Contribution			5000.00
Senate Primary X General Other (specify) ▼ Full Name (Last, First, Middle Initial) Friends Of Schumer Malling Address 509 Madison Ave Suite 1902 City State Zip Code Ny 10022 Purpose of Disbursement Contribution Candidate Name Sen. Charles E. Schumer Office Sought: House Primary X General Other (specify) ▼ City New York Ny 10022 Purpose of Disbursement Contribution Office Sought: House President Other (specify) ▼ Contribution Candidate Name Sen. Charles E. Schumer Office Sought: House President Other (specify) ▼ Contribution Contribution Contribution Transaction ID: 18560166 Date of Disbursement this Perion Other (specify) ▼ Amount of Each Disbursement this Perion Disbursement Tor: 2010 Contribution Transaction ID: 18560166 Date of Disbursement Tor: 2010 Office Sought: Category/ Type Contribution Condidate Name Rep. Mark Steven Kirk Office Sought: House Name Rep. Mark Steven Kirk Office Sought: House Primary X General Category/ Type Office Sought: House Primary X General Category/ Type Other (specify) ▼ Contribution Contribution Contribution Contribution Contribution Contribution	Mr. Steve Stivers	sement For: 2010	, ,	
Full Name (Last, First, Middle Initial) Friends Of Schumer Mailing Address 509 Madison Ave Suite 1902 City New York Purpose of Disbursement Contribution Candidate Name Sen. Charles E. Schumer Office Sought: Full Name (Last, First, Middle Initial) Kirk For Senate Mailing Address President State Zip Code NY 10022 Amount of Each Disbursement this Perio Amount of Each Disbursement this Perio Contribution Contribution Contribution Contribution Transaction ID: 18560162 Date of Disbursement this Perio Amount of Each Disbursement this Perio Contribution Contribution Contribution Transaction ID: 18560166 Date of Disbursement Office Sought: Mailing Address P.O. Box 8 City Winnetka City Winnetka City Winnetka City Winnetka Contribution Candidate Name Rep. Mark Steven Kirk Office Sought: Amount of Each Disbursement Office Sought: Category/ Type Contribution Candidate Name Rep. Mark Steven Kirk Office Sought: Amount of Each Disbursement this Perio Category/ Type Contribution Candidate Name Rep. Mark Steven Kirk Office Sought: Amount of Each Disbursement this Perio Category/ Type Contribution Contribution Contribution Contribution Contribution	Senate President	Primary X Gene	ral	Contribution
City New York NY 10022 Purpose of Disbursement Contribution Candidate Name Sen. Charles E. Schumer Office Sought: House President President President State: NY District: Full Name (Last, First, Middle Initial) Kirk For Senate Mailing Address P.O. Box 8 City State Zip Code Disbursement For: 2010 Mailing Address P.O. Box 8 City State Zip Code Winnetka IL 60093 Purpose of Disbursement Contribution Candidate Name Rep. Mark Steven Kirk Office Sought: House Disbursement For: 2010 Contribution Candidate Name Rep. Mark Steven Kirk Office Sought: House Negative Amount of Each Disbursement this Period Contribution	Full Name (Last, First, Middle Initial)			
New York Purpose of Disbursement Contribution Candidate Name Sen. Charles E. Schumer Office Sought: House	Mailing Address 509 Madison Ave Suite		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	
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David Rivera For Congress					Date of Disbursement
Mailing Address P.O. Box 520633					09 7 7 20 10
City Miami	State FL	Zip Code 33152			Amount of Each Disbursement this Period
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or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (in Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Lynn Jenkins For Congress Malling Address P.O. Box 1441 City State Zip Code KS 66601 Purpose of Disbursement Contribution Cardidate Name Rep. Lynn Jenkins Office Sought: X House Senate President City Rodriguez For Congress Malling Address PO Box 14528 City State Zip Code Senate Primary X General Other (specify) ▼ Transaction ID: 18575842 Date of Disbursement Contribution Contribution Transaction ID: 18575842 Date of Disbursement Contribution Transaction ID: 18575842 Date of Disbursement Office Sought: X House Senate President Senate Primary X General Primary X General Primary X General Other (specify) ▼ Transaction ID: 18575842 Date of Disbursement Office Sought: X House Senate President State: TX District: 23 Full Name (Last, First, Middle Initial) Ben Chandler For Congress Malling Address P. O. Box 12678 City State Zip Code Senate Primary X General Other (specify) ▼ Transaction ID: 18575845 Date of Disbursement Other (specify) ▼ Transaction ID: 18575842 Amount of Each Disbursement In Incomplete In I		Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30
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Full Name (Last, First, Middle Initial) Chad Causey For Congress			Transaction ID: 18578668 Date of Disbursement
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	Full Name (Last, First, Middle Initial) Melissa Bean For Congress					Trans			185°	78688	3	
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·	Full Name (Last, First, Middle Initial) Boyd For Congress				Transaction ID: 18579136 Date of Disbursement
	Mailing Address P.O. Box 15703				09
	City Tallahassee	State FL	Zip Code 32317		Amount of Each Disbursement this Perio
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	Candidate Name Rep. Allen Boyd			Category/ Type	
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NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Friends Of Connie Mack Mailing Address P.O. Box 519 Pmb 388 City Naples FL 34106 Purpose of Disbursement Contribution Candidate Name President State: FL District: 14 Full Name (Last, First, Middle Initial) City Naples FL 34106 Purpose of Disbursement Contribution Candidate Name President State: FL District: 14 Full Name (Last, First, Middle Initial) Ros-Lehtlinen For Congress Mailing Address PO Box 522784 City Miami FL 33152 Purpose of Disbursement Contribution Candidate Name Rep. Diena Ros-Lehtlinen Office Sought: X House President State: FL District: 14 Full Name (Last, First, Middle Initial) Ros-Lehtlinen For Congress Mailing Address PO Box 522784 City Miami FL 33152 Purpose of Disbursement Contribution Candidate Name Rep. Diena Ros-Lehtlinen Office Sought: X House President State: FL District: 18 Full Name (Last, First, Middle Initial) Ros-Lehtlinen Office Sought: X House President Senate President State: FL District: 18 Full Name (Last, First, Middle Initial) Ros-Lehtlinen Office Sought: X House Senate President Senate Pre	EMIZED DISBUI	RSEMENTS	for each	category of the	218	22 X		25 29	
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_	Full Name (Last, First, Middle Initial) Mario Diaz-Balart For Congress					Transaction II		3
	Mailing Address 95 Merrick Way, Suite 2	50				Date of Disburs		2010°
	City Coral Gables	State Zip Code FL 33134				Amount of Eac	h Disbursemen	it this Period
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John D. Dingell For Congress Mailing Address 607 14th Street, Nw								of Di	isburse	eme	nt / Y	ž	0 Ť	0 ^Y	
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Full Name (Last, First, Middle Initial) Shelby For U.S. Senate		Transactio Date of Dis	
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City Tuscaloosa	State Zip Code AL 35403	Amount of	Each Disbursement this Period
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<u> </u>	Full Name (Last, First, Middle Initial) Robert Aderholt For Congress				Transaction ID: 18615738 Date of Disbursement
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	Full Name (Last, First, Middle Initial) Mike Rogers For Congress					Transaction ID: 18615750 Date of Disbursement
	Mailing Address 123 East 13th Street					099 / 27 / 42010
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	Candidate Name Rep. Michael D. Rogers				egory/ vpe	
	Senate President	rsement For: 2010 Primary X General Other (specify) ▼				Contribution
	State: AL District: 03 Full Name (Last, First, Middle Initial) Terri Sewell For Congress					Transaction ID: 18615757 Date of Disbursement
	Mailing Address P.O. Box 1964					0 9 2 7 Y 2 0 1 0 Y
	City Birmingham	State Zip Code AL 35201				Amount of Each Disbursement this Peri
	Purpose of Disbursement Contribution			_	11	2500.00
	Candidate Name Ms. Terri Sewell				egory/ vpe	
	Office Sought: X House Senate President State: AL District: 07	rsement For: 2010 Primary X General Other (specify)	•			Contribution
	Full Name (Last, First, Middle Initial) Toomey For Senate Committee					Transaction ID: 18615761 Date of Disbursement
	Mailing Address 2720 Jordan Road					099 / 27 / 42010
	City Orefield	State Zip Code PA 18069				Amount of Each Disbursement this Peri
	Purpose of Disbursement Contribution Condidate Name			_	11	5000.00
	Candidate Name Mr. Patrick Toomey				egory/ vpe	
	X Senate President	rsement For: 2010 Primary X General Other (specify) ▼				Contribution
	State: PA District:					10000.00

	B (FEC Form 3X) DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page		FOR LINI (check or 21b	E NUMBER:
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Full Name (Las Hoyer For C	st, First, Middle Initial) ongress					Transaction ID: 18615783 Date of Disbursement
Mailing Addres	s 607 14th Street, Nw Suite 800					$\begin{bmatrix} M & M & / & D & D & D & Y & Y & Y & Y & Y & Y & Y$
City Washington		State DC	Zip Code 20005			Amount of Each Disbursement this Per
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Candidate Nan Rep. Steny I	_				tegory/ ype	
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State: MD	District: 05					
,	st, First, Middle Initial) ns For Congress					Transaction ID: 18615790 Date of Disbursement
Mailing Addres	s PO Box 823047					099 / 14 / 2010
City Dallas		State TX	Zip Code 75382			Amount of Each Disbursement this Peri
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Candidate Nan Rep. Pete Se					tegory/ ype	
Office Sought:	X House Disbu Senate President District: 32	rsement For: Primary Other (sp	2010 X General ecify) V			Contribution
Full Name (Las	st, First, Middle Initial) ongress Committee					Transaction ID: 18615804 Date of Disbursement
Mailing Addres	s PO Box 16381					$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Sugar Land		State TX	Zip Code 77496			Amount of Each Disbursement this Per
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Candidate Nan Rep. Pete O				Ca	tegory/ ype	
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	y Information copied from such Reports a for commercial purposes, other than using				of for the purpose of soliciting contributions solicit contributions from such committee
	NAME OF COMMITTEE (In Full) American Hospital Association PA		oce of any pointed		olok com battore nom coon committee
	Full Name (Last, First, Middle Initial) Boucher For Congress Committee)			Transaction ID: 18615813 Date of Disbursement
	Mailing Address P.O. Box 2000				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Abingdon	State VA	Zip Code 24212		Amount of Each Disbursement this Perio
	Purpose of Disbursement Contribution			011	1000.00
	Candidate Name Rep. Rick Boucher			Category/ Type	
	Office Sought: X House Senate President	Disbursement For: Primary Other (sp	2010 X General pecify) ▼		Contribution
	State: VA District: 09 Full Name (Last, First, Middle Initial) Arcuri For Congress				Transaction ID: 18615816 Date of Disbursement
	Mailing Address P.O. Box 8508				$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ 0 & 9 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 4 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
	City Utica	State NY	Zip Code 13505		Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution			011	3000.00
	Candidate Name Rep. Michael A. Arcuri			Category/ Type	
	Office Sought: X House Senate President State: NY District: 24	Disbursement For: Primary Other (sp	2010 X General pecify)		Contribution
	Full Name (Last, First, Middle Initial) Friends Of Dennis Cardoza				Transaction ID: 18615833 Date of Disbursement
	Mailing Address PO Box 2749				099 / 14 / 2010
	City Merced	State CA	Zip Code 95340		Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution			011	5000.00
	O and Palata Managa			Category/ Type	
	Candidate Name Rep. Dennis A. Cardoza				
		Disbursement For: Primary Other (sp	2010 X General pecify) ▼		Contribution

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	American Hospital Association PAC											
	Full Name (Last, First, Middle Initial) Dan Seals for Congress					Trans Date o		sburse	ement			
	Mailing Address PO Box 584					0 ^M 9	M /	^D 1	^D 4	/ Y	ž 0 1	0 Y
	City Wilmette	State Zip Code IL 60091				Amou	nt of	Each	Disb	-	nent this	-
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	Full Name (Last, First, Middle Initial) David Vitter For U.S. Senate					Trans	of Dis	sburse	ement			
	Mailing Address PO Box 8175					0 ^M 9	M /	^D 1	6	/ L	ž 0 1	0 1
	City Metairie	State Zip Code LA 70011				Amou	nt of	Each	Disb		nent this	
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	Full Name (Last, First, Middle Initial) Peters For Congress					Trans Date of	of Dis	sburse	ement			
	Mailing Address PO Box 226					0 _M 9	M /	^D 1	6	/ L	ž 0 1	0 1
	City Bloomfield Hills	State Zip Code MI 48303				Amou	nt of	Each	Disb		nent this	
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-	, .	First, Middle Initial) gress Committee PO Box 830							Date of		ion ID:	ement		70 2 0 1 () ^Y
_	City	FO BOX 630		State	Zip Code				-	int o	f Each		ırsem	ent this I	
F	York Purpose of Disbu	rsement	;	SC	29745	_					•		3	3500.00)
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Ō	Office Sought:	X House Senate President District: 05	Disburse	ment For: Primary Other (spe	2010 X General ecify)		- 71-		Contri	ibut	ion				
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N	Mailing Address	PO Box 33027							0 9	IVI	້1	6 /	Ľ.	ž 0 1 ()
5	City Seattle			State WA	Zip Code 98133				Amou	int o	f Each	Disbu		ent this I	
(Purpose of Disbui Contribution Candidate Name Rep. Jay Inslee						_	ory/		-				1000.00	,
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N	Mailing Address	PO Box 2009							0 ^M 9	М	[/] 1	6 ^D	Y	ž 0 i 0) \
5	City Sioux Falls			State SD	Zip Code 57101				Amou	int o	f Each	Disbu	-	ent this I	
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		ailed Summary Page	27	22 X 23
				n for the purpose of soliciting contributions solicit contributions from such committee
NAME OF COMMITTEE (In Full) American Hospital Association	on PAC			
Full Name (Last, First, Middle Initia Graves For Congress	al)			Transaction ID: 18616540 Date of Disbursement
Mailing Address 2345 Grand	d, Suite 2400			099 / 16 / 2010
City Kansas City	State MO	Zip Code 64108		Amount of Each Disbursement this Perio
Purpose of Disbursement Contribution			011	1000.00
Candidate Name Rep. Samuel B. Graves, Jr.			Category/ Type	
Office Sought: X House Senate President	Disbursement F Prima Other			Contribution
State: MO District: 06 Full Name (Last, First, Middle Initia	al)			Transaction ID: 10010540
Friends Of Phil Hare	~-,			Transaction ID: 18616542 Date of Disbursement
Mailing Address 224 18th St P.O. Box 41				09
City Rock Island	State IL	Zip Code 61204		Amount of Each Disbursement this Perio
Purpose of Disbursement Contribution			011	2000.00
Candidate Name Rep. Phil Hare			Category/ Type	
Office Sought: X House Senate President State: IL District: 17	Disbursement F Prima Other			Contribution
Full Name (Last, First, Middle Initial Serrano For Congress	al)			Transaction ID: 18616545 Date of Disbursement
Mailing Address 1831 Bay S	treet, Se			09 16 7 2010
City Washington	State DC	Zip Code 20003		Amount of Each Disbursement this Period
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Candidate Name Rep. Jose E. Serrano			Category/ Type	
Office Sought: X House Senate President	Disbursement F Prima Other		1	Contribution
State: NY District: 16				
				5500.00

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American Hospital Association PAC										
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Mailing Address PO Box 1663				0 ^M 9	M /	1	^D 6	Y 2	0 1	o ^Y
City Tacoma	State Zip Code WA 98401			Amou	nt of	Each	Disburs	emer	t this	Period
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Candidate Name Rep. Norman D. Dicks	,	Category	//							
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Full Name (Last, First, Middle Initial)				Trans	anti	on ID:	1861	2550		
Norm Dicks For Congress				Date o				JJJ2	-	
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Denny Heck For Congress				Date o	of Di	sburse				V
Mailing Address PO Box 235				0 ^M 9	M /	1	^D 6	[*] 2	01	o *
City Olympia	State Zip Code WA 98507			Amou	nt of	Each	Disburs	emer	t this	Period
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Candidate Name Mr. Dennis Heck		Category	//							
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	Mailing Address P	O Box 5202							0 9	/ D	1 6 /	y y 2	010	Y
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	Candidate Name Mr. Joe Manchin Office Sought:	House	Disbursem		2010		tegory/ Type							
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	Full Name (Last, First, Middle Initial) Mike Thompson For Congress					Trans		on ID sburs	_		613		
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	City Sacramento	State Zip Code CA 95841				Amou	ınt ol	Each	Disb	urser	ment '	this P	eriod
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	Candidate Name Rep. Michael Thompson		Ca	ateg Type	ory/								
	Senate President	ement For: 2010 Primary X General Other (specify) ▼		-71-		Contr	ibut	ion					
	State: CA District: 01 Full Name (Last, First, Middle Initial)										240		
	Joe Donnelly For Congress							sburs	emen				V
	Mailing Address PO Box 1961					0 9	IVI .	2	2 2	′ L	Ž () 1 0	
	City South Bend	State Zip Code IN 46634				Amou	ınt ol	Each	Disb	ourser		this P	erioc
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	Candidate Name Rep. Joseph Donnelly		1	ateg Type	-								
	Office Sought: X House Disbury Senate President State: IN District: 02	sement For: 2010 Primary X General Other (specify) ▼				Contr	ibut	ion					
	Full Name (Last, First, Middle Initial) Donald A. Manzullo For Congress					Trans		sburs	emen		244		
	Mailing Address PO Box 7783					0 ^M 9	М	D 2	2 2	/ Y	ž () 1 0	Y
	City Rockford	State Zip Code IL 61126				Amou	int of	Each	Disb	urser	ment	this P	erioc
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	Candidate Name Rep. Donald A. Manzullo			ateg									
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American Hospital Association PAC												
Full Name (Last, First, Middle Initial) Pete Stark Re-Election Committee					ransa ate of		burse	ement		245	i	
Mailing Address P.O. Box 8331					0 9		^D 2	2 2	Y	ž	0 1 (0 Y
City Fremont	State Zip Code CA 94537			A	moun	t of	Each	Disb	ırse	men	t this	Period
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Candidate Name Rep. Fortney Peter Stark	-	Categ	gory/									
Senate President	ement For: 2010 Primary X General Other (specify)			Co	ontrib	outi	on					
State: CA District: 13												
Full Name (Last, First, Middle Initial) Issa For Congress					ransa Oate of		burse	ement	-	246	i	
Mailing Address P O Box 760					0 ^M 9 M	/	^D 2	2 2	Y	ž	0 Ť	0 ^Y
City Vista	State Zip Code CA 92085			A	moun	t of	Each	Disb	ırse	men	t this	Period
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Candidate Name Rep. Darrell E. Issa		Categ										
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State: CA District: 49 Full Name (Last, First, Middle Initial)												
Congressman Waxman Campaign Comm	ittee			D	ransa ate of	Dis	burse	ement	_			
Mailing Address 6380 Wilshire Blvd. #16	12				0 9		^D 2	2 2	Y	ž	0 Ť	0 1
City Los Angeles	State Zip Code CA 90048			A	moun	t of	Each	Disb	ırse	men	t this	Period
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Candidate Name Rep. Henry A. Waxman	-	Categ	gory/									
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NAME OF COMMITTEE (In Full) American Hospital Association PAC												
Full Name (Last, First, Middle Initial) Committee To Re-Elect Loretta Sanch	ez					Date	action of Disbu	urseme				
Mailing Address 1212 S. Victory Blvd Suite 211						0 9	M /	^D 2 2]	ž	0 1 0) \
City Burbank	State CA	Zip Code 91502				Amou	nt of Ea	ach Di	sburse	-		_
Purpose of Disbursement Contribution Candidate Name			_	011			•		•	200	00.00	
Rep. Loretta Sanchez	oursement For:	2010		ategor Type	y/ 							
Senate President State: CA District: 47	Primary Other (spe	X General				Contr	ibutior	1				
Full Name (Last, First, Middle Initial) King For Congress							action of Disbu			7249		
Mailing Address 116 N Main St. PO Box 400						0 9	M /	^D 2 2 2] / [ž	0 1 0	Y
City Early	State IA	Zip Code 50535				Amou	nt of Ea	ach Di	sburse			
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Candidate Name Rep. Steve A. King				ategor Type	·y/							
Office Sought: X House Senate President State: IA District: 05	oursement For: Primary Other (spe	2010 X General cify) ▼				Contr	ibutior	1				
Full Name (Last, First, Middle Initial) Boswell For Congress						Date	action of Disbu	urseme	ent			
Mailing Address PO Box 6220						0 ^M 9	M / L	^D 2 2]	ž	0 1 0) \
City Des Moines	State IA	Zip Code 50309				Amou	nt of Ea	ach Di	sburse			
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Candidate Name Rep. Leonard L. Boswell	oursement For:	2010		ategor Type	·y/							
Senate President	Primary Other (spe	2010 X General cify) ▼				Contr	ibutior	1				
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	NAME OF COMMITTEE (In Full) American Hospital Association PAC		, , , ,		
<u>/</u>	Full Name (Last, First, Middle Initial) Schauer For Congress				Transaction ID: 18617252 Date of Disbursement
	Mailing Address PO Box 100				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Battle Creek	State MI	Zip Code 49016		Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution			011	2000.00
	Candidate Name Rep. Mark Hamilton Schauer		0010	Category/ Type	
	Office Sought: X House Senate President State: MI District: 07	Primary Other (spe	2010 X General ecify) ▼		Contribution
	Full Name (Last, First, Middle Initial) Huizenga For Congress				Transaction ID: 18617253 Date of Disbursement
	Mailing Address 441 William Court				$\begin{bmatrix} \begin{smallmatrix} M & M \\ D & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & Z \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & D & I & O \end{smallmatrix} \end{bmatrix}$
	City Zeeland	State MI	Zip Code 49464		Amount of Each Disbursement this Perio
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	Candidate Name Mr. William Huizenga			Category/ Type	
	Office Sought: X House Disbu	rsement For:	2010 X General		Contribution
	Senate President State: MI District: 02	Other (spe	ecify) 🔻		
	President		ecify) 🔻		Transaction ID: 18617280 Date of Disbursement
	State: MI District: 02 Full Name (Last, First, Middle Initial)	Other (spe	ecify) ▼		
	President State: MI District: 02 Full Name (Last, First, Middle Initial) Tim Scott For Congress	Other (spe	zip Code 29407		Date of Disbursement M 9 M / D 2 D / Y 2 O 1 O Amount of Each Disbursement this Period
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	y Information copied from such Reports and State or commercial purposes, other than using the nan			
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·	Full Name (Last, First, Middle Initial) Lincoln Davis For Congress			Transaction ID: 18617352 Date of Disbursement
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	City Jamestown	State Zip Code TN 38556		Amount of Each Disbursement this Period
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	Candidate Name Rep. Lincoln Davis		Category/ Type	
	Senate President	ement For: 2010 Primary X General Other (specify)		Contribution
	State: TN District: 04 Full Name (Last, First, Middle Initial) Menendez For Senate			Transaction ID: 18617545 Date of Disbursement
	Mailing Address One Gateway Center Su	uite 520		0 9 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Newark	State Zip Code NJ 07102		Amount of Each Disbursement this Period
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	Candidate Name Sen. Robert Menendez		Category/ Type	
		ement For: 2012 Primary General Other (specify)		2012 Contribution
	Full Name (Last, First, Middle Initial) Menendez For Senate			Transaction ID: 18617692 Date of Disbursement
	Mailing Address One Gateway Center Su	ite 520		09 / 24 / 2010
	City Newark	State Zip Code NJ 07102		Amount of Each Disbursement this Period
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	Candidate Name Sen. Robert Menendez		Category/ Type	
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	Mailing Address PO Box 326					0 9	М	/ D	2 4	/ L	ž	0 ť 0	Y
	City Everett	State Zip Code WA 98206				Amou	int o	f Eacl	n Disl	burse	-	this F	
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	Mailing Address P. O. Box 7292					0 ^M 9	М	/ D	2 4	/ Y	ž	0 Ĭ 0	Υ
	City Chicago	State Zip Code IL 60680				Amou	int o	f Eacl	n Disl	burse	ment	this F	eriod
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Donald A. Manzullo For Congress							Date		isbu	rser	ment			Y
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Diana DeGette For Congress Inc.							Date		isbu	rser				Y
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	st, First, Middle Initial) eal For Congress Co	mmittee				Transaction II Date of Disburs	sement		
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City Springfield		State MA	Zip Code 01108			Amount of Eac	h Disburs	ement this	Period
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City Cedar Rapids		State IA	Zip Code 52406			Amount	of Each	Disbur	rseme	nt this I	Period	d
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	y Information copied from such Report for commercial purposes, other than us												
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	Full Name (Last, First, Middle Initial) Nunes For Congress								action IE		17718		
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	City Pixley	Stat CA		Zip Code 93256				Amou	nt of Eac	h Disbur			erio
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	Candidate Name Rep. Devin Nunes Office Sought: X House	Disbursemer	at For	2010		tegory/ ype							
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	Full Name (Last, First, Middle Initial) Pascrell For Congress								action II		17719		
	Mailing Address P.O. Box 640							0 9	M / D	24	y y	0 Ĭ 0	Y
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	Candidate Name Rep. William J. Pascrell, Jr.					tegory/ ype							
	Office Sought: X House Senate President State: NJ District: 08		mary	2010 X General ecify) ▼				Contri	bution				
	Full Name (Last, First, Middle Initial) Graves For Congress	•						Date of	action II of Disburs	sement			
	Mailing Address 2345 Grand, S	Suite 2400						0 9	M / D	24	ž	0 1 0	Y
	City Kansas City	State MC		Zip Code 64108				Amou	nt of Eac	h Disbur			
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	Candidate Name Rep. Samuel B. Graves, Jr.	1				tegory/ ype							
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NAME OF COMMITTEE (In Full)											
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Committee To Elect Chris Murphy						of D	isburse	ement	V	v · v ·	V
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NAME OF COMMITTEE (In Full)									
American Hospital Association PAC									
Full Name (Last, First, Middle Initial) Richmond For Congress			Transaction ID: 1 Date of Disburseme						
Mailing Address 1631 Elysian Fields Suite	150		09 / 28	Y 2010					
,	State Zip Code LA 70126		Amount of Each Dis	sbursement this Period					
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Candidate Name Mr. Cedric Richmond		Category/ Type							
Office Sought: X House Disburse Senate President State: LA District: 02	ment For: 2010 Primary X General Other (specify)		Contribution						
Full Name (Last, First, Middle Initial) Mike Ross For Congress Committee			Transaction ID: 1 Date of Disburseme	ent					
Mailing Address PO Box 360			$\begin{bmatrix} M & M \\ 0 & 9 \end{bmatrix}$	Y 2010 Y					
•	State Zip Code AR 71857		Amount of Each Dis	sbursement this Period					
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Candidate Name Rep. Michael Avery Ross		Category/ Type							
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Full Name (Last, First, Middle Initial) Lewis For Congress Committee			Transaction ID: 1 Date of Disburseme						
Mailing Address PO Box 247			$\begin{bmatrix} 0 & 9 & M \\ 0 & 9 & M \end{bmatrix}$	['] 2010 [']					
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Candidate Name Rep. Jerry Lewis		Category/ Type							
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American Hospital Association PAC												
Full Name (Last, First, Middle Initial) Wally Herger For Congress Committee					Trans Date o		sburs	eme		115		
Mailing Address PO Box 1007					0 ^M 9	M /	D 2	2 9	/ Y	ž	0 1	o ^Y
City Willows	State Zip Code CA 95988			,	Amoui	nt of	Each	n Di	sburse	men	t this	Period
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Full Name (Last, First, Middle Initial) Kurt Schrader For Congress					Trans Date c		sburs	em		121		
Mailing Address PO Box 3314 Suite 240					0 ^M 9	M /	D 2	2 9	/ Y	ž	0 Ť	o ^Y
City Oregon City	State Zip Code OR 97045			,	Amoui	nt of	Each	n Di	sburse	-		
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Mailing Address 12 Trumbull Street					0 9	VI /	D 2	2 9	/ Y	ž	0 1 (o ^Y
City New Haven	State Zip Code CT 06511			,	Amoui	nt of	Each	n Di	sburse	men	t this	Period
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NAME OF COMMITTEE (In Full) American Hospital Association PAC			
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City Collinsville	State Zip Code IL 62234		Amount of Each Disbursement this Period
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Rep. John M. Shimkus		Category/ Type	
Office Sought: X House Disbu Senate President	rsement For: 2010 Primary X General Other (specify) ▼		Contribution
State: IL District: 19			
Full Name (Last, First, Middle Initial) Roskam For Congress Committee			Transaction ID: 18620144 Date of Disbursement
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Candidate Name Rep. Peter Roskam		Category/ Type	
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Full Name (Last, First, Middle Initial) Bachus For Congress Committee			Transaction ID: 18620145 Date of Disbursement
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President District:

	B (FEC Form 3X)	Use separate schedule(s	FOR LINE (check on	NUMBER: PAGE 141 / 144
ITEMIZED DIS	SBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
				for the purpose of soliciting contributions plicit contributions from such committee
NAME OF COMM American Hosp	MITTEE (In Full) Dital Association PAC			
Full Name (Last,	First, Middle Initial)			Transaction ID: 18625897
All Power to th	e People PAC			Date of Disbursement
Mailing Address	499 South Capitol Stree Suite 422	et SW		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Washington		State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbu 2010 Contribution			011	2000.00
Candidate Name All Power to th	e People PAC		Category/ Type	
Office Sought:	Senate President	sement For: Primary General Other (specify)		2010 Contribution
State:	District:			
•	First, Middle Initial) Feam Republicans for Utiliz	zing Sensible Tact-		Transaction ID: 18665819 Date of Disbursement
Mailing Address	Post Office Box 490			$\begin{array}{c c} \begin{array}{c c} \begin{array}{c c} \\ \end{array} & \begin{array}{c cc \\ \end{array} & \begin{array}{$
City St. Joseph		State Zip Code MI 49085		Amount of Each Disbursement this Period
Purpose of Disbu Re-issue of 7/10	rsement check, misdeposited by Upton f	or All of Us	011	3000.00
Candidate Name TRUST PAC (Tractics)	Геат Republicans for Utiliz	zing Sensible	Category/ Type	
Tactics) Office Sought:	House Disburs Senate President	sement For: Primary General Other (specify)		Re-issue of 7/10 check, misdeposited by Upton for All of Us

SUBTOTAL of Disbursements This Page (optional)	•	5000.00
TOTAL This Period (last page this line number only)	•	278500.00

State:

В.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	NUMBER: PAGE 142 / 144
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b	22 23 24 25 26 X 28a 28b 28c 29 30b
Any Information copied from such Reports and Stateme or for commercial purposes, other than using the name	ents may not be sold or used and address of any political of	by any person f committee to so	for the purpose of soliciting contributions licit contributions from such committee
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Charles H Whitfield, , Jr.			Transaction ID: 18616559 Date of Disbursement
Mailing Address 1420 Tusculum Boulevard	i		$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ 0 & 9 & M \end{smallmatrix} & \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 6 \end{smallmatrix} \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
,	tate Zip Code FN 37745-5825		Amount of Each Disbursement this Period
Purpose of Disbursement Refund		010	125.00
Candidate Name		Category/ Type	
President	nent For: Primary General Other (specify) ▼		Refund
State: District:			
Full Name (Last, First, Middle Initial) Mr. G Douglas Higginbotham			Transaction ID: 18620066 Date of Disbursement
Mailing Address P O Box 607			09
,	State Zip Code MS 39441-0607		Amount of Each Disbursement this Period
Purpose of Disbursement Refund		010	250.00
Candidate Name		Category/ Type	
	nent For: Primary General Other (specify) ▼		Refund

SUBTOTAL of Disbursements This Page (optional)	•	375.00
TOTAL This Period (last page this line number only)		375.00
TOTAL THIS I choo (last page this line number only)		010.00

State:

District:

C.

00UEDIU E D (EEO E			
SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER: PAGE 143 / 144
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	y one) 22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)	e and address of any pointed		more contributions from Sacri committee
American Hospital Association PAC			
Full Name (Last, First, Middle Initial)			Transaction ID: 18622169
American Express			Date of Disbursement
Mailing Address Ste. 001			09 0 1 7 2 0 1 0
City	State Zip Code		Amount of Each Disbursement this Period
Chicago	IL 60679		4.95
Purpose of Disbursement Merchant Fees		001	4.95
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		Merchant Fees
State: District:			
Full Name (Last, First, Middle Initial) American Express			Transaction ID: 18622170 Date of Disbursement
Mailing Address Ste. 001			09 0 7 7 2 0 1 0 7
City	State Zip Code		Amount of Each Disbursement this Period
Chicago	IL 60679		32.50
Purpose of Disbursement Merchant Fees		001	GEIGG
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		Merchant Fees
Full Name (Last, First, Middle Initial)			Tuesday ID 40000474
Merchant Bankcard			Transaction ID: 18622174 Date of Disbursement
Mailing Address 1601 Elm Street			$\begin{bmatrix} 0 & 9 & M \\ 0 & 9 & M \end{bmatrix}$
City Dallas	State Zip Code TX 75201		Amount of Each Disbursement this Period
Purpose of Disbursement Merchant Fees		001	87.40
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify) \	туре	Merchant Fees
State: District:	<u> </u>		
SUBTOTAL of Disbursements This Page (optional)			124.85

В.

Office Sought:

State:

House

Senate

District:

President

Disbursement For:

Primary

Other (specify)

SCHEDULE B (FEC Form 3X)

FOR LINE NUMBER: PAGE 144 / 144 Use separate schedule(s) (check only one) **ITEMIZED DISBURSEMENTS** for each category of the 21b 22 23 25 26 **Detailed Summary Page** 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Transaction ID: 18622183 Paymentech Date of Disbursement 07 0 9 2010 Mailing Address 14221 Dallas Parkway **Building Two** City State Zip Code Amount of Each Disbursement this Period Dallas TX 75254 20.45 Purpose of Disbursement Merchant Fees 001 Candidate Name Category/ Type Office Sought: Disbursement For: House Merchant Fees General Senate Primary President Other (specify) State: District: Full Name (Last, First, Middle Initial) Transaction ID: 18622192 Citibank, F.S.B. Date of Disbursement 20 0 9 2010 Mailing Address 1400 G Street, NW City State Zip Code Amount of Each Disbursement this Period 20005 Washington DC 35.42 Purpose of Disbursement Bank Fee 001 Candidate Name Category/ Type

General

SUBTOTAL of Disbursements This Page (optional)	•	55.87
TOTAL This Period (last page this line number only)		180.72

Bank Fee