

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5
21st Century Oncology, Inc. Political Action Committee

ADDRESS (number and street) 2234 Colonial Blvd. Attn: Margarita Suarez Fort Myers FL 33907
Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00385120 CITY STATE ZIP CODE
3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period 01 / 01 / 2014 through 03 / 31 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Daniel E. Dosoretz MD

Signature of Treasurer Daniel E. Dosoretz MD [Electronically Filed] Date 04 / 10 / 2014

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

21st Century Oncology, Inc. Political Action Committee

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="25588.00"/>	<input type="text" value="25588.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="25588.00"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="12172.00"/>	<input type="text" value="12172.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="37760.00"/>	<input type="text" value="37760.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="35110.43"/>	<input type="text" value="35110.43"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2649.57"/>	<input type="text" value="2649.57"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**21st Century Oncology, Inc. Political Action Committee**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	9612.00	9612.00
(ii) Unitemized .....	960.00	960.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	10572.00	10572.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	10572.00	10572.00
12. Transfers From Affiliated/Other Party Committees.....	1600.00	1600.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	12172.00	12172.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	12172.00	12172.00

**DETAILED SUMMARY PAGE**

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	110.43	110.43
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	110.43	110.43
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	35000.00	35000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	35110.43	35110.43
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	35110.43	35110.43

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	10572.00	10572.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10572.00	10572.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	110.43	110.43
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	110.43	110.43

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

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

FOR LINE NUMBER: PAGE 6 OF 15  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**21st Century Oncology, Inc. Political Action Committee**

**A. Dr Christopher Chen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1010 SEMINOLE DRIVE  
 APT 1107  
 City State Zip Code  
 FORT LAUDERDALE FL 33304-3220  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 21st Century Oncology, LLC Medical Doctor  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1152.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : PR1567028832928**  
 Amount of Each Receipt this Period  
 1152.00  
 P/R Deduction (\$192.00 Bi-Weekly)

**B. Mr. David E. Lee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9741 Mar Largo Circle  
 City State Zip Code  
 Fort Myers FL 33919-7325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 21st Century Oncology, LLC Physician Assistant  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : PR1567085132928**  
 Amount of Each Receipt this Period  
 300.00  
 P/R Deduction (\$50.00 Bi-Weekly)

**C. Mrs. Victoria Danton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1409 Davis Drive  
 City State Zip Code  
 Fort Myers FL 33919-1069  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 21st Century Oncology Services, Inc Director of Revenue Integrity  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : PR1580095132928**  
 Amount of Each Receipt this Period  
 450.00  
 P/R Deduction (\$75.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1902.00  
**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: (check only one)	PAGE 7 OF 15
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**21st Century Oncology, Inc. Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Quinten Curtis Black MD</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2014 <b>Transaction ID : PR1580879432928</b>
Mailing Address 1404 Kenton Lane		Amount of Each Receipt this Period 480.00
City Asheville	State NC	Zip Code 28803-2468
FEC ID number of contributing federal political committee. C		P/R Deduction (\$80.00 Bi-Weekly)
Name of Employer RTA of Western NC, PA	Occupation Medical Doctor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	

Full Name (Last, First, Middle Initial) <b>B. Mark Robert Jones MD</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2014 <b>Transaction ID : PR1580886832928</b>
Mailing Address 1400 LONG RUN ROAD		Amount of Each Receipt this Period 300.00
City LOUISVILLE	State KY	Zip Code 40245-4334
FEC ID number of contributing federal political committee. C		P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer 21st Century Oncology of Kentucky (KEN)	Occupation Medical Doctor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. Tam Nguyen MD</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2014 <b>Transaction ID : PR1580891932928</b>
Mailing Address 2798 Bellini Road		Amount of Each Receipt this Period 600.00
City Henderson	State NV	Zip Code 89052-3118
FEC ID number of contributing federal political committee. C		P/R Deduction (\$100.00 Bi-Weekly)
Name of Employer Michael J. Katin, MD, PC - MJK	Occupation Medical Doctor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1380.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 8 OF 15  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**21st Century Oncology, Inc. Political Action Committee**

**A. Dr Patrick Michael Francke**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7 Winnebago Road  
 City State Zip Code  
 Sea Ranch Lakes FL 33308-2305  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Carolina Regional Cancer Center, LLC Medical Doctor  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : PR1633307932928**  
 Amount of Each Receipt this Period  
 240.00  
 P/R Deduction (\$40.00 Bi-Weekly)

**B. Dr Keith Lawrence Miller**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12731 Terabella Way  
 City State Zip Code  
 Fort Myers FL 33912-0910  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 21st Century Oncology, LLC Medical Doctor  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 900.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : PR1692755732928**  
 Amount of Each Receipt this Period  
 900.00  
 P/R Deduction (\$150.00 Bi-Weekly)

**C. Dr. Dwight Fitch**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9122 16th Ave Circle, NW  
 City State Zip Code  
 Bradenton FL 34209-8133  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 21st Century Oncology, LLC Medical Doctor  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : PR2127270532928**  
 Amount of Each Receipt this Period  
 600.00  
 P/R Deduction (\$100.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1740.00  
**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: (check only one)	PAGE 9 OF 15
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**21st Century Oncology, Inc. Political Action Committee**

**A. Brian P Quaranta MD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 Vista Lake Drive  
 Apt 108  
 City Candler State NC Zip Code 28715-5103  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Radiation Therapy Associates of Wester  
 Occupation Medical Doctor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : PR2127272432928**  
 Amount of Each Receipt this Period 240.00  
 P/R Deduction (\$40.00 Bi-Weekly)

**B. Madlyn Dornaus**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18930 Knoll Landing Drive  
 City Fort Myers State FL Zip Code 33908-4760  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer 21st Century Oncology Services, Inc  
 Occupation VP Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : PR2232241732928**  
 Amount of Each Receipt this Period 450.00  
 P/R Deduction (\$75.00 Bi-Weekly)

**C. Dr. Peter Greenberg**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 77-840 Flora Rd  
 City Palm Desert State CA Zip Code 92211-4109  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer 21st Century Oncology of California, P  
 Occupation Medical Doctor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 03 / 31 / 2014  
**Transaction ID : PR2366842332928**  
 Amount of Each Receipt this Period 1200.00  
 P/R Deduction (\$200.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1890.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 10 OF 15  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**21st Century Oncology, Inc. Political Action Committee**

**A. Dr David Horvick**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 953 Creek Rock Rd  
 City State Zip Code  
 Bel Air MD 21014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 21st Century Onc of Harford County, Ma Medical Doctor  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : PR2366842532928**  
 Amount of Each Receipt this Period  
 300.00  
 P/R Deduction (\$50.00 Bi-Weekly)

**B. Marc A. Melser MD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 27090 Harbor Oaks Boulevard  
 City State Zip Code  
 Punta Gorda FL 33983-6507  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 21st Century Oncology, LLC Medical Doctor - Urologist  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : PR2412064432928**  
 Amount of Each Receipt this Period  
 600.00  
 P/R Deduction (\$100.00 Bi-Weekly)

**C. Robert L. Long**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 909 Mar Walt Drive  
 City State Zip Code  
 Fort Walton Beach FL 32547-6635  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 21st Century Oncology, LLC Medical Doctor  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : PR2492181532928**  
 Amount of Each Receipt this Period  
 600.00  
 P/R Deduction (\$100.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1500.00  
**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 11 OF 15 (check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**21st Century Oncology, Inc. Political Action Committee**

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

Mailing Address 9070 Pittsburgh Blvd

City Fort Myers	State FL	Zip Code 33967-7205
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FEC ID number of contributing federal political committee. **C**

Name of Employer 21st Century Oncology Services, Inc	Occupation Director of Ancillary Services
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

**Transaction ID : PR2492181932928**

Amount of Each Receipt this Period  

300.00
--------

P/R Deduction (\$50.00 Bi-Weekly)

**B. Rie Alhara**  
Full Name (Last, First, Middle Initial)

Mailing Address 14270 Royal Harbor

City Fort Myers	State FL	Zip Code 33908-6503
--------------------	-------------	------------------------

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

Name of Employer 21st Century Oncology, LLC	Occupation Medical Doctor
--	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

**Transaction ID : PR2497582232928**

Amount of Each Receipt this Period  

300.00
--------

P/R Deduction (\$50.00 Bi-Weekly)

**C. Kevin J. Kerlin**  
Full Name (Last, First, Middle Initial)

Mailing Address 904 Mill Rd

City Goldsboro	State NC	Zip Code 27534-8951
-------------------	-------------	------------------------

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

Name of Employer Radiation Therapy Associates of Wester	Occupation Medical Doctor
--	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

**Transaction ID : PR2598671232928**

Amount of Each Receipt this Period  

600.00
--------

P/R Deduction (\$100.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	9612.00

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

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

FOR LINE NUMBER: PAGE 12 OF 15  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**21st Century Oncology, Inc. Political Action Committee**

**A. Oncure Medical Corp. Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 168 Inverness Drive West  
Suite 650

City Englewood State CO Zip Code 80112

FEC ID number of contributing federal political committee. **C** C00487629

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 30 / 2014

**Transaction ID : 37054064**

Amount of Each Receipt this Period  
1600.00

Transfer from Affiliated Committee

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1600.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**21st Century Oncology, Inc. Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Portman For Senate Committee**

Mailing Address 9856 Archer Lane

City State Zip Code  
Dublin OH 43017

Purpose of Disbursement  
Contribution

011

Candidate Name

**Sen. Rob Portman**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: OH District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 06 / 2014

**Transaction ID : 36964891**

Amount of Each Disbursement this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Mike Crapo For US Senate**

Mailing Address P.O. Box 1948

City State Zip Code  
Boise ID 83701

Purpose of Disbursement  
Contribution

011

Candidate Name

**Sen. Mike Crapo**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: ID District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2014

**Transaction ID : 36964902**

Amount of Each Disbursement this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Wyden For Senate**

Mailing Address 232 NE 9th Avenue

City State Zip Code  
Portland OR 97232

Purpose of Disbursement  
Contribution

011

Candidate Name

**Sen. Ron Wyden**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: OR District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 18 / 2014

**Transaction ID : 36964913**

Amount of Each Disbursement this Period

5000.00

Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

12500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**21st Century Oncology, Inc. Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Dave Camp For Congress**

Mailing Address 5915 Eastman Avenue  
Suite 100

City Midland State MI Zip Code 48640

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. David Camp**

Office Sought:  House  
 Senate  
 President  
State: MI District: 04

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 18 / 2014

**Transaction ID : 36964915**

Amount of Each Disbursement this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Alison For Kentucky**

Mailing Address 340 Democrat Drive

City Frankfort State KY Zip Code 40601

Purpose of Disbursement  
Contribution

Candidate Name

**Alison Grimes**

Office Sought:  House  
 Senate  
 President  
State: KY District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 37019978**

Amount of Each Disbursement this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Friends Of Nan Hayworth**

Mailing Address P. O. Box 189

City Mount Kisco State NY Zip Code 10549

Purpose of Disbursement  
Contribution

Candidate Name

**Nan Hayworth**

Office Sought:  House  
 Senate  
 President  
State: NY District: 18

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 25 / 2014

**Transaction ID : 37020006**

Amount of Each Disbursement this Period

5000.00

Contribution

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

12500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**21st Century Oncology, Inc. Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Natalie Tennant for Senate**

Mailing Address PO Box 1063

City Charleston State WV Zip Code 25324

Purpose of Disbursement  
Contribution

011

Candidate Name

**Natalie Tennant**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: WV District:

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 37066467**

Amount of Each Disbursement this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Nunn For Senate**

Mailing Address PO Box 78936

City Atlanta State GA Zip Code 30357

Purpose of Disbursement  
Contribution

011

Candidate Name

**Michelle Nunn**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: GA District:

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

**Transaction ID : 37066468**

Amount of Each Disbursement this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

10000.00

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

35000.00