NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, ty over the lines.	-	Use Only
Healthcare Freedor				
DDRESS (number and street	t) PO Box 2485			
Check if different				
than previously reported. (ACC)	Springfield			152
	INUMBER V C	TY 🔺	STATE 🔺	ZIP CODE
C C00528414		IS THIS NEW REPORT X (N)	OR AMENDE (A)	D
 TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 	Report Due On: Ma	ur 20 (M3)	20 (M5) Aug 20 (M8 20 (M6) Sep 20 (M9 0 (M7) Oct 20 (M1)	(Non-Election Year Only) Dec 20 (M12 (Non-Election Year Only)
Quarterly Repo July 15 Quarterly Repo October 15 Quarterly Repo	rt (Q2) (C) 12-Day PRE-Election Report for the:	Primary (12P) Convention (12C)		in the
X January 31 Year-End Repo July 31 Mid-Ye Report (Non-ele Year Only) (MY	ar (d) 30-Day ection (d) POST -Election (f) Report for the:	on on General (30G)	Runoff (30R)	State of Special (30S
(TER)	-	on on		in the State of
. Covering Period	M M / D D / Y Y Y 07 01 2013	through		2013
certify that I have examine type or Print Name of Trea	d this Report and to the best of surer Joe Grandy	f my knowledge and belief	f it is true, correct and comp	olete.
			M M /	

01/31/2014 12 : 51

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

	OF FEC Form 3X (Rev. 02/2003)	RECEIPTS AND DISBURSEMENTS	Page 2
۷	Vrite or Type Committee Name		
	Healthcare Freedom Fund		
F	Report Covering the Period: From: 07	/ D D / Y Y Y Y 01 2013 To:	M M / D D / Y Y Y Y 12 31 2013
	_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2013		8025.13
	(b) Cash on Hand at Beginning of Reporting Period	55346.80	
	(c) Total Receipts (from Line 19)	78600.00	195402.54
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	133946.80	203427.67
7.	Total Disbursements (from Line 31)	76363.30	145844.17
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	57583.50	57583.50
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10	. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

Page 3

195402.54

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Healthcare Freedom Fund

Loan Repayments Received 0.00 0.00 Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 0.00 0.00 0.00 Refunds of Contributions Made 0.00 0.00 0.00 to Federal Candidates and Other 0.00 0.00 0.00 Political Committees 0.00 0.00 0.00 Other Federal Receipts 0.00 0.00 0.00 (Dividends, Interest, etc.) 0.00 0.00 0.00 (a) Non-Federal Account (from Schedule H3)	Report Covering the Period: From:	/ D D / Y	p: 12 31 2013
Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Uniternized (ii) Uniternized (iii) OTAL (add Lines 11(a)(i) and (ii) (b) Political Party Committees (c) Other Political Committees (c) Total Contributions (add Lines 11(a)(ii), (b), and (c)) (Carry Transfers From Affiliated/Other Party Committees (a) Total Contributions Made 0.00 0.00 0.00 0.00 Contributions Made 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 (d) Total Contributions Made to Ederal Conditates and Other Political Committees<	I. Receipts		
(a) Individuals/Persons Other Than Political Committees (i) Uniternized (use Schedule A)	Contributions (other than loans) From:		
Than Political Committees 1500.00 15750.00 (i) Unitemized (use Schedule A) 0.00 0.00 (ii) TOTAL (add Lines 11(a)(i) and (ii)			
(i) Itemized (use Schedule A)			
(ii) Unitemized 0.00 0.0 (iii) TOTAL (add 0.00 0.0 (iii) TOTAL (add 1550,00 15750,00 (b) Political Party Committees 0.00 0.00 (c) Other Political Committees 0.00 0.00 (such as PACs) 0.00 179652.5 (d) Total Contributions (add Lines 11(d), (b), and (c)) (Carry Totals to Line 33, page 5) 77100.00 195402.5 Transfers From Affiliated/Other 0.00 0.00 0.00 Party Committees 0.00 0.00 0.00 All Loans Received 0.00 0.00 0.00 Clarry Totals to Line 37, page 5) 0.00 0.00 0.00 Refunds, Rebates, etc.) 0.00 0.00 0.00 Clarry Totals to Line 37, page 5) 0.00 0.00 0.00 Political Committees 0.00 0.00 0.00 Other Federal Receipts 0.00 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 0.00 (c) Total Transfers (add 18(a) and 18(b)) 0.00 0.00 0.00 (b) Levin Funds (add Lines 11(d),		1500.00	15750.00
(ii) TOTAL (add Lines 11(a)(i) and (ii)			
Lines 11(a)(i) and (ii) 1500.00 15750.0 (b) Political Party Committees 0.00 0.01 (c) Other Political Committees 77100.00 179652.5 (d) Total Contributions (add Lines 77100.00 179652.5 11(a)(iii), (b), and (c)) (Carry 78600.00 195402.5 Transfers From Affiliated/Other 0.00 0.01 Party Committees 0.00 0.01 All Loans Received 0.00 0.00 Loan Repayments Received 0.00 0.00 Offsets To Operating Expenditures 0.00 0.00 (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 0.00 0.00 Refunds of Contributions Made 0.00 0.00 Other Federal Candidates and Other 0.00 0.00 Political Committees 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 Total Receipts (add Lines 11(d), 78600.00 195402.5	(ii) Unitemized	0.00	0.0
Lick Holp, and (n), and (n	(iii) TOTAL (add		
(a) Orbital Political Committees (c) Other Political Committees (such as PACs)	Lines 11(a)(i) and (ii)	1500.00	15750.00
(a) Orbital Political Committees (c) Other Political Committees (such as PACs)			
(such as PACs)		0.00	0.00
(a) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)		77100.00	170052 5
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) 78600.00 195402.5- Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 All Loans Received 0.00 0.00 Loan Repayments Received 0.00 0.00 Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 0.00 0.00 Refunds of Contributions Made to Federal Candidates and Other 0.00 0.00 Political Committees 0.00 0.00 0.00 (Dividends, Interest, etc.) 0.00 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 0.00 (c) Total Transfers (add 18(a) and 18(b)) 0.00 0.00 0.00 (c) Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) 78600.00 195402.5		7 7 7	179052.5
Totals to Line 33, page 5) 78600.00 195402.5 Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 All Loans Received 0.00 0.00 Loan Repayments Received 0.00 0.00 Clarry Totals to Line 37, page 5) 0.00 0.00 Refunds, Rebates, etc.) 0.00 0.00 Clarry Totals to Line 37, page 5) 0.00 0.00 Political Committees 0.00 0.00 Clividends, Interest, etc.) 0.00 0.00 Clividends, Interest, etc.) 0.00 0.00 (a) Non-Federal Account (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfers (add 18(a) and 18(b)) 0.00 0.00 Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) 78600.00 195402.5			
India's Form Affiliated/Other Party Committees Party Committees All Loans Received All Loans Received All Loans Received Outor		78600.00	195402.54
Party Committees 0.00 0.00 All Loans Received 0.00 0.00 All Loans Received 0.00 0.00 Usan Repayments Received 0.00 0.00 Offsets To Operating Expenditures 0.00 0.00 (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 0.00 0.00 Refunds of Contributions Made 0.00 0.00 to Federal Candidates and Other 0.00 0.00 Political Committees 0.00 0.00 (Dividends, Interest, etc.) 0.00 0.00 (a) Non-Federal Account (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfers (add 18(a) and 18(b)). 0.00 0.00 Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) 78600.00 195402.5		7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
All Loans Received 0.00 Loan Repayments Received 0.00 Offsets To Operating Expenditures 0.00 (Refunds, Rebates, etc.) 0.00 (Carry Totals to Line 37, page 5) 0.00 Refunds of Contributions Made 0.00 to Federal Candidates and Other 0.00 Political Committees 0.00 Other Federal Receipts 0.00 (Dividends, Interest, etc.) 0.00 (Dividends, Interest, etc.) 0.00 (b) Levin Funds (from Schedule H5) 0.00 (c) Total Transfers (add 18(a) and 18(b)) 0.00 Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) 78600.00		0.00	0.00
An Edails Received Loan Repayments Received Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) (Carry Totals to Line 37, page 5) Refunds of Contributions Made to Federal Candidates and Other Political Committees Other Federal Receipts (Dividends, Interest, etc.) (Dividends, Interest, etc.) (a) Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3) (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b)) Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) 78600.00	Party Commutees	7 7 7	
Construction Construction Construction Construction Carry Totals to Line 37, page 5) Construction Refunds of Contributions Made Construction to Federal Candidates and Other Construction Political Committees	All Loans Received	0.00	0.0
Construction Construction Construction Construction Carry Totals to Line 37, page 5) Construction Refunds of Contributions Made Construction to Federal Candidates and Other Construction Political Committees		0.00	
(Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 0.00 0.00 Refunds of Contributions Made 0.00 0.00 to Federal Candidates and Other 0.00 0.00 Political Committees		0.00	0.0
(Carry Totals to Line 37, page 5) 0.00 0.00 Refunds of Contributions Made 0.00 0.00 to Federal Candidates and Other 0.00 0.00 Political Committees			
Refunds of Contributions Made 0.00 0.00 Refunds of Contributions Made 0.00 0.00 Viter Federal Candidates and Other 0.00 0.00 Political Committees		0.00	0.00
to Federal Candidates and Other Political Committees		7 7	7 7 7
Political Committees 0.00 0.00 Other Federal Receipts 0.00 0.00 Dividends, Interest, etc.) 0.00 0.00 Transfers from Non-Federal and Levin Funds 0.00 0.00 (a) Non-Federal Account 0.00 0.00 (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 Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))			
Other Federal Receipts (Dividends, Interest, etc.)		0.00	0.00
(Dividends, Interest, etc.) 0.00 0.00 Transfers from Non-Federal and Levin Funds 0.00 0.00 (a) Non-Federal Account 0.00 0.00 (b) Levin Funds (from Schedule H3) 0.00 0.00 (c) Total Transfers (add 18(a) and 18(b)) 0.00 0.00 Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))		7 7 *	
Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3) (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b)) Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))		0.00	0.00
(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 Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) 78600.00 195402.54	Transfers from Non-Federal and Levin Funds		
(b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfers (add 18(a) and 18(b)) 0.00 0.00 Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	(a) Non-Federal Account		
(c) Total Transfers (add 18(a) and 18(b)) Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	(from Schedule H3)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b)) Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))			
Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	(b) Levin Funds (from Schedule H5)	0.00	0.0
12, 13, 14, 15, 16, 17, and 18(c)) ► 78600.00 195402.54	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.0
Iotal Federal Receipts	 (c) Total Transfers (add 18(a) and 18(b)) 9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	0.00	
	al Receipts		

78600.00

100

(subtract Line 18(c) from Line 19)►

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)		Page 4
II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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	43963.30	48644.17
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii), and (b))► Transfers to Affiliated/Other Party	43963.30	48644.17
Committees Contributions to	0.00	0.00
Federal Candidates/Committees and Other Political Committees	32400.00	97200.00
Independent Expenditures	0.00	0.00
(use Schedule E) Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made Refunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	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
Other Disbursements	0.00	0.00
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
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	76363.30	145844.17
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	76363.30	145844.17

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DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Total Contributions (other than loans) (from Line 11(d), page 3) 	78600.00	195402.54
 Total Contribution Refunds (from Line 28(d)) 	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	78600.00	195402.54
 Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) 	43963.30	48644.17
 Offsets to Operating Expenditures (from Line 15, page 3) 	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	43963.30	48644.17

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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'			Detailed Summary Page	11a 13		11b 14	11c		12 16	17
	y information copied from such Reports and Stat for commercial purposes, other than using the n			or the		pose of	f soliciting		ntribut	ions
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) Healthcare Freedom Fund									
A.	Full Name (Last, First, Middle Initial) Behrends B. Foster			Date of	f Re	eceipt				
	Mailing Address 1722 N. Nelson Street			м м 12	1	05			ү 013	Y
	City Arlington	State VA	Zip Code 22207				SA11AI Receipt th			
	FEC ID number of contributing federal political committee.	С				,		_	500.	.00
	Bluestone Strategies	Occupation Partner								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00							
В.	Full Name (Last, First, Middle Initial) Marc S. Lampkin			Date of	f Re	eceipt				
	Mailing Address 1640 Davidson Road			м м 12	/	D 16			у 013	Y
	City McLean	State VA	Zip Code 22101				SA11AI. Receipt th			
	FEC ID number of contributing federal political committee.	С				,	9	_	1000.	00
	BrownsteinHyattFarber&Schreck	Occupation Attorney								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00							
с.	Full Name (Last, First, Middle Initial)			Date of	f Re	eceipt				
	Mailing Address			M M	/	D	D / Y	Y	Y	Y
	City	State	Zip Code	Amount	t of	Each F	Receipt th	nis F	Period	
	FEC ID number of contributing federal political committee.	С				, .		_		
	Name of Employer	Occupation								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼							
s	UBTOTAL of Receipts This Page (optional)		·····			,			1500.	00
-	OTAL This Pariod (last page this line number on	b.)							1500.	00

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

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	Use separate schedul	
TIEWIZED RECEIPIS	for each category of t Detailed Summary Pa	ge 11a 11b X 11c 12
		13 14 15 16 17 y any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee. 10
NAME OF COMMITTEE (In Full) Healthcare Freedom Fund		
Full Name (Last, First, Middle Initial) AHS MEDICAL HOLDINGS LLC GOOD	GOVERNMENT FUND	Date of Receipt
Mailing Address ONE BURTON HILLS BOULEVA SUITE 250	RD	M M / D D / Y Y Y Y 07 23 2013
City NASHVILLE	StateZip CodeTN37215	Transaction ID : SA11C.4271 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С соозэоэ63	2500.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500	0.00
Full Name (Last, First, Middle Initial) B. AMERICAN ACADEMY OF NEUROLO	DGY BRAINPAC	Date of Receipt
Mailing Address 401 C ST NE		09 26 2013
City WASHINGTON	StateZip CodeDC20002	Transaction ID : SA11C.4291 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С соо435933	1500.00
Name of Employer	Occupation	
Receipt For: // Primary General Other (specify) ▼ //	Aggregate Year-to-Date ▼ 2500	.00
Full Name (Last, First, Middle Initial) C. AMERICAN ACADEMY OF OPHTHALMOLOGY INC	POLITICAL COMMITTEE (OPHTHPA	C) Date of Receipt
Mailing Address 655 BEACH STREET		09 19 _2013 _
City SAN FRANCISCO	StateZip CodeCA94109	Transaction ID : SA11C.4287 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00196246	1500.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3500).00
SUBTOTAL of Receipts This Page (optional)		

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Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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	for each category of the Detailed Summary Page	11a 11b X 11c 12 13 14 15 16 17
		ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Healthcare Freedom Fund		
Full Name (Last, First, Middle Initial) A. AMERICAN COLLEGE OF CARDIOLC Mailing Address 2400 N ST NW City WASHINGTON FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼	DGY POLITICAL ACTION COMMITTE State Zip Code DC 20037 C C00375360 Occupation Aggregate Year-to-Date ▼ 5000.00	M M M / D D / Y Y Y Y Y 12 23 23 2013 Transaction ID : SA11C.4358 Amount of Each Receipt this Period 5000.00
B. Full Name (Last, First, Middle Initial) AMERICAN COLLEGE OF SURGEONS Mailing Address 20 F ST NW, STE 1000 ATTN: SARA MORSE City	State Zip Code	M M / D / Y
WASHINGTON FEC ID number of contributing federal political committee. Name of Employer	DC 20001 C C00382424 Occupation	Amount of Each Receipt this Period
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3500.00	
C. Full Name (Last, First, Middle Initial) AMERICAN DENTAL ASSOCIATIO Mailing Address 1111 14TH STREET, NW SUITE 1100 City	ON POLITICAL ACTION COMMIT	TEE Date of Receipt 10 18 2013 Transaction ID : SA11C.4307
WASHINGTON FEC ID number of contributing federal political committee. Name of Employer	DC 20005 C C00000729 Occupation	Amount of Each Receipt this Period
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numbe		

Use separate schedule(s)

FOR LINE NUMBER:

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		Use separate schedule(s)	(che	(check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page		11a 13		11b 14	X 11c	12	17			
Any information copied from such Reports and St or for commercial purposes, other than using the				or the		pose o	f soliciting	g contrib	utions			
NAME OF COMMITTEE (In Full) Healthcare Freedom Fund												
Full Name (Last, First, Middle Initial) A. AMERICAN HOSPITAL ASSOCIATIO	N		[Date of	Re	ceipt						
Mailing Address 325 SEVENTH STREET NW				м м 09	1	D 16		у у 2013	Y			
City WASHINGTON	State DC	Zip Code 20004					: SA11C.4 Receipt th		d			
FEC ID number of contributing federal political committee.	Ссза	0001788				7		150	00.00			
Name of Employer	Occupation											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1500.00]									
Full Name (Last, First, Middle Initial) B. AMERICAN SOCIETY OF PLASTIC	SURGEC	ONS PLASTYPAC		Date of	Re	ceipt						
Mailing Address 20 F STREET NW #310A City	State	Zip Code		м м 09	/	27	,	2013	Y			
WASHINGTON	DC	20001	4				: SA11C.4 Receipt th		d			
FEC ID number of contributing federal political committee.	C coo)249342				,			0.00			
Name of Employer	Occupation											
Receipt For:	Aggregate	Year-to-Date ▼										
Other (specify) ▼		2500.00										
Full Name (Last, First, Middle Initial) C. ARKANSAS BEST CORPORATION	POLITICA	AL ACTION COMMITTEE	[Date of	Re	ceipt						
Mailing Address 3801 OLD GREENWOOD RO PO BOX 10048	AD			м м 11	/	26		2013	Y			
City FORT SMITH	State AR	Zip Code 72903	-			-	: SA11C.4 Receipt th		d			
FEC ID number of contributing federal political committee.	C co	0193383				,			00.00			
Name of Employer	Occupation											
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00										
SUBTOTAL of Receipts This Page (optional)			•					500	0.00			
TOTAL This Period (last page this line number of	only)	······				,	,					

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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•••			Detailed Summary Page		11a 13	-	11b 14	X 11c	12	17								
	y information copied from such Reports and St for commercial purposes, other than using the				for the		pose o	f soliciting	contrib	utions								
	NAME OF COMMITTEE (In Full) Healthcare Freedom Fund																	
Α.	Full Name (Last, First, Middle Initial) ASSOCIATED GENERAL CONTRACTORS OF AMERICA POLITICAL ACTION COMMITTEE Mailing Address 2300 WILSON BLVD.																	
	SUITE 400	State	Zip Code	_	12 Trans	act	23 ion ID	3 : SA11C.4	2013 1356	_								
	ARLINGTON	VA	22201	_	Amoun	t of	Each	Receipt th	is Perio	k								
	FEC ID number of contributing federal political committee.	C co	0082917				7		100	0.00								
	Name of Employer	Occupatior	1															
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3500.00															
В.	Full Name (Last, First, Middle Initial) BHFS-E, PC PAC (BROWNSTEIN HYATT FARBER	SCHRECK P	OLITICAL ACTION COMMITTEE)		Date of	f Re	eceipt											
	Mailing Address 410 SEVENTEENTH STREET SUITE 2200				M M 12	1	16		y y 2013	Y								
	City DENVER	State CO	Zip Code 80202	_				: SA11C.4 Receipt th		4								
	FEC ID number of contributing federal political committee.	0	0390583				7		100	_								
	Name of Employer	Occupatior	1															
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00															
<u>с</u> .	Full Name (Last, First, Middle Initial) BURGER KING FRANCHISEE PA	.C			Date of	f Re	eceipt											
	Mailing Address 1701 BARRETT LAKES BLVD SUITE 180				м м 12	1	D 02		ү ү 2013	Y								
	City KENNESAW	State GA	Zip Code 30144	_				: SA11C.4 Receipt th		4								
	FEC ID number of contributing federal political committee.	C CO	0329425				,	7		0.00								
	Name of Employer	Occupation	I															
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2000.00															
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SCHEDULE A (FEC Form 3X) MIZED DECEIDTO

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FOR LINE NUMBER:

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PAGE 11 OF

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	11a 11b X 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) Healthcare Freedom Fund		
Full Name (Last, First, Middle Initial) A. CAPELLA HEALTHCARE, INC. GOVE Mailing Address 501 CORPORATE CENTRE D		Date of Receipt
City	State Zip Code	Transaction ID : SA11C.4265
FRANKLIN	TN 37067	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00421420	1000.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) COMMUNITY HEALTH SYSTEM PROFESSIONAL SERVIES C	CORPORATION POL ACTION CMTE (A/K/A CHS PAC)	Date of Receipt
Mailing Address 4000 MERIDIAN BLVD.		07 25 2013
City FRANKLIN	State Zip Code TN 37067	Transaction ID : SA11C.4276 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00485896	5000.00
Name of Employer	Occupation	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Initial) C. DCI PAC		Date of Receipt
Mailing Address 1828 L STREET NW SUITE 400		12 09 2013
City WASHINGTON	State Zip Code DC 20036	Transaction ID : SA11C.4347
FEC ID number of contributing federal political committee.	C C00412395	Amount of Each Receipt this Period
Name of Employer	Occupation	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		6500.00

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Use separate schedule(s)

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PAGE 12 OF

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ITEMIZED RECEIPTS		e separate schedule(s) each category of the	(check only one)		
		tailed Summary Page		1b × 11c 4 15	12 16 1 ¹
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NAME OF COMMITTEE (In Full) Healthcare Freedom Fund					
Full Name (Last, First, Middle Initial) FEDERATION OF AMERICAN H	OSPITALS PAC		Date of Rece	eipt	
Mailing Address 750 9TH STREET NW			M M / / 08	D D / Y 26	2013
City WASHINGTON		ip Code 0001		n ID : SA11C.4 ach Receipt thi	
FEC ID number of contributing federal political committee.	C C0000226	51			5000.00
Name of Employer	Occupation				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-t	o-Date ▼ 5000.00]		
Full Name (Last, First, Middle Initial) B. FMR LLC POLITICAL ACTION	COMMITTEE (FIDE	ELITY PAC)	Date of Rece	eipt	
Mailing Address 82 DEVONSHIRE STRE N5A	ET	,	10 /	07 / Y	2013
City BOSTON		ip Code 2109		n ID : SA11C.43 ach Receipt thi	
FEC ID number of contributing federal political committee.	C C0021504	6			1500.00
Name of Employer	Occupation				
Receipt For: Primary General Other (specify)	Aggregate Year-t	o-Date ▼ 1500.00]		
Full Name (Last, First, Middle Initial) C. FOOD MARKETING INSTITUTE PO	LITICAL ACTION COM	IMITTEE FOODPAC	Date of Rece	eipt	
Mailing Address 2345 CRYSTAL DRIVE SUITE 800			M M / 10		20 <u>1</u> 3
City ARLINGTON		ip Code 2202		n ID : SA11C.4 ach Receipt thi	
FEC ID number of contributing federal political committee.	C C0001455	55			1500.00
Name of Employer	Occupation				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-t	o-Date ▼ 2500.00]		
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PAGE 13 OF

		Detailed Summary Page		11a 13		11b 14	X 11c	12	17
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NAME OF COMMITTEE (In Full) Healthcare Freedom Fund									
Full Name (Last, First, Middle Initial) FREEDOM PROJECT; THE				Date of	Re	ceipt			
Mailing Address 320 1ST STREET SE				м м 10	/	07		2013	Y
City WASHINGTON	State DC	Zip Code 20003					: SA11C.4		
FEC ID number of contributing federal political committee.	0	0305805		Amount	U	Each	Receipt th	5000	_
Name of Employer	Occupation	1							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00]						
Full Name (Last, First, Middle Initial) GROOM LAW GROUP, CHARTER		L ACTION COMMITTEE		Date of	Re	ceipt			
Mailing Address 1701 PENNSYLVANIA AV		7. 0.1		м м 12	/	D 16		2013	Y
City WASHINGTON	State DC	Zip Code 20006					: SA11C.4 Receipt th		
FEC ID number of contributing federal political committee.	C coo	0394775			-	7	1	1000	_
Name of Employer	Occupation	1							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]						
Full Name (Last, First, Middle Initial) . HCA INC. GOOD GOVERNME	NT FUND			Date of	Re	ceipt			
Mailing Address PO BOX 550 ONE PARK PLAZA				м м 07	/	23		ү ү 2013	Y
City NASHVILLE	State TN	Zip Code 37203					: SA11C. Receipt th		
FEC ID number of contributing federal political committee.	Ссо	0067231				1		5000	_
Name of Employer	Occupation	1							
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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FOR LINE NUMBER:

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	EMIZED RECEIPTS		for each category of the Detailed Summary Page		11a		11b	X 11c		12	47
	y information copied from such Reports and Sta for commercial purposes, other than using the r					purp					
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) Healthcare Freedom Fund										
Α.	Full Name (Last, First, Middle Initial) I-VOTE HEALTH OF IASIS HEALTHCARE CORPO Mailing Address 117 SEABOARD LANE STE E	RATION PC	LITICAL ACTION COMMITTEE		Date o	_	ceipt	D / Y	Y	Y	Ŷ
		0 1 1			07		23	3	20	013	_
		State TN	Zip Code 37067					: SA11C.			
	FRANKLIN		37067	- 1	Amoun	t of E	Each	Receipt th	nis P	eriod	
	FEC ID number of contributing federal political committee.	C coo	0540435				,		_	1500.	00
	Name of Employer	Occupation									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1500.00								
B.	Full Name (Last, First, Middle Initial) INSURED RETIREMENT INSTITUTE POL	ITICAL AC	CTION COMMITTEE (IRI PAC	;)	Date o	f Rec	ceipt				
	Mailing Address 1101 NEW YORK AVENUE NW SUITE 825				м м 12	/	05)13	Y
	City	State	Zip Code					: SA11C.4			
	WASHINGTON	DC	20005	- :	Amoun	t of E	Each	Receipt th	nis P	eriod	
	FEC ID number of contributing federal political committee.	C coo	490474				,	7	_	2000.	00
	Name of Employer	Occupation									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2000.00								
	Full Name (Last, First, Middle Initial)		· · · · · · · · · · · · · · · · · · ·								
C.	Mailing Address 1401 H STREET NW SUITE 12		LACTION COMMITTEE		Date o	_	ceipt	D / Y		Y	Y
	<u></u>	Otata	Zin Oada	_	09	- I.	23			013	_
	City WASHINGTON	State DC	Zip Code 20005					: SA11C. Receipt th			
	FEC ID number of contributing federal political committee.	C coo	0105981				,	10001011		1500	.00
	Name of Employer	Occupation									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00								
s	UBTOTAL of Receipts This Page (optional)		•				,	7	-	5000.	00

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FEC Schedule A (Form 3X) Rev. 02/2003

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PAGE 15 OF

		Use separate schedule(s)	(check	(check only one)								
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Any information copied from such Reports and or for commercial purposes, other than using the			erson for									
NAME OF COMMITTEE (In Full) Healthcare Freedom Fund												
Full Name (Last, First, Middle Initial) A. LIFEPOINT HOSPITALS INC GOOI	D GOVERNI	IENT FUND	Da	te of F	Receipt							
Mailing Address 103 POWELL COURT SUIT	E 200			07	/ 2	о / Y 3	2013	Y				
City BRENTWOOD	State TN	Zip Code 37027				: SA11C. Receipt th	4269					
FEC ID number of contributing federal political committee.	C co	0347955			,		2500).00				
Name of Employer	Occupation	1										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2500.00]									
Full Name (Last, First, Middle Initial) B. NATIONAL ASSOCIATION OF HEA	LTH UNDER	WRITERS PAC (HUPAC)	Da	te of F	Receipt							
Mailing Address 1212 NEW YORK AVE NW SUITE 1100			M	10	/ D	D / Y 5	2013	Y				
City WASHINGTON	State DC	Zip Code 20005				: SA11C.4 Receipt th						
FEC ID number of contributing federal political committee.	C co	0283135			7		1500	_				
Name of Employer	Occupation	1										
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1500.00]									
Full Name (Last, First, Middle Initial) C. NEW YORK LIFE INSURANCE COM		TICAL ACTION COMMITTE	E Da	te of F	Receipt							
Mailing Address 51 MADISON AVENUE ROOM 1109			M	м 08		D / Y)5	2013	Y				
City NEW YORK	State NY	Zip Code 10010				SA11C. Receipt th						
FEC ID number of contributing federal political committee.	Ссо	0158881			,	1000.01	2500	_				
Name of Employer	Occupation	1										
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SUBTOTAL of Receipts This Page (optional)					,	7	6500	.00				

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PAGE 16 OF

			Detailed Summary Page	-	11a		11b 14	X 11c	12		17			
	v information copied from such Reports and Stat for commercial purposes, other than using the n				for the		rpose (of soliciting	g contr	ibutio	ons			
	NAME OF COMMITTEE (In Full) Healthcare Freedom Fund													
	Full Name (Last, First, Middle Initial) NEW YORK LIFE INSURANCE COMPAN	Y POLITI	CAL ACTION COMMITTEE		Date of	of R	eceipt							
-	Mailing Address 51 MADISON AVENUE ROOM 1109 City	State	Zip Code	09 23 2013 Transaction ID : SA11C.4290										
	NEW YORK	NY	10010	_				Receipt th		iod				
	FEC ID number of contributing rederal political committee.	C co	0158881				3		25	500.0	0			
Ī	Name of Employer	Occupation	1											
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00											
	Full Name (Last, First, Middle Initial) RITE AID CORPORATION POLITICA		ON COMMITTEE		Date of	of R	eceipt							
-	Mailing Address 30 HUNTER LANE				м 09	И	3	D / Y	2013					
	City CAMP HILL	State PA	Zip Code 17011					: SA11C.4 Receipt th		iod				
	FEC ID number of contributing rederal political committee.	C coo	0104083				9	7	5	500.0	0			
I	Name of Employer	Occupation	l											
Ī	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00											
с. Г	Full Name (Last, First, Middle Initial)	CAL AC	TION COMMITTEE		Date	of R	eceipt							
I	Mailing Address 30 HUNTER LANE				M 10	M A	3	D / Y	2013					
	City CAMP HILL	State PA	Zip Code 17011	\neg				: SA11C. Receipt th		iod				
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1	Name of Employer	Occupation	1											
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PAGE 17 OF

			Detailed Summary Page		11a 13		11b 14	X 11c		12 16	17
	y information copied from such Reports and Stat for commercial purposes, other than using the na										
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) Healthcare Freedom Fund										
A.	Full Name (Last, First, Middle Initial) SOCIETY FOR VASCULAR SURGERY	POLITIC	CAL ACTION COMMITTEE		Date o	f Re	eceipt				
	Mailing Address 633 N. ST. CLAIR ST. 24TH FLOOR City	State	Zip Code		09		23		201	ү 13	Y
	CHICAGO	IL	60611					Receipt th		eriod	
	FEC ID number of contributing federal political committee.	C coo	0381459				7		1	1000.	00
	Name of Employer	Occupation									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 3000.00								
в.	Full Name (Last, First, Middle Initial) TENET HEALTHCARE CORPORATION		CAL ACTION COMMITTEE		Date o	f Re	eceipt				
	Mailing Address 1445 ROSS AVENUE SUITE 1400				м м 08	/	2		201	ү 3	Y
	City DALLAS	State TX	Zip Code 75202					: SA11C.4 Receipt th		eriod	
	FEC ID number of contributing federal political committee.	C coo	0119354				,		-	2500.0	00
	Name of Employer	Occupation									
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2500.00]							
с.	Full Name (Last, First, Middle Initial) TENN POLITICAL ACTION COMMI		NC (TENN PAC)		Date o	f Re	eceipt				
	Mailing Address 228 S WASHINGTON STREET				^M M	/	D 02		ү 201		Y
	City ALEXANDRIA	State VA	Zip Code 22314					: SA11C. Receipt th		eriod	
	FEC ID number of contributing federal political committee.	C co	0388421				7		2	2000.	00
	Name of Employer	Occupation	I								
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2000.00]							
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SCHEDULE A (FEC Form 32 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 OF 23 (check only one) 11a 11b X 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Healthcare Freedom Fund Full Name (Last, First, Middle Initial)	nd Statements may not be sold or used by any g the name and address of any political committed DYEE POLITICAL ACTION COMMITTEE T State Zip Code IL 61629 C C00148031 Occupation Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) THE EYE OF THE TIGER POLIT Mailing Address PO BOX 2485 City SPRINGFIELD FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼	TICAL ACTION COMMITTEE State Zip Code VA 22152 C C00467431 Occupation Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 12 02 2013 Transaction ID : SA11C.4337 Amount of Each Receipt this Period 1000.00
C. Full Name (Last, First, Middle Initial) UNAKA COMPANY POLITICA Mailing Address 1500 INDUSTRIAL RD City GREENEVILLE	State Zip Code TN 37743	Date of Receipt 08 Transaction ID : SA11C.4281 Amount of Each Propriet this Period

GREENEVILLE	111 37743	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С соозт1229	2600.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 2600.00	
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SCHEDULE A	(FEC	Form	3X)
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A. Full Name (Last, First, Middle Initial)	ESS GOOD GOVERNMEN	T CLUB (VERIZON/VERIZON WIRELES	Da	ate of	Receipt							
Mailing Address 1300 I ST NW, STE 40 ATTN: TAYLOR CRAIG				12	/ D	5	2013	Y				
City WASHINGTON	State DC	Zip Code 20005		Transa	ction ID	: SA11C	.4339					
FEC ID number of contributing federal political committee.		0186288	Ar	nount	of Each	Receipt t	this Period 1000					
Name of Employer	Occupatior	1										
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00]									
Full Name (Last, First, Middle Initial) VERIZON COMMUNICATIONS INC./VERIZON WIRE	LESS GOOD GOVERNME	ENT CLUB (VERIZON/VERIZON WIRELES	Da	ate of	Receipt							
Mailing Address 1300 I ST NW, STE 400 ATTN: TAYLOR CRAIC City		Zip Code	_ L	12		6	2013	Y				
WASHINGTON	DC	20005				: SA11C. Receipt t	.4351 this Period	k				
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$\left \right $	NAME OF COMMITTEE (In Full)													
\backslash	Healthcare Freedom Fund													
_	Full Name (Last, First, Middle Initial)													
А.	American Express						Date of Disbursement							
	Mailing Address PO Box 1270						M 11		0	7		013	Y	
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	Candidate Name			Cate	aor	v/								
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	President	Other (specify												
	State: District:		· •											
_	Full Name (Last, First, Middle Initial)													
В.	Capitol Hill Club								isburse					
	Mailing Address 300 1st Street SE						M 09		2	27		2013	Y	
	- 5		lip Code 20003				Tra	nsac	tion ID	: SB21E	.431	6		
	Washington Purpose of Disbursement		20003	_	_									
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		ment For:	0											
	President	Primary Other (specify	General											
	State: District:		/ ▼											
	Full Name (Last, First, Middle Initial)													
С.	Concentric Office, LLC						Date	of D	isburse	ement				
	Mailing Address 8136 Old Keene Mill Road						M 08		1	D / 3		013	Y	
	Suite A300													
	5		Cip Code				Tra	nsac	tion ID	: SB21E	.431	1		
	Springfield Purpose of Disbursement	VA 2	22152		_	_								
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	Senate	Primary	General											
	President District	Other (specify) v											
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s	UBTOTAL of Disbursements This Page (optional)								7			3260).82	
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SCHEDULE B (FEC Form 3X)		Use separate schedule(s)			OR LINE NUMBER: PAGE 21 OF									OF 23					
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	y information copied from such Reports and Stater for commercial purposes, other than using the nar																		
$\left \right\rangle$	NAME OF COMMITTEE (In Full)																		
	Healthcare Freedom Fund																		
Α.	Full Name (Last, First, Middle Initial) Concentric Office, LLC						Date o	f Di	sburs	en	nent								
	· · · · · · · · · · · · · · · · · · ·																		
	Mailing Address 8136 Old Keene Mill Road Suite A300	State Zip Code VA 22152						10 18 2013											
	City Springfield							Transaction ID : SB21B.4318											
	Purpose of Disbursement Compliance Services	001					Amount of Each Disbursement this Period												
	Candidate Name			Cate		rv/		Amount of Each Disbursement this Period											
					ype			L.,		7	-	7	-	75	2.84				
	Office Sought: House Disbursel	ment For: Primary	General																
	State: District:	Other (spe	ecify) ▼																
_	Full Name (Last, First, Middle Initial)																		
В.	Brian Kaegi							Date o	f Di	sburs	en	nent							
	Mailing Address 222 Wilsonia Avenue						11 D D / Y Y Y 11 13 2013								Y				
	Nashville	State TN	Zip Code 37205-2819					Transaction ID : SB21B.4323											
	Purpose of Disbursement Fundraising Consulting	C	003			Amount of Each Disbursement this Period													
	Candidate Name	Cate Ty				ry/		12000.00											
	Office Sought: House Disburser Senate President	ment For: Primary Other (spe	General cify) ▼																
_	State: District:																		
C.	Full Name (Last, First, Middle Initial) Machado & Co.							Date o	_										
	Mailing Address 6111 Newman Road								11 / D D / Y Y Y Y 11 13 2013										
	CityStateZip CodeFairfaxVA22030-5918							Transaction ID : SB21B.4326											
	Purpose of Disbursement Fundraising Consulting							Amount of Each Disbursement this Period											
	Candidate Name	Category Type							gory/ 16050.04										
	Office Sought: House Disburser Senate President																		
	State: District:																		
s	UBTOTAL of Disbursements This Page (optional)					• •			_	,			_	28802	2.88				
т	OTAL This Period (last page this line number only)				•		L.		7	_	7							

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS		Use separate schedule(s)			FOR LINE NUMBER: PAGE 22 (check only one)								22	OF 23		
		for each Detailed	(C		k oniy 21b 27	one) 22 28	a -	23 28	b	24 28c		25 29	26 30b			
	y information copied from such Reports and Stater for commercial purposes, other than using the nar															
$\left \right\rangle$	NAME OF COMMITTEE (In Full) Healthcare Freedom Fund															
	Full Name (Last, First, Middle Initial)															
Α.	Machado & Co.						Date									
	Mailing Address 6111 Newman Road		12 18 2013													
	City Fairfax	State Zip Code VA 22030-5918					Transaction ID : SB21B.4360									
	Purpose of Disbursement Fundrasising Consulting						Amount of Each Disbursement this Pe									
	Candidate Name			Cate T	egoi ype		10740.00									
	Senate President	ment For: Primary Other (spe	General cify) ▼													
В.	State: District: Full Name (Last, First, Middle Initial) Machado & Co.						Date	of D	isbur	ser	ment					
	Mailing Address 6111 Newman Road						12 / D D / Y Y Y Y 12 18 2013									
	CityStateZip CodeFairfaxVA22030-5918						Transaction ID : SB21B.4361									
	Purpose of Disbursement Food & Beverage						Amount of Each Disbursement this Period									
	Candidate Name	Categor Type						1159.60								
	Office Sought: House Disbursel Senate President	ment For: Primary Other (spe	General cify) ▼													
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C.	Full Name (Last, First, Middle Initial)						Date	of D		sei		v	Ý	Y		
	Mailing Address			Ľ		L										
	City State Zip Code															
	Purpose of Disbursement						Amount of Each Disbursement this Period									
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	State: District:						_	_	-			-	_			
s	UBTOTAL of Disbursements This Page (optional)						Ļ	-	7	+	7	+	11899			
т	OTAL This Period (last page this line number only)							7		7		43963	3.30		

SCHEDULE B (FEC Form 3X)		FOR L		BFR				PA	GE 2	23 OI	= 23
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check	only one	one)							
	Detailed Summary Page	2	1b 7	22 28a	×	23 28b	\mid	24 28c		25 29	26 30b
Any information copied from such Reports and Staten or for commercial purposes, other than using the name	I nents may not be sold or used ne and address of any politica	d by any p	erson fo	r the	purp ntrib	oose (of so	licitin	g con	tributio	ons
NAME OF COMMITTEE (In Full)											
Healthcare Freedom Fund											
Full Name (Last, First, Middle Initial) A. NATIONAL REPUBLICAN CONGF Mailing Address 320 FIRST STREET SE	RESSIONAL COMMI	TTEE		ate of 09	[:] Dis	sburse			201	13	
5	State Zip Code		Transaction ID : SB23.4314								
WASHINGTON Purpose of Disbursement	DC 20003		_								
Recount Fund		011	A	nount	of	Each	Disb	urser	ment	this Pe	eriod
Candidate Name NATIONAL EMERGENCY MEDICINE POLITICAL A		Category/ Type				,		7	3	2400.0	00
Senate President	nent For: 2013 Primary General Other (specify)										
State: District: Full Name (Last, First, Middle Initial)	Recount										
B.				ate of	[:] Dis	burse			V		
Mailing Address											
City											
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Candidate Name		10			,	, , , , , , , , , , , , , , , , , , ,					
	nent For: Primary General Other (specify) v										
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Candidate Name	Category/ Type										
	nent For: Primary General Other (specify) ▼										
·				-		-		-	2	2400 (0
SUBTOTAL of Disbursements This Page (optional)		·····)		-	-	7	-	7		2400.0	+
TOTAL This Period (last page this line number only)			• L			,		7	3	2400.0	00