FEC FORM 3X REPORT OF RECEIPTS AND DISBURSEMENTS For other Than An Authorized Committee RECEIVED FEC MAIL CENTER 707 JUL 16 MI 9:52 Ones Use Cay 1. NAME OF COMMITTEE (in full) TYPE DR PRINT V Example: If typing, type I2FEAMS BAYCARKE PRAYSILIC/LAMIST PACE Example: If typing, type I2FEAMS Ones Use Cay BAYCARKE PRAYSILIC/LAMIST PACE Image: If typing, type I2FEAMS Ones Use Cay Check II different trans providues Image:						·	and the second second
1. NAME OF COMMITTEE (in full) TYPE OR PRINT V Exemple: If typing, type Over the lines. 12FE4MS BALY CLARKE PLAYSLIC LIAMS PACE PLAY SLIC LIAMS PACE PLAY SLIC LIAMS PACE ADDRESS (number and street) LLG H. M.S. PACE ADDRESS (number and street) LLG H. M.S. PACE Chock If different reported. (ACC) CRECEN, BALY Chock If different reported. (ACC) CRECEN, BALY Chock If different reported. (ACC) SIS THIS REFORT (a) Quarterly Reports: SIS THIS REFORT (a) Quarterly Reports: One of the protocol and the protocol (a) Quarterly Report (C1) (b) Monthly (choose One) (b) Monthly (choose One) Pres 20 (M2) May 20 (M3) And 20 (M3) (a) Quarterly Report (C1) (b) Monthly (choose One) Pres 20 (M4) Jul 20 (M7) Oct 20 (M10) Jun 31 (YE) (a) Quarterly Report (C2) October 15 Quarterly Report (C2) Prescent (C2) Prescent and the of the chop (M2) Prescent and complete (a) Quarterly Report (C2) Jul 20 (M1) General (300) Runoft (30h) Special (325) (b) Jul 31 (W1 YEE (FEE) So Oby POST-Election on		AN	D DISBURS	SEMEN ⁻	rs		
COMMITTEE (in full) over the lines. 12PP4M3						TOL OOF	
ADDRESS (number and street) Life(H_IN_BR_0A_DM/A)Y Check if different reported. (ACC) CR_EEN_BALY(or print V			12FE4M5	
Check if different the previously reported. (ACC) CR_EEN, IBATY	BAYCARE	PHYSI	ICIIANISI P		<u>+_+_</u>	<u>+</u>	
Check if different the previously reported. (ACC) CR_E_E_N, IBATY 2. FEC IDENTIFICATION NUMBER ▼ CITYA STATEA ZIP CODE A 2. FEC IDENTIFICATION NUMBER ▼ CITYA STATEA ZIP CODE A 4. TYPE OF REPORT (choose One) 3. IS THIS REPORT NEW (N) OR AMENDED (A) 4. TYPE OF REPORT (choose One) (b) Monthly (hoose One) Feb 20 (M2) May 20 (M5) Aug 20 (M6) Nov 22 (M1) (a) Cuarterly Reports: April 15 Outaretry Report (C1) Mer 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M10) (a) Uy 15 Outaretry Report (C2) Outaretry Report (C1) April 20 (M1) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (a) Uy 15 Outaretry Report (C2) Outaretry Report (C2) Primary (12P) General (12G) Runoff (12P) (b) January 31 Mere-End Report (M2) Belefiction on If I = 0 If I = 0 If I = 0 (c) Termination Report Termination Report Election on If I = 0 If I = 0 If I = 0 (c) Termination Report If I = 0 5. Covering Period If I = 0 If I = 0 If I = 0							
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Image: State of Very State Report (VE) July 31 Mid-Year Report (Non-election Year Only) (MY) Election on State of Image: State of Very State of Very State of Very State of Very Only (MY) Image: State of Very Post-Election Report for the: General (30G) Runoff (30R) Special (30S) Image: State of Very State of Very State of Very Post-Election Very Only (MY) Image: State of Very Post-Election Report for the: General (30G) Runoff (30R) Special (30S) Image: State of Very Post-Election Very Only (MY) Image: State of Very Post-Election Report for the: Image: State of Very Post-Election Report (10C) Image: State of Very Post-Election Report for the: Image: State of Very Post-Election Report (10C) Image: State of Very Post-Election Report for the: Image: State of Very Post-Election Very Post-Election (TER) Image: State of Very Post-Election Report for the: Image: State of Very Post-Election Report for the: Image: State of Very Post-Election Report for the: Image: State of Very Post-Election (TER) Image: State of Very Post-Election Report for the: Image: State of Very Post-Election Report for the: Image: State of Very Post-Election Report for the: Image: Very Post-Election Period Image: State of Very Post-Election Report for the: Image: State of Very Post-Election Report for the: Image: State of Very Post-Election Report for the: Image: Very Post Post for the: Image: State of	Quarterly	Report (Q3)		المتحدينات ا · · ·	· • • • • • • • •	┈╔╵╔╶╔╶╔╶╔╶ ╔	in the
A Report (Non-election Year Only) (MY) POST-Election Report General (30G) Runoff (30R) Special (30S) Termination Report (TER) Termination Report Election on Image: Comparison of the state of the st	Year-End	Report (YE)	Election	on			
Termination Report (TER) Election on in the State of 5. Covering Period Image: Constraint of the best of my knowledge and belief it is true, correct and complete. 1 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 Chris Signature of Treasurer Chris NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §4379. Office Use	Report (N	lon-election	POST-Election	General (S	30G)	Runoff (30R)	Special (30S)
5. Covering Period 0.1 0.1 0.0 0.7 through 0.6 3.0 0.0.7 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 Chris Augustian Signature of Treasurer Date 0.7 0.0 7 0.0 7 NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. FEC FORM 3X Rev. 12/2004		on Report	,	on M	/	<u>, , , , , , , , , , , , , , , , , , , </u>	
Type or Print Name of Treasurer Chris Augustian 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 Use	5. Covering Period	<u>0.1</u> ′	6.1 (<u>2007</u>	through	1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	' <u>30</u> ' G	007
Signature of Treasurer Date 07 067 2007 NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. FEC FORM 3X Office Use Sev. 12/2004					d belief it is tru	e, correct and co	mplete.
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. Office Use	Type or Print Name of	Treasurer	hris Augus	tian		<u></u>	
Office Use FEC FORM 3X Bey 12/2004	Signature of Treasurer		IL (lug O)	<u></u> . D	ate 0.7	10 2007
Use Bey 12/2004	NOTE: Submission of fa	lse, erroneous, o	r incomplete information r	nay subject the p	erson signing th	is Report to the p	enalties of 2 U.S.C. §437g.
	Use						

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Г	-1	FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	Page 2
		r Type Committee Name		
_	Ba	y Care Physicia	ns PAC	
P	eport	Covering the Period: From:	3.1 (<u>6.1</u> (2.0.0.7 T	0.c / 3.0 / 2.0.0.7
			COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a)	Cash on Hand January 1, 2007		10,31357
	• •	Cash on Hand at Beginning of Reporting Period	10,31357	
	(c)	Total Receipts (from Line 19)	3,2,2,8,4,1	3,2,28,4,1
	(Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1354198	13,541,98
7.	Total	Disbursements (from Line 31)	0.0.0	
8.	Repo	on Hand at Close of orting Period ract Line 7 from Line 6(d))	1354198	13,541,98
9.	the C	s and Obligations Owed TO Committee (Itemize all on dule C and/or Schedule D)	0.00	
10.	the C	s and Obligations Owed BY Committee (Itemize all on Idule C and/or Schedule D)	0.00	
	т	his committee has qualified as a mult	candidate 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	

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I	FEC Form 3X (Rev. 02/2003)		of Receipts			Page 3
	Irite or Type Committee Name					
	Bay Care Physicia	25	PAC			
	Day cure Physicia			- <u> </u>		
R	eport Covering the Period: From:		0.1 20.0.7	To:	0.6	3.0 2.00
	I. Receipts		COLUMN A Total This Period			COLUMN B ndar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other					
	Than Political Committees		119845] [11981
	(i) Itemized (use Schedule A)		and the second sec		 	lal_(_0a7
	(ii) Unitemized		202996			20299
-	(iii) TOTAL (add		2008/11	Ī		31701
	Lines 11(a)(i) and (ii)		3,2,2,8,4,1			5,2,2,0,4
	(b) Political Party Committees		000			00
	(c) Other Political Committees	است المحمو				
	(such as PACs)		0.0.0			
	(d) Total Contributions (add Lines					
	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)		3,2,2,8,41			32284
12.	Transfers From Affiliated/Other	ineres Second		8 1. 1 P		
	Party Committees		0.0.0			D-C
				Ì		
13.	All Loans Received		0.00			0.0
14	Loan Repayments Received		000	I ľ		
	Offsets To Operating Expenditures				- I IV.	
	(Refunds, Rebates, etc.)	-		1 6		
	(Carry Totals to Line 37, page 5)					0_0
. 16.	Refunds of Contributions Made					, ,
	to Federal Candidates and Other Political Committees		$\cap \cap \cap$			0.0
17.	Other Federal Receipts	المعداد ومنصح			and and and the second seco	
	(Dividends, Interest, etc.)		0.0.0			
18.	Transfers from Non-Federal and Levin Fun	ds Barrie				
	(a) Non-Federal Account (from Schedule H3)					0.0
	(b) Levin Funds (from Schedule H5)		000			0_0
		است. بد سر		4 L 1 7		
	(c) Total Transfers (add 18(a) and 18(b))		000			
			· · · · · · · · · · · · · · · · · · ·			
19.	Total Receipts (add Lines 11(d),	Contraction of the local division of the loc	anang metaga kerang kerang metaga mengameng karang			
	12, 13, 14, 15, 16, 17, and 18(c))		3,2,28,4,1			3,228.4
20	Total Enderel Bassiste	and then the	an a			
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)►			F		3,2,2,8,4
•	· · · ·		<u></u>			<u> </u>
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· L	-			•		
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DETAILED SUMMARY PAGE

of Disbursements

Page 4

COLUMN A Total This Period

COLUMN B Calendar Year-to-Date

· Г	-	DETAILE
	FEC Form 3X (Rev. 02/2003)	01
	II. Disbursements	
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share	
	(i) Federal Share	
	(ii) Non-Federal Share(b) Other Federal Operating	
	 Expenditures (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) 	
22.	Transfers to Affiliated/Other Party	
23.	Committees Contributions to Federal Candidates/Committees and Other Political Committees	
24.	Independent Expenditures	
25.	(use Schedule E) Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	
26.	Loan Repayments Made	
27. 28.	Loans Made Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	
	 (b) Political Party Committees (c) Other Political Committees (such as PACs) 	
	 (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) 	
20	Other Disbursements	
20.		lass from the second
30.	Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity (from Schedule H6))
	(i) Federal Share	
	 (ii) "Levin" Share (b) Federal Election Activity Paid Entirely With Federal Funds 	
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶	
31.	Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).	
32.	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	
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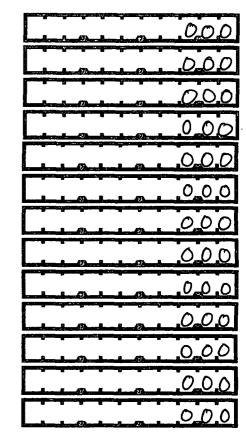
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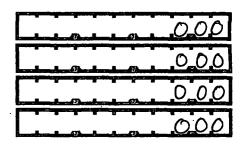
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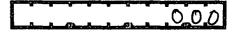














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DETAILED SUMMARY PAGE

of Disbursements

COLUMN A

Total This Period

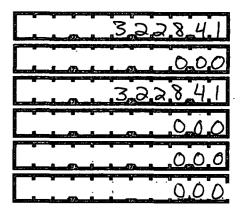
FEC Form 3X (Rev. 02/2003)

III. Net Contributions/ Operating Expenditures

- 33. Total Contributions (other than loans) (from Line 11(d), page 3)
- Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))
- 37. Offsets to Operating Expenditures (from Line 15, page 3).....

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Page 5 COLUMN B Calendar Year-to-Date



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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE / OF 2 (check only one) 11a 11a 11b
Any information copied from such Reports and Stater or for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full) Bay Care Phy Sicio	me and address of any political committee	13 14 15 16 17 erson for the purpose of soliciting contributions e to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) A. <u>Harrison</u> , Richard L Mailing Address <u>984</u> Highland Sping City <u>Oneida</u> WI FEC ID number of contributing federal political committee. Name of Employer BayCarc Clinic, LLP	75 C+. State Zip Code	Date of Receipt Payroll Deduction 6.6' 22' 2007 Amount of Each Receipt this Period 1/22 - \$64.00 3/22 - \$38.67 3/22 - \$20.79 4/20 - \$54.89 5/22 - \$67.24
DEPERE WI FEC ID number of contributing federal political committee. Name of Employer Bay Care Clinic LUP	State Zip Code S4115 Cupation MeDical Docfor ggregate Year-to-Date ▼	6/22- #47.81 Date of Receipt Payroll Deduction 0.6 ' 2.2 ' 2.0.0.7 Armount of Each Receipt this Period 4.1.67 Monthly beg. 2/22/07 841.67 Monthly beg. 2/22/07 6/22/07
<u>Green Bay</u> FEC ID number of contributing federal political committee.	State Zip Code VI SH3FF Cluster Scupation PhySician ggregate Year-to-Date ▼	Date of Receipt Payroll Deduction 0.6 22 2.0.0.7 Amount of Each Receipt this Period 41.67 Monthly beg. 2/22/07 \$41.67 Monthly beg. 2/22/07 6/22/07
SUBTOTAL of Receipts This Page (optional)		

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SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 2. OF 3
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	
Any information copied from such Reports and Stateme		13 14 15 16 17
or for commercial purposes, other than using the name	and address of any political committee	e to solicit contributions from such committee.
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