FEC FORM (BURSEI				Office Use Only	
. NAME OF COMMITTE		PE OR PRINT 🔻		mple: If typin r the lines.	ng, type	12FE4M5		
Healthcare	Freedom Fur	nd						
		PO Box 2485						
	if different							
	eviously d. (ACC)	Springfield				VA	22152	
E. FEC IDEN		BER 🔻			S		ZIP CODE	`
C C008	528414		3. IS THIS REPORT		IEW N) OR	AM (A)	ENDED	
	e) ly Reports:	(b) Monthly Report Due On:	Feb 20 (M2) Mar 20 (M3)		May 20 (M5) Iun 20 (M6) Iul 20 (M7)	Sep 2	20 (M9) (Non Year 20 (M9) Dec (Non Year	20 (M11 -Election Only) 20 (M12 -Election Only) 31 (YE)
	ril 15 arterly Report (Q1) y 15 arterly Report (Q2) tober 15 arterly Report (Q3) nuary 31 ar-End Report (YE)	(C) 12-Day PRE -Ele Report		Primary (12P Convention (*	12C)	General(Special(1		off (12R)
X Jul Re Yes	y 31 Mid-Year port (Non-election ar Only) (MY) mination Report ER)	(d) 30-Day POST -E Report		General (30G		Runoff (3	0R) Spering the State of	cial (30S)
. Covering Pe	priod 01	/ D D / Y	2013	through	M M 06	/ D D / 30	2013	
-	we examined this I	Report and to the Joe Grandy	e best of my kno	wledge and b	pelief it is true	e, correct and	l complete.	
Signature of Trea	asurer Joe Gran	dy		[Electronically	Filed] Da	ate 07		13
1	n of false, erroneou	s, or incomplete i	nformation may su	bject the pers	son signing thi	s Report to th	e penalties of 2 U.S.C	. §437g.
Office							FEC FORM	v

07/19/2013 10 : 25

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Healthcare Freedom Fund Y М D M 01 01 2013 06 30 2013 Report Covering the Period: From: To: COLUMN A COLUMN B This Period Calendar Year-to-Date (a) Cash on Hand 6. Y 8025.13 January 1, 2013 (b) Cash on Hand at 8025.13 Beginning of Reporting Period..... 116802.54 116802.54 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 124827.67 124827.67 6(a) and 6(c) for Column B)..... 69480.87 69480.87 7. Total Disbursements (from Line 31)..... 8. Cash on Hand at Close of Reporting Period 55346.80 55346.80 (subtract Line 7 from Line 6(d)) Debts and Obligations Owed TO 9. the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)

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

Healthcare Freedom Fund

Report Covering the Period: From: 01	01 2013 1	To: 06 30 2013
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	14250.00	14250.00
	7 7	
(ii) Unitemized	0.00	0.0
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)	14250.00	14250.00
	0.00	0.00
(b) Political Party Committees	0.00	
(c) Other Political Committees (such as PACs)	102552.54	102552.5
(d) Total Contributions (add Lines	7 7	
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	116802.54	116802.54
2. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
	0.00	0.00
3. All Loans Received		
	0.00	
Loan Repayments Received Offsets To Operating Expenditures	0.00	0.0
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
6. Refunds of Contributions Made	7 7	7 7
to Federal Candidates and Other		
Political Committees	0.00	0.00
7. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
 Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (b) Non-Federal Account (c) Non-Federal Account (c) Non-Federal Account 		
(from Schedule H3)	0.00	0.00
	7 7 7	7 7 0.00
(b) Levin Funds (from Schedule H5)	0.00	0.0
	7 7	7 7
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
 (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	116802
· ∠, · 0, · −, · 0, · 0, · /, and · 0(0))	110002.04	11002.
0. Total Federal Receipts		

116802.54

20. Total Federal Receipts (subtract Line 18(c) from Line 19)......►

116802.54

Page 3

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)	of Disbursements	Page 4
II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calendar fear-to-Date
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	4680.87	4680.87
(c) Total Operating Expenditures	4680.87	4680.87
(add 21(a)(i), (a)(ii), and (b)) ► . Transfers to Affiliated/Other Party	400.07	400.07
Committees	0.00	0.00
Federal Candidates/Committees and Other Political Committees	64800.00	64800.00
 Independent Expenditures (use Schedule E) Coordinated Party Expenditures 	0.00	0.00
 Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F) 	0.00	0.00
	0.00	0.00
5. Loan Repayments Made		
7. Loans Made 8. Refunds of Contributions To: (a) Individuals/Persons Other	0.00	0.00
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	0.00	
(add Lines 28(a), (b), and (c))▶	0.00	0.00
9. Other Disbursements	0.00	0.00
 Allocated 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)).	69480.87	69480.87
. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	69480.87	69480.87
		7 7 7

FE6AN026

I

DETAILED SUMMARY PAGE

of Disbursements

II. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Total Contributions (other than loans) (from Line 11(d), page 3) 	116802.54	116802.54
 Total Contribution Refunds (from Line 28(d)) 	0.00	0.00
 Net Contributions (other than loans) (subtract Line 34 from Line 33) 	116802.54	116802.54
 Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) 	4680.87	4680.87
. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
. Net Operating Expenditures (subtract Line 37 from Line 36)	4680.87	4680.87

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

PAGE 6 OF

26

			Detailed Summary Page		(11a		11b	11c	12	2	
_					13		14	15	16	-	17
Ar or	ny information copied from such Reports and for commercial purposes, other than using th	Statements ma e name and a	ay not be sold or used by any p ddress of any political committee	erson e to so	for the plicit co	e purp ontrib	pose of a outions fr	soliciting om such	contri comr	ibutio mitte	ons e.
$\left \right\rangle$	NAME OF COMMITTEE (In Full)										
	Healthcare Freedom Fund										
Α.	Full Name (Last, First, Middle Initial) Gregory J. Burden				Date o	of Re	eceipt				
	Mailing Address 2465 Campus Drive				03	/	25	/ Y	y 2013		Y
	City	State	Zip Code			sacti		SA11AI.4		_	
	Irvine	CA	92612		Amour	nt of	Each Re	eceipt this	s Peri	iod	
	FEC ID number of contributing federal political committee.	С					,		10	000.0	00
	Name of Employer	Occupation									
	Owl Co.	CEO									
	Receipt For:	Aggregate	Year-to-Date V								
	Primary General		4000.00	11.							
	Other (specify)		1000.00	4							
_	Full Name (Last, First, Middle Initial)										
В.	Mary M. Cohorst				Date of	of Re	eceipt				
	Mailing Address 650 N Hayden Bay Drive				03	/	D D D 19	/ Y	2013		Y
	City	State	Zip Code			sacti		SA11AI.4			
	Portland	OR	97217-7966					eceipt this		iod	
	FEC ID number of contributing federal political committee.	С				7		-	500.0	00	
	Name of Employer	Occupation		_							
	Chugach Education Services	President									
	Receipt For:	1	Year-to-Date ▼								
	Primary General	Aggregate									
	Other (specify)	L	500.00	4							
с.	Full Name (Last, First, Middle Initial) Rett Dallas				Date d	of Re	eceipt				
	Mailing Address 711 Ironwood Drive				м 03	/	25	/ Y	y 2013		Y
	City	State	Zip Code		Tran	sact	ion ID : S	SA11AI.4	196		
	Bowling Green	TN	42103		Amour	nt of	Each Re	eceipt this	s Peri	iod	
	FEC ID number of contributing federal political committee.	С					,	7	5	500.0	00
	Name of Employer	Occupation									
	Education & Training Resources	Executive	/P & CFO								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General		500.00	11							
	Other (specify)		500.00								
s	UBTOTAL of Receipts This Page (optional)			•			7	9	20	0.00	0
-				_							

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

100

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

PAGE 7

OF

			Detailed Summary Page		(11			11b	11c	12			
·		<u></u>	<u> </u>		13			14	15	16	-	17	
Ar or	y information copied from such Reports and for commercial purposes, other than using the	Statements mane and a	ay not be sold or used by any p address of any political committee	erson e to so	for olicit	the coi	pur ntrib	pose of outions	f soliciting from suc	j contri h comr	ibutio mitte	ons e.	
$\left \right\rangle$	NAME OF COMMITTEE (In Full) Healthcare Freedom Fund												
<u>к</u> .	Full Name (Last, First, Middle Initial) Sam Devore		Date of Receipt										
	Mailing Address 18 Blackberry Lane			03 25 2013									
	City	State	Zip Code		Tr	ans	acti	ion ID :	SA11AI.	4200			
	Madison	MS	39110		Amo	oun	t of	Each F	Receipt th	nis Peri	iod		
	FEC ID number of contributing federal political committee.	С				_		7	7	5	500.0	00	
	Name of Employer	Occupation	1										
	MINACT	Executive \	/P										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00										
<u> </u>	Full Name (Last, First, Middle Initial) Brian E. Fox				Dat	e of	f Re	eceipt					
	Mailing Address 1500 Meng Road					™ 03	/	25		2013		(
	City	State	Zip Code		Tr	ans	acti	ion ID :	SA11AI.	4198		_	
	Bowling Green	TN	42104-8777		Amo	oun	t of	Each F	Receipt th	nis Peri	iod		
	FEC ID number of contributing federal political committee.						, .	7	5	500.0	0		
	Name of Employer Education & Training Resources	Occupation President 8											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]									
с.	Full Name (Last, First, Middle Initial) Howard S. Harmon				Dat	e of	f Re	eceipt					
	Mailing Address 115 Windmere Avenue					03	/	25		y 2013		Ŷ	
	City Bowling Green	State KY	Zip Code 42103-8720						SA11AI				
		IX I	42103-8720	_	Amo	oun	t of	Each F	Receipt th	is Peri	iod		
	FEC ID number of contributing federal political committee.	С				_	_	7	- 7	Ę	500.0	00	
	Name of Employer	Occupation	l										
	Education & Training Resources	Executive	/P & COO										
	Receipt For:	Aggregate	Year-to-Date V										
	Primary General Other (specify) ▼		500.00]									
s	UBTOTAL of Receipts This Page (optional)			•				1		15	500.0	0	
\vdash	OTAL This Period (last page this line numbe			•				,	,				

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

PAGE 8 OF

				Summary Page		11a 13		11b	11c		12 16	17
	y information copied from such Reports and Sta for commercial purposes, other than using the					for the		pose of	soliciting		ntribut	ions
	NAME OF COMMITTEE (In Full) Healthcare Freedom Fund			any pontical committee								
A.	Full Name (Last, First, Middle Initial) Nikki L. Niswonger Mailing Address 1508 Crestwood Drive					Date of		eceipt) / Y	Y	Y	Y
	City	State	Zip Co	ode		05	Į,	29			013	
	Greenville	TN	2ip Ci 37745						SA11AI. Receipt th			
	FEC ID number of contributing federal political committee.	С						7			5000.	00
	Name of Employer Homemaker	Occupation Homemake										
	Receipt For: Primary General Other (specify) ▼	Aggregate		te ▼ 5000.00								
в.	Full Name (Last, First, Middle Initial) Scott M. Niswonger					Date of	Re	eceipt				
	Mailing Address PO Box 938					м м 05	1	29) 13	Y
	City Greenville	State TN	Zip Co 37744						SA11AL			
	FEC ID number of contributing federal political committee.	С	0114			Amouni			Receipt th		5000.	00
	Name of Employer Landair, Inc.	Occupation Chairman										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Da	te ▼ 5000.00]							
C.	Full Name (Last, First, Middle Initial)					Date of	Re	eceipt				
	Mailing Address 6615 Madison McLean Drive					м м 03	/	25)13	Y
	City McLean	State VA	Zip Co 22101	ode -2902					SA11AI. Receipt th			
	FEC ID number of contributing federal political committee.	С						7			250	00
	Name of Employer	Occupation										
	Retired Receipt For:	Retired			_							
	Primary General Other (specify)	Aggregate	Year-to-Da	te ▼ 250.00]							
s	UBTOTAL of Receipts This Page (optional)							7		1	0250.	00
т	OTAL This Period (last page this line number o	nly)			•			7				

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 9 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and State or for commercial purposes, other than using the national		
NAME OF COMMITTEE (In Full) Healthcare Freedom Fund		
Full Name (Last, First, Middle Initial) A. Don Sundquist Mailing Address PO Box 28 City Townsend Too ID - ID - In the Address ID - In th	State Zip Code TN 37882	Date of Receipt 03 25 2013 Transaction ID : SA11AI.4192 Amount of Each Receipt this Period
Name of Employer O Sundquist Anthony, LLC G	C ccupation overnment Affairs ggregate Year-to-Date ▼ 500.00	500.00
Full Name (Last, First, Middle Initial) B. Mailing Address City	State Zip Code	Date of Receipt
FEC ID number of contributing federal political committee.	ccupation	Amount of Each Receipt this Period
Receipt For: A Primary General Other (specify) ▼	ggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) C. Mailing Address City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Amount of Each Receipt this Period
Name of Employer O	C ccupation ggregate Year-to-Date V	
SUBTOTAL of Receipts This Page (optional)		500.00 14250.00

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 10 OF

11 -	MIZED RECEIPTS		for each category of th Detailed Summary Pag			11a 13		11b 14	X 11c	12 16		17
	information copied from such Reports and S r commercial purposes, other than using the											
	AME OF COMMITTEE (In Full) lealthcare Freedom Fund											
	III Name (Last, First, Middle Initial) MERICAN ACADEMY OF DERMATOLOGY ASSOC	IATION POLITI	[Date o	f Rec	ceipt						
Ma Ci	ailing Address 1445 NEW YORK AVENUE N STE 800	W State	Zip Code	M = M / D = D / Y = Y = Y = Y Y 03 11								
	/ASHINGTON	DC	20005		4			-	SA11C. Receipt th		d	
	EC ID number of contributing deral political committee.	C cod	0359539			linouri		,	,		0.00	
Na	ame of Employer	Occupation	1		-							
Re	eceipt For: Primary General	Aggregate	Year-to-Date ▼		-							
	Other (specify)	L	5000	0.00								
	III Name (Last, First, Middle Initial) MERICAN ACADEMY OF FAMILY PHYSIC	CIANS POLI	TICAL ACTION COMMIT	ITEE	C	Date o	f Rec	ceipt				
M	ailing Address 1133 CONNECTICUT AVENU SUITE 1100	E, NW				м м 03	/	D 07	D / Y	2013	Y	
Ci		State	Zip Code						SA11C.4			
W	ASHINGTON	DC	20036			moun	t of E	Each I	Receipt th	nis Perio	d	
	EC ID number of contributing deral political committee.	C coo				,		250	0.00			
Na	ame of Employer	Occupation			-							
Re	eceipt For: Primary General Other (specify) v	Aggregate	Year-to-Date ▼ 2500.	.00								
FL C. /	III Name (Last, First, Middle Initial)	OLOGY I	BRAINPAC			Date o	f Rec	ceipt				
M	ailing Address 401 C ST NE] [м м 03	1	D 11		y y 2013	Y	
Ci V	ty /ASHINGTON	State DC	Zip Code 20002						: SA11C. Receipt th		d	
	EC ID number of contributing deral political committee.	C co	0435933					,		100	00.00	
Na	ame of Employer	Occupation	1		-							
Re	eceipt For: Primary General	Aggregate	Year-to-Date ▼		-							
-	Other (specify)		1000	0.00								
SUF	BTOTAL of Receipts This Page (optional)			k						850	0.00	٦
	AL This Period (last page this line number of				j			7				٦

S	CHEDULE A (FEC Form 3X)					NUMBE	R: PAG	GE 11 (OF 2	26		
IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the	(cl	neck on							
			Detailed Summary Page		11a	11b	X 11c	12		. –		
	y information copied from such Reports and St	atomonto m	l		13	14	15	16		17		
	for commercial purposes, other than using the											
$\left \right\rangle$	NAME OF COMMITTEE (In Full)											
	Healthcare Freedom Fund											
<u> </u>	Full Name (Last, First, Middle Initial)			<u></u>								
Α.		SY INC PULI	TICAL COMMITTEE (OPHTHPA)			f Receipt						
	Mailing Address 655 BEACH STREET				03 27 2013							
	City	State	Zip Code				: SA11C					
	SAN FRANCISCO	CA	94109		Amoun	t of Each	Receipt t	his Perio	d			
	FEC ID number of contributing federal political committee.	C co	0196246					200	0.00			
	Name of Employer	Occupation	1									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General		2000.00	11.								
	Other (specify)		2000.00									
_	Full Name (Last, First, Middle Initial) AMERICAN ACADEMY OF OTOLARYNGOLOG											
В.				_		f Receipt						
	Mailing Address 1650 DIAGONAL ROAD				03		25	_2013	Y			
	City	State	Zip Code				: SA11C.					
	ALEXANDRIA	VA	22314		Amoun	t of Each	Receipt t	his Perio	d			
	FEC ID number of contributing federal political committee.	C C00306449				J.		500	0.00			
	Name of Employer	Occupation	1									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General			11.								
	Other (specify)		5000.00	4								
<u>с.</u>	Full Name (Last, First, Middle Initial) AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS - A	MERICAN UROI	OGICAL ASSOCIATION PAC (UROPAC)		Date o	f Receipt						
	Mailing Address P.O. BOX 15441				м м 04)1	_ 20 <u>1</u> 3	Y			
	City	State	Zip Code		Trans	saction ID) : SA11C	.4220				
	WASHINGTON	DC	20003		Amoun	t of Each	Receipt t	his Perio	d			
	FEC ID number of contributing federal political committee.	C co	0273003					500	0.00			
	Name of Employer	Occupatior	1									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General			11.								
	Other (specify)		5000.00									
s	UBTOTAL of Receipts This Page (optional)		•••••	▶ _		5	- 7	12000	0.00]		
т	OTAL This Period (last page this line number of	only)	••••••	•								

Image# 13941186822

Image# 13941186823

SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS	5	

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 12 OF

	EMIZED RECEIPTS		for each category of the Detailed Summary Page		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	y information copied from such Reports and St for commercial purposes, other than using the				
	NAME OF COMMITTEE (In Full) Healthcare Freedom Fund				
Α.	Full Name (Last, First, Middle Initial) AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS P Mailing Address 725 FIFTHEENTH ST., NW SU City		DN COMMITTEE (NEUROSURGERYPAC))	Date of Receipt
	WASHINGTON FEC ID number of contributing federal political committee.		20005 0413955		Amount of Each Receipt this Period 5000.00
	Name of Employer Receipt For: Primary General Other (specify) ▼	Occupation Aggregate	Year-to-Date ▼ 5000.00		
в.	Full Name (Last, First, Middle Initial) AMERICAN COLLEGE OF RADIOLOGY ASSO Mailing Address 1891 PRESTON WHITE DRIVI		LITICAL ACTION COMMITTEE	<u>=</u>	Date of Receipt
	City RESTON FEC ID number of contributing federal political committee.	State VA	Zip Code 20191 0343459		02 28 2013 Transaction ID : SA11C.4149 Amount of Each Receipt this Period 1500.00
	Name of Employer Receipt For:	Occupation			
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1500.00		
C.	Full Name (Last, First, Middle Initial) AMERICAN COLLEGE OF SURGEONS P	ROFESSIC	DNAL ASSOCIATION PAC		Date of Receipt
	Mailing Address 20 F ST NW, STE 1000 ATTN: SARA MORSE City WASHINGTON	State DC	Zip Code 20001		03 25 2013 Transaction ID : SA11C.4204 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C co	0382424		1000.00
	Name of Employer Receipt For:	Occupation			
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00		
s	UBTOTAL of Receipts This Page (optional)				7500.00
Т	OTAL This Period (last page this line number of	only)		🕨	

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

PAGE 13 OF

			Detailed Summary Page		11a		11b		X 11c	12	2					
					13		14		15	16	ſ	17				
or for co	mation copied from such Reports and Simmercial purposes, other than using the	tatements mana name and a	ay not be sold or used by any p ddress of any political committee	erson e to s	for the olicit cor	purp ntrib	pose outior	e of s ns fre	soliciting om such	contri 1 comr	ibutic nittee	ons e.				
	E OF COMMITTEE (In Full) althcare Freedom Fund															
	lame (Last, First, Middle Initial) ERICAN GASTROENTEROLOGIC	CAL ASSO	CIATION INC. PAC		Date of Receipt											
	g Address 4926 DELRAY AVENUE				03 25 2013 Transaction ID : SA11C.4206											
City BETH	IESDA	State MD	Zip Code 20814		iod											
	ID number of contributing al political committee.	C cod	0423228	Amount of Each Receipt this Period												
Name	of Employer	Occupation														
	pt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00													
	lame (Last, First, Middle Initial) ERICAN MEDICAL ASSOCIATIO	ON			Date of	Re	eceip	ot								
	g Address 25 MASSACHUSETTS AVENU SUITE 600	UE, NW			м м 03	/		25	/ Y	2013						
City WASH	HINGTON	State DC	Zip Code 20001						SA11C.4 eceipt th		iod					
	ID number of contributing al political committee.	С сто	0001847				3		7	25	500.0	0				
Name	of Employer	Occupation														
	pt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2500.00]												
Full N AMER	lame (Last, First, Middle Initial) IICAN OSTEOPATHIC INFORMATION ASSOCIATION	- OSTEOPATHIC	C POLITICAL ACTION COMMITTEE		Date of	Re	eceip	ot								
	g Address 1090 VERMONT AVE., NW SUITE 500				м м 03	/		15	/ Y	2013						
City WAS	HINGTON	State DC	Zip Code 20005						SA11C.4 eceipt th		iod					
	ID number of contributing al political committee.	C co	0113803				7			25	500.0	0				
Name	of Employer	Occupation														
	pt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2500.00]												
SUBTO	TAL of Receipts This Page (optional)			•			7			60	00.0)				
TOTAL	This Period (last page this line number of	only)		•			7		,							

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 14 OF

26

	MIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b X 11c 12 13 14 15 16 17
	r information copied from such Reports and Sta or commercial purposes, other than using the			
\	NAME OF COMMITTEE (In Full) Healthcare Freedom Fund			
A. 1 - 1 1 1	Full Name (Last, First, Middle Initial) AMERICAN SOCIETY FOR RADIATION Mailing Address 8280 WILLOW OAKS CORPOR SUITE 500 Dity FAIRFAX FEC ID number of contributing ederal political committee. Name of Employer Receipt For: Primary General Other (specify)	State VA C C0 Occupation	Zip Code 22031 0384602	Date of Receipt
B. 1 (1 1 1	Full Name (Last, First, Middle Initial) AMERICAN SOCIETY OF ANESTHESIOLOG Mailing Address 520 N. NORTHWEST HIGHWA Dity PARK RIDGE FEC ID number of contributing ederal political committee. Name of Employer Receipt For: Primary General	State IL Occupation	Zip Code 60068 02555752 Year-to-Date ▼	Date of Receipt 03 04 2013 Transaction ID : SA11C.4155 Amount of Each Receipt this Period 2500.00
C.	Other (specify) Full Name (Last, First, Middle Initial) ASSOCIATED GENERAL CONTRACTORS OF AN Mailing Address 2300 WILSON BLVD. SUITE 400 City ARLINGTON FEC ID number of contributing ederal political committee. Name of Employer Receipt For: Primary General Other (specify)	State VA C C0 Occupation	Zip Code 22201 0082917	Date of Receipt 06 28 2013 Transaction ID : SA11C.4239 Amount of Each Receipt this Period 2500.00
รเ	BTOTAL of Receipts This Page (optional)		•	7000.00
тс	TAL This Period (last page this line number o	nly)	••••••	

SCHEDULE A (FEC Form 3X)

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 15 OF

	Use separate schedule(s	;) (check only one)
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$
		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. EDWARD JONES PAC		Date of Receipt
Mailing Address 12555 MANCHESTER F	ROAD	M M / D D / Y Y Y Y Y 03 11 2013
City ST. LOUIS	StateZip CodeMO63131	Transaction ID : SA11C.4162 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00410407	1000.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	0
Full Name (Last, First, Middle Initial)	S POLITICAL ACTION COMMITTEE	Date of Receipt
Mailing Address 3 BETHESDA METRO (SUITE 1100	CENTER	06 29 2013
City BETHESDA	StateZip CodeMD20814	Transaction ID : SA11C.4243 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00113811	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. EVERY REPUBLICAN IS CR	UCIAL (ERICPAC)	Date of Receipt
Mailing Address 25 E MAIN STREET SUITE 200		M M / D D / Y Y Y Y Y 06 29 2013
City RICHMOND	State Zip Code VA 23219	Transaction ID : SA11C.4241 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00384701	5000.00
Name of Employer	Occupation	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 5000.00	0
SUBTOTAL of Receipts This Page (option	al)	11000.00
TOTAL This Period (last page this line nu	mber only)	

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

PAGE 16 OF

			Detailed Summary Page		11a 13		11b 14	X 11c		12 16	17					
	y information copied from such Reports and St for commercial purposes, other than using the				for the		pose o	f solicitin		ntribut	ions					
	NAME OF COMMITTEE (In Full) Healthcare Freedom Fund															
Α.	Full Name (Last, First, Middle Initial) EYEPAC POLITICAL ACTION COMMITTEE FOR AMERICAN SC Mailing Address 4000 LEGATO ROAD, SUITE		RACT AND REFRACTIVE SURGERY		Date of											
	Maining Address 4000 LEGATO ROAD, SOITE	700		03 11 2013												
	City	State	Zip Code		Transaction ID : SA11C.4168											
	FAIRFAX	VA	22033	Amount of Each Receipt this Period												
	FEC ID number of contributing federal political committee.	C cod	0171504				,			5000.	00					
	Name of Employer	Occupation	1													
	Receipt For:	Aggregate	Year-to-Date ▼													
	Other (specify) ▼		5000.00]												
в.	Full Name (Last, First, Middle Initial)		OMMITTEE (FLUOR PAC)		Date of	f Re	ceipt									
	Mailing Address 6700 LAS COLINAS BOULEV	ARD			м м 04	1	01		20	13	Y					
	City	State TX	Zip Code 75039					SA11C.								
	IRVING		Amoun	t of	Each	Receipt t	his P	eriod								
	FEC ID number of contributing federal political committee.	C coo	0034132				,			5000.	00					
	Name of Employer	Occupation	I													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00]												
<u>с</u> .	Full Name (Last, First, Middle Initial) FOOD MARKETING INSTITUTE POLITIC	AL ACTION	COMMITTEE FOODPAC		Date of	f Re	ceipt									
	Mailing Address 2345 CRYSTAL DRIVE SUITE 800				03	1	25			ү 13	Y					
	City ARLINGTON	State VA	Zip Code 22202					: SA11C Receipt t								
	FEC ID number of contributing federal political committee.	C co	0014555				7			1000	.00					
	Name of Employer	Occupation	1													
	Receipt For:	Aggregate	Year-to-Date ▼													
	Other (specify) ▼		1000.00]												
F	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number of					-	7		1	1000.(00					

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 17 OF

26

			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										ions				
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) Healthcare Freedom Fund														
Α.	Full Name (Last, First, Middle Initial) HEALTHSOUTH CORPORATION POL Mailing Address 3660 GRANDVIEW PARKWAY,	SUITE 200)		Date of	/	24		2) 13	Y				
	City BIRMINGHAM	State AL	Zip Code 35243		eriod										
	FEC ID number of contributing federal political committee.	C co	0414649				,	7		1000	.00				
	Name of Employer	Occupation													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]											
B.	Full Name (Last, First, Middle Initial) I.P.H.F.H.A. INC. POLITICAL ACTION		IITTEE INC.		Date of	Re	eceipt								
	Mailing Address 7829 E. ROCKHILL #201			04 22 2013											
	City WICHITA	State KS	Zip Code 67206	Transaction ID : SA11C.4225 Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	C cod)251447	2500.00											
	Name of Employer	Occupation	I												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2500.00]											
C.	Full Name (Last, First, Middle Initial) INVESTMENT COMPANY INSTITUTE P		L ACTION COMMITTEE		Date of	Re	eceipt								
	Mailing Address 1401 H STREET NW SUITE 120	00			м м 03	/	22)13	Y				
	City WASHINGTON	State DC	Zip Code 20005					: SA11C.4 Receipt th							
	FEC ID number of contributing federal political committee.	C co	0105981				7			2500	.00				
	Name of Employer	Occupation	I												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2500.00]											
s	UBTOTAL of Receipts This Page (optional)						7	7		6000.	00				
т	OTAL This Period (last page this line number on	ly)					,	- 7							

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 18 OF

26

ITEMIZED RECEIPTS	for each category of Detailed Summary	
		by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Healthcare Freedom Fund		
Full Name (Last, First, Middle Initial) INVESTMENT COMPANY INST Mailing Address 1401 H STREET NW S City WASHINGTON FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼	State Zip Code DC 20005 C C00105981 Occupation Aggregate Year-to-Date ▼	MITTEE Date of Receipt 06 10 2013 Transaction ID : SA11C.4236 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) MANAGEMENT AND TRAINING COF Mailing Address 500 NORTH MARKETP City CENTERVILLE FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼	State Zip Code UT 84403 C C00208322 Occupation Aggregate Year-to-Date ▼	MITTEE Date of Receipt MITTEE Date of Receipt 03 26 2013 Transaction ID : SA11C.4214 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) NATIONAL EMERGENCY MEI Mailing Address 1125 EXECUTIVE CIRC City IRVING FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State TX Zip Code 75038 C C00140061 Occupation Aggregate Year-to-Date ▼	MMITTEE Date of Receipt 02 22 22 2013 Transaction ID : SA11C.4144 Amount of Each Receipt this Period 2500.00
SUBTOTAL of Receipts This Page (option TOTAL This Period (last page this line nu		

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 19 OF

26

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 State or for commercial purposes, other than using the nar		
NAME OF COMMITTEE (In Full) Healthcare Freedom Fund		
IRVING FEC ID number of contributing federal political committee. Name of Employer Of Descript For:	DLITICAL ACTION COMMITTEE State Zip Code TX 75038 C C00140061 ccupation ggregate Year-to-Date ▼ 5000.00	Date of Receipt 03 / 07 / 2013 Transaction ID : SA11C.4159 Amount of Each Receipt this Period 2500.00
WASHINGTON FEC ID number of contributing federal political committee. Name of Employer	AVE AMERICAS FREE ENTERPRISE TRUST State Zip Code DC 20004 C C00101105 ccupation ggregate Year-to-Date ▼ 52.54	Date of Receipt 02 05 2013 Transaction ID : SA11C.4142 Amount of Each Receipt this Period 52.54 In-kind - Event Host
WASHINGTON FEC ID number of contributing federal political committee. Name of Employer		Date of Receipt 02 25 2013 Transaction ID : SA11C.4146 Amount of Each Receipt this Period 5000.00
SUBTOTAL of Receipts This Page (optional)		7552.54

SCHEDULE A (FEC Form 3X)

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 20 OF

ITEMIZED RECEIPTS		Use separate schedule(s)	(check only one)								
		for each category of the Detailed Summary Page		11a 13		11b 14	X 11c	12	17		
Any information copied from such Reports and Sta or for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pendotreas of any political committee	erson for	r the	purp ntrib	oose o	of soliciting	g contribu	tions		
NAME OF COMMITTEE (In Full) Healthcare Freedom Fund											
Full Name (Last, First, Middle Initial) A. RESCARE, INC. ADVOCACY FUND Mailing Address 9901 LINN STATION ROAD				ate of	F Re	D		YY	Y		
City LOUISVILLE	State KY	Zip Code 40223					1 : SA11C. 4 Receipt th				
FEC ID number of contributing federal political committee.		0344663				7		1000).00		
Name of Employer	Occupation	1									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00									
Full Name (Last, First, Middle Initial) SHEET METAL AND AIR CONDITIONING CON	TRACTORS	POLITICAL ACTION COMMITTEE	E Da	ate of	Re	ceipt					
Mailing Address 4201 LAFAYETTE CENTER DF				06	/	04		2013	Y		
City CHANTILLY	State VA	Zip Code 20151					: SA11C.4 Receipt th				
FEC ID number of contributing federal political committee.	C coo	0013961				,		2500	.00		
Name of Employer	Occupation	I									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2500.00									
Full Name (Last, First, Middle Initial) C. SOCIETY FOR VASCULAR SURGERY	POLITIC	AL ACTION COMMITTEE	Da	ate of	Re	ceipt					
Mailing Address 633 N. ST. CLAIR ST. 24TH FLOOR				м м 02	/	D 2		ү ү 2013	Y		
City CHICAGO	State IL	Zip Code 60611					: SA11C. Receipt th				
FEC ID number of contributing federal political committee.	C co	0381459				,	7	2000	0.00		
Name of Employer	Occupation	l									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2000.00									
SUBTOTAL of Receipts This Page (optional)		••••••						5500	.00		
TOTAL This Period (last page this line number o	nly)	•				,					

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

PAGE 21 OF

		Detailed Summary Page		11a		11b	X 11c		12					
Any information and all forms of Design	Otata			13		14	15		16	17				
Any information copied from such Reports and or for commercial purposes, other than using th														
NAME OF COMMITTEE (In Full)														
Healthcare Freedom Fund														
Full Name (Last, First, Middle Initial) SOCIETY OF THORACIC SURGEO	NS POLITIC	CAL ACTION COMMITTEE		Date of	Re	ceipt								
Mailing Address 20 F STREET, NW SUITE 310 C			03 / 04 2013 Transaction ID : SA11C.4153											
City WASHINGTON	State DC	Zip Code 20001												
	DC	20001	_ /	Amount	of	Each I	Receipt th	is Pe	eriod					
FEC ID number of contributing federal political committee.	C co	0325936			_	7			1500.	00				
Name of Employer	Occupatior	1												
Receipt For:	Aggregate	Year-to-Date ▼												
Primary General Other (specify) ▼		1500.00												
Full Name (Last, First, Middle Initial) B. SPINE PAC OF THE NATIONAL ASS	SOCIATION	OF SPINE SPECIALISTS	[Date of	Re	ceipt								
Mailing Address 7075 VETERANS BLVD.				м м 03	/	D 08		y 201	13	Y				
City	State	Zip Code		Trans	acti	on ID :	: SA11C.4	160						
BURR RIDGE	IL	60527	_ /	Amount	of	Each I	Receipt th	is Pe	eriod					
FEC ID number of contributing federal political committee.	Ссо	0349225			_	,		1	1500.	00				
Name of Employer	Occupation	1												
Receipt For:	Aggregate	Year-to-Date ▼												
Other (specify) ▼		1500.00												
Full Name (Last, First, Middle Initial) C. SYMBION INC GOOD GOVERN	IMENT FU	ND		Date of	Re	ceipt								
Mailing Address 40 BURTON HILLS BLVD S	UITE 500			м м 03	/	D 18		201	13 13	Y				
City NASHVILLE	State TN	Zip Code 37215					: SA11C.4 Receipt th							
FEC ID number of contributing federal political committee.	C co	0520833				7			5000.	00				
Name of Employer	Occupation	1												
Receipt For:	Aggregate	Year-to-Date ▼												
Primary General Other (specify) ▼		5000.00												
SUBTOTAL of Receipts This Page (optional)	<u> </u>		•				· · ·	8	3000.(00				
TOTAL This Period (last page this line number						7								

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

PAGE 22 OF

			Detailed Summary Page		11a		11b		X 11c		12	<u> </u>
Ar	y information copied from such Reports and Sta	tements ma	av not be sold or used by any ne	erson	13 for the	purr	14 bose	of	15 soliciting		16 ntribut	17 ions
	for commercial purposes, other than using the n											
\backslash	NAME OF COMMITTEE (In Full)											
/	Healthcare Freedom Fund											
Α.	Full Name (Last, First, Middle Initial) TEXTRON INC. POLITICAL ACTION C	OMMITT	EE		Date of	Re	ceipt					
	Mailing Address 40 WESTMINSTER STREET				м м 03	/		22	/ Y		у 013	Y
	City	State	Zip Code		Trans	acti	on ID):	SA11C.4	1183	3	
	PROVIDENCE	RI	02903	- 1	Amount	of	Each	Re	eceipt th	is F	Period	
	FEC ID number of contributing federal political committee.	C coo	0123612				7			_	1000	00
	Name of Employer	Occupation										
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General		1000.00									
	Other (specify)		1000.00									
В.	Full Name (Last, First, Middle Initial) TEXTRON INC. POLITICAL ACTION	COMMI	ITEE		Date of	Re	ceipt					
	Mailing Address 40 WESTMINSTER STREET				M M	/	D	D	/ Y	Y	Y	Y
	<u></u>	Ctoto	Zin Codo		06)6			013	
	City PROVIDENCE	State RI	Zip Code 02903						SA11C.4 eceipt th			
	FEC ID number of contributing				Amouni		Lacii	1.0		13 1	enou	_
	federal political committee.		0123612				7	-	7	_	1000.	00
	Name of Employer	Occupation										
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General	· · · ·	2000.00									
	Other (specify)	L	, , , , , , , , , , , , , , , , , , , ,									
С.	Full Name (Last, First, Middle Initial) THE AMERICAN CONGRESS OF	OB-GYN	IS PAC (OB-GYN PAC)		Date of	Re	ceipt					
	Mailing Address 409 12TH STREET, SW				м м 03	/		22	/ Y) 013	Y
	City	State DC	Zip Code						SA11C.4			
	WASHINGTON		20024		Amount	of	Each	Re	eceipt th	iis F	Period	
	FEC ID number of contributing federal political committee.	C co	0364158				7			_	5000	.00
	Name of Employer	Occupation										
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General		5000.00									
	Other (specify)	5000.00										
s	UBTOTAL of Receipts This Page (optional)						7		3		7000.	00
T	OTAL This Period (last page this line number on	ıly)		-						T		
		- *					1					

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

PAGE 23 OF

			Detailed Summary Page		11a 13		11b 14	X 11c	12	1 1	7				
	ny information copied from such Reports and Statem for commercial purposes, other than using the name				for the			of soliciting	g contrib	utions					
$\left \right\rangle$	NAME OF COMMITTEE (In Full) Healthcare Freedom Fund														
A.	Full Name (Last, First, Middle Initial) YRC WORLDWIDE INC. PAC				Date o	f Re	eceipt								
	Mailing Address 10990 ROE AVE.				м м 06	/	D 19		у у 2013	Y					
	,	state KS	Zip Code 66211	_	Transaction ID : SA11C.4237 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	C0009	90209				7		100	0.00					
	Name of Employer Occ	cupation													
	Receipt For: Age Primary General Other (specify) ▼	gregate Ye	ear-to-Date ▼ 1000.00]											
в.	Full Name (Last, First, Middle Initial)				Date o	f Re	eceipt								
	Mailing Address														
	City S	itate	Zip Code		Amoun	t of	Each	Receipt th	nis Perio	d					
	FEC ID number of contributing federal political committee.														
	Name of Employer Occ	cupation													
	Receipt For: Age Primary General Other (specify) ▼	gregate Ye	ear-to-Date ▼												
с.	Full Name (Last, First, Middle Initial)				Date o	f Re	ceipt								
	Mailing Address				M - M	/	D	D / Y	- Y - Y	Y					
	City S	itate	Zip Code		Amoun	t of	Each	Receipt th	nis Perio	d					
	FEC ID number of contributing federal political committee.	;					7]				
	Name of Employer Occ	cupation													
	Receipt For: Age Primary General Other (specify) ▼	gregate Ye	ear-to-Date ▼]											
s	UBTOTAL of Receipts This Page (optional)						л. I		100	0.00]				
т	OTAL This Period (last page this line number only).						,		10255	2.54					

S	CHEDULE B (FEC Form 3X)						NUMBER: PAGE 24 OF										
IT	EMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(cl		k only 21b 27	one) 22 28a		23 28b	2	4	25	26 30b				
	y information copied from such Reports and State for commercial purposes, other than using the na					perso	n for th	e pur	pose	of solic	iting o	contribu	utions				
\square	NAME OF COMMITTEE (In Full)																
	Healthcare Freedom Fund																
Α.	Full Name (Last, First, Middle Initial) Capitol Hill Club					Date of Disbursement											
	· · · · · · · · · · · · · · · · · · ·																
	Mailing Address 300 1st Street SE				03 28 2013												
	City Washington	State DC	Zip Code 20003				Transaction ID : SB21B.4251										
	Purpose of Disbursement Food & Beverage			-			Amount of Each Disbursement this Period										
	Candidate Name				03		Αποι	int of	Each	Disbu	seme	nt this	Period				
				Cate Ty	egor /pe	ry/	1003.2										
	Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General														
	State: District:		- 3 / •														
в.					Date of Disbursement												
	Mailing Address 300 1st Street SE		05 29 2013														
	City Washington	State DC	Zip Code 20003				Transaction ID : SB21B.4263 Amount of Each Disbursement this Period										
	Purpose of Disbursement Food & Beverage			0	03												
	Candidate Name			Cate		ry/	159.										
	Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General cify) ▼														
	Full Name (Last, First, Middle Initial)																
C.	Concentric Office, LLC				Date of Disbursement												
	Mailing Address 8136 Old Keene Mill Road Suite A300		03 05 Y Y Y Y Y 03 05 2013														
	City Springfield				Tra	Transaction ID : SB21B.4245											
	Purpose of Disbursement Compliance Services		0	01													
	Candidate Name			ry/	Amount of Each Disbursement this F												
	Office Sought: House Disburse Senate President State: District:	ype						,									
							_			_							
⊢	UBTOTAL of Disbursements This Page (optional).					-	F	+	7		,	192	5.36				
IΤ	OTAL This Period (last page this line number only	′)							7	_	7	_					

S	CHEDULE B (FEC Form 3X)			F	FOR LINE NUMBER: PAGE 25 OF 26												
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the		hecl	k or	nly one)										
			Summary Page			211 27		22 28a		23 28b	\vdash	24 28c	\vdash	25 29	26 30b		
	y information copied from such Reports and Sta for commercial purposes, other than using the																
\backslash	NAME OF COMMITTEE (In Full)																
	Healthcare Freedom Fund																
Α.	Full Name (Last, First, Middle Initial) Concentric Office, LLC							Date of Disbursement									
	Mailing Address 8136 Old Keene Mill Road Suite A300			04 15 2013													
	City Springfield	State VA	Zip Code 22152				Transaction ID : SB21B.4256										
	Purpose of Disbursement Compliance Services			0	01		Amount of Each Disbursement this Period										
	Candidate Name							1647.60									
	Office Sought: House Disbu	rsement For: Primary Other (spe	General ecify) ▼														
	State: District:																
В.	Full Name (Last, First, Middle Initial) Machado & Co.						Date of Disbursement										
	Mailing Address 6111 Newman Road		03 / D D / Y Y Y Y 03 11 2013														
	City Fairfax	Zip Code 22030-5918				Transaction ID : SB21B.4246							6				
	Purpose of Disbursement Event Expenses			003				Amount of Each Disbursement this Period									
	Candidate Name							619.87									
	Office Sought: House Disbu	rsement For: Primary Other (spe	General Gereify) ▼														
	State: District:																
C.	Full Name (Last, First, Middle Initial)							Date of Disbursement									
	Mailing Address 655 Taylor Street NE	03 28 2013															
	City Washington			Transaction ID : SB21B.4253													
	Purpose of Disbursement Catering			0	03			A		F aab					Devied		
	Candidate Name		Cate	-	ry/	Amount of Each Disbursement this Period 235.50											
	Office Sought: House Disbu Senate President State: District:	rsement For: Primary Other (spe	General ecify) ▼														
								_	-	-			-	-			
s	UBTOTAL of Disbursements This Page (optiona	al)						<u> </u>	-	9	_		-	2502			
т	OTAL This Period (last page this line number o	nly)								7	_	7		4428	.33		

SCHE	DULE E	B (F	EC For	m 3X)			schedule(LINE N			:			PA	GE	26	OF 26				
ITEMIZED DISB		SBUI	RSEME	NTS		for eac Detaile	ý	(cł		c only 21b 27	22 X 23 24 25							25 29	26 30b						
	ormation cop											perso		or the		oose (solicitin		ontribu	itions				
	E OF COM	MITTEE	E (In Full)																						
He	althcare	Free	dom Fu	nd																					
-	Full Name (Last, First, Middle Initial)																								
A. CO	NGRES	SIO	VAL TRU	JST										Date of	f Dis										
Mailii	ng Address	228 S \	WASHINGT	EET SU	JITE 115								05 16 2013												
City ALE>	KANDRIA							State Zip Code VA 22314							Transaction ID : SB23.4259										
	ose of Disbu												Amount of Each Disbursement this Period												
										1	11		Α	moun	t of	Each	D	Isburse	ment	t this	Period				
	Candidate Name								C		egor vpe	y/		_		7		7		3240	0.00				
Office	e Sought:		House Senate President		X	nent For: Primary Other (sp		General																	
State	:	Distri	ct:																						
	Full Name (Last, First, Middle Initial) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTI							TE	E		Date of Disbursement														
Mailii	g Address 320 FIRST STREET SE											03 / D D / Y Y Y Y 2013													
	HINGTON	StateZip CodeTONDC20003											Transaction ID : SB23.4249												
	ose of Disbu										11		Amount of Each Disbursement this Period												
Cano	Candidate Name											y/	32400.00								_				
Office	e Sought:		House Senate President	Di	X	nent For: Primary Other (sp		General	_1		pe					,		,							
State	:	Distri	ct:																						
Full I C.	Name (Last,	, First, I	Viddle Initia	l)									0	Date of	f Dis										
Mailii	Mailing Address													M M	/	D	D		Ý	Y	Y				
City	City State Zip Code																								
Purp	ose of Disbu	of Disbursement																			Deviad				
Canc	ndidate Name								c		egor vpe	y/	Amount of Each Disbursement this Period												
	e Sought:		House Senate President	Di		nent For: Primary Other (sp		General ▼										- 7							
State		Distri	CI:														_								
SUBTO	DTAL of Dis	bursem	ents This P	age (op	tional)								ļ	_	_	,		,		64800).00				
TOTAL	. This Period	d (last j	bage this lin	ne numb	er only)											,				64800	0.00				