

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEC MAIL CENTER 2011 JUL 14 AM 8:54

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

CHILD HEALTH CORPORATION OF AMERICA - PAC

ADDRESS (number and street)

6803 WEST 64 STREET SUITE 208

Check if different than previously reported. (ACC)

SHAWNEE MISSION

KS

66202

FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00430587

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)
July 31 Mid-Year Report (Non-election Year Only) (MY)
Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
Mar 20 (M3)
Apr 20 (M4)
May 20 (M5)
Jun 20 (M6)
Jul 20 (M7)
Aug 20 (M8)
Sep 20 (M9)
Oct 20 (M10)
Nov 20 (M11) (Non-Election Year Only)
Dec 20 (M12) (Non-Election Year Only)
Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
General (12G)
Runoff (12R)
Convention (12C)
Special (12S)

Election on

MM/DD/YYYY

in the State of

State

(d) 30-Day POST-Election Report for the:

- General (30G)
Runoff (30R)
Special (30S)

Election on

MM/DD/YYYY

in the State of

State

5. Covering Period

01 / 01 / 2011

through

06 / 30 / 2011

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 Craig F. Fischer

Signature of Treasurer

[Handwritten Signature]

Date

06 / 30 / 2011

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 Only

FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Child Health Corporation of America - PAC

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

11030623839

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2011"/>		<input type="text" value="5416.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="5416.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="7515.00"/>	<input type="text" value="7515.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<input type="text" value="12931.00"/>	<input type="text" value="12931.00"/>
7. Total Disbursements (from Line 31)	<input type="text" value="6000.00"/>	<input type="text" value="6000.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<input type="text" value="6931.00"/>	<input type="text" value="6931.00"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Child Health Corporation of America - PAC

Report Covering the Period: From:

MM / DD / YYYY
01 / 01 / 2011

To:

MM / DD / YYYY
06 / 30 / 2011

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

7,350.00

7,350.00

(ii) Unitemized.....

165.00

165.00

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

7,515.00

7,515.00

(b) Political Party Committees.....

(c) Other Political Committees (such as PACs).....

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

7,515.00

7,515.00

12. Transfers From Affiliated/Other Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

18. 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))..

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

7,515.00

7,515.00

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

7,515.00

7,515.00

11030623840

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	00	00
22. Transfers to Affiliated/Other Party Committees	00	00
23. Contributions to Federal Candidates/Committees and Other Political Committees	6,000.00	6,000.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. 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))	00	00
29. Other Disbursements	00	00
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)) ..	6,000.00	6,000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	6,000.00	6,000.00

11030623841

DETAILED SUMMARY PAGE
of Disbursements

**III. Net Contributions/Operating Ex-
penditures**

**COLUMN A
Total This Period**

**COLUMN B
Calendar Year-to-Date**

33. Total Contributions (other than loans) (from Line 11(d), page 3)	7,515.00	7,515.00
34. Total Contribution Refunds (from Line 28(d))00	.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7,515.00	7,515.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))00	.00
37. Offsets to Operating Expenditures (from Line 15, page 3)00	.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)00	.00

11030623842

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

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

FOR LINE NUMBER:
(check only one)

PAGE OF

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

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

NAME OF COMMITTEE (In Full)

Child Health Corporation of America - PAC

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY
01 / 12 / 2011

A. Klobuchar for Minnesota

Mailing Address

10 G Street NE Suite 570

City Washington DC State Zip Code 20002

Purpose of Disbursement
Contribution

Candidate Name
Amy Klobuchar

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Amount of Each Disbursement this Period
1,000.00

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY
02 / 23 / 2011

B. HIGPA-PAC

Mailing Address

2025 M Street NW Suite 800

City Washington DC State Zip Code 20036

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Amount of Each Disbursement this Period
5,000.00

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Amount of Each Disbursement this Period

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

6,000.00

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

6,000.00

11030623943

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

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

FOR LINE NUMBER:		PAGE		OF	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)

Child Health Corporation of America - PAC

Full Name (Last, First, Middle Initial)

A. Bertoch David

Mailing Address

16522 West 81

City

Lenexa

State

KS

Zip Code

66219

FEC ID number of contributing federal political committee.

C

Name of Employer

CHCA

Occupation

Vice President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

5,000.00

Date of Receipt

05 / 10 / 2011

Amount of Each Receipt this Period

5,000.00

Full Name (Last, First, Middle Initial)

B. Vasto Nancy

Mailing Address

5906 S National Drive

City

Parkville

State

MO

Zip Code

64152

FEC ID number of contributing federal political committee.

C

Name of Employer

CHCA

Occupation

Vice President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1,000.00

Date of Receipt

06 / 03 / 2011

Amount of Each Receipt this Period

1,000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶

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

600.00

11030623844

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

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

FOR LINE NUMBER:
(check only one)

PAGE OF

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Child Health Corporation of America - PAC

Full Name (Last, First, Middle Initial)

A. Jerry L Rutherford

Mailing Address

7311 Ward Park way

City Kansas City

State MO

Zip Code 64114

FEC ID number of contributing federal political committee.

C

Name of Employer

CHCA

Occupation

President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

02 / 28 / 2011

Amount of Each Receipt this Period

1,000.00

Full Name (Last, First, Middle Initial)

B. Jeffrey J Primovic

Mailing Address

15605 Slater

City Overland Park

State KS

Zip Code 66221

FEC ID number of contributing federal political committee.

C

Name of Employer

CHCA

Occupation

Senior Vice President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

02 / 28 / 2011

Amount of Each Receipt this Period

1,000.00

Full Name (Last, First, Middle Initial)

C. D Brian Humphreys

Mailing Address

16203 W 79 Terrace

City Lenexa

State KS

Zip Code 66219 1675

FEC ID number of contributing federal political committee.

C

Name of Employer

CHCA

Occupation

Vice President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

02 / 28 / 2011

Amount of Each Receipt this Period

3,000.00

SUBTOTAL of Receipts This Page (optional).....▶

2,300.00

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

11030623845

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

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

FOR LINE NUMBER:
(check only one)

PAGE OF

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Child Health Corporation of America - PAC

Full Name (Last, First, Middle Initial)

A. D Brian Humphreys

Mailing Address

17523 W 83 Terrace

City

Lenexa

State

KS

Zip Code

66219

FEC ID number of contributing federal political committee.

C

Name of Employer

CHCA

Occupation

Vice President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

5,000.00

Date of Receipt

03 / 02 / 2011

Amount of Each Receipt this Period

2,000.00

Full Name (Last, First, Middle Initial)

B. Katherine A Conrad

Mailing Address

4811 W 80 street

City

Prairie Village

State

KS

Zip Code

66208 5026

FEC ID number of contributing federal political committee.

C

Name of Employer

CHCA

Occupation

Vice President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

03 / 02 / 2011

Amount of Each Receipt this Period

5,000.00

Full Name (Last, First, Middle Initial)

C. Barbara Spreadbury

Mailing Address

15007 W 76 street

City

Lenexa

State

KS

Zip Code

66216

FEC ID number of contributing federal political committee.

C

Name of Employer

CHCA

Occupation

Vice President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

03 / 02 / 2011

Amount of Each Receipt this Period

5,000.00

SUBTOTAL of Receipts This Page (optional).....▶

1,200.00

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

11030623846

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

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

FOR LINE NUMBER: (check only one)	PAGE	OF
<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15
<input type="checkbox"/> 12 16	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)

Child Health Corporation of America - PAC

Full Name (Last, First, Middle Initial)

A. Craig Fischer

Mailing Address

9729 Sagamore

City

Leawood

State

KS

Zip Code

66206

FEC ID number of contributing federal political committee.

C

Name of Employer

CHCA

Occupation

Chief Financial officer

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

MM / DD / YYYY
03 / 10 / 2011

Amount of Each Receipt this Period

1,000.00

Full Name (Last, First, Middle Initial)

B. Jennifer Gedney

Mailing Address

3541 Genessee

City

Kansas City

State

MO

Zip Code

64111

FEC ID number of contributing federal political committee.

C

Name of Employer

CHCA

Occupation

Vice President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

MM / DD / YYYY
03 / 10 / 2011

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Kassandra Jensen

Mailing Address

809 West Truman Road

City

Independence

State

MO

Zip Code

64050

FEC ID number of contributing federal political committee.

C

Name of Employer

CHCA

Occupation

Vice President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

MM / DD / YYYY
03 / 25 / 2011

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....▶

1,750.00

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

11030623847

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

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

FOR LINE NUMBER: PAGE OF

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Child Health Corporation of America - PAC

Full Name (Last, First, Middle Initial)

A. Michelle Lunbeck

Mailing Address

16303 S Brentwood Street

City

Olathe

State

KS

Zip Code

66062

FEC ID number of contributing federal political committee.

C

Name of Employer

CHCA

Occupation

Vice President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

03 / 25 / 2011

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Sandra Tillman

Mailing Address

1726 NW 57 CT

City

Kansas City

State

MO

Zip Code

64151 2191

FEC ID number of contributing federal political committee.

C

Name of Employer

CHCA

Occupation

Senior Vice President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

03 / 18 / 2011

Amount of Each Receipt this Period

1,000.00

Full Name (Last, First, Middle Initial)

C. Robert M Davidson

Mailing Address

5610 W 131 street

City

Overland Park

State

KS

Zip Code

66209

FEC ID number of contributing federal political committee.

C

Name of Employer

CHCA

Occupation

Vice President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

03 / 18 / 2011

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....▶

1,500.00

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

7,350.00

11030623848

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

11030623849

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked 7/11/11
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

Imp
PREPARER

7/14/11
DATE PREPARED