

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
VANGUARD HEALTH MANAGEMENT INC PAC

ADDRESS (number and street) 20 BURTON HILLS BOULEVARD STE 100  
 Check if different than previously reported. (ACC)  
NASHVILLE TN 37215

2. **FEC IDENTIFICATION NUMBER** C00380402  
**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 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 02 01 2008 through 02 29 2008

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 Aaron Broad

Signature of Treasurer Electronically Filed by Aaron Broad Date 03 17 2008

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								
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**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  
VANGUARD HEALTH MANAGEMENT INC PAC

Report Covering the Period: From: 

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	2

D	D
2	9

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		43419.17
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	44002.68									
(c) Total Receipts (from Line 19) .....	5505.26	11088.77								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	49507.94	54507.94								
7. Total Disbursements (from Line 31) .....	3500.00	8500.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	46007.94	46007.94								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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**

Write or Type Committee Name  
VANGUARD HEALTH MANAGEMENT INC PAC

Report Covering the Period: From: 

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	2

D	D
2	9

Y	Y	Y	Y
2	0	0	8

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	4196.27	6176.67
(i) Itemized (use Schedule A) .....	1307.30	4908.60
(ii) Unitemized .....	5503.57	11085.27
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	5503.57	11085.27
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	1.69	3.50
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	5505.26	11088.77
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	5505.26	11088.77

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3500.00	8500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	3500.00	8500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3500.00	8500.00

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	5503.57	11085.27
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5503.57	11085.27
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

**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 6 / 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
VANGUARD HEALTH MANAGEMENT INC PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Kelvin Ault		Date of Receipt
	Mailing Address 9240 Kingsboro Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 9 / 2 0 0 8
	City	State	Zip Code
	Brentwood	TN	37027
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.7425
Name of Employer Vanguard Healthcare		Occupation VP - Tax	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 262.52	<input type="text"/> 131.26
			payroll deduction 65.63 per period

<b>B.</b>	Full Name (Last, First, Middle Initial) Reginald M. Ballantyne, III		Date of Receipt
	Mailing Address 3266 E. Valley Vista Lane		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 9 / 2 0 0 8
	City	State	Zip Code
	Paradise Valley	AZ	85253
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.7412
Name of Employer Vanguard Health Management		Occupation SVP Market Strategy & Govt Relations	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 601.68	<input type="text"/> 300.84
			payroll deduction 150.42 per period

<b>C.</b>	Full Name (Last, First, Middle Initial) Harold K. Bandy		Date of Receipt
	Mailing Address 9004 Old Smyrna Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 9 / 2 0 0 8
	City	State	Zip Code
	Brentwood	TN	37027
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.7430
Name of Employer Vanguard Health Management		Occupation AVP - Information Technology	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 266.68	<input type="text"/> 133.34
			payroll deduction 66.67 per period

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 565.44
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**VANGUARD HEALTH MANAGEMENT INC PAC**

<b>A.</b>	Full Name (Last, First, Middle Initial) Richard Wayne Brasher	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 1925 Oak Hampton Place	<b>Transaction ID:</b> SA11AI.7427
	City State Zip Code Brentwood TN 37027	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction 62.50 per period
	Name of Employer Occupation Vanguard Health Management VP Risk Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Bruce F. Buchanan	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 134 E. Hermosa Drive	<b>Transaction ID:</b> SA11AI.7390
	City State Zip Code San Antonio TX 78212	Amount of Each Receipt this Period 262.50
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction 131.25 per period
	Name of Employer Occupation Phoenix Baptist CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Bruce Chafin	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 11105 Hoylake Lane	<b>Transaction ID:</b> SA11AI.7410
	City State Zip Code Fairfax VA 22030	Amount of Each Receipt this Period 236.76
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll deduction 118.38 per period
	Name of Employer Occupation Vanguard Health Management SVP Compliance and Ethics	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 473.52	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>624.26</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 14  
(check only one)

<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)  
**VANGUARD HEALTH MANAGEMENT INC PAC**

<p><b>A.</b> Full Name (Last, First, Middle Initial) Jeff Egbert</p> <p>Mailing Address 1069 E Erie Court</p> <p>City State Zip Code Gilbert AZ 85296</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Maryvale Hospital Occupation CEO</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">383.32</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 2 / 2 9 / 2 0 0 8</span></p> <p><b>Transaction ID:</b> SA11AI.7388</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">191.66</span></p> <p>payroll deduction 95.83 per period</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Valerie Karen Flinn</p> <p>Mailing Address 3209 Gleneagles Court</p> <p>City State Zip Code Plano TX 75093</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Vanguard Health Management Occupation President, Phys &amp; Ambulatory Svcs</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">540.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 2 / 2 9 / 2 0 0 8</span></p> <p><b>Transaction ID:</b> SA11AI.7415</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">270.00</span></p> <p>payroll deduction 135 per period</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) John M. Geer</p> <p>Mailing Address 2223 Hemingway Drive</p> <p>City State Zip Code Nashville TN 37215</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Vanguard Health Management Occupation VP - Development</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">300.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 2 / 2 9 / 2 0 0 8</span></p> <p><b>Transaction ID:</b> SA11AI.7407</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">150.00</span></p> <p>payroll deduction 75 per period</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">611.66</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 14  
(check only one)

<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)  
VANGUARD HEALTH MANAGEMENT INC PAC

**A.**

Full Name (Last, First, Middle Initial)  
Thomas W. Hijeck

Mailing Address 97 Town Farm Road

City State Zip Code  
Enfield CT 06082

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

Name of Employer MetroWest Occupation CNO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.7397

Amount of Each Receipt this Period  
120.00

payroll deduction 60 per period

**B.**

Full Name (Last, First, Middle Initial)  
Dennis K. Jacobs

Mailing Address 147 N. Berwick Lane

City State Zip Code  
Franklin TN 37069

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

Name of Employer Vanguard Health Management Occupation VP - Facilities Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 218.76

Date of Receipt  
M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.7441

Amount of Each Receipt this Period  
109.38

payroll deduction 54.69 per period

**C.**

Full Name (Last, First, Middle Initial)  
S. James Johnston

Mailing Address 919 Hidden Oak Place

City State Zip Code  
Brentwood TN 37027

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

Name of Employer Vanguard Health Management Occupation SVP - Human Resources

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 416.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.7432

Amount of Each Receipt this Period  
208.00

payroll deduction 104 per period

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 437.38

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
VANGUARD HEALTH MANAGEMENT INC PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Debra L. Lee	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 602 Creek View Drive	<b>Transaction ID:</b> SA11AI.7416
	City Prosper State TX Zip Code 75078	Amount of Each Receipt this Period 109.38
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction 54.69 per period
	Name of Employer Vanguard Health Management Occupation CFO/Physician & Ambulatory Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 218.76	

<b>B.</b>	Full Name (Last, First, Middle Initial) Frank L. Molinaro	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 2210 Mary Jane Lane	<b>Transaction ID:</b> SA11AI.7395
	City Park Ridge State IL Zip Code 60068	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction 100 per period
	Name of Employer Weiss Hospital Occupation COO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Matthew Shane Olivier	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 4163 Victory Drive	<b>Transaction ID:</b> SA11AI.7414
	City Frisco State TX Zip Code 75034	Amount of Each Receipt this Period 121.88
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction 60.94 per period
	Name of Employer Vanguard Health Management Occupation Chief Development Officer/Phys & Amb Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 243.76	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>431.26</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
VANGUARD HEALTH MANAGEMENT INC PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Harold H. Pilgrim	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 125 Alyesbury Hill	<b>Transaction ID:</b> SA11AI.7406
	City State Zip Code San Antonio TX 78209	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction 100 per period
	Name of Employer Occupation Vanguard Health Systems VP Business Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Lance Brandon Robinson	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 420 Elmington Avenue	<b>Transaction ID:</b> SA11AI.7434
	City State Zip Code Nashville TN 37205	Amount of Each Receipt this Period 78.13
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction final deduction
	Name of Employer Occupation Vanguard Health Management VP Supply Chain Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.39	

<b>C.</b>	Full Name (Last, First, Middle Initial) Phillip Roe	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 212 Chapelwood Drive	<b>Transaction ID:</b> SA11AI.7424
	City State Zip Code Franklin TN 37069	Amount of Each Receipt this Period 270.00
	FEC ID number of contributing federal political committee. <b>C</b>	payroll deduction 135 per period
	Name of Employer Occupation Vanguard Health Management SVP Controller & CAO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>548.13</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

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

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NAME OF COMMITTEE (In Full)  
VANGUARD HEALTH MANAGEMENT INC PAC

**A.** Full Name (Last, First, Middle Initial)  
Anne L. Sanford  
Mailing Address 119 Brighton Close  
City Nashville State TN Zip Code 37205  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vanguard Health Management Occupation VP - Development  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 216.68  
Date of Receipt 02 / 29 / 2008  
Transaction ID: SA11AI.7408  
Amount of Each Receipt this Period 108.34  
payroll deduction 54.17 per period

**B.** Full Name (Last, First, Middle Initial)  
Alan H. Smith, Jr.  
Mailing Address 11818 Cupworth Court  
City Huntersville State NC Zip Code 28078  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vanguard Health Management Occupation VP Applications  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 02 / 29 / 2008  
Transaction ID: SA11AI.7429  
Amount of Each Receipt this Period 125.00  
payroll deduction 62.50 per period

**C.** Full Name (Last, First, Middle Initial)  
Joseph Scott Steiner  
Mailing Address 11257 Claywood  
City St. Louis State MO Zip Code 63126  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MacNeal Hospital Occupation COO  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00  
Date of Receipt 02 / 29 / 2008  
Transaction ID: SA11AI.7389  
Amount of Each Receipt this Period 112.50  
payroll deduction 56.25 per period

**SUBTOTAL** of Receipts This Page (optional) ..... ► 345.84  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 14
	<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)  
VANGUARD HEALTH MANAGEMENT INC PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Keith L. Swinney	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 2935 Nacogdoches, Apt 111	Transaction ID: SA11AI.7401
	City State Zip Code San Antonio TX 78217	Amount of Each Receipt this Period 223.96
	FEC ID number of contributing federal political committee. C	payroll deduction 111.98 per period
	Name of Employer Occupation Baptist Medical Center CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 447.92	

<b>B.</b>	Full Name (Last, First, Middle Initial) Alan G. Thomas	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 7387 Old Franklin Road	Transaction ID: SA11AI.7417
	City State Zip Code Fairview TN 37062	Amount of Each Receipt this Period 208.34
	FEC ID number of contributing federal political committee. C	payroll deduction 104.17 per period
	Name of Employer Occupation Vanguard Health Management SVP Operations Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.68	

<b>C.</b>	Full Name (Last, First, Middle Initial) Thomas M. Ways	Date of Receipt MM / DD / YYYY 02 / 29 / 2008
	Mailing Address 1538 Lewisburg Pike	Transaction ID: SA11AI.7409
	City State Zip Code Franklin TN 37064	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	payroll deduction 100 per period
	Name of Employer Occupation Vanguard Health Management SVP Managed Care/Physician Inegration	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	632.30
<b>TOTAL</b> This Period (last page this line number only) .....	4196.27

**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 14 / 14

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

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NAME OF COMMITTEE (In Full)  
VANGUARD HEALTH MANAGEMENT INC PAC

A.	Full Name (Last, First, Middle Initial) CITIZENS FOR ALTMIRE	Transaction ID: SB23.7446 Date of Disbursement 02 / 04 / 2008
	Mailing Address P.O. Box 1776	Amount of Each Disbursement this Period 2500.00
	City Freedom State PA Zip Code 15042	
	Purpose of Disbursement campaign contribution	Category/ Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: PA District: 04	

B.	Full Name (Last, First, Middle Initial) GUTIERREZ FOR CONGRESS	Transaction ID: SB23.7444 Date of Disbursement 02 / 21 / 2008
	Mailing Address 2146 W CHURCHILL STREET	Amount of Each Disbursement this Period 1000.00
	City CHICAGO State IL Zip Code 60647	
	Purpose of Disbursement campaign contribution	Category/ Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: IL District: 04	

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

3500.00

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

3500.00