PAGE 1 / 254

### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	For Othe	er man an au	norized Co	nmittee		Office Use Only	
1. NAME OF COMMITTEE (in		R PRINT ▼	Example: over the	If typing, type lines.	12FE4M	I5	
FIRST COLO	NIES ANESTHE	ESIA ASSOCI	ATES LLC	POLITICAL	L ACTION C	OMMITTEE	
	<u> </u>						
ADDRESS (number at the contract of the contrac	ferent FRED	ERICK	WAY		MD	21703	
2. <b>FEC IDENTIFIC</b>	CATION NUMBER '	▼ CI	ГҮ▲		STATE ▲	ZIP CODE	<b>A</b>
C C004163	05		S THIS REPORT	X NEW (N) O		MENDED )	
July 15 Quarter October Quarter  January Year-Er  July 31 Report Year Or	eports:    Disports:   Column   Column	eport ue On:  Mai  Apr  12-Day  PRE-Election  Report for the:  Election	Convo	May 20 (N  Jun 20 (M  Jul 20 (M  ary (12P)  ention (12C)  aral (30G)	16) Sep	20 (M9) De (Nc Yes 20 (M10) Ja (12G) Ru (12S)	ov 20 (M11) on-Election ar Only) ec 20 (M12) on-Election ar Only) en 31 (YE) en 31 (YE) en 31 (YE) en 31 (30S)
5. Covering Period	07	01 2017	th	rough 12		2017	
I certify that I have on the state of Print Name of Print Name	Roth, c	and to the best of Jeremy, , Dr.,	my knowledg	e and belief it is	s true, correct an	d complete.	
Signature of Treasure	Roth, Jeremy, , I	Or.,	[Elect	ronically Filed]	Date 01		2018
NOTE: Submission of	false, erroneous, or in	ncomplete information	n may subject	the person signir	ng this Report to t	the penalties of 52 U.S	S.C. § 30109
Office Use						FEC FORM Rev. 05/2016	

#### **SUMMARY PAGE** OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016) Page 2

Write or Type Committee Name

FIRST COLONIES ANESTHESIA	ASSOCIATES LLC POLITICAL AC	CTION COMMITTEE
Report Covering the Period: From:	07 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	12 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand  January 1,  2017		93943.90
(b) Cash on Hand at  Beginning of Reporting Period	96852.07	
(c) Total Receipts (from Line 19)	37404.66	64139.66
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	134256.73	158083.56
7. Total Disbursements (from Line 31)	50590.90	74417.73
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	83665.83	83665.83
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 multion	candidate committee. (see FEC FORM 1M)	
	For further information contact:	
	Federal Election Commission 999 E Street, NW	

Washington, DC 20463

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

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

#### FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE

R	eport Covering the Period: From:		12 31 2017
	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)	35864.66	43114.66
	(ii) Unitemized(iii) TOTAL (add	1540.00	21025.00
	Lines 11(a)(i) and (ii)	37404.66	64139.66
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
12.	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)  Transfers From Affiliated/Other	37404.66	64139.66
	Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
	Loan Repayments Received  Offsets To Operating Expenditures	0.00	0.00
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
17	to Federal Candidates and Other Political Committees Other Federal Receipts	0.00	0.00
	(Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds	0.00	0.00
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	37404.66	64139.66
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	37404.66	64139.66

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures:     (a) Allocated Federal/Non-Federal     Activity (from Schedule H4)		Calcinal Four to Date
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	200	0.00
Expenditures(c) Total Operating Expenditures	0.00	0.00
(add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00
Transfers to Affiliated/Other Party Committees	0.00	0.00
Contributions to Federal Candidates/Committees and Other Political Committees	4900.00	5400.00
Independent Expenditures	4	4
(use Schedule E) Coordinated Party Expenditures (52 U.S.C. § 30116(d))	0.00	0.00
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans MadeRefunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
Other Disbursements (Including	45 45 45	4 4
Non-Federal Donations)	45690.90	69017.73
Federal Election Activity (52 U.S.C. § 30101(20)  (a) Allocated Federal Election Activity (from Schedule H6)  (i) Federal Share		
V	0.00	0.00
(ii) "Levin" Share(b) Federal Election Activity Paid	0.00	0.00
Entirely With Federal Funds	0.00	0.00
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))	50590.90	74417.73
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	50590.90	74417.73

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)	of Dispursements	Page <b>5</b>
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)	37404.66	64139.66
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	37404.66	64139.66
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

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

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Ajrawat, Satinder, , , Date of Receipt Mailing Address 9905 Potomac Manors Drive 2017 City Zip Code State Transaction ID: SA11AI.11736 MD Potomac 20854 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Ajrawat, Satinder, , , Date of Receipt Mailing Address 9905 Potomac Manors Drive 2017 City State Zip Code Transaction ID: SA11AI.11845 MD Potomac 20854 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 350.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Ajrawat, Satinder, , , Date of Receipt Mailing Address 9905 Potomac Manors Drive 25 2017 City Zip Code State Transaction ID: SA11AI.11946 MD Potomac 20854 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)		I	,	I	Ī	,	_	15	50.00	)	
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Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIA	ATES LLC POLITIC	AL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle I Ajrawat, Satinder, , ,  Mailing Address 9905 Potomac Manors Drive		ization Name	Date of Receipt
City	State	Zip Code	10 25 2017  Transaction ID : SA11AI.12048
Potomac	MD	20854	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual)	Occupation	on (for Individual)	Memo Item
First Colonies Anesthesia	Physiciar	n	Payroll deduction
Receipt For:	Aggregate Year	-to-Date ▼	
Primary General  Other (specify) ▼		450.00	
Full Name of Individual (Last, First, Middle I Ajrawat, Satinder, , ,		ization Name	Date of Receipt
Mailing Address 9905 Potomac Manors Drive	9		11 25 2017
City	State	Zip Code	Transaction ID : SA11AI.12151
Potomac	MD	20854	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation Physician	on (for Individual) n	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year	-to-Date ▼ 500.00	
Full Name of Individual (Last, First, Middle I	Initial) or Full Organi	ization Name	Date of Receipt
Mailing Address 9905 Potomac Manors Drive	е		12 22 / 2017
City	State 1	Zip Code	Transaction ID : SA11AI.12254
Potomac	IVIU	20854	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer (for Individual)	Occupation	on (for Individual)	Memo Item
First Colonies Anesthesia	Physician	1	Payroll deduction
Receipt For:  Primary  General	Aggregate Year	-to-Date ▼	
Other (specify)	1 7	550.00	
SUBTOTAL of Receipts This Page (optional)		•	150.00
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Use separate schedule(s) for each category of the Detailed Summary Page

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Ajrawat, Satinder, , , Date of Receipt Mailing Address 9905 Potomac Manors Drive 2017 City Zip Code State Transaction ID: SA11AI.12356 MD Potomac 20854 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Azran, Marc, , , Date of Receipt Mailing Address 800 Hillsboro Drive 2017 City State Zip Code Transaction ID: SA11AI.11700 Silver Spring MD 20902 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Azran, Marc, , , Date of Receipt Mailing Address 800 Hillsboro Drive 25 2017 City State Zip Code Transaction ID: SA11AI.11811 MD Silver Spring 20902 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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

F	OR	LINE	NU	MBER	:	PAGE	9	OF	2	254
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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Azran, Marc, , , Date of Receipt Mailing Address 800 Hillsboro Drive 2017 City Zip Code State Transaction ID: SA11AI.11913 Silver Spring MD 20902 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Azran, Marc, , , Date of Receipt Mailing Address 800 Hillsboro Drive 10 2017 City State Zip Code Transaction ID: SA11AI.12015 Silver Spring MD 20902 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 450.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Azran, Marc, , , Date of Receipt Mailing Address 800 Hillsboro Drive 25 2017 City State Zip Code Transaction ID: SA11AI.12118 MD Silver Spring 20902 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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

F	OR	LINE	NU	MBER	:	PAGE	_ ′	10	OF		254
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or for	commercial purposes, other than using the			rson for the purpose of soliciting contributions to solicit contributions from such committee.
	ME OF COMMITTEE (In Full) RST COLONIES ANESTHESI.	A ASSC	OCIATES LLC POLITICA	AL ACTION COMMITTEE
<b>A</b> . A	I Name of Individual (Last, First, Middle Initia zran, Marc, , , iling Address 800 Hillsboro Drive	al) or Full C	Organization Name	Date of Receipt
				12 22 2017
Cit	/ ver Spring	State MD	Zip Code 20902	Transaction ID : SA11AI.12221
FE	C ID number of contributing eral political committee.	С	2002	Amount of Each Receipt this Period  50.00
Na	me of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
	st Colonies Anesthesia	Phy	vsician	Payroll deduction
Re	ceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
<b>B</b> . A	I Name of Individual (Last, First, Middle Initia zran, Marc, , , iling Address 800 Hillsboro Drive	al) or Full C	Organization Name	Date of Receipt
ivia	illing Address 800 Hillsboro Drive			12 29 2017
Cit	/	State	Zip Code	Transaction ID : SA11AI.12324
Sil	ver Spring	MD	20902	Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	С		50.00
	me of Employer (for Individual) tt Colonies Anesthesia		supation (for Individual) vsician	Memo Item Payroll deduction
Re	ceipt For:	Aggregate	Year-to-Date ▼	
	Primary General  Other (specify) ▼		600.00	
	I Name of Individual (Last, First, Middle Initia	al) or Full C	Organization Name	Date of Receipt
	iling Address 10021 Dickens Avenue			07 25 / Y Y Y Y Y Y
Cit <sub>i</sub> Be	y ethesda	State MD	Zip Code 20814	Transaction ID : SA11AI.11692  Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	С		50.00
Na	me of Employer (for Individual)	Occ	upation (for Individual)	Memo Item
	st Colonies Anesthesia	Phy	sician	Payroll deduction
Re	ceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 300.00	
	TOTAL of Receipts This Page (optional)		<b>&gt;</b>	150.00

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

FOR LINE NUMBER:						PAGE	_ ′	11	OF		254
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		13		14		15		16	6		17

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NAME OF COMMITTEE (In Full)

	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA	ASSO(	CIATES LLC POLITICA	L ACTION COMMITTEE
Α.	Full Name of Individual (Last, First, Middle Initial) Barkinskiy, Maksim, , ,  Mailing Address 10021 Dickens Avenue	) or Full Org	ganization Name	Date of Receipt  08 25 2017
	City Bethesda	State MD	Zip Code 20814	Transaction ID : SA11AI.11803  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	50.00		
	Name of Employer (for Individual) First Colonies Anesthesia	Occup Physi	pation (for Individual) ician	Memo Item Payroll deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	∕ear-to-Date ▼ 350.00	
В.	Full Name of Individual (Last, First, Middle Initial) Barkinskiy, Maksim, , ,  Mailing Address 10021 Dickens Avenue	ganization Name	Date of Receipt  09 25 2017	
	City Bethesda	Zip Code 20814	Transaction ID : SA11AI.11905  Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) First Colonies Anesthesia	Occu Phys	pation (for Individual) ician	Memo Item Payroll deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 400.00	
<del></del>	Full Name of Individual (Last, First, Middle Initial) Barkinskiy, Maksim, , ,	) or Full Or	ganization Name	Date of Receipt
	Mailing Address 10021 Dickens Avenue	State	Tip Code	10 25 2017
	City Bethesda	Zip Code 20814	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) First Colonies Anesthesia Receipt For:	Memo Item Payroll deduction		
	Primary General Other (specify)			
s	UBTOTAL of Receipts This Page (optional)		<b>&gt;</b>	150.00

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

C.

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

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

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Barkinskiy, Maksim, , , Date of Receipt Mailing Address 10021 Dickens Avenue 11 2017 City State Zip Code Transaction ID: SA11AI.12110 MD Bethesda 20814 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Barkinskiy, Maksim, , , Date of Receipt Mailing Address 10021 Dickens Avenue 12 2017 City State Zip Code Transaction ID: SA11AI.12213 Bethesda MD 20814 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 550.00

Full Name of Individual (Last, First, Middle In Barkinskiy, Maksim, , ,	Date of Receipt		
Mailing Address 10021 Dickens Avenue			12 29 2017
City	State	Zip Code	Transaction ID : SA11AI.12316
Bethesda	MD	20814	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
First Colonies Anesthesia	Phys	cian	Payroll deduction
Receipt For: Primary General Other (specify)			
<u>-</u>			

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

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

150.00

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

	FOR LINE NUMBER:						PAGE	. 1	13	OF	 254
(check only one)											
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	Statements may not be sold or used by any per e name and address of any political committee	
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Ir Beck, Marc, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 16 Norris Run Court	07 25 2017	
City	State Zip Code MD 21136	Transaction ID : SA11AI.11715
Reisterstown	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
First Colonies Anesthesia	Physician	Payroll deduction
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	300.00	
Full Name of Individual (Last, First, Middle Ir Beck, Marc, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 16 Norris Run Court		08 25 2017
City	State Zip Code MD 21136	Transaction ID : SA11AI.11825
Reisterstown	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name of Individual (Last, First, Middle Ir Beck, Marc, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 16 Norris Run Court		09 25 2017
City	State Zip Code	Transaction ID : SA11AI.11927
Reisterstown	MD 21136	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	400.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	150.00
TOTAL This Period (last page this line number	only)	

Use separate schedule(s) for each category of the

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Beck, Marc, , , Date of Receipt Mailing Address 16 Norris Run Court 2017 City Zip Code State Transaction ID: SA11AI.12029 MD Reisterstown 21136 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Beck, Marc, , , Date of Receipt Mailing Address 16 Norris Run Court 2017 City State Zip Code Transaction ID: SA11AI.12132 MD Reisterstown 21136 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Beck, Marc, , , Date of Receipt Mailing Address 16 Norris Run Court 22 2017 City State Zip Code Transaction ID: SA11AI.12235 MD Reisterstown 21136 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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

		LINE	PAGE	•	15	OF	254			
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	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSOC	CIATES LLC POLITICA	L ACTION COMMITTEE					
Α.	Full Name of Individual (Last, First, Middle Init Beck, Marc, , ,  Mailing Address 16 Norris Run Court	Date of Receipt  12 29 2017							
	City	State	Zip Code	Transaction ID : SA11AI.12337					
	Reisterstown	MD	21136	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		50.00					
	Name of Employer (for Individual)	Occup	pation (for Individual)	Memo Item					
	First Colonies Anesthesia	Physi	ician	Payroll deduction					
	Receipt For:  Primary General  Other (specify) ▼								
В.	Full Name of Individual (Last, First, Middle Init Briggs, Jeffrey, , , Mailing Address 14952 Finegan Farm Rd	ial) or Full Orç	ganization Name	Date of Receipt  07 25 2017					
	City	State	Zip Code	Transaction ID : SA11AI.11673					
	Germantown	MD	20874	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		50.00					
	Name of Employer (for Individual) First Colonies Anesthesia	Occu	pation (for Individual) ician	Memo Item Payroll deduction					
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	/ear-to-Date ▼						
<del></del>	Full Name of Individual (Last, First, Middle Init Briggs, Jeffrey, , ,	ial) or Full Org	ganization Name	Date of Receipt					
	Mailing Address 14952 Finegan Farm Rd			08 25 2017					
	City Germantown	State MD	Zip Code 20874	Transaction ID : SA11AI.11784  Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		50.00					
	Name of Employer (for Individual) First Colonies Anesthesia	Occup Physi	oation (for Individual) cian	Memo Item Payroll deduction					
	Receipt For:  Primary General Other (specify)	Aggregate Y	/ear-to-Date ▼ 350.00						
H	SUBTOTAL of Receipts This Page (optional)		<u> </u>	150.00					
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NAME OF COMMITTEE (In Full)

FIRST COLONIES ANESTHESI	IA ASSOC	CIATES LLC POLITICA	L ACTION COMMITTEE					
Full Name of Individual (Last, First, Middle Initi	ial) or Full Org	anization Name						
A. Briggs, Jeffrey, , ,			Date of Receipt					
Mailing Address 14952 Finegan Farm Rd	0454-	Zip Code	09 25 2017					
City	State MD	Zip Code 20874	Transaction ID : SA11AI.11886					
Germantown	רוואו	20014	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.		50.00						
Name of Employer (for Individual) First Colonies Anesthesia	ation (for Individual) cian	Memo Item Payroll deduction						
Receipt For:	Aggregate Ye	ear-to-Date ▼	]					
Primary General Other (specify) ▼		400.00						
Full Name of Individual (Last, First, Middle Initi Briggs, Jeffrey, , ,	ial) or Full Org	anization Name	Date of Receipt					
Mailing Address 14952 Finegan Farm Rd			10 25 2017					
City								
Germantown	20874	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.		50.00						
Name of Employer (for Individual) First Colonies Anesthesia	Occup Physic	oation (for Individual) cian	Memo Item Payroll deduction					
Receipt For:	Aggregate Ye	ear-to-Date ▼						
Primary General  Other (specify) ▼	4	450.00						
Full Name of Individual (Last, First, Middle Initi	ial) or Full Org	nanization Name	Date of Receipt					
Mailing Address 14952 Finegan Farm Rd	04-4	7in Code	11 25 2017					
City Germantown	State MD	Zip Code 20874	Transaction ID : SA11AI.12091					
	.,,,,,	20017	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		50.00					
Name of Employer (for Individual) First Colonies Anesthesia	Memo Item Payroll deduction							
Receipt For:								
Primary General Other (specify)		500.00						
SUBTOTAL of Receipts This Page (optional)		<b>&gt;</b>	150.00					
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	d Statements may not be sold or used by any p the name and address of any political committe	
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITIC	CAL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle A. Briggs, Jeffrey, , ,  Mailing Address 14952 Finegan Farm Rd	Initial) or Full Organization Name	Date of Receipt
City	State Zip Code	12 22 2017  Transaction ID : SA11Al.12194
Germantown	MD 20874	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
First Colonies Anesthesia	Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name of Individual (Last, First, Middle B. Briggs, Jeffrey, , ,  Mailing Address 14952 Finegan Farm Rd	Initial) or Full Organization Name	Date of Receipt  12 29 2017
City	State Zip Code	Transaction ID : SA11AI.12297
Germantown	MD 20874	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  600.00	
Full Name of Individual (Last, First, Middle C. Buckley, Christopher, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 49 Boone Trail		07 25 2017
City Severna Park	State Zip Code 21146	Transaction ID : SA11AI.11750  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 450.00	]
	er only)	175.00

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F	OR	LINE	NU	MBER	:	PAGE	_ ′	18	OF	2	254
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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Buckley, Christopher, , , Date of Receipt Mailing Address 49 Boone Trail 2017 City Zip Code State Transaction ID: SA11AI.11858 MD Severna Park 21146 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 525.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Buckley, Christopher, , , Date of Receipt Mailing Address 49 Boone Trail 2017 City State Zip Code Transaction ID: SA11AI.11959 MD Severna Park 21146 Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 600.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Buckley, Christopher, , , Date of Receipt Mailing Address 49 Boone Trail 25 2017 City Zip Code State Transaction ID: SA11AI.12061 MD Severna Park 21146 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 675.00 Other (specify) 225.00 SUBTOTAL of Receipts This Page (optional).....

C.

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

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

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		13		14		15		16			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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Buckley, Christopher, , , Date of Receipt Mailing Address 49 Boone Trail 11 2017 City State Zip Code Transaction ID: SA11AI.12164 MD 21146 Severna Park Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Buckley, Christopher, , , Date of Receipt Mailing Address 49 Boone Trail 2017 City State Zip Code Transaction ID: SA11AI.12267 Severna Park MD 21146 Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify)

Other (specify)		025,00	
Full Name of Individual (Last, First, Middle In Buckley, Christopher, , ,	itial) or Full Orga	anization Name	Date of Receipt
Mailing Address 49 Boone Trail			12 29 2017
City	State	Zip Code	Transaction ID : SA11AI.12369
Severna Park	MD	21146	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		75.00
Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
First Colonies Anesthesia	Physici	an	Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate Ye	ar-to-Date ▼ 900.00	
NIDTOTAL of Descists This Description (authors)			225.00

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F	OR	LINE	NU	MBER	:	PAGE	2	20	OF	2	254
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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Bunker, John, , , Date of Receipt Mailing Address 15229 National Pike 2017 City Zip Code State Transaction ID: SA11AI.11753 MD Hagerstown 21740 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Bunker, John, , , Date of Receipt Mailing Address 15229 National Pike 2017 City State Zip Code Transaction ID: SA11AI.11861 MD Hagerstown 21740 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 350.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **C.** Bunker, John, , , Date of Receipt Mailing Address 15229 National Pike 25 2017 City State Zip Code Transaction ID: SA11AI.11962 MD Hagerstown 21740 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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		13		14		15		16		17

Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Bunker, John, , , Date of Receipt Mailing Address 15229 National Pike 2017 City Zip Code State Transaction ID: SA11AI.12064 MD Hagerstown 21740 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Bunker, John, , , Date of Receipt Mailing Address 15229 National Pike 2017 City State Zip Code Transaction ID: SA11AI.12167 MD Hagerstown 21740 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **C.** Bunker, John, , , Date of Receipt Mailing Address 15229 National Pike 22 2017 City State Zip Code Transaction ID: SA11AI.12270 MD Hagerstown 21740 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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		13		14		15		16			17

Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Bunker, John, , , Date of Receipt Mailing Address 15229 National Pike 2017 City Zip Code State Transaction ID: SA11AI.12372 MD Hagerstown 21740 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Cappuccino, Rachel, , , Date of Receipt Mailing Address 2811 Sommersby Rd. 10 2017 City State Zip Code Transaction ID : SA11AI.12057 MD Mount Airy 21771 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 225.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Cappuccino, Rachel, , , Date of Receipt Mailing Address 2811 Sommersby Rd. 25 2017 City State Zip Code Transaction ID: SA11AI.12160 MD Mount Airy 21771 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 100.00 SUBTOTAL of Receipts This Page (optional).....

Primary

Other (specify)

General

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

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

				MBER	:	PAGE	2	23	OF	:	254
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	X	11a		11b		11c		12			
		13		14		15		16			17

Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Cappuccino, Rachel, , , Date of Receipt Mailing Address 2811 Sommersby Rd. 2017 City Zip Code State Transaction ID: SA11AI.12263 MD Mount Airy 21771 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Cappuccino, Rachel, , , Date of Receipt Mailing Address 2811 Sommersby Rd. 2017 City State Zip Code Transaction ID: SA11AI.12365 MD Mount Airy 21771 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Charney, Donald, , , Date of Receipt Mailing Address 3707 Meadowhill Court 25 2017 City State Zip Code Transaction ID: SA11AI.11716 MD Phoenix 21131 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼

300.00

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

F	OR	LINE	NU	MBER	:	PAGE	2	24	OF		254
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	AME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA	A ASSC	CI	ATES LLC POLITICA	L ACTION COMMITTEE
<b>A</b>	ull Name of Individual (Last, First, Middle Initia Charney, Donald, , , ailing Address 3707 Meadowhill Court	al) or Full C	Orgar	nization Name	Date of Receipt
	ity	State		Zip Code	08 25 2017  Transaction ID : SA11AI.11826
F	Phoenix  EC ID number of contributing	MD	-	21131	Amount of Each Receipt this Period
_	deral political committee.  ame of Employer (for Individual)		upat	ion (for Individual)	Memo Item
_	rst Colonies Anesthesia eceipt For: Primary General Other (specify) ▼		ysicia Yea	r-to-Date ▼ 350.00	Payroll deduction
<b>B</b> . <u>C</u>	ull Name of Individual (Last, First, Middle Initia Charney, Donald, , , ailing Address 3707 Meadowhill Court	al) or Full C	Orgar	nization Name	Date of Receipt  09 25 2017
	ity hoenix	State MD		Zip Code 21131	Transaction ID : SA11AI.11928  Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C	_		50.00
	ame of Employer (for Individual) rst Colonies Anesthesia		cupat ysicia	ion (for Individual) an	Memo Item Payroll deduction
R	eceipt For:  Primary General  Other (specify)	Aggregate	Yea	r-to-Date ▼ 400.00	
	ull Name of Individual (Last, First, Middle Initia Charney, Donald, , ,	al) or Full C	Orgar	nization Name	Date of Receipt
_	ailing Address 3707 Meadowhill Court				10 25 2017
	ity Phoenix	State MD		Zip Code 21131	Transaction ID : SA11AI.12030  Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	С	Ξ		50.00
Fi	ame of Employer (for Individual) irst Colonies Anesthesia		upat sicia	ion (for Individual) n	Memo Item Payroll deduction
R	eceipt For: Primary General Other (specify)	Aggregate	Yea	r-to-Date ▼ 450.00	
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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Charney, Donald, , , Date of Receipt Mailing Address 3707 Meadowhill Court 2017 City Zip Code State Transaction ID: SA11AI.12133 MD 21131 Phoenix Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Charney, Donald, , , Date of Receipt Mailing Address 3707 Meadowhill Court 2017 City State Zip Code Transaction ID: SA11AI.12236 MD Phoenix 21131 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 550.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Charney, Donald, , , Date of Receipt Mailing Address 3707 Meadowhill Court 29 2017 City State Zip Code Transaction ID: SA11AI.12338 MD Phoenix 21131 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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		LINE			:	PAGE	2	26	OF	: :	254
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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Chary, Satyam, , , Date of Receipt Mailing Address 9 Alterwood Lane 2017 City Zip Code State Transaction ID: SA11AI.11717 MD Owings Mill 21117 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Chary, Satyam, , , Date of Receipt Mailing Address 9 Alterwood Lane 2017 City State Zip Code Transaction ID : SA11AI.11827 MD Owings Mill 21117 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 350.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Chary, Satyam, , , Date of Receipt Mailing Address 9 Alterwood Lane 25 2017 City State Zip Code Transaction ID: SA11AI.11929 MD Owings Mill 21117 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Chary, Satyam, , , Date of Receipt Mailing Address 9 Alterwood Lane 2017 City Zip Code State Transaction ID: SA11AI.12031 MD Owings Mill 21117 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Chary, Satyam, , , Date of Receipt Mailing Address 9 Alterwood Lane 2017 11 City State Zip Code Transaction ID: SA11AI.12134 MD Owings Mill 21117 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Chary, Satyam, , , Date of Receipt Mailing Address 9 Alterwood Lane 22 2017 City State Zip Code Transaction ID: SA11AI.12237 MD Owings Mill 21117 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Chary, Satyam, , , Date of Receipt Mailing Address 9 Alterwood Lane 2017 City Zip Code State Transaction ID: SA11AI.12339 MD Owings Mill 21117 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Chen, Edward, , , Date of Receipt Mailing Address 10209 Fleming Avenue 2017 City State Zip Code Transaction ID: SA11AI.11674 MD Bethesda 20814 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Chen, Edward, , , Date of Receipt Mailing Address 10209 Fleming Avenue 25 2017 City State Zip Code Transaction ID: SA11AI.11785 MD Bethesda 20814 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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NAME OF COMMITTEE (In Full)

#### NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Chen, Edward, , , Date of Receipt Mailing Address 10209 Fleming Avenue 2017 City Zip Code State Transaction ID: SA11AI.11887 MD Bethesda 20814 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Chen, Edward, , , Date of Receipt Mailing Address 10209 Fleming Avenue 10 2017 City State Zip Code Transaction ID: SA11AI.11989 MD Bethesda 20814 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 450.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Chen, Edward, , , Date of Receipt Mailing Address 10209 Fleming Avenue 25 2017 City State Zip Code Transaction ID: SA11AI.12092 MD Bethesda 20814 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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F	OR	LINE	NU	MBER	:	PAGE	. 3	30	OF	2	254
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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Chen, Edward, , , Date of Receipt Mailing Address 10209 Fleming Avenue 2017 City Zip Code State Transaction ID: SA11AI.12195 MD Bethesda 20814 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Chen, Edward, , , Date of Receipt Mailing Address 10209 Fleming Avenue 2017 City State Zip Code Transaction ID: SA11AI.12298 MD Bethesda 20814 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 600.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Chester, William, , , Date of Receipt Mailing Address 1906 Thurston Rd. 25 2017 City Zip Code State Transaction ID: SA11AI.11675 MD Dickerson 20842 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify)

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FEC Schedule A (Form 3X) Rev. 06/2016

150.00

federal political committee.

First Colonies Anesthesia

Other (specify)

Receipt For:

Primary

Name of Employer (for Individual)

General

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

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

F	OR	LINE	NU	MBER	:	PAGE	3	32	OF	2	254
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		13		14		15		16	;		17

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600.00

Occupation (for Individual)

Physician

Aggregate Year-to-Date ▼

Memo Item

Payroll deduction

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

F	OR	LINE	NU	MBER	:	PAGE	3	33	OF	 254
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	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Ir Chien, Derek, , ,  Mailing Address 13070 Twelve Hills Road	nitial) or Full Organization Name	Date of Receipt
City Clarksville	State Zip Code MD 21029	7 25 2017 Transaction ID : SA11AI.11676 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer (for Individual)  First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼	Occupation (for Individual) Physician  Aggregate Year-to-Date ▼  300.00	Payroll deduction
Full Name of Individual (Last, First, Middle Ir Chien, Derek, , ,	, , , , , , , , , , , , , , , , , , , ,	Date of Receipt
Mailing Address 13070 Twelve Hills Road  City Clarksville  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) First Colonies Anesthesia  Receipt For: Primary General	State Zip Code MD 21029  C  Occupation (for Individual) Physician  Aggregate Year-to-Date ▼	Transaction ID : SA11AI.11787  Amount of Each Receipt this Period  50.00  Memo Item  Payroll deduction
Other (specify) ▼  Full Name of Individual (Last, First, Middle Ir Chien, Derek, , ,  Mailing Address 13070 Twelve Hills Road		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Clarksville  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code 21029  C  Occupation (for Individual) Physician  Aggregate Year-to-Date ▼  400.00	Transaction ID : SA11AI.11889  Amount of Each Receipt this Period  50.00  Memo Item  Payroll deduction
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number	only)	

Name of Employer (for Individual)

General

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

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First Colonies Anesthesia

Receipt For:

Primary

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

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F	OR	LINE	NU	MBER	:	PAGE	3	34	OF		254
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Memo Item

Payroll deduction

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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Chien, Derek, , , Date of Receipt Mailing Address 13070 Twelve Hills Road 2017 City State Zip Code Transaction ID: SA11AI.11991 MD Clarksville 21029 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Chien, Derek, , , Date of Receipt Mailing Address 13070 Twelve Hills Road 11 2017 City State Zip Code Transaction ID: SA11AI.12094 Clarksville MD 21029 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee.

Occupation (for Individual)

Physician

Aggregate Year-to-Date ▼

Other (specify) ▼		500.00					
Full Name of Individual (Last, First, Middle In Chien, Derek, , ,	Date of Receipt						
Mailing Address 13070 Twelve Hills Road			12 22 2017				
City	State	Zip Code	Transaction ID : SA11AI.12197				
Clarksville	MD	21029	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		50.00				
Name of Employer (for Individual)	Occup	pation (for Individual)	Memo Item				
First Colonies Anesthesia	Physic	cian	Payroll deduction				
Receipt For: Primary General Other (specify)							
IIDTOTAL of Descripto This Descriptoral			150.00				

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or for commercial purposes, other than using			e to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOC	CIATES LLC POLITIC	AL ACTION COMMITTEE		
Full Name of Individual (Last, First, Middle Chien, Derek, , ,  Mailing Address 13070 Twelve Hills Road	Date of Receipt				
City Clarksville	State MD	Zip Code 21029	Transaction ID : SA11AI.12300  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		50.00		
Name of Employer (for Individual)  First Colonies Anesthesia  Receipt For:  □ Primary □ General  □ Other (specify) ▼	Phys	pation (for Individual) ician /ear-to-Date ▼ 600.00	Memo Item Payroll deduction		
Full Name of Individual (Last, First, Middle B. Ciolino, Charles, , ,  Mailing Address 11008 South Glen Road					
City Potomac	State MD	Zip Code 20854	Transaction ID : SA11AI.11693  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	50.00				
Name of Employer (for Individual) First Colonies Anesthesia	Occu Phys	pation (for Individual) ician	Memo Item Payroll deduction		
Receipt For:  Primary General  Other (specify) ▼	Primary General				
Full Name of Individual (Last, First, Middle C. Ciolino, Charles, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Ciolino, Charles, , ,				
Mailing Address 11008 South Glen Road	08 / 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City Potomac	State MD	Zip Code 20854	Transaction ID : SA11AI.11804  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	, and the second				
Name of Employer (for Individual) First Colonies Anesthesia Receipt For:  Primary  General	Physi	pation (for Individual) cian ⁄ear-to-Date ▼	Memo Item Payroll deduction		
Other (specify)					
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F	FOR LINE NUMBER:					PAGE	3	36	OF	2	254
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		13		14		15		16			17

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F	OR	LINE	NU	MBER	:	PAGE	3	37	OF	 254
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	Statements may not be sold or used by any per e name and address of any political committee is	
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle In Ciolino, Charles, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 11008 South Glen Road		12 22 2017
City	State Zip Code	Transaction ID : SA11AI.12214
Potomac	MD 20854	_ Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
First Colonies Anesthesia	Physician	Payroll deduction
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	550.00	
Full Name of Individual (Last, First, Middle In Ciolino, Charles, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 11008 South Glen Road		12 29 2017
City	State Zip Code	Transaction ID : SA11AI.12317
Potomac	MD 20854	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name of Individual (Last, First, Middle In Coore, Lincoln, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 11546 Fox River Drive		07 25 2017
City Ellicott City	State Zip Code 21042	Transaction ID : SA11AI.11725  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	450.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	175.00
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				MBER	:	PAGE	3	38	OF	:	254
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		4-1-4-1-4-1-1	
Full Name of Individual (Last, First, Middle In Coore, Lincoln, , ,	itial) or Full Or	ganization Name	Date of Receipt
Mailing Address 11546 Fox River Drive			10 25 2017
City	State	Zip Code	Transaction ID : SA11AI.12038
Ellicott City	MD	21042	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		75.00
Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
First Colonies Anesthesia	Phys	ician	Payroll deduction
Receipt For:	Aggregate `	Year-to-Date ▼	
Primary General Other (specify)		675.00	
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SUBTOTAL of Receipts This Page (optional).....

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225.00

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Coore, Lincoln, , , Date of Receipt Mailing Address 11546 Fox River Drive 2017 City Zip Code State Transaction ID: SA11AI.12141 MD Ellicott City 21042 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Coore, Lincoln, , , Date of Receipt Mailing Address 11546 Fox River Drive 2017 City State Zip Code Transaction ID: SA11AI.12244 Ellicott City MD 21042 Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 825.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Coore, Lincoln, , , Date of Receipt Mailing Address 11546 Fox River Drive 29 2017 City State Zip Code Transaction ID: SA11AI.12346 MD Ellicott City 21042 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) 225.00

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

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

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Coursey, Melvin, , , Date of Receipt Mailing Address 18720 Shremor Drive 2017 City State Zip Code Transaction ID: SA11AI.11677 MD Derwood 20855 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Coursey, Melvin, , , Date of Receipt Mailing Address 18720 Shremor Drive 25 2017 City State Zip Code Transaction ID: SA11AI.11788 MD 20855 Derwood Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 350.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Coursey, Melvin, , , Date of Receipt Mailing Address 18720 Shremor Drive 25 2017 City State Zip Code Transaction ID: SA11AI.11890 MD Derwood 20855 Amount of Each Receipt this Period FEC ID number of contributing C

rederai politicai committee.		
Name of Employer (for Individual) First Colonies Anesthesia Receipt For: Primary General Other (specify)	Occupation (for Individual) Physician  Aggregate Year-to-Date ▼  400.00	Memo Item Payroll deduction
SUBTOTAL of Receipts This Page (optional)	·····	150.00
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		FEC Schedule A (Form 3X) Rev. 06/2

50.00

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F	OR	LINE	NU	MBER	:	PAGE	_ 4	11	OF	2	254
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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Coursey, Melvin, , , Date of Receipt Mailing Address 18720 Shremor Drive 2017 City Zip Code State Transaction ID: SA11AI.11992 MD Derwood 20855 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Coursey, Melvin, , , Date of Receipt Mailing Address 18720 Shremor Drive 2017 City State Zip Code Transaction ID: SA11AI.12095 MD 20855 Derwood Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Coursey, Melvin, , , Date of Receipt Mailing Address 18720 Shremor Drive 22 2017 City State Zip Code Transaction ID: SA11AI.12198 MD Derwood 20855 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Coursey, Melvin, , , Date of Receipt Mailing Address 18720 Shremor Drive 2017 City Zip Code State Transaction ID: SA11AI.12301 MD Derwood 20855 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Cutler, Carlo, , , Date of Receipt Mailing Address 10909 Sasha Boulevard 10 2017 City State Zip Code Transaction ID: SA11AI.12049 MD Hagerstown 21742 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 225.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Cutler, Carlo, , , Date of Receipt Mailing Address 10909 Sasha Boulevard 25 2017 City State Zip Code Transaction ID: SA11AI.12152 MD Hagerstown 21742 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 100.00 SUBTOTAL of Receipts This Page (optional).....

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

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Cutler, Carlo, , , Date of Receipt Mailing Address 10909 Sasha Boulevard 2017 City Zip Code State Transaction ID: SA11AI.12255 MD Hagerstown 21742 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Cutler, Carlo, , , Date of Receipt Mailing Address 10909 Sasha Boulevard 2017 City State Zip Code Transaction ID: SA11AI.12357 MD Hagerstown 21742 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** DeLoach, Lauren, , , Date of Receipt Mailing Address 15114 Pepperridge Drive 25 2017 City Zip Code State Transaction ID: SA11AI.11743 MD Bowie 20721 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify)

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

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

	the name and address of any political committee	
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle DeLoach, Lauren, , ,  Mailing Address 15114 Pepperridge Drive	Initial) or Full Organization Name	Date of Receipt
Mailing Address 13114 Pepperhage Drive		08 25 2017
City	State Zip Code	Transaction ID : SA11AI.11851
Bowie	MD 20721	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
First Colonies Anesthesia	Physician	Payroll deduction
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name of Individual (Last, First, Middle 3. DeLoach, Lauren, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 15114 Pepperridge Drive		09 25 2017
City	State Zip Code	Transaction ID : SA11AI.11952
Bowie	MD 20721	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name of Individual (Last, First, Middle DeLoach, Lauren, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 15114 Pepperridge Drive		10 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code MD 20721	Transaction ID : SA11AI.12054
Bowie	MD 20721	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
First Colonies Anesthesia	Physician	Payroll deduction
Receipt For:    Primary   General	Aggregate Year-to-Date ▼	
Other (specify)	450.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line numb	per only)	

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name DeLoach, Lauren, , , Date of Receipt Mailing Address 15114 Pepperridge Drive 2017 City Zip Code State Transaction ID: SA11AI.12157 MD **Bowie** 20721 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. DeLoach, Lauren, , , Date of Receipt Mailing Address 15114 Pepperridge Drive 2017 City State Zip Code Transaction ID: SA11AI.12260 MD **Bowie** 20721 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 550.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** DeLoach, Lauren, , , Date of Receipt Mailing Address 15114 Pepperridge Drive 29 2017 City Zip Code State Transaction ID: SA11AI.12362 MD Bowie 20721 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)		I	,	I		,	_	15	50.00	)	
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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not ne name and address	be sold or used by any pe of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIAT	TES LLC POLITIC	AL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle II  Dugan, Karen, , Dr.,  Mailing Address 4107 Vickie Lynn Court	nitial) or Full Organiza	ation Name	Date of Receipt
			12 29 2017
City		p Code	Transaction ID : SA11AI.12393
Mt. Airy	MD	21771	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		20.00
Name of Employer (for Individual)	Occupation	(for Individual)	Memo Item
First Colonies Anesthsia	Physician		Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to	p-Date ▼ 220.00	
Full Name of Individual (Last, First, Middle In Emamhosseini, Ali, , ,	nitial) or Full Organiza	ation Name	Date of Receipt
Mailing Address 47788 Saulty Drive			07 25 2017
City		p Code 20165	Transaction ID : SA11AI.11699
Sterling	VA   2	20100	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation Physician	n (for Individual)	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to	o-Date ▼ 300.00	
Full Name of Individual (Last, First, Middle II Emamhosseini, Ali, , ,	nitial) or Full Organiza	ation Name	Date of Receipt
Mailing Address 47788 Saulty Drive			08 / 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		p Code	Transaction ID : SA11AI.11810
Sterling	VA 2	20165	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer (for Individual)	Occupation	(for Individual)	Memo Item
First Colonies Anesthesia	Physician		Payroll deduction
Receipt For:  Primary  General	Aggregate Year-to	o-Date ▼	
Other (specify)		350.00	
SUBTOTAL of Receipts This Page (optional)		•	120.00
TOTAL This Period (last page this line number	r only)		

C.

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

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

F	OR	LINE	NU	MBER	:	PAGE	_ 4	17	OF		254
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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Emamhosseini, Ali, , , Date of Receipt Mailing Address 47788 Saulty Drive 2017 City State Zip Code Transaction ID: SA11AI.11912 VA Sterling 20165 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Emamhosseini, Ali, , , Date of Receipt Mailing Address 47788 Saulty Drive 10 2017 City State Zip Code Transaction ID: SA11AI.12014 VA Sterling 20165 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General

Other (specify) V		430.00	
Full Name of Individual (Last, First, Middle In Emamhosseini, Ali, , ,	nitial) or Full Or	ganization Name	Date of Receipt
Mailing Address 47788 Saulty Drive			11 25 2017
City	State	Zip Code	Transaction ID : SA11AI.12117
Sterling	VA	20165	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
First Colonies Anesthesia	Phys	cian	Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate `	/ear-to-Date ▼ 500.00	

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C.

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

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

F	OR	LINE	NU	PAGE	_ 4	18	OF		254			
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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Emamhosseini, Ali, , , Date of Receipt Mailing Address 47788 Saulty Drive 2017 City State Zip Code Transaction ID: SA11AI.12220 VA Sterling 20165 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Emamhosseini, Ali, , , Date of Receipt Mailing Address 47788 Saulty Drive 12 2017 City State Zip Code Transaction ID: SA11AI.12323 VA Sterling 20165 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 600.00

		7	
Full Name of Individual (Last, First, Middle In Evans, Richard, , ,	nitial) or Full Orga	anization Name	Date of Receipt
Mailing Address 6436 West Langley Lane			07 25 2017
City	State	Zip Code	Transaction ID : SA11AI.11697
McLean	VA	22101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
First Colonies Anesthesia	Physic	ian	Payroll deduction
Receipt For:  Primary General Other (specify)			
			150.00

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Any information copied from such Reports and or for commercial purposes, other than using the			person for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOC	IATES LLC POLITIC	CAL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle II  Evans, Richard, , ,  Mailing Address 6436 West Langley Lane	nitial) or Full Orga	anization Name	Date of Receipt
	ı		08 25 2017
City McLean	State VA	Zip Code 22101	Transaction ID : SA11AI.11808
	V / \	22101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
First Colonies Anesthesia	Physic	ian	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 350.00	
Full Name of Individual (Last, First, Middle II  Evans, Richard, , ,	nitial) or Full Orga	anization Name	Date of Receipt
Mailing Address 6436 West Langley Lane			09 25 2017
City	State	Zip Code	Transaction ID : SA11AI.11910
McLean	VA	22101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupa Physic	ation (for Individual) sian	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 400.00	]
Full Name of Individual (Last, First, Middle In Evans, Richard, , ,	nitial) or Full Orga	anization Name	Date of Receipt
Mailing Address 6436 West Langley Lane			10 / 25 / 2017
City McLean	State VA	Zip Code 22101	Transaction ID : SA11AI.12012
	177		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual)		ation (for Individual)	Memo Item
First Colonies Anesthesia Receipt For:	Physici		Payroll deduction
Primary General	Aggregate Ye		1
Other (specify)		450.00	
SUBTOTAL of Receipts This Page (optional)		)	150.00
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F	OR	LINE	NU	<b>MBER</b>	:	PAGE		50	OF		254
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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Evans, Richard, , , Date of Receipt Mailing Address 6436 West Langley Lane 2017 City Zip Code State Transaction ID: SA11AI.12115 VA McI ean 22101 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Evans, Richard, , , Date of Receipt Mailing Address 6436 West Langley Lane 2017 City State Zip Code Transaction ID: SA11AI.12218 VA McLean 22101 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 550.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Evans, Richard, , , Date of Receipt Mailing Address 6436 West Langley Lane 29 2017 City Zip Code State Transaction ID: SA11AI.12321 VAMcLean 22101 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify)

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Ferkler, Philip, , Dr., Date of Receipt Mailing Address 4107 Vickie Lynn Court 2017 City Zip Code State Transaction ID: SA11AI.12394 MD Mt. Airy 21771 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Flax, Ronald, , , Date of Receipt Mailing Address 3715 Birchmere Court 10 2017 City State Zip Code Transaction ID: SA11AI.12032 MD Owings Mill 21117 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 225.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Flax, Ronald, , , Date of Receipt Mailing Address 3715 Birchmere Court 25 2017 City State Zip Code Transaction ID: SA11AI.12135 MD Owings Mill 21117 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 70.00 SUBTOTAL of Receipts This Page (optional).....

First Colonies Anesthesia

General

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

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

Primary

Receipt For:

C.

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

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

F	OR	LINE	NU	MBER	:	PAGE	52	OF	 254
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Payroll deduction

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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Flax, Ronald, , , Date of Receipt Mailing Address 3715 Birchmere Court 2017 City State Zip Code Transaction ID: SA11AI.12238 MD Owings Mill 21117 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Flax, Ronald, , , Date of Receipt Mailing Address 3715 Birchmere Court 2017 City State Zip Code Transaction ID: SA11AI.12340 Owings Mill MD 21117 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual)

Other (specify) $\blacktriangledown$	4	300.00	
Full Name of Individual (Last, First, Middle In Gabrielli, Tamara, , ,		anization Name	Date of Receipt
Mailing Address 504 Reserve Champion Drive	e 		07
City	State	Zip Code	Transaction ID : SA11AI.11755
Rockville	MD	20850	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
First Colonies Anesthesia	Physic	ian	Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 300.00	
			100.00

Physician

Aggregate Year-to-Date ▼

7 - - -

First Colonies Anesthesia

Other (specify)

General

Receipt For:

Primary

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

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

F	OR	LINE	NU	MBER	:	PAGE	53	OF	254			
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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Gabrielli, Tamara, , , Date of Receipt Mailing Address 504 Reserve Champion Drive 2017 City Zip Code State Transaction ID: SA11AI.11863 MD Rockville 20850 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Gabrielli, Tamara, , , Date of Receipt Mailing Address 504 Reserve Champion Drive 2017 City State Zip Code Transaction ID: SA11AI.11964 MD Rockville 20850 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 400.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Gabrielli, Tamara, , , Date of Receipt Mailing Address 504 Reserve Champion Drive 25 2017 City Zip Code State Transaction ID: SA11AI.12066 MD Rockville 20850 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual)

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450.00

Occupation (for Individual)

Physician

Aggregate Year-to-Date ▼

Payroll deduction

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

F	OR	LINE	NU	MBER	:	PAGE	54	OF	254			
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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Gabrielli, Tamara, , , Date of Receipt Mailing Address 504 Reserve Champion Drive 2017 City Zip Code State Transaction ID: SA11AI.12169 MD Rockville 20850 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Gabrielli, Tamara, , , Date of Receipt Mailing Address 504 Reserve Champion Drive 2017 City State Zip Code Transaction ID: SA11AI.12272 MD Rockville 20850 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 550.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Gabrielli, Tamara, , , Date of Receipt Mailing Address 504 Reserve Champion Drive 29 2017 City Zip Code State Transaction ID: SA11AI.12374 MD Rockville 20850 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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F	OR	LINE	NU	<b>MBER</b>	:	PAGE	 55	OF	 254
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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Gambon, Thomas, , , Date of Receipt Mailing Address 7700 Charleston Drive 2017 City Zip Code State Transaction ID: SA11AI.11765 MD Bethesda 20817 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Gambon, Thomas, , , Date of Receipt Mailing Address 7700 Charleston Drive 2017 City State Zip Code Transaction ID: SA11AI.11873 MD Bethesda 20817 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 350.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Gambon, Thomas, , , Date of Receipt Mailing Address 7700 Charleston Drive 25 2017 City State Zip Code Transaction ID: SA11AI.11974 MD Bethesda 20817 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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

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Name of Employer (for Individual)

General

First Colonies Anesthesia

Other (specify)

Receipt For:

Primary

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

F	OR	LINE	NU	MBER	:	PAGE	 57	OF	2	254
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300.00

Occupation (for Individual)

Physician

Aggregate Year-to-Date ▼

Memo Item

Payroll deduction

First Colonies Anesthesia

Other (specify)

General

Receipt For:

Primary

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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F	OR	LINE	NU	MBER	:	PAGE	 58	OF	2	254
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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Gathiuni, Raymond, , , Date of Receipt Mailing Address 540 Raven Avenue, #1474 2017 City Zip Code State Transaction ID: SA11AI.12087 MD Gaithersburg 20877 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Gathiuni, Raymond, , , Date of Receipt Mailing Address 540 Raven Avenue, #1474 2017 11 City State Zip Code Transaction ID: SA11AI.12190 MD Gaithersburg 20877 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 400.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Gathiuni, Raymond, , , Date of Receipt Mailing Address 540 Raven Avenue, #1474 22 2017 City Zip Code State Transaction ID: SA11AI.12293 MD Gaithersburg 20877 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual)

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450.00

Physician

Aggregate Year-to-Date ▼

Payroll deduction

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

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Gathiuni, Raymond, , , Date of Receipt Mailing Address 540 Raven Avenue, #1474 2017 City State Zip Code Transaction ID: SA11AI.12395 MD 20877 Gaithersburg Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) \(\nbeggreat{\psi}\) 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Grube, Steven, , , Date of Receipt Mailing Address 13895 Foxtower Road 2017 City Zip Code State Transaction ID: SA11AI.11756 Thurmont MD 21788 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee.

Name of Employer (for Individual) First Colonies Anesthesia	Occupation Physician	(for Individual)	Memo Item Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to	o-Date ▼ 300.00					
Full Name of Individual (Last, First, Middle Grube, Steven, , ,  Mailing Address 13895 Foxtower Road	Initial) or Full Organiza	ation Name	Date of Receipt				
City Thurmont  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) First Colonies Anesthesia Receipt For:  Primary General Other (specify)	MD 2	p Code 21788 (for Individual) 0-Date ▼	Transaction ID : SA11AI.11864  Amount of Each Receipt this Period  50.00  Memo Item  Payroll deduction				
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В.	Full Name of Individual (Last, First, Middle Init Grube, Steven, , ,	Date of Receipt						
	Mailing Address 13895 Foxtower Road	10 25 2017						
	City	State	Zip Code	Transaction ID : SA11Al.12067				
	Thurmont	MD	21788	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		50.00				
	Name of Employer (for Individual)	Occupa	tion (for Individual)	Memo Item				
	First Colonies Anesthesia	Physicia	an	Payroll deduction				
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 450.00					
_	Full Name of Individual (Last, First, Middle Init	nization Name						
C.	Grube, Steven, , ,			Date of Receipt				
	Mailing Address 13895 Foxtower Road	11 25 2017						

City State Zip Code Transaction ID: SA11AI.12170 MD Thurmont 21788 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify)

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Grube, Steven, , , Date of Receipt Mailing Address 13895 Foxtower Road 2017 City Zip Code State Transaction ID: SA11AI.12273 MD Thurmont 21788 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Grube, Steven, , , Date of Receipt Mailing Address 13895 Foxtower Road 2017 City State Zip Code Transaction ID: SA11AI.12375 MD **Thurmont** 21788 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 600.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Hairston, Keith, , , Date of Receipt Mailing Address 12312 Highstakes Drive 25 2017 City State Zip Code Transaction ID: SA11AI.11720 MD Reisterstown 21136 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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F	OR	LINE	NU	IMBER	:	PAGE	. (	62	OF	2	254	
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		13		14		15		16			17	

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150.00

Name of Employer (for Individual)

General

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

First Colonies Anesthesia

Receipt For:

C.

Primary

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

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F	OR	LINE	NU	MBER	:	PAGE	- (	33	OF		254		
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Memo Item

Payroll deduction

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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hairston, Keith, , , Date of Receipt Mailing Address 12312 Highstakes Drive 11 2017 City State Zip Code Transaction ID: SA11AI.12136 MD Reisterstown 21136 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Hairston, Keith, , , Date of Receipt Mailing Address 12312 Highstakes Drive 2017 City State Zip Code Transaction ID: SA11AI.12239 Reisterstown MD 21136 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee.

Occupation (for Individual)

Physician

Aggregate Year-to-Date ▼

Other (specify) ▼	4	550.00	
Full Name of Individual (Last, First, Middle Ini Hairston, Keith, , ,  Mailing Address 12312 Highstakes Drive  City	tial) or Full Org	anization Name	Date of Receipt  12 29 2017  Transaction ID: SA11AI.12341
Reisterstown  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)	МД	21136  ation (for Individual)	Amount of Each Receipt this Period  50.00  Memo Item
First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼  600.00	Payroll deduction
SUBTOTAL of Receipts This Page (optional)			150.00

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

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Reisterstown	MD	21136	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		50.00				
Name of Employer (for Individual)	Occup	oation (for Individual)	Memo Item				
First Colonies Anesthesia	Physi	cian	Payroll deduction				
Receipt For: Primary General Other (specify)	Aggregate \	/ear-to-Date ▼ 400.00					
SUBTOTAL of Receipts This Page (optional)		<b>&gt;</b>	150.00				
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			FEC Schedule A (Form 3X) Rev. 06/2				

First Colonies Anesthesia

Other (specify)

General

Receipt For:

Primary

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

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550.00

Occupation (for Individual)

Physician

Aggregate Year-to-Date ▼

Payroll deduction

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

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	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSO	CIATES LLC POLITICA	L ACTION COMMITTEE
Α.	Full Name of Individual (Last, First, Middle Init Hairston-Jones, Shelly, , , Mailing Address 12312 Highstakes Drive	ial) or Full Or	ganization Name	Date of Receipt
	City	State	Zip Code	12 29 2017 Transaction ID : SA11AI.12368
	Reisterstown	MD	21136	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
	First Colonies Anesthesia	Phys	ician	Payroll deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate \	/ear-to-Date ▼ 600.00	
В.	Full Name of Individual (Last, First, Middle Init Hanna, John, , , Mailing Address 9310 Leigh Mill Court	ial) or Full Or	ganization Name	Date of Receipt  07
	City	State	Zip Code	Transaction ID : SA11AI.11706
	Great Falls	VA	22066	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) First Colonies Anesthesia	Occu Phys	pation (for Individual) sician	Memo Item Payroll deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate \	/ear-to-Date ▼	
<del>-</del>	Full Name of Individual (Last, First, Middle Init Hanna, John, , ,	ial) or Full Or	ganization Name	Date of Receipt
	Mailing Address 9310 Leigh Mill Court			08 25 2017
	City Great Falls	State VA	Zip Code 22066	Transaction ID : SA11AI.11816  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) First Colonies Anesthesia	Occu Physi	pation (for Individual) ician	Memo Item Payroll deduction
	Receipt For: Primary General Other (specify)	Aggregate \	/ear-to-Date ▼ 350.00	
s	SUBTOTAL of Receipts This Page (optional)		<b>•</b>	150.00
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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hanna, John, , , Date of Receipt Mailing Address 9310 Leigh Mill Court 2017 City Zip Code State Transaction ID: SA11AI.11918 VA **Great Falls** 22066 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Hanna, John, , , Date of Receipt Mailing Address 9310 Leigh Mill Court 10 2017 City State Zip Code Transaction ID: SA11AI.12020 **Great Falls** VA 22066 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 450.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Hanna, John, , , Date of Receipt Mailing Address 9310 Leigh Mill Court 25 2017 City State Zip Code Transaction ID: SA11AI.12123 VA**Great Falls** 22066 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hessinger, Glen, , , Date of Receipt Mailing Address 8101 Ruxton Crossing Road 2017 City State Zip Code Transaction ID: SA11AI.12137 MD Towson 21204 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) В

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В.	Full Name of Individual (Last, First, Middle In Hessinger, Glen, , ,	itial) or Full Orga	anization Name	Date of Receipt
	Mailing Address 8101 Ruxton Crossing Road			12 22 2017
	City	State	Zip Code	Transaction ID : SA11AI.12240
	Towson	MD	21204	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) First Colonies Anesthesia	Occup Physic	ation (for Individual) cian	Memo Item Payroll deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 550.00	
C.		itial) or Full Org	anization Name	Date of Receipt
	Mailing Address 8101 Ruxton Crossing Road			12 29 2017

City State Zip Code Transaction ID : SA11AI.12342 MD Towson 21204 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify)

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NAME OF COMMITTEE (In Full)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  A. Hogarth, Jean-Max, , ,	
A. Hogarth, Jean-Max, , ,  Mailing Address 1614 Randallwood Ct	Date of Receipt  07 25 2017
City State Zip Code Jarretsville MD 21084	Transaction ID : SA11AI.11722  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  Occupation (for Individual)	50.00 Memo Item
Name of Employer (for Individual)       Occupation (for Individual)         First Colonies Anesthesia       Physician         Receipt For:       Aggregate Year-to-Date ▼	Payroll deduction
Primary General Other (specify) ▼ 30	00.00
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  B. Hogarth, Jean-Max, , ,  Mailing Address 1614 Randallwood Ct	Date of Receipt
City State Zip Code Jarretsville MD 21084	Transaction ID : SA11AI.11832  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	50.00
Name of Employer (for Individual) First Colonies Anesthesia  Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼  Aggregate Year-to-Date ▼  38	50.00
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  C. Hogarth, Jean-Max, , ,	Date of Receipt
Mailing Address 1614 Randallwood Ct  City State Zip Code	09 / 25 / 2017 Transaction ID : SA11AI.11933
Jarretsville MD 21084	Amount of Each Receipt this Period  50.00
federal political committee.  Name of Employer (for Individual)  Occupation (for Individual)	Memo Item
First Colonies Anesthesia Physician  Receipt For:  Primary General Aggregate Year-to-Date ▼	Payroll deduction
Other (specify)  40  SUBTOTAL of Receipts This Page (optional)	

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F	OR	LINE	NU	MBER	:	PAGE	7	72	OF	 254
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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCI	ATES LLC POLITIC	AL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hogarth, Jean-Max, , ,  Mailing Address 1614 Randallwood Ct			Date of Receipt
			10 25 2017
City  Jarretsville	State MD	Zip Code 21084	Transaction ID : SA11AI.12035
	IVID	21004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer (for Individual)	ne of Employer (for Individual)  Occupation (for Individual)		
First Colonies Anesthesia	esthesia Physician		Payroll deduction
Receipt For:	Aggregate rear-to-bate v		
Primary General  Other (specify) ▼			
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  Hogarth, Jean-Max, , ,			Date of Receipt
Mailing Address 1614 Randallwood Ct	los-r	Zz. O. d.	11 25 2017
City	State	Zip Code	Transaction ID : SA11AI.12138
Jarretsville	INID	21084	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician		Memo Item Payroll deduction
Receipt For:	Aggregate Yea	ur-to-Date ▼	
Primary General Other (specify) ▼	4	500.00	
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  C. Hogarth, Jean-Max, , ,			Date of Receipt
Mailing Address 1614 Randallwood Ct			12 22 / 2017
City	State	Zip Code	Transaction ID : SA11AI.12241
Jarretsville	MD	21084	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual)  Occupation (for Individual)			Memo Item
First Colonies Anesthesia	Physicia	in .	Payroll deduction
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Primary General Other (specify)			
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Name of Employer (for Individual)

First Colonies Anesthesia

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F	OR	LINE	NU	MBER	:	PAGE	7	74	OF	- 2	254
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Primary General Other (specify)	Aggregate Year-to-Date ▼ 450.00								
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Occupation (for Individual)

Physician

Memo Item

Payroll deduction

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hong, Sung-Soo,,, Date of Receipt Mailing Address 100 Croydon Road 11 2017 City Zip Code State Transaction ID: SA11AI.12139 MD **Baltimore** 21212 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Hong, Sung-Soo, , , Date of Receipt Mailing Address 100 Croydon Road 2017 City State Zip Code Transaction ID: SA11AI.12242 MD **Baltimore** 21212 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 550.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Hong, Sung-Soo, , , Date of Receipt Mailing Address 100 Croydon Road 29 2017 City State Zip Code Transaction ID: SA11AI.12344 MD **Baltimore** 21212 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify)

FEC	Schedule	Α	(Form	3X)	Rev.	06/2016

150.00

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F	OR	LINE	NU	MBER	:	PAGE	7	76	OF	 254
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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)

FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE

FIRST COLONIES ANESTHES	SIA ASSOCI	ATES LLC POLITICA	L ACTION COMMITTEE
Full Name of Individual (Last, First, Middle In Hough, Stuart, , ,	itial) or Full Orgar	nization Name	Date of Receipt
Mailing Address 9110 Travener Circle			07 25 2017
City Frederick	State MD	Zip Code 21704	Transaction ID : SA11AI.11678  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		75.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupat Physicia	ion (for Individual) an	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Yea	ur-to-Date ▼ 450.00	
Full Name of Individual (Last, First, Middle In Hough, Stuart, , ,  Mailing Address 9110 Travener Circle	itial) or Full Orgar	nization Name	Date of Receipt
City Frederick	State MD	Zip Code 21704	08 25 2017  Transaction ID : SA11AI.11789  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		75.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupat Physicia	tion (for Individual) an	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Yea	r-to-Date ▼ 525.00	
Full Name of Individual (Last, First, Middle In Hough, Stuart, , ,  Mailing Address 9110 Travener Circle	itial) or Full Orgar	nization Name	Date of Receipt
City Frederick	State MD	Zip Code 21704	09 25 2017  Transaction ID : SA11AI.11891  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		75.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupat Physicia	ion (for Individual) n	Memo Item Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate Yea	r-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optional)		<b>&gt;</b>	225.00
TOTAL This Period (last page this line number	only)		

Name of Employer (for Individual)

General

First Colonies Anesthesia

Receipt For:

Primary

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F	OR	LINE	NU	MBER	:	PAGE	7	77	OF	2	254
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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hough, Stuart, , , Date of Receipt Mailing Address 9110 Travener Circle 2017 City Zip Code State Transaction ID: SA11AI.11993 MD Frederick 21704 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 675.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Hough, Stuart, , , Date of Receipt Mailing Address 9110 Travener Circle 2017 City State Zip Code Transaction ID: SA11AI.12096 MD Frederick 21704 Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 750.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Hough, Stuart, , , Date of Receipt Mailing Address 9110 Travener Circle 22 2017 City Zip Code State Transaction ID: SA11AI.12199 MD Frederick 21704 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee.

Other (specify)	022.00										
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825 00

Occupation (for Individual)

Physician

Aggregate Year-to-Date ▼

Memo Item

Payroll deduction

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F	OR	LINE	NU	MBER	:	PAGE	7	78	OF	: :	254
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	X	11a		11b		11c		12			
		13		14		15		16			17

Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hough, Stuart, , , Date of Receipt Mailing Address 9110 Travener Circle 2017 City Zip Code State Transaction ID: SA11AI.12302 MD Frederick 21704 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Hsiao, Leo, , , Date of Receipt Mailing Address 115 Meridian Lane 2017 City State Zip Code Transaction ID: SA11AI.11731 MD Towson 21286 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **C.** Hsiao, Leo, , , Date of Receipt Mailing Address 115 Meridian Lane 25 2017 City State Zip Code Transaction ID: SA11AI.11841 MD Towson 21286 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 175.00 SUBTOTAL of Receipts This Page (optional).....

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

F	OR	LINE	NU	MBER	:	PAGE	7	79	OF	2	254
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		13		14		15		16			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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hsiao, Leo, , , Date of Receipt Mailing Address 115 Meridian Lane 2017 City Zip Code State Transaction ID: SA11AI.11942 MD Towson 21286 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Hsiao, Leo, , , Date of Receipt Mailing Address 115 Meridian Lane 10 2017 City State Zip Code Transaction ID: SA11AI.12044 MD Towson 21286 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 450.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **C.** Hsiao, Leo, , , Date of Receipt Mailing Address 115 Meridian Lane 25 2017 City State Zip Code Transaction ID: SA11AI.12147 MD Towson 21286 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 150.00

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

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		ittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLIT	ICAL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle In Hsiao, Leo, , ,  Mailing Address 115 Meridian Lane	nitial) or Full Organization Name	Date of Receipt
		12 22 2017
City Towson	State Zip Code MD 21286	Transaction ID : SA11AI.12250
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  50.00
Name of Employer (for Individual)  First Colonies Anesthesia	Memo Item Payroll deduction	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name of Individual (Last, First, Middle In Hsiao, Leo, , ,  Mailing Address 115 Meridian Lane	nitial) or Full Organization Name	Date of Receipt
City Towson	Transaction ID : SA11AI.12352  Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	50.00	
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name of Individual (Last, First, Middle In Isaac, Sean, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 7 Starlight Farm Drive		07 25 2017
City Phoenix	State Zip Code 21131	Transaction ID : SA11AI.11730  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia Receipt For:	Occupation (for Individual) Physician	Memo Item Payroll deduction
Primary General Other (specify)	Aggregate Year-to-Date ▼  300.00	
SUBTOTAL of Receipts This Page (optional)		150.00
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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Isaac, Sean, , , Date of Receipt Mailing Address 7 Starlight Farm Drive 2017 City Zip Code State Transaction ID: SA11AI.11840 MD 21131 Phoenix Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Isaac, Sean, , , Date of Receipt Mailing Address 7 Starlight Farm Drive 2017 City State Zip Code Transaction ID: SA11AI.11941 MD Phoenix 21131 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 400.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Isaac, Sean, , , Date of Receipt Mailing Address 7 Starlight Farm Drive 25 2017 City State Zip Code Transaction ID: SA11AI.12043 MD Phoenix 21131 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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

F	FOR LINE NUMBER:					PAGE	: 8	32	OF	2	254
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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Isaac, Sean, , , Date of Receipt Mailing Address 7 Starlight Farm Drive 2017 City Zip Code State Transaction ID: SA11AI.12146 MD 21131 Phoenix Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Isaac, Sean, , , Date of Receipt Mailing Address 7 Starlight Farm Drive 2017 City State Zip Code Transaction ID: SA11AI.12249 MD Phoenix 21131 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 550.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Isaac, Sean, , , Date of Receipt Mailing Address 7 Starlight Farm Drive 29 2017 City Zip Code State Transaction ID: SA11AI.12351 MD Phoenix 21131 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify)

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or	for commercial purposes, other than using the			rson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSO	CIATES LLC POLITICA	AL ACTION COMMITTEE
A.	Full Name of Individual (Last, First, Middle Init Jagannath, Supriya, , ,	ial) or Full Or	ganization Name	Date of Receipt
	Mailing Address 4109 Celtic Way			10 25 2017
	City	State	Zip Code	Transaction ID : SA11AI.12079
	Frederick	MD	21704	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		25.00	
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
	First Colonies Anesthesia	Phys		Payroll deduction
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate \	Year-to-Date ▼	
	Full Name of Individual (Last, First, Middle Init	ial) or Full Or	9-1-4-1-4-1-1	
	Jagannath, Supriya, , ,	iai) or ruii or	ganization Name	Date of Receipt
	Mailing Address 4109 Celtic Way			11 25 2017
	City	Transaction ID : SA11AI.12182		
	Frederick	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С	25.00	
	Name of Employer (for Individual) First Colonies Anesthesia		pation (for Individual) sician	Memo Item Payroll deduction
	Receipt For:	Aggregate \	Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
	Full Name of Individual (Last, First, Middle Init Jagannath, Supriya, , ,	ial) or Full Or	ganization Name	Date of Receipt
	Mailing Address 4109 Celtic Way			12 22 / 2017
	City Frederick	State MD	Zip Code 21704	Transaction ID : SA11AI.12285  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
	First Colonies Anesthesia	Phys	. ,	Payroll deduction
	Receipt For: Primary General Other (specify)	Aggregate \	Year-to-Date ▼ 275.00	
	JBTOTAL of Receipts This Page (optional)		<b>&gt;</b>	75.00

C.

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

F	FOR LINE NUMBER:					PAGE	: 8	34	OF	2	254
(0	(check only one)										
	X	11a		11b		11c		12			
		13		14		15		16	;		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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Jagannath, Supriya, , , Date of Receipt Mailing Address 4109 Celtic Way 2017 City State Zip Code Transaction ID: SA11AI.12387 MD Frederick 21704 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Johnson, David, , , Date of Receipt Mailing Address 5506 Bootjack Drive 07 2017 City State Zip Code Transaction ID: SA11AI.11757 Frederick MD 21702 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00

	1	4 4	
Full Name of Individual (Last, First, Middle In Johnson, David, , ,	Date of Receipt		
Mailing Address 5506 Bootjack Drive	08 25 2017		
City	State	Zip Code	Transaction ID : SA11AI.11865
Frederick	MD	21702	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
First Colonies Anesthesia	Physic	ian	Payroll deduction
Receipt For: Primary General Other (specify)			

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

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

125.00

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

F	FOR LINE NUMBER:					PAGE	35	OF	 254
(0	(check only one)								
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		13		14		15	16	;	17

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NAME OF COMMITTEE (In Full)

$\left. \right\rangle$	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA	A ASSOC	IATES LLC POLITICAI	_ ACTION COMMITTEE			
Α.	Full Name of Individual (Last, First, Middle Initia Johnson, David, , ,  Mailing Address 5506 Bootjack Drive	l) or Full Org	anization Name	Date of Receipt			
	City Frederick	State MD	Zip Code 21702	09 25 2017  Transaction ID : SA11AI.11966  Amount of Each Respire this Period			
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 50.00			
	Name of Employer (for Individual) First Colonies Anesthesia Receipt For:	Occup Physic Aggregate Ye		Memo Item Payroll deduction			
	Primary						
В.	Full Name of Individual (Last, First, Middle Initia Johnson, David, , , Mailing Address 5506 Bootjack Drive	anization Name	Date of Receipt  10 25 2017				
	City Frederick	State Zip Code ck MD 21702					
	FEC ID number of contributing federal political committee.	С		50.00			
	Name of Employer (for Individual) First Colonies Anesthesia	Occup Physic	ation (for Individual) cian	Memo Item Payroll deduction			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 450.00				
<del>С</del> .	Full Name of Individual (Last, First, Middle Initial Johnson, David, , ,	l) or Full Org	anization Name	Date of Receipt			
	Mailing Address 5506 Bootjack Drive  City	State	Zip Code	11 25 2017  Transaction ID : SA11AI.12171			
	Frederick FEC ID number of contributing	MD C	21702	Amount of Each Receipt this Period			
	federal political committee.	50.00 Memo Item					
	Name of Employer (for Individual) First Colonies Anesthesia Receipt For:	ation (for Individual) ian ear-to-Date ▼	Payroll deduction				
	Primary General Other (specify)						
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TOTAL This Period (last page this line number only).....

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

F						PAGE	36	OF		254
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	X	11a		11b		11c	12			
		13		14		15	16	;		17

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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES		CAL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Init	tial) or Full Organization Name	Date of Receipt
Mailing Address 5506 Bootjack Drive		12 22 2017
City Frederick	State Zip Code MD 21702	Transaction ID : SA11AI.12274  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia	Memo Item Payroll deduction	
Receipt For:  Primary General  Other (specify) ▼		
Full Name of Individual (Last, First, Middle Init  Johnson, David, , ,  Mailing Address 5506 Bootjack Drive	tial) or Full Organization Name	Date of Receipt
City Frederick	Transaction ID : SA11Al.12376  Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	50.00	
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  600.00	
Full Name of Individual (Last, First, Middle Init	tial) or Full Organization Name	Date of Receipt
Mailing Address 6414 Tilden Lane		07 25 2017
City Rockville	State Zip Code MD 20852	Transaction ID : SA11AI.11698  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia	Memo Item Payroll deduction	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional)		150.00

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

First Colonies Anesthesia

Other (specify)

General

Receipt For:

Primary

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

_		NUMBER	: PAGE	87 OF	254
(ch	eck only	one)			
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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Johnson, Laron, , , Date of Receipt Mailing Address 6414 Tilden Lane 2017 City Zip Code State Transaction ID: SA11AI.11809 MD Rockville 20852 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Johnson, Laron, , , Date of Receipt Mailing Address 6414 Tilden Lane 2017 City State Zip Code Transaction ID: SA11AI.11911 MD Rockville 20852 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 400.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **C.** Johnson, Laron, , , Date of Receipt Mailing Address 6414 Tilden Lane 25 2017 City Zip Code State Transaction ID: SA11AI.12013 MD Rockville 20852 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual)

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450.00

Physician

Aggregate Year-to-Date ▼

Payroll deduction

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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name of Individual (Last, First, Middle In Johnson, Laron, , ,  Mailing Address 6414 Tilden Lane	nitial) or Full Organization Name	Date of Receipt
City	State Zip Code	11 25 2017 Transaction ID : SA11AI.12116
Rockville	MD 20852	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
First Colonies Anesthesia	Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name of Individual (Last, First, Middle In Johnson, Laron, , ,  Mailing Address 6414 Tilden Lane	nitial) or Full Organization Name	Date of Receipt
<del></del>		12 22 2017
City	State Zip Code	Transaction ID : SA11AI.12219
Rockville	MD 20852	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name of Individual (Last, First, Middle In Johnson, Laron, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 6414 Tilden Lane		12 29 2017
City	State Zip Code	Transaction ID : SA11AI.12322
Rockville	MD 20852	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	600.00	
SUBTOTAL of Receipts This Page (optional)		150.00
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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kamdar, Faisal, , , Date of Receipt Mailing Address 1626 Irvin St. 2017 City Zip Code State Transaction ID: SA11AI.11694 VA Vienna 22182 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Kamdar, Faisal, , , Date of Receipt Mailing Address 1626 Irvin St. 2017 City State Zip Code Transaction ID: SA11AI.11805 VA Vienna 22182 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 350.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Kamdar, Faisal, , , Date of Receipt Mailing Address 1626 Irvin St. 25 2017 City Zip Code State Transaction ID: SA11AI.11907 VAVienna 22182 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kamdar, Faisal, , , Date of Receipt Mailing Address 1626 Irvin St. 2017 City Zip Code State Transaction ID: SA11AI.12009 VA Vienna 22182 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Kamdar, Faisal, , , Date of Receipt Mailing Address 1626 Irvin St. 2017 11 City State Zip Code Transaction ID: SA11AI.12112 VA Vienna 22182 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Kamdar, Faisal, , , Date of Receipt Mailing Address 1626 Irvin St. 22 2017 City Zip Code State Transaction ID: SA11AI.12215 VAVienna 22182 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kamdar, Faisal, , , Date of Receipt Mailing Address 1626 Irvin St. 2017 City Zip Code State Transaction ID: SA11AI.12318 VA Vienna 22182 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Kaufman, James, , , Date of Receipt Mailing Address 7514 Arrowood Road 2017 City State Zip Code Transaction ID: SA11AI.11707 MD Bethesda 20817 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Kaufman, James, , , Date of Receipt Mailing Address 7514 Arrowood Road 25 2017 City State Zip Code Transaction ID: SA11AI.11817 MD Bethesda 20817 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kaufman, James, , , Date of Receipt Mailing Address 7514 Arrowood Road 2017 City Zip Code State Transaction ID: SA11AI.11919 MD Bethesda 20817 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Kaufman, James, , , Date of Receipt Mailing Address 7514 Arrowood Road 10 2017 City State Zip Code Transaction ID: SA11AI.12021 MD Bethesda 20817 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 450.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Kaufman, James, , , Date of Receipt Mailing Address 7514 Arrowood Road 25 2017 City State Zip Code Transaction ID: SA11AI.12124 MD Bethesda 20817 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kaufman, James, , , Date of Receipt Mailing Address 7514 Arrowood Road 2017 City Zip Code State Transaction ID: SA11AI.12227 MD Bethesda 20817 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Kaufman, James, , , Date of Receipt Mailing Address 7514 Arrowood Road 2017 City State Zip Code Transaction ID: SA11AI.12330 MD Bethesda 20817 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 600.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Kenol, Cynthia, , , Date of Receipt Mailing Address 6579 Prestwick Drive 25 2017 City State Zip Code Transaction ID: SA11AI.11679 MD Highland 20777 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 200.00 SUBTOTAL of Receipts This Page (optional).....

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kenol, Cynthia, , , Date of Receipt Mailing Address 6579 Prestwick Drive 2017 State City Zip Code Transaction ID: SA11AI.11790 MD Highland 20777 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Kenol, Cynthia, , , Date of Receipt Mailing Address 6579 Prestwick Drive 2017 City State Zip Code Transaction ID: SA11AI.11892 MD Highland 20777 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 800.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Kenol, Cynthia, , , Date of Receipt Mailing Address 6579 Prestwick Drive 25 2017 City State Zip Code Transaction ID: SA11AI.11994 MD Highland 20777 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional).....

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kenol, Cynthia, , , Date of Receipt Mailing Address 6579 Prestwick Drive 2017 State City Zip Code Transaction ID: SA11AI.12097 MD Highland 20777 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Kenol, Cynthia, , , Date of Receipt Mailing Address 6579 Prestwick Drive 2017 City State Zip Code Transaction ID: SA11AI.12200 MD Highland 20777 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1100.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Kenol, Cynthia, , , Date of Receipt Mailing Address 6579 Prestwick Drive 29 2017 City State Zip Code Transaction ID: SA11AI.12303 MD Highland 20777 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional).....

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NAME OF COMMITTEE (In Full)

FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE

Full Name of Individual (Last First Middle Initial) or Full Organization Name

Full Name of Individual (Last, First, Midd Kim, HaengShik, , ,	lle Initial) or Full Org	ganization Name	Date of Receipt			
Mailing Address 11429 Twining Lane			07 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City	State	Zip Code	Transaction ID : SA11AI.11695			
Potomac	MD	20854	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	50.00					
Name of Employer (for Individual)	Memo Item					
First Colonies Anesthesia	Physic	cian	Payroll deduction			
Receipt For:	Aggregate Y	ear-to-Date ▼				
Primary General Other (specify) ▼		300.00				
Full Name of Individual (Last, First, Midd Kim, HaengShik, , ,	lle Initial) or Full Org	ganization Name	Date of Receipt			
Mailing Address 11429 Twining Lane	08 25 2017					
City	State	Zip Code	Transaction ID : SA11AI.11806			
Potomac	MD	20854	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		50.00			
Name of Employer (for Individual) First Colonies Anesthesia	Occup Physi	oation (for Individual) ician	Memo Item Payroll deduction			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 350.00				
Full Name of Individual (Last, First, Midd Kim, HaengShik, , ,	lle Initial) or Full Org	ganization Name	Date of Receipt			
Mailing Address 11429 Twining Lane		_	09 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City	State	Zip Code	Transaction ID : SA11AI.11908			
Potomac	MD	20854	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		50.00			
Name of Employer (for Individual) First Colonies Anesthesia	Occup Physic	pation (for Individual)	Memo Item Payroll deduction			
Receipt For: Primary General Other (specify)	Aggregate Y	ear-to-Date ▼				
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federal political committee.

Name of Employer (for Individual)

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

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

FOR LINE NUMBER:						PAGE		98	OF	 254
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		13		14		15		16	;	17

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Name of Employer (for individual)		Occupation (ioi individual)	
First Colonies Anesthesia		Physician	Payroll deduction
Receipt For: Primary General Other (specify)	Aggre	gate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)		·····	150.00
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			FEC Schedule A (Form 3X) Rev. 06/

Occupation (for Individual)

C

50.00

Memo Item

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F	FOR LINE NUMBER:						. (	99	OF	2	254
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	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESI	IA ASSO	CIATES LLC POLITIC	CAL ACTION COMMITTEE	
Α.	Full Name of Individual (Last, First, Middle Initi Kim, James, , ,  Mailing Address 7115 Kings Point Way  City	ial) or Full O	rganization Name	Date of Receipt    M	
	Columbia	MD	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	50.00			
	Name of Employer (for Individual)	Occi	upation (for Individual)	Memo Item	
	First Colonies Anesthesia	Phys	sician	Payroll deduction	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 400.00		
В.	Full Name of Individual (Last, First, Middle Initi Kim, James, , ,  Mailing Address 7115 Kings Point Way	ial) or Full O	rganization Name	Date of Receipt	
				10 25 2017	
	City	State	Zip Code	Transaction ID : SA11AI.12017	
	Columbia	MD	21046	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	ů			
	Name of Employer (for Individual) First Colonies Anesthesia		upation (for Individual) sician	Memo Item Payroll deduction	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 450.00		
<del></del>	Full Name of Individual (Last, First, Middle Initi	ial) or Full O	rganization Name	Date of Receipt	
	Mailing Address 7115 Kings Point Way			11 25 2017	
	City Columbia	State MD	Zip Code 21046	Transaction ID : SA11AI.12120  Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		50.00	
	Name of Employer (for Individual) First Colonies Anesthesia		upation (for Individual) sician	Memo Item Payroll deduction	
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify)		500.00		
H	CUBTOTAL of Receipts This Page (optional)  OTAL This Period (last page this line number of			150.00	

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

						PAGE	1	00 OF	:	254	
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	the name and address of any political committee	
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITIC	AL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Kim, James, , ,  Mailing Address 7115 Kings Point Way	Initial) or Full Organization Name	Date of Receipt
City	State Zip Code	12 22 2017
Columbia	MD 21046	Transaction ID : SA11AI.12223  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual)  Physician	Memo Item Payroll deduction
Receipt For:	Aggregate Year-to-Date ▼	1 ayıdıl deduction
Primary General Other (specify) ▼	550.00	
Full Name of Individual (Last, First, Middle Kim, James, , ,  Mailing Address 7115 Kings Point Way	Initial) or Full Organization Name	Date of Receipt
City Columbia	State Zip Code MD 21046	12 29 2017  Transaction ID : SA11Al.12326
FEC ID number of contributing federal political committee.	C 21046	Amount of Each Receipt this Period  50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  600.00	
Full Name of Individual (Last, First, Middle	Initial) or Full Organization Name	Date of Receipt
Mailing Address 6795 Stockwell Manor Dr.		07 25 2017
City Falls Church	State Zip Code VA 22043	Transaction ID : SA11AI.11680  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line numb	per only)	

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

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Ko, Richard, , , Date of Receipt Mailing Address 6795 Stockwell Manor Dr. 25 2017 City State Zip Code Transaction ID: SA11AI.11791 VA 22043 Falls Church Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer (for Individual) Occupation (for Individual) Memo Item First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 350.00 В

Full Name of Individual (Last, First, Middle 3. Ko, Richard, , ,	e Initial) or Full Organization Name	Date of Receipt					
Mailing Address 6795 Stockwell Manor Dr.		09 25 2017					
City	State Zip Code	Transaction ID : SA11AI.11893					
Falls Church	VA 22043	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	50.00					
Name of Employer (for Individual) First Colonies Anesthesia	Memo Item Payroll deduction						
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00						
Full Name of Individual (Last, First, Middle Ko, Richard, , , Mailing Address 6795 Stockwell Manor Dr.		Date of Receipt  10 25 2017					
City Falls Church	State Zip Code VA 22043	Transaction ID : SA11AI.11995					
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  50.00					
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction					
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 450.00						
SUBTOTAL of Receipts This Page (optional	)	150.00					
TOTAL This Period (last page this line num	ber only)						
		FEC <b>Schedule A (Form 3X)</b> Rev. 06/20					

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

FOR LINE NUMBER:						PAGE	1	02 OF	254
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Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name of Individual (Last, First, Middle In Ko, Richard, , ,	itial) or Full Organization Name	Date of Receipt
Mailing Address 6795 Stockwell Manor Dr.		11 25 2017
City Falls Church	State Zip Code VA 22043	Transaction ID : SA11AI.12098
FEC ID number of contributing		Amount of Each Receipt this Period
federal political committee.	C	50.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
First Colonies Anesthesia Receipt For:	Physician The Park Th	Payroll deduction
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	500.00	
Full Name of Individual (Last, First, Middle In Ko, Richard, , ,	itial) or Full Organization Name	Date of Receipt
Mailing Address 6795 Stockwell Manor Dr.		12 22 2017
City	State Zip Code	Transaction ID : SA11AI.12201
Falls Church	VA 22043	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  550.00	
Full Name of Individual (Last, First, Middle In	itial) or Full Organization Name	Date of Receipt
Mailing Address 6795 Stockwell Manor Dr.		12 29 2017
City Falls Church	State Zip Code VA 22043	Transaction ID : SA11AI.12304  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	600.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number	only)	

Other (specify)

C.

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Lee, Won, , , Date of Receipt Mailing Address 6812 Koandah Gardens 2017 City State Zip Code Transaction ID: SA11AI.11764 MD Highland 20777 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Lee, Won, , , Date of Receipt Mailing Address 6812 Koandah Gardens 80 2017 City State Zip Code Transaction ID: SA11AI.11872 Highland MD 20777 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General

care. (epocary) v	-	4 14	
Full Name of Individual (Last, First, Middle In Lee, Won, , ,	Date of Receipt		
Mailing Address 6812 Koandah Gardens	09 25 2017		
City	State	Zip Code	Transaction ID : SA11AI.11973
Highland	MD	20777	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer (for Individual)	Occupa	tion (for Individual)	Memo Item
First Colonies Anesthesia	Physicia	an	Payroll deduction
Receipt For: Primary General Other (specify)	ar-to-Date ▼ 400.00		
UDTOTAL of Benefith This Bene (autional)			150.00

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

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

350,00

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

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Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Ini Lee, Won, , , Mailing Address 6812 Koandah Gardens	tial) or Full Organization Name	Date of Receipt
City Highland	State Zip Code MD 20777	10 25 2017  Transaction ID : SA11AI.12075  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual)  First Colonies Anesthesia  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation (for Individual) Physician  Aggregate Year-to-Date ▼  450.00	Memo Item Payroll deduction
Full Name of Individual (Last, First, Middle Ini  Lee, Won, , ,  Mailing Address 6812 Koandah Gardens  City  Highland  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)	State Zip Code MD 20777  C Occupation (for Individual)	Date of Receipt  11 25 2017  Transaction ID: SA11AI.12178  Amount of Each Receipt this Period  50.00  Memo Item
First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼	Physician  Aggregate Year-to-Date ▼  500,00	Payroll deduction
Full Name of Individual (Last, First, Middle Initee, Won, , , Mailing Address 6812 Koandah Gardens  City Highland  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code MD 20777  C  Occupation (for Individual) Physician  Aggregate Year-to-Date   550.00	Date of Receipt  12
SUBTOTAL of Receipts This Page (optional)	<u> </u>	150.00
TOTAL This Period (last page this line number	only)	

Primary

C.

Other (specify)

General

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

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:						PAGE	: 1	05 OF	254
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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Lennox, William, , ,  Mailing Address 3706A Meadowhill Court  City Phoenix  State MD 21131  City Phoenix  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) First Colonies Anesthesia  Receipt For: Primary General Other (specify)  Date of Receipt  MMM 25 Transaction ID : SA11AI.11842  Amount of Each Receipt this Period  Memo Item Payroll deduction			, , , , , , , , , , , , , , , , , , , ,					
City Phoenix  State Zip Code Phoenix  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) First Colonies Anesthesia  Receipt For: Primary  General  State Zip Code Transaction ID : SA11AI.11842  Amount of Each Receipt this Period  100.00  Memo Item Payroll deduction		Date of Receipt						
Phoenix  MD 21131  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  First Colonies Anesthesia  Receipt For:  Primary  General  Amount of Each Receipt this Period  Doccupation (for Individual)  Physician  Payroll deduction	Mailing Address 3706A Meadowhill Court							
FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  First Colonies Anesthesia  Receipt For:  Primary  General  Amount of Each Receipt this Period  100.00  Memo Item  Payroll deduction	City	State	Zip Code	Transaction ID : SA11AI.11842				
federal political committee.  Name of Employer (for Individual)  First Colonies Anesthesia  Receipt For:  Primary  General  Occupation (for Individual)  Physician  Payroll deduction  Aggregate Year-to-Date ▼	Phoenix	MD	21131	Amount of Each Receipt this Period				
First Colonies Anesthesia Physician Payroll deduction  Receipt For:  Primary General Aggregate Year-to-Date   Aggregate Year-to-Date	ĕ	C		100.00				
Receipt For:  Primary General  Aggregate Year-to-Date ▼	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item				
Primary General Aggregate Year-to-Date Y	First Colonies Anesthesia	Physi	cian	Payroll deduction				
·	Primary General	Aggregate \						

600.00

Aggregate Year-to-Date ▼

250.00

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

ı	FOF	R LINE	NUMBER	PAGE	: 1	06 OF		254	
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	d Statements may not be sold or used by any pe the name and address of any political committee				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE			
Full Name of Individual (Last, First, Middle Lennox, William, , ,  Mailing Address 3706A Meadowhill Court	Initial) or Full Organization Name	Date of Receipt  09 25 2017			
City Phoenix	State Zip Code MD 21131	Transaction ID : SA11AI.11943			
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period			
Name of Employer (for Individual)  First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼	First Colonies Anesthesia Physician  Receipt For:  Primary General Aggregate Year-to-Date ▼				
Full Name of Individual (Last, First, Middle Lennox, William, , ,  Mailing Address 3706A Meadowhill Court	Date of Receipt  10 25 2017				
City Phoenix FEC ID number of contributing federal political committee.	State Zip Code MD 21131	Transaction ID : SA11AI.12045  Amount of Each Receipt this Period  100.00			
Name of Employer (for Individual) First Colonies Anesthesia Receipt For:	Occupation (for Individual) Physician	Memo Item Payroll deduction			
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00				
Full Name of Individual (Last, First, Middle Lennox, William, , ,	Initial) or Full Organization Name	Date of Receipt			
Mailing Address 3706A Meadowhill Court  City	State Zip Code	11 25 2017 Transaction ID : SA11AI.12148			
Phoenix  FEC ID number of contributing federal political committee.	MD 21131	Amount of Each Receipt this Period			
Name of Employer (for Individual) First Colonies Anesthesia Receipt For:  Primary General Other (specify)	Occupation (for Individual) Physician  Aggregate Year-to-Date ▼  1000.00	Memo Item Payroll deduction			
SUBTOTAL of Receipts This Page (optional)	er only)	300.00			

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

FOR LINE NUMBER:						PAGE	: 1	07 OF	:	254
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Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any perse name and address of any political committee to	
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAL	L ACTION COMMITTEE
Full Name of Individual (Last, First, Middle In Lennox, William, , ,  Mailing Address 3706A Meadowhill Court	itial) or Full Organization Name	Date of Receipt
City Phoenix  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)	State Zip Code MD 21131  C Occupation (for Individual)	12 22 2017  Transaction ID : SA11AI.12251  Amount of Each Receipt this Period  100.00  Memo Item
First Colonies Anesthesia  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Physician  Aggregate Year-to-Date ▼  1100.00	Payroll deduction
Full Name of Individual (Last, First, Middle In Lennox, William, , ,  Mailing Address 3706A Meadowhill Court  City Phoenix  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) First Colonies Anesthesia  Receipt For: Primary General Other (specify)	Date of Receipt  12 29 2017  Transaction ID : SA11AI.12353  Amount of Each Receipt this Period  100.00  Memo Item  Payroll deduction	
Full Name of Individual (Last, First, Middle In Liao, Yongbo, , ,  Mailing Address 11625 Quarterfields Road  City Ellicott City  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code 21042  C  Occupation (for Individual) Physician  Aggregate Year-to-Date  250.00	Date of Receipt  08
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	250.00
TOTAL This Period (last page this line number	only)	

First Colonies Anesthesia

General

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

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

Receipt For:

Primary

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:						PAGE	1	08 OF	254
(check only one)									
	X	11a		11b		11c		12	
		13		14		15		16	17

Payroll deduction

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Other (specify) ▼		350.00	
Full Name of Individual (Last, First, Middle Ir Liao, Yongbo, , ,	Date of Receipt		
Mailing Address 11625 Quarterfields Road  City	Zip Code	11 25 2017 Transaction ID : SA11Al.12191	
Ellicott City	MD	21042	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer (for Individual)	Occup	pation (for Individual)	Memo Item
First Colonies Anesthesia	Physi	cian	Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate Y	/ear-to-Date ▼ 400.00	
			150.00

Physician

Aggregate Year-to-Date ▼

						PAGE	1	09 OF		254	
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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not ne name and address	be sold or used by any pe of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIAT	TES LLC POLITICA	AL ACTION COMMITTEE					
Full Name of Individual (Last, First, Middle In Liao, Yongbo, , ,  Mailing Address 11625 Quarterfields Road	nitial) or Full Organiza	ation Name	Date of Receipt					
			12 22 2017					
City		p Code	Transaction ID : SA11AI.12294					
Ellicott City	IVID	21042	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		50.00					
Name of Employer (for Individual)	Occupation	(for Individual)	Memo Item					
First Colonies Anesthesia	Physician		Payroll deduction					
Receipt For:	Aggregate Year-to	o-Date ▼						
Primary General Other (specify) ▼	Primary General Other (specify) ▼  450.00							
Full Name of Individual (Last, First, Middle In Liao, Yongbo, , ,	nitial) or Full Organiza	ation Name	Date of Receipt					
Mailing Address 11625 Quarterfields Road	Chair -	n Codo	12 29 2017					
City Ellicott City		p Code 21042	Transaction ID : SA11AI.12396  Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	y III							
Name of Employer (for Individual) First Colonies Anesthesia	Occupation Physician	n (for Individual)	Memo Item Payroll deduction					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to	500,00						
Full Name of Individual (Last, First, Middle In Litecky, Raymond, , ,	nitial) or Full Organiza	ation Name	Date of Receipt					
Mailing Address 2710 Route 32			07 25 / Y Y Y Y Y					
City		p Code	Transaction ID : SA11AI.11739					
West Friendship	MD 2	21794	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		50.00					
Name of Employer (for Individual)	Occupation	(for Individual)	Memo Item					
First Colonies Anesthesia	Physician		Payroll deduction					
Receipt For:  Primary  General	Aggregate Year-to	o-Date ▼						
Other (specify)								
SUBTOTAL of Receipts This Page (optional)			150.00					
TOTAL This Period (last page this line number	r only)							

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Any information copied from such Reports and S or for commercial purposes, other than using the						
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE				
Full Name of Individual (Last, First, Middle Ini Litecky, Raymond, , , Mailing Address 2710 Route 32	tial) or Full Organization Name	Date of Receipt				
City	State Zip Code	08 25 2017  Transaction ID : SA11AI.11848				
West Friendship	MD 21794	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	deral political committee.					
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
First Colonies Anesthesia	Physician	Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼						
Full Name of Individual (Last, First, Middle Ini Litecky, Raymond, , , Mailing Address 2710 Route 32	tial) or Full Organization Name	Date of Receipt				
	In a	09 25 2017				
City	State Zip Code	Transaction ID : SA11AI.11949				
West Friendship	MD 21794	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00					
Full Name of Individual (Last, First, Middle Ini	tial) or Full Organization Name	Date of Receipt				
Mailing Address 2710 Route 32		10 25 2017				
City	State Zip Code	Transaction ID : SA11AI.12051				
West Friendship	MD 21794	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify)	450.00					
SUBTOTAL of Receipts This Page (optional)	<u> </u>	150.00				
TOTAL This Period (last page this line number	only)					

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Any information copied from such Reports and S or for commercial purposes, other than using the	, , , ,						
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE					
Full Name of Individual (Last, First, Middle Ini Litecky, Raymond, , , Mailing Address 2710 Route 32	tial) or Full Organization Name	Date of Receipt					
City	State Zip Code	11 25 2017  Transaction ID : SA11AI.12154					
West Friendship	MD 21794	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	50.00					
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item					
First Colonies Anesthesia	Physician	Payroll deduction					
Receipt For:  Primary General  Other (specify) ▼							
Full Name of Individual (Last, First, Middle Ini Litecky, Raymond, , ,  Mailing Address 2710 Route 32	tial) or Full Organization Name	Date of Receipt					
011	lo	12 22 2017					
City West Friendship	State Zip Code MD 21794	Transaction ID : SA11AI.12257					
West Friendship	MD   21794	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	50.00					
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00						
Full Name of Individual (Last, First, Middle Ini	tial) or Full Organization Name	Date of Receipt					
Mailing Address 2710 Route 32		12 29 2017					
City West Friendship	State Zip Code MD 21794	Transaction ID: SA11AI.12359					
West Friendship	MD 21794	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	50.00					
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction					
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify)	600.00						
SUBTOTAL of Receipts This Page (optional)	<u> </u>	150.00					
TOTAL This Period (last page this line number	only)						

FEC ID number of contributing

Name of Employer (for Individual)

federal political committee.

First Colonies Anesthesia

Receipt For:

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

FOI	R LINE	NUMBER	PAGE	: 1	12 OF		254		
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	13	14		15		16		17	

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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Lockhart, Zakiya, , , Date of Receipt Mailing Address 8750 Polished Pebble Way 2017 City State Zip Code Transaction ID: SA11AI.11704 MD Laurel 20723 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Lockhart, Zakiya, , , Date of Receipt Mailing Address 8750 Polished Pebble Way 2017 City State Zip Code Transaction ID: SA11AI.11814 MD Laurel 20723 Amount of Each Receipt this Period

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Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 525.00	
Full Name of Individual (Last, First, Middle In Lockhart, Zakiya, , ,  Mailing Address 8750 Polished Pebble Way	nitial) or Full Org	anization Name	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID : SA11AI.11916
Laurel	MD	20723	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		75.00
Name of Employer (for Individual) First Colonies Anesthesia	Occup Physic	ation (for Individual) sian	Memo Item Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optional)			225.00

Occupation (for Individual)

Physician

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

75.00

Memo Item

Payroll deduction

FEC ID number of contributing

Name of Employer (for Individual)

federal political committee.

First Colonies Anesthesia

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

				MBER	PAGE	1	13 OF	: :	254	
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Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼  825.00						
SUBTOTAL of Receipts This Page (optional)	Ξ	,	_	 _	225.00	)	
TOTAL This Period (last page this line number		<u> </u>	_	 _			

Occupation (for Individual)

Physician

C

75.00

Memo Item

Payroll deduction

FOI	R LINE	NUMBER	PAGE	: 1	14 OF		254		
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	rmation copied from such Reports and Sta mmercial purposes, other than using the n			n for the purpose of soliciting contributions solicit contributions from such committee.
	OF COMMITTEE (In Full) ST COLONIES ANESTHESIA	A ASSOC	IATES LLC POLITICAL	. ACTION COMMITTEE
Locl	lame of Individual (Last, First, Middle Initia khart, Zakiya, , , g Address 8750 Polished Pebble Way	l) or Full Orga	anization Name	Date of Receipt
City		State	Zip Code	12 29 2017 Transaction ID : SA11AI.12327
Laure	el	MD	Amount of Each Receipt this Period	
	ID number of contributing al political committee.		75.00	
Name	of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
	Colonies Anesthesia	Physici	ian	Payroll deduction
Recei	pt For: Primary General Other (specify) ▼			
3. Mal	lame of Individual (Last, First, Middle Initia one, Thomas, , , g Address 11667 Fairmont Pl	ıl) or Full Orga	anization Name	Date of Receipt
				07 25 2017
City	-20-	State	Zip Code	Transaction ID : SA11AI.11758
<u>Ijams</u>	VIIIe	MD	21754	Amount of Each Receipt this Period
	ID number of contributing al political committee.	С		75.00
	e of Employer (for Individual) Colonies Anesthesia	Occupa Physic	ation (for Individual) ian	Memo Item Payroll deduction
Recei	pt For: Primary General Other (specify) ▼	Aggregate Ye	ar-to-Date ▼ 450,00	
	lame of Individual (Last, First, Middle Initialone, Thomas, , ,	l) or Full Orga	anization Name	Date of Receipt
Mailin	g Address 11667 Fairmont PI			08 25 2017
City Ijams	eville	State MD	Zip Code 21754	Transaction ID : SA11AI.11866  Amount of Each Receipt this Period
FEC	ID number of contributing al political committee.	С		75.00
First (	of Employer (for Individual) Colonies Anesthesia	Occupa Physicia	ation (for Individual)	Memo Item Payroll deduction
	pt For: Primary General	ar-to-Date ▼		
	Other (specify)	35	525.00	
SUBTO	TAL of Receipts This Page (optional)		<b>&gt;</b>	225.00
TOTAL	This Period (last page this line number on	nly)	<b>&gt;</b>	4 4

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	Statements may not be sold or used by any perse name and address of any political committee to	
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Ir Malone, Thomas, , ,  Mailing Address 11667 Fairmont PI	nitial) or Full Organization Name	Date of Receipt
City	State Zip Code	09 25 2017 Transaction ID : SA11AI.11967
Ijamsville	MD 21754	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
First Colonies Anesthesia	Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name of Individual (Last, First, Middle Ir Malone, Thomas, , ,  Mailing Address 11667 Fairmont PI	nitial) or Full Organization Name	Date of Receipt
		10 25 2017
City	State Zip Code MD 21754	Transaction ID : SA11AI.12069
Ijamsville	MD 21754	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	
Full Name of Individual (Last, First, Middle Ir . Malone, Thomas, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 11667 Fairmont PI		11 25 2017
City	State Zip Code	Transaction ID : SA11AI.12172
Ijamsville	MD 21754	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	750.00	
SUBTOTAL of Receipts This Page (optional)		225.00
TOTAL This Period (last page this line number	only)	4-14-14-14-14-14-14-14-14-14-14-14-14-14

Other (specify)

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

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

F	OR	LINE	NU	IMBER	:	PAGE	1	16 OF		254	
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SUBTOTAL of Receipts This Page (optional)		I	,	I		,	_	2	200.0	0	
TOTAL This Period (last page this line number only)		_	7	_	_	7	_		-4-	_	

300.00

Receipt For:

Primary

General

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

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

F	OR	LINE	NU	MBER	:	PAGE	1	17 OF		254		
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Other (specify) ▼	4	399.66	
Full Name of Individual (Last, First, Middle In Martin, Stephen, , ,	nitial) or Full Org	ganization Name	Date of Receipt
Mailing Address 3336 O Street, NW			10 25 2017
City	State	Zip Code	Transaction ID : SA11AI.11996
Washington	DC	20007	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer (for Individual)	Occup	pation (for Individual)	Memo Item
First Colonies Anesthesia	Physi	cian	Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate Y	/ear-to-Date ▼ 449.66	
UDTOTAL of Descripts This Descriptoral			149.66

Aggregate Year-to-Date ▼

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

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City	State	Zip Code	Transaction ID : SA11AI.12202
Washington	DC	20007	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer (for Individual) First Colonies Anesthesia Receipt For:	Occupa Physic Aggregate Yea		Memo Item Payroll deduction
Primary General  Other (specify) ▼	4	549.66	
Full Name of Individual (Last, First, Middle In Martin, Stephen, , ,	nitial) or Full Orga	nization Name	Date of Receipt
Mailing Address 3336 O Street, NW			12 29 2017
City	State	Zip Code	Transaction ID : SA11AI.12305
Washington	DC	20007	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual)	Occupa	tion (for Individual)	Memo Item
First Colonies Anesthesia	Physicia	an	Payroll deduction
Receipt For:  Primary General Other (specify)	Aggregate Ye	ar-to-Date ▼ 599.66	
SUBTOTAL of Receipts This Page (optional)			150.00
TOTAL This Period (last page this line number	only)	······	

F	OR	LINE	NU	MBER	:	PAGE	1	19 OF		254	
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or for commercial purposes, other than using							
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHI	ESIA ASSOC	CIATES LLC POLITIC	AL ACTION COMMITTEE				
Full Name of Individual (Last, First, Middle Meshulam, Richard, , ,  Mailing Address 3401 Fielding Road	Initial) or Full Org	ganization Name	Date of Receipt  O7 25 2017				
City Baltimore	State	Zip Code 21208	7 25 2017 Transaction ID : SA11AI.11724 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	11200	Amount of Each Receipt this Period				
Name of Employer (for Individual)  First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼	Physi	oation (for Individual) ician /ear-to-Date ▼	Memo Item Payroll deduction				
B. Meshulam, Richard, , ,  Mailing Address 3401 Fielding Road	Initial) or Full Org	ganization Name	Date of Receipt  08 25 2017				
City Baltimore	State MD	Zip Code 21208	Transaction ID : SA11AI.11834  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		50.00				
Name of Employer (for Individual) First Colonies Anesthesia	Occup Physi	pation (for Individual) ician	Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 350.00					
Full Name of Individual (Last, First, Middle C. Meshulam, Richard, , ,	Initial) or Full Org	ganization Name	Date of Receipt				
Mailing Address 3401 Fielding Road			09 25 2017				
City Baltimore	State MD	Zip Code 21208	Transaction ID : SA11AI.11935  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		50.00				
Name of Employer (for Individual) First Colonies Anesthesia Receipt For:	Physic	oation (for Individual) cian ∕ear-to-Date ▼	Memo Item Payroll deduction				
Primary General Other (specify)							
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line numb		·	150.00				

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Use separate schedule(s) for each category of the

F	OR	LINE	NU	MBER	:	PAGE	1	20 OF		254
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	X	11a		11b	11c		12			
		13		14		15		16		17

Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Meshulam, Richard, , , Date of Receipt Mailing Address 3401 Fielding Road 2017 City Zip Code State Transaction ID: SA11AI.12037 MD **Baltimore** 21208 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Meshulam, Richard, , , Date of Receipt Mailing Address 3401 Fielding Road 2017 City State Zip Code Transaction ID: SA11AI.12140 MD **Baltimore** 21208 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Meshulam, Richard, , , Date of Receipt Mailing Address 3401 Fielding Road 22 2017 City Zip Code State Transaction ID: SA11AI.12243 MD **Baltimore** 21208 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

F	OR	LINE	NU	MBER	:	PAGE	1	21 OF		254	
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	Statements may not be sold or used by any per e name and address of any political committee t	
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle In Meshulam, Richard, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 3401 Fielding Road	12 29 2017	
City Baltimore	Transaction ID : SA11AI.12345	
FEC ID number of contributing	MD 21208	Amount of Each Receipt this Period
federal political committee.	C	50.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
First Colonies Anesthesia	Physician	Payroll deduction
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	600.00	
Full Name of Individual (Last, First, Middle In Moayed, Omid, , ,	uitial) or Full Organization Name	Date of Receipt
Mailing Address 8913 Cherbourg Drive		07 25 2017
City	State Zip Code	Transaction ID : SA11Al.11691
Potomac	MD 20854	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name of Individual (Last, First, Middle In Moayed, Omid, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 8913 Cherbourg Drive		08 25 2017
City	State Zip Code	Transaction ID : SA11AI.11802
Potomac	MD 20854	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify)	350.00	
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	150.00
TOTAL This Period (last page this line number	only)	

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				ttee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSO	CIATES LLC POLIT	ICAL ACTION COMMITTEE
Α.	Full Name of Individual (Last, First, Middle Init Moayed, Omid, , ,  Mailing Address 8913 Cherbourg Drive  City	ial) or Full Or	ganization Name  Zip Code	Date of Receipt  09 25 2017  Transaction ID : SA11AI.11904
	Potomac	MD	20854	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
	First Colonies Anesthesia	Phys	ician	Payroll deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate \	Year-to-Date ▼ 400.00	
В.	Full Name of Individual (Last, First, Middle Init Moayed, Omid, , ,  Mailing Address 8913 Cherbourg Drive	ial) or Full Or	ganization Name	Date of Receipt
				10 25 2017
	City	State	Zip Code	Transaction ID : SA11AI.12006
	Potomac	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) First Colonies Anesthesia		pation (for Individual) sician	Memo Item Payroll deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate \	Year-to-Date ▼ 450.00	
<u> </u>	Full Name of Individual (Last, First, Middle Init Moayed, Omid, , ,	ial) or Full Or	ganization Name	Date of Receipt
	Mailing Address 8913 Cherbourg Drive			11 25 2017
	City Potomac	State MD	Zip Code 20854	Transaction ID : SA11AI.12109  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) First Colonies Anesthesia	Occu Physi	pation (for Individual) ician	Memo Item Payroll deduction
	Receipt For: Primary General Other (specify)	Aggregate \	Year-to-Date ▼ 500.00	
H	SUBTOTAL of Receipts This Page (optional)			150.00

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				mittee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSO	CIATES LLC POL	TICAL ACTION COMMITTEE
Α.	Mailing Address 8913 Cherbourg Drive	ial) or Full Or		Date of Receipt  12 22 2017
	City Potomac	Zip Code 20854	Transaction ID : SA11AI.12212	
	FEC ID number of contributing federal political committee.	М	20034	Amount of Each Receipt this Period  50.00
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
	First Colonies Anesthesia	Phys	sician	Payroll deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate `	Year-to-Date ▼ 550.00	
В.	Full Name of Individual (Last, First, Middle Init Moayed, Omid, , ,  Mailing Address 8913 Cherbourg Drive	ial) or Full Or	rganization Name	Date of Receipt
	5 Co To Chiologiang Envio			12 29 2017
	City	State	Zip Code	Transaction ID : SA11AI.12315
	Potomac	MD	20854	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) First Colonies Anesthesia		upation (for Individual) sician	Memo Item Payroll deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate `	Year-to-Date ▼ 600.00	
<u> </u>	Full Name of Individual (Last, First, Middle Init Morman, Allyson, , ,	ial) or Full Or	rganization Name	Date of Receipt
	Mailing Address 6509 Autumn Wind Circle			07 07 2017
	City Clarksville	State MD	Zip Code 21029	Transaction ID : SA11AI.11648  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) First Colonies Anesthesia	Occu Phys	ipation (for Individual) iician	Memo Item Payroll deduction
	Receipt For: Primary General Other (specify)	Aggregate `	Year-to-Date ▼	
H	SUBTOTAL of Receipts This Page (optional)			

Other (specify)

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

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

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

FC	R	LINE	NU	<b>MBER</b>	:	PAGE	: 1	24 OF	:	254
(ch	nec	ck only	or	ne)						
[	X	11a		11b		11c		12		
		13		14		15		16		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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Morman, Allyson, , , Date of Receipt Mailing Address 6509 Autumn Wind Circle 2017 City Zip Code State Transaction ID: SA11AI.11649 MD Clarksville 21029 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Morman, Allyson, , , Date of Receipt Mailing Address 6509 Autumn Wind Circle 18 2017 City State Zip Code Transaction ID: SA11AI.11650 Clarksville MD 21029 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Morman, Allyson, , , Date of Receipt Mailing Address 6509 Autumn Wind Circle 01 2017 City Zip Code State Transaction ID: SA11AI.11651 MD Clarksville 21029 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify)

800.00

150.00

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F	OR	LINE	NU	<b>MBER</b>	:	PAGE	: 1	25 OF	 254
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	X	11a		11b		11c		12	
		13		14		15		16	17

Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Morman, Allyson, , , Date of Receipt Mailing Address 6509 Autumn Wind Circle 15 2017 City Zip Code State Transaction ID: SA11AI.11652 MD Clarksville 21029 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Morman, Allyson, , , Date of Receipt Mailing Address 6509 Autumn Wind Circle 2017 City State Zip Code Transaction ID: SA11AI.11653 Clarksville MD 21029 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 950.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Morman, Allyson, , , Date of Receipt Mailing Address 6509 Autumn Wind Circle 13 2017 City Zip Code State Transaction ID: SA11AI.11654 MD Clarksville 21029 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

FC	R	LINE	NU	<b>MBER</b>	:	PAGE	: 1	26 OF	:	254
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		13		14		15		16		17

Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Ini Morman, Allyson, , ,  Mailing Address 6509 Autumn Wind Circle	tial) or Full Organization Name	Date of Receipt  10 27 2017
City	State Zip Code	10 27 2017 Transaction ID : SA11Al.11655
Clarksville	MD 21029	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
First Colonies Anesthesia	Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00	
Full Name of Individual (Last, First, Middle Ini  Morman, Allyson, , ,  Mailing Address 6509 Autumn Wind Circle	tial) or Full Organization Name	Date of Receipt
		11 09 2017
City	State Zip Code	Transaction ID : SA11AI.11656
Clarksville	MD 21029	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
Full Name of Individual (Last, First, Middle Ini Morman, Allyson, , ,	tial) or Full Organization Name	Date of Receipt
Mailing Address 6509 Autumn Wind Circle		11 22 2017
City Clarksville	State Zip Code MD 21029	Transaction ID : SA11AI.11657
	21029	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
First Colonies Anesthesia	Physician	Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1150.00	
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number		150.00

FOF	R LINE	NU	MBER	:	PAGE	1	27 OF	254
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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE				
Full Name of Individual (Last, First, Middle In Morman, Allyson, , ,  Mailing Address 6509 Autumn Wind Circle	itial) or Full Organization Name	Date of Receipt				
City	State Zip Code	12 08 2017 Transaction ID : SA11AI.11658				
Clarksville	MD 21029	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
First Colonies Anesthesia	Physician	Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00					
Full Name of Individual (Last, First, Middle In Morman, Allyson, , ,  Mailing Address 6509 Autumn Wind Circle	itial) or Full Organization Name	Date of Receipt				
011		12 21 2017				
City Clarksville	State Zip Code MD 21029	Transaction ID : SA11AI.11659				
	MD   21029	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  1250.00					
Full Name of Individual (Last, First, Middle In Mossman, Danielle, , ,	itial) or Full Organization Name	Date of Receipt				
Mailing Address 3709 Falling Green Way		07 25 2017				
City	State Zip Code	Transaction ID : SA11AI.11754				
Mt. Airy	MD 21771	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify)	300.00					
SUBTOTAL of Receipts This Page (optional)	<u> </u>	150.00				
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Use separate schedule(s) for each category of the Detailed Summary Page

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	X	11a		11b		11c		12		
		13		14		15		16		17

Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mossman, Danielle, , , Date of Receipt Mailing Address 3709 Falling Green Way 2017 City Zip Code State Transaction ID: SA11AI.11862 MD Mt. Airy 21771 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Mossman, Danielle, , , Date of Receipt Mailing Address 3709 Falling Green Way 2017 City State Zip Code Transaction ID: SA11AI.11963 MD Mt. Airy 21771 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 400.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Mossman, Danielle, , , Date of Receipt Mailing Address 3709 Falling Green Way 25 2017 Zip Code City State Transaction ID: SA11AI.12065 MD Mt. Airy 21771 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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

							1	29 OF	: :	254
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		13		14		15		16		17

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F	FOR LINE NUMBER:						1	30 OF	254
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		13		14		15		16	17

Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Ini Munro, Thomas, , ,  Mailing Address 15310 Forest Lake Court	tial) or Full Organization Name	Date of Receipt
City Darnestown	State Zip Code MD 20874	07 25 2017  Transaction ID : SA11AI.11766  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer (for Individual)  First Colonies Anesthesia  Receipt For:  □ Primary □ General  □ Other (specify) ▼	Occupation (for Individual) Physician  Aggregate Year-to-Date ▼  450.00	Memo Item Payroll deduction
Full Name of Individual (Last, First, Middle Ini Munro, Thomas, , ,  Mailing Address 15310 Forest Lake Court  City  Darnestown  FEC ID number of contributing federal political committee.	State Zip Code MD 20874	Date of Receipt  08 25 2017  Transaction ID : SA11Al.11874  Amount of Each Receipt this Period
Name of Employer (for Individual) First Colonies Anesthesia  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation (for Individual) Physician  Aggregate Year-to-Date ▼  525.00	Memo Item Payroll deduction
Full Name of Individual (Last, First, Middle Ini Munro, Thomas, , ,  Mailing Address 15310 Forest Lake Court  City Darnestown  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code MD 20874  C  Occupation (for Individual) Physician  Aggregate Year-to-Date   600.00	Date of Receipt  09
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	225.00
TOTAL This Period (last page this line number	only)	

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

F	OR	LINE	NU	<b>MBER</b>	PAGE	: 1	31 OF	 254	
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	X	11a		11b		11c		12	
		13		14		15		16	17

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Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 825.00	
SUBTOTAL of Receipts This Page (optional).	·····	225.00
TOTAL This Period (last page this line number	er only)	
		FEC Schedule A (Form 3X) Rev. 06/

FEC ID number of contributing

federal political committee.

First Colonies Anesthesia

Other (specify)

General

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

Receipt For:

Primary

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

FOR LINE NUMBER:						PAGE	1	32 OF	: :	254
(ch	ne	ck only	or	ne)						
[	X	11a		11b		11c		12		
		13		14		15		16		17

75.00

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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Munro, Thomas, , , Date of Receipt Mailing Address 15310 Forest Lake Court 2017 City State Zip Code Transaction ID: SA11AI.12385 MD Darnestown 20874 Amount of Each Receipt this Period

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	Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item			
	First Colonies Anesthesia	Physic	ian	Payroll deduction			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ear-to-Date ▼				
3.	Full Name of Individual (Last, First, Middle Initial Nalls, Anna, , , Mailing Address 603 Queen Street, # 4  City Alexandria  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State VA	Zip Code 22314 ation (for Individual)	Date of Receipt  07 25 2017  Transaction ID : SA11AI.11682  Amount of Each Receipt this Period  100.00  Memo Item  Payroll deduction			
<b>-</b>	Full Name of Individual (Last, First, Middle Initial Nalls, Anna, , ,  Mailing Address 603 Queen Street, # 4  City Alexandria  FEC ID number of contributing federal political committee.	State VA	Zip Code 22314	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	Name of Employer (for Individual)	Occupa	ation (for Individual)	Mellio Itelli			

Physician

Aggregate Year-to-Date ▼

700.00

7

275.00

Payroll deduction

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

FOR	R LINE	NUMBE	PAGE	1	33 OF		254			
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	13	14		15		16		17		

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		09 25 2017
City	State Zip Code	Transaction ID : SA11AI.11895
Alexandria	VA 22314	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
First Colonies Anesthesia	Physician	Payroll deduction
Receipt For:		- Fayron deduction
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	800.00	
Full Name of Individual (Last, First, Middl Nalls, Anna, , ,	e Initial) or Full Organization Name	Date of Receipt
Mailing Address 603 Queen Street, # 4		10 25 2017
City	State Zip Code	Transaction ID : SA11AI.11997
Alexandria	VA 22314	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	Aggregate real to bate v	
Other (specify) ▼	900.00	
Full Name of Individual (Last, First, Middl. Nalls, Anna, , ,	e Initial) or Full Organization Name	Date of Receipt
Mailing Address 603 Queen Street, # 4		11 25 / Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.12100
Alexandria	VA 22314	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼ 1000.00	
Other (specify)		
	nl)	300.00

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

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	FO	R LINE	NU	MBER	PAGE	: 1	34 OF	254	
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		13		14		15		16	17

Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Nalls, Anna, , , Date of Receipt Mailing Address 603 Queen Street, # 4 2017 City Zip Code State Transaction ID: SA11AI.12203 VA Alexandria 22314 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Nalls, Anna, , , Date of Receipt Mailing Address 603 Queen Street, #4 2017 City State Zip Code Transaction ID: SA11AI.12306 VA Alexandria 22314 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1200.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Nicholas, Elizabeth, , , Date of Receipt Mailing Address 10604 Avonlea Hills Court 25 2017 City Zip Code State Transaction ID: SA11AI.11751 MD Hagerstown 21742 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 250.00 SUBTOTAL of Receipts This Page (optional).....

				MBER	PAGE	1	35 OF	: :	254		
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			13		14		15		16		17

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	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSOC	CIATES LLC POLITICA	L ACTION COMMITTEE
Α.	Full Name of Individual (Last, First, Middle Initi Nicholas, Elizabeth, , , Mailing Address 10604 Avonlea Hills Court	ial) or Full Or	ganization Name	Date of Receipt
	City Hagerstown	State MD	Zip Code 21742	08 25 2017  Transaction ID : SA11AI.11859
	FEC ID number of contributing federal political committee.	С	21172	Amount of Each Receipt this Period  50.00
	Name of Employer (for Individual) First Colonies Anesthesia Receipt For:	oation (for Individual) ician ′ear-to-Date ▼	Memo Item Payroll deduction	
	Primary General Other (specify) ▼			
В.	Full Name of Individual (Last, First, Middle Initi Nicholas, Elizabeth, , ,	ial) or Full Or	ganization Name	Date of Receipt
	Mailing Address 10604 Avonlea Hills Court		T=	09 25 2017
	City Hagerstown	State MD	Zip Code 21742	Transaction ID : SA11Al.11960  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) First Colonies Anesthesia	Occu Phys	pation (for Individual) ician	Memo Item Payroll deduction
	Receipt For:  Primary General  Other (specify) ▼	rear-to-Date ▼ 400.00		
<del>С</del> .	Full Name of Individual (Last, First, Middle Initi Nicholas, Elizabeth, , ,	ial) or Full Or	ganization Name	Date of Receipt
	Mailing Address 10604 Avonlea Hills Court			10 25 2017
	City Hagerstown	State MD	Zip Code 21742	Transaction ID : SA11AI.12062  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) First Colonies Anesthesia	Occup Physi	oation (for Individual) cian	Memo Item Payroll deduction
	Receipt For: Primary General Other (specify)			
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Primary

Other (specify)

General

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Nicholas, Elizabeth, , , Date of Receipt Mailing Address 10604 Avonlea Hills Court 2017 City Zip Code State Transaction ID: SA11AI.12165 MD Hagerstown 21742 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Nicholas, Elizabeth, , , Date of Receipt Mailing Address 10604 Avonlea Hills Court 2017 City State Zip Code Transaction ID: SA11AI.12268 MD Hagerstown 21742 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 550.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Nicholas, Elizabeth, , , Date of Receipt Mailing Address 10604 Avonlea Hills Court 29 2017 City Zip Code State Transaction ID: SA11AI.12370 MD Hagerstown 21742 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼

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600.00

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or for commercial purposes, other than using th	e name and address of any political committee						
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE					
Full Name of Individual (Last, First, Middle Ir O'Fallon, Denis, , ,  Mailing Address 12123 Merricks Court	nitial) or Full Organization Name	Date of Receipt					
City	07 25 2017  Transaction ID : SA11AI.11759						
Monrovia	Monrovia MD 21770						
FEC ID number of contributing federal political committee.	50.00						
Name of Employer (for Individual)  First Colonies Anesthesia  Receipt For:	Memo Item Payroll deduction						
Primary General  Other (specify) ▼							
Full Name of Individual (Last, First, Middle Ir O'Fallon, Denis, , ,  Mailing Address 12123 Merricks Court	nitial) or Full Organization Name	Date of Receipt					
City	State Zip Code	08 25 2017					
Monrovia	Transaction ID : SA11AI.11867  Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	FEC ID number of contributing						
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00						
Full Name of Individual (Last, First, Middle Ir O'Fallon, Denis, , ,	nitial) or Full Organization Name	Date of Receipt					
Mailing Address 12123 Merricks Court		09 25 2017					
City Monrovia	State Zip Code MD 21770	Transaction ID : SA11AI.11968  Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	50.00					
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction					
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 400.00						
SUBTOTAL of Receipts This Page (optional)		150.00					
TOTAL This Period (last page this line number	only)						

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or for commercial purposes, other than using the							
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE					
Full Name of Individual (Last, First, Middle In O'Fallon, Denis, , ,	itial) or Full Organization Name	Date of Receipt					
Mailing Address 12123 Merricks Court		10 25 2017					
City	State Zip Code	Transaction ID : SA11AI.12070					
Monrovia	MD 21770	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	50.00					
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item					
First Colonies Anesthesia	Physician	Payroll deduction					
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify) ▼	450.00						
Full Name of Individual (Last, First, Middle In 3. O'Fallon, Denis, , ,	itial) or Full Organization Name	Date of Receipt					
Mailing Address 12123 Merricks Court		11 25 2017					
City	State Zip Code	Transaction ID : SA11AI.12173					
Monrovia	Monrovia MD 21770						
FEC ID number of contributing federal political committee.	C	50.00					
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00						
Full Name of Individual (Last, First, Middle In	itial) or Full Organization Name	Date of Receipt					
Mailing Address 12123 Merricks Court		12 22 2017					
City	State Zip Code	Transaction ID : SA11AI.12276					
Monrovia	MD 21770	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	50.00					
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual)  Physician	Memo Item Payroll deduction					
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify)	550.00						
SUBTOTAL of Receipts This Page (optional)		150.00					
TOTAL This Period (last page this line number	only)						

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		by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC PO	LITICAL ACTION COMMITTEE				
Full Name of Individual (Last, First, Middle Ir O'Fallon, Denis, , ,  Mailing Address 12123 Merricks Court	nitial) or Full Organization Name	Date of Receipt				
	12 29 2017					
City Monrovia	State Zip Code MD 21770	Transaction ID : SA11AI.12378				
Monrovia	MD 21770	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	50.00					
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
First Colonies Anesthesia	Physician	Payroll deduction				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	600	.00				
Full Name of Individual (Last, First, Middle Ir Oletsky, Jon, , ,		Date of Receipt				
Mailing Address 6417 Enchanted Solitude Pla	ce	07 25 2017				
City	State Zip Code	Transaction ID : SA11AI.11741				
Columbia	MD 21044	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.						
Name of Employer (for Individual) First Colonites Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	0.00				
Full Name of Individual (Last, First, Middle Ir	itial) or Full Organization Name	Pote of Provint				
C. Oletsky, Jon, , ,  Mailing Address 6417 Enchanted Solitude Pla	ace	Date of Receipt  08 25 2017				
City	State Zip Code	Transaction ID : SA11AI.11849				
Columbia	MD 21044	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
First Colonites Anesthesia	Physician	Payroll deduction				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify)	350	0.00				
SUBTOTAL of Receipts This Page (optional)						
TOTAL This Period (last page this line number	only)					

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

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Oletsky, Jon, , , Date of Receipt Mailing Address 6417 Enchanted Solitude Place 2017 City State Zip Code Transaction ID: SA11AI.11950 MD Columbia 21044 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) First Colonites Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Oletsky, Jon, , , Date of Receipt Mailing Address 6417 Enchanted Solitude Place 10 2017 City State Zip Code Transaction ID: SA11AI.12052 Columbia MD 21044 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonites Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 450.00 C.

		<u> </u>	
Full Name of Individual (Last, First, Middle In Oletsky, Jon, ,	Date of Receipt		
Mailing Address 6417 Enchanted Solitude Pla		7in Codo	11 25 2017
City Columbia	State MD	Zip Code 21044	Transaction ID : SA11AI.12155
Columbia	IVID	21044	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item
First Colonites Anesthesia	Physi	cian	Payroll deduction
Receipt For: Primary General	∕ear-to-Date ▼		
Other (specify)			

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	ny information copied from such Reports and St for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	A ASSOC	CIATES LLC POLITICA	AL ACTION COMMITTEE
Α.	Full Name of Individual (Last, First, Middle InitiOletsky, Jon, , , Mailing Address 6417 Enchanted Solitude Place		panization Name	Date of Receipt  12 22 2017
	City Columbia	Transaction ID : SA11AI.12258		
	FEC ID number of contributing federal political committee.	C	21044	Amount of Each Receipt this Period  50.00
	Name of Employer (for Individual)  First Colonites Anesthesia  Receipt For:  Primary General  Other (specify) ▼	Physic	eation (for Individual) cian ear-to-Date ▼  550.00	Memo Item Payroll deduction
В.	Full Name of Individual (Last, First, Middle Initi Oletsky, Jon, , , Mailing Address 6417 Enchanted Solitude Place		ganization Name	Date of Receipt  12 29 2017
	City Columbia	State MD	Zip Code 21044	Transaction ID : SA11AI.12360  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) First Colonites Anesthesia	Occup Physi	oation (for Individual) cian	Memo Item Payroll deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 600.00	
<del>С</del> .	Full Name of Individual (Last, First, Middle Initi Osuji, Emmanuel, , ,	ial) or Full Org	anization Name	Date of Receipt
	Mailing Address 8362 Governor Run			07 25 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Ellicott City	State MD	Zip Code 21043	Transaction ID : SA11AI.11742  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) First Colonies Anesthesia	Physic		Memo Item Payroll deduction
	Receipt For: Primary General Other (specify)	Aggregate Y	ear-to-Date ▼ 300.00	
s	SUBTOTAL of Receipts This Page (optional)		• • • • • • • • • • • • • • • • • • •	150.00
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	for commercial purposes, other than using the									
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESI	A ASSOC	CIATES LLC POLITICA	AL ACTION COMMITTEE						
Α.	Full Name of Individual (Last, First, Middle Initi Osuji, Emmanuel, , , Mailing Address 8362 Governor Run	Date of Receipt  08 25 2017								
	City Ellicott City	State	Zip Code 21043	Transaction ID : SA11AI.11850						
	FEC ID number of contributing federal political committee.	C	2.0.0	Amount of Each Receipt this Period  50.00						
	Name of Employer (for Individual)  First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼	Phys	pation (for Individual) ician ⁄ear-to-Date ▼ 350.00	Memo Item Payroll deduction						
— В.	Full Name of Individual (Last, First, Middle Initi Osuji, Emmanuel, , ,	al) or Full Or	ganization Name	Date of Receipt						
	Mailing Address 8362 Governor Run  City	State	Zip Code	09 25 2017 Transaction ID : SA11Al.11951						
	Ellicott City  FEC ID number of contributing federal political committee.	C	21043	Amount of Each Receipt this Period  50.00						
	Name of Employer (for Individual) First Colonies Anesthesia	Occu Phys	pation (for Individual) sician	Memo Item Payroll deduction						
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	/ear-to-Date ▼							
<del>С</del> .	Full Name of Individual (Last, First, Middle Initi Osuji, Emmanuel, , ,	al) or Full Or	ganization Name	Date of Receipt						
	Mailing Address 8362 Governor Run	10 25 2017								
	City Ellicott City	State MD	Zip Code 21043	Transaction ID : SA11AI.12053  Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		50.00						
	Name of Employer (for Individual) First Colonies Anesthesia	Physi		Memo Item Payroll deduction						
	Receipt For:  Primary General  Other (specify)	Aggregate \	∕ear-to-Date ▼ 450.00							
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Any information copied from such Reports and or for commercial purposes, other than using th							
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES	LLC POLITICAL	ACTION COMMITTEE				
Full Name of Individual (Last, First, Middle Ir Osuji, Emmanuel, , ,  Mailing Address 8362 Governor Run	Date of Receipt						
City	State Zip Cod		11 25 2017				
Ellicott City	MD 21043		Transaction ID : SA11AI.12156  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.		50.00					
Name of Employer (for Individual)	Occupation (for I	ndividual)	Memo Item				
First Colonies Anesthesia	Physician		Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼							
Full Name of Individual (Last, First, Middle Ir Osuji, Emmanuel, , ,  Mailing Address 8362 Governor Run							
Maining Address 6362 Governor Kun	ruming rudices 8302 Governor Run						
City	State Zip Cod	e	Transaction ID : SA11AI.12259				
Ellicott City	MD 21043		Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		50.00				
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for I Physician	ndividual)	Memo Item Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Receipt For:  Primary  General  Aggregate Year-to-Date ▼						
Full Name of Individual (Last, First, Middle Ir Osuji, Emmanuel, , ,	nitial) or Full Organization N	lame	Date of Receipt				
Mailing Address 8362 Governor Run	01-1-	_	12 29 2017				
City Ellicott City	State Zip Cod MD 21043	<del>e</del>	Transaction ID : SA11AI.12361				
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period  50.00				
Name of Employer (for Individual)	Occupation (for I	ndividual)	Memo Item				
First Colonies Anesthesia	Physician		Payroll deduction				
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General

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Owens, Philip, , , Date of Receipt Mailing Address 141 Adams St NW 2017 City Zip Code State Transaction ID: SA11AI.11683 DC Washington 20001 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Owens, Philip, Date of Receipt Mailing Address 141 Adams St NW 2017 City State Zip Code Transaction ID: SA11AI.11794 DC Washington 20001 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 350.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Owens, Philip, , , Date of Receipt Mailing Address 141 Adams St NW 25 2017 City State Zip Code Transaction ID: SA11AI.11896 DC Washington 20001 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician

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					ourpose of soliciting contributions tributions from such committee.
NAME OF COMMIT		A ASSOC	IATES LLC POLITIC	AL ACTIO	ON COMMITTEE
Full Name of Individual Name, Philip, ,  Mailing Address 14		al) or Full Org	anization Name	Date of	Receipt
City		10	25 2017 action ID : SA11AI.11998		
Washington		State DC	Zip Code 20001		of Each Receipt this Period
FEC ID number of federal political con	•	С			50.00
Name of Employer	,		ation (for Individual)		emo Item
First Colonies Anest Receipt For: Primary	General	Aggregate Ye		Payroll de	eduction
Other (specify	,		450.00	]	
Full Name of Indivional Philip,  Mailing Address 14		al) or Full Org	anization Name	M = M	Receipt
City		State	Zip Code	11 Transa	25 2017 action ID : SA11AI.12101
Washington		DC	20001		of Each Receipt this Period
FEC ID number of federal political con	ğ .	С			50.00
Name of Employer First Colonies Anest		Occup Physic	ation (for Individual) cian	Payroll de	emo Item eduction
Receipt For: Primary Other (specify	General y) ▼	Aggregate Ye	ear-to-Date ▼ 500.00	]	
Full Name of Indivi C. Owens, Philip	dual (Last, First, Middle Initia	al) or Full Orga	anization Name	Date of	Receipt
Mailing Address 14	11 Adams St NW			12	22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Washington		State DC	Zip Code 20001		action ID : SA11AI.12204 of Each Receipt this Period
FEC ID number of federal political con	ğ .	C			50.00
Name of Employer First Colonies Anes	,	Occupa Physic	ation (for Individual) ian	Payroll de	emo Item eduction
Receipt For: Primary	General	Aggregate Ye	ear-to-Date ▼		
Other (specify	y)		550.00		
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or for commercial purposes, other than using			to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHI	ESIA ASSOC	IATES LLC POLITICA	AL ACTION COMMITTEE					
Full Name of Individual (Last, First, Middle Owens, Philip, , ,  Mailing Address 141 Adams St NW  City Washington  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  First Colonies Anesthesia  Receipt For:  Primary General	State DC	Zip Code 20001 ation (for Individual)	Date of Receipt  12 29 2017  Transaction ID: SA11AI.12307  Amount of Each Receipt this Period  50.00  Memo Item  Payroll deduction					
Other (specify) ▼	Other (specify) ▼ 600.00							
Full Name of Individual (Last, First, Middle B. Ozkum, Kent, , ,  Mailing Address 10720 Dern Road	e Initial) or Full Orga	anization Name	Date of Receipt  07 25 2017					
City Emmitsburg								
FEC ID number of contributing federal political committee.	y III							
Name of Employer (for Individual) First Colonies Anesthesia	Occupa Physic	ation (for Individual) sian	Payroll deduction					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 300.00						
Full Name of Individual (Last, First, Middle C. Ozkum, Kent, , ,	e Initial) or Full Orga	anization Name	Date of Receipt					
Mailing Address 10720 Dern Road			08 25 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City Emmitsburg	State MD	Zip Code 21727	Transaction ID : SA11AI.11875  Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		50.00					
Name of Employer (for Individual)  First Colonies Anesthesia  Receipt For:  Primary General	Occupa Physici Aggregate Ye		Memo Item Payroll deduction					
Other (specify)		350.00						
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	y information copied from such Reports and St for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSOC	CIATES LLC POLITICA	AL ACTION COMMITTEE
Α.	Full Name of Individual (Last, First, Middle Init Ozkum, Kent, , , Mailing Address 10720 Dern Road	ial) or Full Org	ganization Name	Date of Receipt
	City	State	Zip Code	09 25 2017
	Emmitsburg	MD	21727	Transaction ID : SA11AI.11976  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual)	Occup	pation (for Individual)	Memo Item
	First Colonies Anesthesia	Physi	cian	Payroll deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	'ear-to-Date ▼ 400.00	
В.	Full Name of Individual (Last, First, Middle Init Ozkum, Kent, , , Mailing Address 10720 Dern Road	ial) or Full Org	ganization Name	Date of Receipt  10 25 2017
	City	State	Zip Code	Transaction ID : SA11AI.12078
	Emmitsburg	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) First Colonies Anesthesia	Occup Physi	oation (for Individual) ician	Memo Item Payroll deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	rear-to-Date ▼ 450.00	
	Full Name of Individual (Last, First, Middle Init Ozkum, Kent, , ,	ial) or Full Org	ganization Name	Date of Receipt
	Mailing Address 10720 Dern Road			11 25 2017
	City Emmitsburg	State MD	Zip Code 21727	Transaction ID : SA11AI.12181  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) First Colonies Anesthesia	Occup Physic	Memo Item Payroll deduction	
	Receipt For: Primary General Other (specify)	Aggregate Y	ear-to-Date ▼ 500.00	
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Receipt For:

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

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

FOR LINE NUMBER:						PAGE	1	48 OF		254
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	×	11a		11b		11c		12		
		13		14		15		16		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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Ozkum, Kent, , , Date of Receipt Mailing Address 10720 Dern Road 2017 City State Zip Code Transaction ID: SA11AI.12284 MD Emmitsburg 21727 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Ozkum, Kent, , , Date of Receipt Mailing Address 10720 Dern Road 2017 City State Zip Code Transaction ID: SA11AI.12386 **Emmitsburg** MD 21727 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician

Other (specify) ▼	4	600.00	
Full Name of Individual (Last, First, Middle Ir Park, Paul, , ,  Mailing Address 510 Golden Oak Terrace	, ,		Date of Receipt  07
City	State	Zip Code	Transaction ID : SA11AI.11684
Rockville	MD	20850	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual)	Occup	ation (for Individual)	Memo Item
First Colonies Anesthesia	Physic	ian	Payroll deduction
Receipt For: Primary General Other (specify)			
NUDTOTAL of Desciots This Descriptions!)			150.00

Aggregate Year-to-Date ▼

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

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$\rangle$	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA	A ASSOCI	IATES LLC POLITICAL	_ ACTION COMMITTEE			
١.	Full Name of Individual (Last, First, Middle Initial Park, Paul, , ,	) or Full Orga	nization Name	Date of Receipt			
	Mailing Address 510 Golden Oak Terrace			08 25 2017			
	City  Rockville	State MD	Zip Code 20850	Transaction ID : SA11AI.11795  Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.		50.00				
	Name of Employer (for Individual) First Colonies Anesthesia	Occupa Physici	ation (for Individual) an	Memo Item Payroll deduction			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 350.00				
3.	Full Name of Individual (Last, First, Middle Initial Park, Paul, , ,	) or Full Orga	nization Name	Date of Receipt			
	Mailing Address 510 Golden Oak Terrace			09 25 2017			
	City	State MD	Zip Code	Transaction ID : SA11AI.11897			
	Rockville	טואו	20850	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		50.00			
	Name of Employer (for Individual) First Colonies Anesthesia	Occupa Physic	ation (for Individual) ian	Memo Item Payroll deduction			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 400.00				
).	Full Name of Individual (Last, First, Middle Initial Park, Paul, , ,	) or Full Orga	nization Name	Date of Receipt			
	Mailing Address 510 Golden Oak Terrace			10 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City Rockville	State MD	Zip Code 20850	Transaction ID : SA11AI.11999			
	FEC ID number of contributing federal political committee.	C	2000	Amount of Each Receipt this Period 50.00			
	Name of Employer (for Individual) First Colonies Anesthesia	e of Employer (for Individual)  Occupation (for Individual)					
	Receipt For: Primary General Other (specify)	Aggregate Ye					
s	UBTOTAL of Receipts This Page (optional)		<u>&gt;</u>	150.00			

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FOR LINE NUMBER:						PAGE	1	50 OF	254
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Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions eto solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIA	ATES LLC POLITIC	AL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Park, Paul, , ,  Mailing Address 510 Golden Oak Terrace	Initial) or Full Organ	ization Name	Date of Receipt
City	State	Zip Code	11 25 2017
Rockville	MD	20850	Transaction ID : SA11AI.12102  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual) First Colonies Anesthesia	Physicia		Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year	r-to-Date ▼ 500.00	]
Full Name of Individual (Last, First, Middle Park, Paul, , ,  Mailing Address 510 Golden Oak Terrace	Initial) or Full Organ	ization Name	Date of Receipt
011		7' 0 1	12 22 2017
City Rockville	State MD	Zip Code 20850	Transaction ID : SA11AI.12205
FEC ID number of contributing federal political committee.	С	20030	Amount of Each Receipt this Period  50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupati Physicia	on (for Individual) n	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year	-to-Date ▼ 550.00	
Full Name of Individual (Last, First, Middle Park, Paul, , ,	Initial) or Full Organ	ization Name	Date of Receipt
Mailing Address 510 Golden Oak Terrace			12 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Rockville	State MD	Zip Code 20850	Transaction ID : SA11AI.12308
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period  50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupati Physiciar	on (for Individual) n	Memo Item Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate Year	-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optional).		)	150.00
TOTAL This Period (last page this line number	er only)		

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	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSO	CIATES LLC POLITICA	L ACTION COMMITTEE
Α.	Full Name of Individual (Last, First, Middle Init Passi, Yuvesh, , ,  Mailing Address 14132 Chinkapin Drive	ial) or Full Or	ganization Name	Date of Receipt
	City	State	Zip Code	12 29 2017  Transaction ID : SA11AI.12391
	Rockville FEC ID number of contributing	МО	20850	Amount of Each Receipt this Period
	Rame of Employer (for Individual)		pation (for Individual)	Memo Item
	First Colonies Anesthesia  Receipt For:  Primary General  Other (specify)	Phys Aggregate	ician ∕ear-to-Date ▼ 250.00	Payroll deduction
_	Other (specify) ▼  Full Name of Individual (Last, First, Middle Init	ial) or Full Or	<u> </u>	
В.	Pauliukonis, Kestutis, , ,  Mailing Address 1813 Solitaire Lane			Date of Receipt  07 25 2017
	City McLean	State VA	Zip Code 22101	Transaction ID : SA11AI.11685  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) First Colonies Anesthesia	Occu Phys	pation (for Individual) sician	Memo Item Payroll deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate \	/ear-to-Date ▼	
<del></del>	Full Name of Individual (Last, First, Middle Init Pauliukonis, Kestutis, , ,	ial) or Full Or	ganization Name	Date of Receipt
	Mailing Address 1813 Solitaire Lane			08 25 2017
	City McLean	State VA	Zip Code 22101	Transaction ID : SA11AI.11796  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) First Colonies Anesthesia	Occu Physi	pation (for Individual) ician	Memo Item Payroll deduction
	Receipt For:  Primary General  Other (specify)	Aggregate \	/ear-to-Date ▼ 350.00	
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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Pauliukonis, Kestutis, , , Date of Receipt Mailing Address 1813 Solitaire Lane 2017 City Zip Code State Transaction ID: SA11AI.11898 VA McI ean 22101 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Pauliukonis, Kestutis, , , Date of Receipt Mailing Address 1813 Solitaire Lane 10 2017 City State Zip Code Transaction ID: SA11AI.12000 VA McLean 22101 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 450.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Pauliukonis, Kestutis, , , Date of Receipt Mailing Address 1813 Solitaire Lane 25 2017 City State Zip Code Transaction ID: SA11AI.12103 VAMcLean 22101 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 150.00

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

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F	OR	LINE	NU	<b>MBER</b>	:	PAGE	: 1	53 OF	 254
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		13		14		15		16	17

Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Pauliukonis, Kestutis, , , Date of Receipt Mailing Address 1813 Solitaire Lane 2017 City Zip Code State Transaction ID: SA11AI.12206 VA McI ean 22101 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Pauliukonis, Kestutis, , , Date of Receipt Mailing Address 1813 Solitaire Lane 2017 City State Zip Code Transaction ID: SA11AI.12309 VA McLean 22101 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 600.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Peck, Michael, , , Date of Receipt Mailing Address 4 Farm Haven Court 25 2017 City State Zip Code Transaction ID: SA11AI.11708 MD Rockville 20852 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify)

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

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F	OR	LINE	NU	<b>MBER</b>	:	PAGE	: 1	54 OF	 254
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		13		14		15		16	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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Peck, Michael, , , Date of Receipt Mailing Address 4 Farm Haven Court 2017 City Zip Code State Transaction ID: SA11AI.11818 MD Rockville 20852 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 525.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Peck, Michael, , , Date of Receipt Mailing Address 4 Farm Haven Court 2017 City State Zip Code Transaction ID: SA11AI.11920 MD 20852 Rockville Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 600.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Peck, Michael, , , Date of Receipt Mailing Address 4 Farm Haven Court 25 2017 City State Zip Code Transaction ID: SA11AI.12022 MD Rockville 20852 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 675.00 Other (specify) 225.00 SUBTOTAL of Receipts This Page (optional).....

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Peck, Michael, , , Date of Receipt Mailing Address 4 Farm Haven Court 2017 City Zip Code State Transaction ID: SA11AI.12125 MD Rockville 20852 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Peck, Michael, , , Date of Receipt Mailing Address 4 Farm Haven Court 2017 City State Zip Code Transaction ID: SA11AI.12228 MD 20852 Rockville Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 825.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Peck, Michael, , , Date of Receipt Mailing Address 4 Farm Haven Court 29 2017 City State Zip Code Transaction ID: SA11AI.12331 MD Rockville 20852 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) 225.00 SUBTOTAL of Receipts This Page (optional).....

FC	R	LINE	NU	<b>MBER</b>	:	PAGE	: 1	56 OF	254
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$\rangle$	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA	A ASSOC	CIATES LLC POLITICAL	ACTION COMMITTEE
١.	Full Name of Individual (Last, First, Middle Initia Peruvemba, Ramani, , , Mailing Address 8302 Fox Haven Drive	l) or Full Org	ganization Name	Date of Receipt
		Ctata	Zin Codo	07 25 2017
	City McLean	State VA	Zip Code 22102	Transaction ID : SA11AI.11686  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual)		pation (for Individual)	Memo Item
	First Colonies Anesthesia	Physi	cian	Payroll deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 300.00	
3.	Full Name of Individual (Last, First, Middle Initia Peruvemba, Ramani, , ,  Mailing Address 8302 Fox Haven Drive	l) or Full Org	ganization Name	Date of Receipt
				08 25 2017
	City	State	Zip Code	Transaction ID : SA11AI.11797
	McLean	VA	22102	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) First Colonies Anesthesia	Occup Physi	pation (for Individual) ician	Memo Item Payroll deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 350.00	
 ).	Full Name of Individual (Last, First, Middle Initia Peruvemba, Ramani, , ,	l) or Full Org	ganization Name	Date of Receipt
	Mailing Address 8302 Fox Haven Drive			09 25 2017
	City	State	Zip Code	Transaction ID : SA11AI.11899
	McLean	VA	22102	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) First Colonies Anesthesia	Occup Physic	oation (for Individual) cian	Memo Item Payroll deduction
	Receipt For:	Aggregate Y	'ear-to-Date ▼	
	Primary General Other (specify)		400.00	
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FC	R	LINE	NU	<b>MBER</b>	:	PAGE	: 1	57 OF	254
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	X	11a		11b		11c		12	
		13		14		15		16	17

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NAME OF COMMITTEE (In Full)

FIRST COLONIES ANESTHE	SIA ASSOC	CIATES LLC POLITICA	L ACTION COMMITTEE
Full Name of Individual (Last, First, Middle In Peruvemba, Ramani, , ,	nitial) or Full Org	janization Name	Date of Receipt
Mailing Address 8302 Fox Haven Drive			10 25 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City McLean	State VA	Zip Code 22102	Transaction ID : SA11AI.12001  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occup Physic	oation (for Individual) cian	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Yo	ear-to-Date ▼ 450.00	
Full Name of Individual (Last, First, Middle I Peruvemba, Ramani, , , Mailing Address 8302 Fox Haven Drive	nitial) or Full Org	ganization Name	Date of Receipt
City McLean	State VA	Zip Code 22102	Transaction ID : SA11AI.12104  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occup Physic	oation (for Individual) ician	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 500.00	
Full Name of Individual (Last, First, Middle In Peruvemba, Ramani, , ,	nitial) or Full Org	janization Name	Date of Receipt
Mailing Address 8302 Fox Haven Drive			12 22 2017
City McLean	State VA	Zip Code 22102	Transaction ID : SA11AI.12207  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual) First Colonies Anesthesia	Physic		Memo Item Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate Yo	ear-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optional)		<b>•</b>	150.00
TOTAL This Period (last page this line numbe	r only)		

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Peruvemba, Ramani, , , Date of Receipt Mailing Address 8302 Fox Haven Drive 2017 City Zip Code State Transaction ID: SA11AI.12310 VA McI ean 22102 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Peterkin, Michael, , , Date of Receipt Mailing Address 1400 Church St. NW, #204 2017 City State Zip Code Transaction ID: SA11AI.11714 DC Washington 20005 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Peterkin, Michael, , , Date of Receipt Mailing Address 1400 Church St. NW, #204 25 2017 City Zip Code State Transaction ID: SA11AI.11824 DC Washington 20005 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify)

150.00

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F	OR	LINE	NU	MBER	:	PAGE	: 1	59 OF	254
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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Peterkin, Michael, , , Date of Receipt Mailing Address 1400 Church St. NW, #204 2017 City Zip Code State Transaction ID: SA11AI.11926 DC Washington 20005 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Peterkin, Michael, , , Date of Receipt Mailing Address 1400 Church St. NW, #204 10 2017 City State Zip Code Transaction ID: SA11AI.12028 DC Washington 20005 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 450.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Peterkin, Michael, , , Date of Receipt Mailing Address 1400 Church St. NW, #204 25 2017 City Zip Code State Transaction ID: SA11AI.12131 DC Washington 20005 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

F	OR	LINE	NU	MBER	:	PAGE	1	60 OF	254
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	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name of Individual (Last, First, Middle In Peterkin, Michael, , , Mailing Address 1400 Church St. NW, #204	itial) or Full Organization Name	Date of Receipt
City	State Zip Code	12 22 2017  Transaction ID : SA11AI.12234
Washington  FEC ID number of contributing federal political committee.	DC 20005	Amount of Each Receipt this Period 50.00
Name of Employer (for Individual)  First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼	Occupation (for Individual) Physician  Aggregate Year-to-Date ▼  550.00	Memo Item Payroll deduction
Full Name of Individual (Last, First, Middle In 3. Peterkin, Michael, , ,	7 7 7	Date of Receipt
Mailing Address 1400 Church St. NW, #204  City Washington  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  First Colonies Anesthesia  Receipt For:  Primary General Other (specify) ▼	State Zip Code 20005  C  Occupation (for Individual) Physician  Aggregate Year-to-Date   600.00	Transaction ID : SA11AI.12336 Amount of Each Receipt this Period  50.00  Memo Item Payroll deduction
Full Name of Individual (Last, First, Middle In Pirovic, Eugen, , ,  Mailing Address 3912 Calverton Drive  City Hyattsville	State Zip Code MD 20782	Date of Receipt  07
FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  First Colonies Anesthesia  Receipt For:  Primary  Other (specify)	Occupation (for Individual) Physician  Aggregate Year-to-Date ▼  300.00	Memo Item Payroll deduction
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	150.00
TOTAL This Period (last page this line number	only)	

First Colonies Anesthesia

Other (specify)

General

Receipt For:

Primary

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

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

				MBER	PAGE	1	61 OF	254	
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SUBTOTAL of Receipts This Page (optional)			,		,	Ξ	150	.00	
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450.00

Physician

Aggregate Year-to-Date ▼

Payroll deduction

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

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Pirovic, Eugen, , , Date of Receipt Mailing Address 3912 Calverton Drive 2017 City Zip Code State Transaction ID: SA11AI.12130 MD Hyattsville 20782 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Pirovic, Eugen, , , Date of Receipt Mailing Address 3912 Calverton Drive 2017 City State Zip Code Transaction ID: SA11AI.12233 MD Hyattsville 20782 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 550.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Pirovic, Eugen, , , Date of Receipt Mailing Address 3912 Calverton Drive 29 2017 City State Zip Code Transaction ID: SA11AI.12335 MD Hyattsville 20782 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

F	OR	LINE	NU	MBER	:	PAGE	1	63 OF		254
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		any person for the purpose of soliciting contributions nmittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POL	ITICAL ACTION COMMITTEE
A. Full Name of Individual (Last, First, Middle Poursharif, Naeem, , ,  Mailing Address 9506 Edgeley Rd	Initial) or Full Organization Name	Date of Receipt
City	State Zip Code	07 25 2017
Bethesda	MD 20814	Transaction ID : SA11AI.11701  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
First Colonies Anesthesia	Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.0	
Full Name of Individual (Last, First, Middle Poursharif, Naeem, , ,  Mailing Address 9506 Edgeley Rd	Initial) or Full Organization Name	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.11812
Bethesda	MD 20814	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	00
Full Name of Individual (Last, First, Middle C. Poursharif, Naeem, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 9506 Edgeley Rd		09 25 2017
City Bethesda	State Zip Code 20814	Transaction ID : SA11AI.11914  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:  Primary General Other (specify)	Aggregate Year-to-Date ▼ 400.0	
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line numb		

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	e name and address of any political committee t	
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name of Individual (Last, First, Middle In Poursharif, Naeem, , ,  Mailing Address 9506 Edgeley Rd	nitial) or Full Organization Name	Date of Receipt
City	State Zip Code	10 25 2017 Transaction ID : SA11AI.12016
Bethesda	MD 20814	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name of Individual (Last, First, Middle In Poursharif, Naeem, , ,  Mailing Address 9506 Edgeley Rd	nitial) or Full Organization Name	Date of Receipt
Mailing Address 9506 Edgeley Rd  City	State Zip Code	11 25 2017  Transaction ID : SA11AI.12119
Bethesda	MD 20814	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name of Individual (Last, First, Middle In Poursharif, Naeem, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 9506 Edgeley Rd		12 22 2017
City Bethesda	State Zip Code MD 20814	Transaction ID : SA11AI.12222  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number	only)	

FO	R LINE	NUI	MBER	PAGE	: 1	65 OF	:	254	
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or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle In Poursharif, Naeem, , ,	itial) or Full Organization Name	Date of Receipt
Mailing Address 9506 Edgeley Rd		12 29 2017
City	State Zip Code MD 20814	Transaction ID : SA11AI.12325
Bethesda	MD	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
First Colonies Anesthesia	Physician	Payroll deduction
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify) ▼	600.00	
Full Name of Individual (Last, First, Middle In	itial) or Full Organization Name	Date of Receipt
Mailing Address 6906 Granite Ridge Ct.		07 25 2017
City	State Zip Code	Transaction ID : SA11AI.11729
Baltimore	MD 21209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name of Individual (Last, First, Middle In	itial) or Full Organization Name	Date of Receipt
Mailing Address 6906 Granite Ridge Ct.		08 25 2017
City	State Zip Code MD 21209	Transaction ID : SA11AI.11839
Baltimore	MD 21209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:	Aggregate Year-to-Date ▼	-
Primary General Other (specify)	350.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number	only)	

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

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Richman, Jeffrey, , , Date of Receipt Mailing Address 6906 Granite Ridge Ct. 2017 City State Zip Code Transaction ID: SA11AI.11940 MD **Baltimore** 21209 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Richman, Jeffrey, , , Date of Receipt Mailing Address 6906 Granite Ridge Ct. 10 2017 City State Zip Code Transaction ID: SA11AI.12042 **Baltimore** MD 21209 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician

Receipt For:  Primary General  Other (specify) ▼			
Full Name of Individual (Last, First, Middle In Richman, Jeffrey, , ,  Mailing Address 6906 Granite Ridge Ct.	nitial) or Full Orga	anization Name	Date of Receipt  11 25 2017
City	State	Zip Code	Transaction ID : SA11AI.12145
Baltimore	MD	21209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
First Colonies Anesthesia	Physic	ian	Payroll deduction
Receipt For: Primary General Other (specify)			
UBTOTAL of Receipts This Page (optional)			150.00

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	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSOC	CIATES LLC POLITICA	AL ACTION COMMITTEE
A.	Full Name of Individual (Last, First, Middle Init Richman, Jeffrey, , ,  Mailing Address 6906 Granite Ridge Ct.	ial) or Full Org	ganization Name	Date of Receipt
	City	State	Zip Code 21209	12 22 2017  Transaction ID : SA11AI.12248
	FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period  50.00		
	Name of Employer (for Individual)  First Colonies Anesthesia  Receipt For:  □ Primary □ General □ Other (specify) ▼	Memo Item Payroll deduction		
В.	Full Name of Individual (Last, First, Middle Init Richman, Jeffrey, , ,  Mailing Address 6906 Granite Ridge Ct.	ial) or Full Org	ganization Name	Date of Receipt  12 29 2017
	City Baltimore	State MD	Zip Code 21209	Transaction ID : SA11AI.12350  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.  Name of Employer (for Individual)	C	pation (for Individual)	50.00  Memo Item
	First Colonies Anesthesia	Physi	ician	Payroll deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 600.00	
	Full Name of Individual (Last, First, Middle Init Rizzuto, Charles, , ,	ial) or Full Orç	ganization Name	Date of Receipt
	Mailing Address 6409 Pinehurst Rd			07 25 2017
	City Baltimore	State MD	Zip Code 21212	Transaction ID : SA11AI.11726  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) First Colonies Anesthesia	Physic		Memo Item Payroll deduction
	Receipt For: Primary General Other (specify)	Aggregate Y	ear-to-Date ▼ 300.00	
s	UBTOTAL of Receipts This Page (optional)			150.00
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Use separate schedule(s) for each category of the Detailed Summary Page

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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) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE					
Full Name of Individual (Last, First, Middle Rizzuto, Charles, , ,  Mailing Address 6409 Pinehurst Rd	Initial) or Full Organization Name	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City Baltimore FEC ID number of contributing	State Zip Code MD 21212	Transaction ID : SA11AI.11836  Amount of Each Receipt this Period  50.00					
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00						
Full Name of Individual (Last, First, Middle  Rizzuto, Charles, , ,  Mailing Address 6409 Pinehurst Rd  City  Baltimore  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) First Colonies Anesthesia  Receipt For:  Primary General Other (specify) ▼	State Zip Code MD 21212  C Occupation (for Individual) Physician  Aggregate Year-to-Date ▼ 400.00	Date of Receipt  M M / 25 / 2017  Transaction ID : SA11Al.11937  Amount of Each Receipt this Period  50.00  Memo Item  Payroll deduction					
Full Name of Individual (Last, First, Middle Rizzuto, Charles, , ,  Mailing Address 6409 Pinehurst Rd  City Baltimore  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) First Colonies Anesthesia Receipt For:  Primary General Other (specify)	Initial) or Full Organization Name  State Zip Code 21212  C  Occupation (for Individual) Physician  Aggregate Year-to-Date ▼	Date of Receipt  10 25 2017  Transaction ID: SA11AI.12039  Amount of Each Receipt this Period  50.00  Memo Item  Payroll deduction					
SUBTOTAL of Receipts This Page (optional).	<b>&gt;</b>	150.00					
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Use separate schedule(s) for each category of the Detailed Summary Page

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First Colonies Anesthesia

General

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

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

Receipt For:

Primary

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

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

F	OR	LINE	NU	MBER	PAGE	1	70 OF		254	
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	X	11a		11b		11c		12		
		13		14		15		16		17

Payroll deduction

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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Roth, Jeremy, , Dr., Date of Receipt Mailing Address 913 Hillstead Drive 2017 City State Zip Code Transaction ID: SA11AI.12397 MD Lutherville 21093 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Rothschild, James, , , Date of Receipt Mailing Address 205 Woodlawn Road 07 2017 City State Zip Code Transaction ID: SA11AI.11734 **Baltimore** MD 21210 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual)

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Other (specify) ▼	4	600.00	
Full Name of Individual (Last, First, Middle In Rothschild, James, , ,  Mailing Address 205 Woodlawn Road	itial) or Full Orç	ganization Name	Date of Receipt  08 25 2017
City	State	Zip Code	Transaction ID : SA11AI.11843
Baltimore	MD	21210	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer (for Individual)	Occup	pation (for Individual)	Memo Item
First Colonies Anesthesia	Physic	cian	Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate Y	ear-to-Date ▼ 700.00	
LIDTOTAL of Descripts This Days (entires)			225.00

Physician

Aggregate Year-to-Date ▼

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	FC	DR	LINE	NU	MBER	PAGE	: 1	71 OF	254	
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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Rothschild, James, , , Date of Receipt Mailing Address 205 Woodlawn Road 2017 City Zip Code State Transaction ID: SA11AI.11944 MD **Baltimore** 21210 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Rothschild, James, , , Date of Receipt Mailing Address 205 Woodlawn Road 10 2017 City State Zip Code Transaction ID: SA11AI.12046 MD **Baltimore** 21210 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 900.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Rothschild, James, , , Date of Receipt Mailing Address 205 Woodlawn Road 25 2017 City State Zip Code Transaction ID: SA11AI.12149 MD **Baltimore** 21210 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional).....

FOR	R LINE	NUMBER	PAGE	: 1	72 OF		254		
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Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Ini Rothschild, James, , ,	tial) or Full Organization Name	Date of Receipt
Mailing Address 205 Woodlawn Road		12 22 2017
City	State Zip Code MD 21210	Transaction ID : SA11AI.12252
Baltimore	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
First Colonies Anesthesia	Physician	Payroll deduction
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1100.00	
Full Name of Individual (Last, First, Middle Ini Rothschild, James, , ,	tial) or Full Organization Name	Date of Receipt
Mailing Address 205 Woodlawn Road		12 29 2017
City	State Zip Code	Transaction ID : SA11AI.12354
Baltimore	MD 21210	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	
Full Name of Individual (Last, First, Middle Ini	tial) or Full Organization Name	Date of Receipt
Mailing Address 356 Copperfield Lane		07 25 2017
City	State Zip Code VA 20170	Transaction ID : SA11AI.11752
Herndon	VA   20170	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify)	300.00	
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	250.00
TOTAL This Period (last page this line number	only)	

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F	OR	LINE	NU	IMBER	PAGE	1	73 OF		254	
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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Salah, Hany, , , Date of Receipt Mailing Address 356 Copperfield Lane 2017 City Zip Code State Transaction ID: SA11AI.11860 VA Herndon 20170 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Salah, Hany, , , Date of Receipt Mailing Address 356 Copperfield Lane 2017 City State Zip Code Transaction ID: SA11AI.11961 VA Herndon 20170 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 400.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Salah, Hany, , , Date of Receipt Mailing Address 356 Copperfield Lane 25 2017 City State Zip Code Transaction ID: SA11AI.12063 VAHerndon 20170 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Salah, Hany, , , Date of Receipt Mailing Address 356 Copperfield Lane 2017 City Zip Code State Transaction ID: SA11AI.12166 VA Herndon 20170 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Salah, Hany, , , Date of Receipt Mailing Address 356 Copperfield Lane 2017 City State Zip Code Transaction ID: SA11AI.12269 VA Herndon 20170 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 550.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Salah, Hany, , , Date of Receipt Mailing Address 356 Copperfield Lane 29 2017 City State Zip Code Transaction ID: SA11AI.12371 VAHerndon 20170 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify)

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

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Sardarian, Leudvig, , , Date of Receipt Mailing Address 11601 Brandy Hall Lane 2017 City Zip Code State Transaction ID: SA11AI.11770 MD North Potomac 20878 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Sardarian, Leudvig, , , Date of Receipt Mailing Address 11601 Brandy Hall Lane 2017 City State Zip Code Transaction ID: SA11AI.11878 North Potomac MD 20878 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 350.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Sardarian, Leudvig, , , Date of Receipt Mailing Address 11601 Brandy Hall Lane 25 2017 City Zip Code State Transaction ID: SA11AI.11979 MD North Potomac 20878 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify)

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Sardarian, Leudvig, , , Date of Receipt Mailing Address 11601 Brandy Hall Lane 2017 City Zip Code State Transaction ID: SA11AI.12081 MD North Potomac 20878 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Sardarian, Leudvig, , , Date of Receipt Mailing Address 11601 Brandy Hall Lane 2017 11 City State Zip Code Transaction ID: SA11AI.12184 North Potomac MD 20878 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Sardarian, Leudvig, , , Date of Receipt Mailing Address 11601 Brandy Hall Lane 22 2017 City Zip Code State Transaction ID: SA11AI.12287 MD North Potomac 20878 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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$\rangle$	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA	A ASSO	CIATES LLO	C POLITICAL	ACTION COMMITTEE
١.	Full Name of Individual (Last, First, Middle Initia Sardarian, Leudvig, , ,  Mailing Address 11601 Brandy Hall Lane	ll) or Full O	rganization Name		Date of Receipt
	City	State	Zip Code		12 29 2017  Transaction ID : SA11AI.12389
	North Potomac	MD	20878		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			50.00
	Name of Employer (for Individual)		upation (for Individ	dual)	Memo Item
	First Colonies Anesthesia	Phys	sician		Payroll deduction
	Receipt For:  Primary General  Other (specify) ▼	600.00			
3.	Full Name of Individual (Last, First, Middle Initia Scheinman, Gerald, , Dr., Mailing Address 8010 Summer Mill Court	ll) or Full O	rganization Name		Date of Receipt
	Walling Address 8010 Summer Will Court				07 25 2017
	City	State	Zip Code		Transaction ID : SA11AI.11687
	Bethesda	MD	20817		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			50.00
	Name of Employer (for Individual) First Colonies Anesthesia		upation (for Individusions) sician	dual)	Memo Item Payroll deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼	300.00	
).	Full Name of Individual (Last, First, Middle Initia Scheinman, Gerald, , Dr.,	l) or Full O	rganization Name		Date of Receipt
	Mailing Address 8010 Summer Mill Court				08 25 2017
	City Bethesda	State MD	Zip Code 20817		Transaction ID : SA11AI.11798
		IVID	20017		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			50.00
	Name of Employer (for Individual) First Colonies Anesthesia		upation (for Individ sician	dual)	Memo Item Payroll deduction
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify)	350.00			
s	UBTOTAL of Receipts This Page (optional)			<b>&gt;</b>	150.00
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Use separate schedule(s) for each category of the Detailed Summary Page

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С.	Full Name of Individual (Last, First, Middle In Scheinman, Gerald, , Dr.,	anization Name	Date of Receipt	
	Mailing Address 8010 Summer Mill Court			11 25 2017
	City	State	Zip Code	Transaction ID : SA11AI.12105
	Bethesda	MD	20817	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item
	First Colonies Anesthesia	Physici	an	Payroll deduction
	Receipt For: Primary General Other (specify)	Aggregate Ye	ar-to-Date ▼ 500.00	
S	SUBTOTAL of Receipts This Page (optional)		<b>&gt;</b>	150.00
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				FEC Schedule A (Form 3X) Rev. 06/20

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F	OR	LINE	NU	MBER	:	PAGE		254			
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		Transaction ID 1 C/117 till 11 CC						
Gettysburg	PA 17325	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	50.00						
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item						
First Colonies Anesthesia	Physician	Payroll deduction						
Receipt For:  Primary General Other (specify)								
SUBTOTAL of Receipts This Page (optional).	UBTOTAL of Receipts This Page (optional)▶							
TOTAL This Period (last page this line number	er only)							
		FEC Schedule A (Form 3X) Rev. 06/2						

First Colonies Anesthesia

Other (specify)

General

Receipt For:

Primary

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

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

F	OR	LINE	NU	<b>MBER</b>	PAGE		254					
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	X	11a		11b		11c		12				
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SUBTOTAL of Receipts This Page (optional)			,			,	_	15	0.00	)	
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450.00

Physician

Aggregate Year-to-Date ▼

Payroll deduction

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F	OR	LINE	NU	MBER	:	PAGE	1	81 OF	254
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	Statements may not be sold or used by any pers e name and address of any political committee to					
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE				
Full Name of Individual (Last, First, Middle In Seymour, Mark, , ,	itial) or Full Organization Name	Date of Receipt				
Mailing Address 400 Herrs Ridge Road		11 25 2017				
City Gettysburg	State Zip Code PA 17325	Transaction ID : SA11AI.12174				
FEC ID number of contributing	1702	Amount of Each Receipt this Period				
federal political committee.		50.00				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
First Colonies Anesthesia	Physician	Payroll deduction				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	500.00					
Full Name of Individual (Last, First, Middle In Seymour, Mark, , ,	itial) or Full Organization Name	Date of Receipt				
Mailing Address 400 Herrs Ridge Road		12 22 2017				
City	State Zip Code	Transaction ID : SA11AI.12277				
Gettysburg	PA 17325	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00					
Full Name of Individual (Last, First, Middle In	itial) or Full Organization Name	Date of Receipt				
Mailing Address 400 Herrs Ridge Road		12 29 2017				
City	State Zip Code	Transaction ID : SA11AI.12379				
Gettysburg	PA 17325	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify)	600.00					
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	150.00				
TOTAL This Period (last page this line number	only)					

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Any information copied from such or for commercial purposes, other	h Reports and Statemener than using the name	nts may not land address	oe sold or used by any of any political committee	person for ee to solic	the purpose of soliciting contributions it contributions from such committee.				
NAME OF COMMITTEE (IN F FIRST COLONIES A	,	SOCIAT	ES LLC POLITION	CAL AC	CTION COMMITTEE				
Full Name of Individual (Last, Singh, Ravi, , ,  Mailing Address 1155 Ripley 9		Full Organiza	ition Name		ate of Receipt				
011	To:			L	07 25 2017				
City Silver Spring	Stat MD	'	o Code 20910		ransaction ID : SA11AI.11705				
FEC ID number of contributing federal political committee.				An	Amount of Each Receipt this Period 50.00				
Name of Employer (for Individual First Colonies Anesthesia Receipt For:	·	Occupation Physician egate Year-to	(for Individual)	Pay	Memo Item roll deduction				
Primary Gener Other (specify) ▼		syate rear-to	300.00						
Full Name of Individual (Last, Singh, Ravi, , , Mailing Address 1155 Ripley S		- Full Organiza	tion Name		tte of Receipt				
City	Stat	to 7:.	o Code	_  L	08 25 2017				
Silver Spring	ME	'	20910		ransaction ID : SA11AI.11815 nount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	g C				50.00				
Name of Employer (for Individent First Colonies Anesthesia	dual)	Occupation Physician	(for Individual)	Pay	Memo Item roll deduction				
Receipt For:  Primary Gener  Other (specify) ▼		egate Year-to	o-Date ▼ 350.00						
Full Name of Individual (Last, Singh, Ravi, , ,	First, Middle Initial) or F	Full Organiza	ition Name	Da	ate of Receipt				
Mailing Address 1155 Ripley	ı			L	09 25 2017				
City Silver Spring	Stat ME		o Code 0910		Transaction ID : SA11AI.11917				
FEC ID number of contributing federal political committee.				An	nount of Each Receipt this Period				
Name of Employer (for Individual First Colonies Anesthesia		Physician	(for Individual)	Pay	Memo Item roll deduction				
Receipt For: Primary Gener Other (specify)		egate Year-to	-Date ▼ 400.00						
SUBTOTAL of Receipts This Pa	age (optional)			<u> </u>	150.00				
TOTAL This Period (last page t	his line number only)			_					

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F	OR	LINE	NU	MBER	:	PAGE	1	83 OF	 254
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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Singh, Ravi,,, Date of Receipt Mailing Address 1155 Ripley Street, #1716 2017 City Zip Code State Transaction ID: SA11AI.12019 Silver Spring MD 20910 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Singh, Ravi, , , Date of Receipt Mailing Address 1155 Ripley Street, #1716 2017 City State Zip Code Transaction ID: SA11AI.12122 Silver Spring MD 20910 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Singh, Ravi, , , Date of Receipt Mailing Address 1155 Ripley Street, #1716 22 2017 City Zip Code State Transaction ID: SA11AI.12225 MD Silver Spring 20910 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify)

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

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	Statements may not be sold or used by any pene name and address of any political committee					
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE				
Full Name of Individual (Last, First, Middle In Singh, Ravi, , ,	nitial) or Full Organization Name	Date of Receipt				
Mailing Address 1155 Ripley Street, #1716		12 29 2017				
City Silver Spring	State Zip Code MD 20910	Transaction ID : SA11AI.12328				
Silver Spring	MD 20910	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
First Colonies Anesthesia	Physician	Payroll deduction				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼						
Full Name of Individual (Last, First, Middle II	nitial) or Full Organization Name					
Sowry, James, , ,		Date of Receipt				
Mailing Address 5008 Green Bridge Rd.		10 25 2017				
City	State Zip Code	Transaction ID : SA11AI.12056				
Dayton	MD 21036	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	25.00				
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  225.00					
Full Name of Individual (Last, First, Middle In Sowry, James, , ,	nitial) or Full Organization Name	Date of Receipt				
Mailing Address 5008 Green Bridge Rd.		11 25 2017				
City	State Zip Code	Transaction ID : SA11AI.12159				
Dayton	MD 21036	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	25.00				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
First Colonies Anesthesia	Physician	Payroll deduction				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify)	250.00					
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	100.00				
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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Sowry, James, , , Date of Receipt Mailing Address 5008 Green Bridge Rd. 2017 City Zip Code State Transaction ID: SA11AI.12262 MD Dayton 21036 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Sowry, James, , , Date of Receipt Mailing Address 5008 Green Bridge Rd. 2017 City State Zip Code Transaction ID: SA11AI.12364 MD Dayton 21036 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Study, Robert, , , Date of Receipt Mailing Address 6 Beall Spring Court 25 2017 City State Zip Code Transaction ID: SA11AI.11709 MD Potomac 20854 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 100.00 SUBTOTAL of Receipts This Page (optional).....

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Study, Robert, , , Date of Receipt Mailing Address 6 Beall Spring Court 2017 City Zip Code State Transaction ID: SA11AI.11819 MD Potomac 20854 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Study, Robert, , , Date of Receipt Mailing Address 6 Beall Spring Court 2017 City State Zip Code Transaction ID: SA11AI.11921 MD 20854 Potomac Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 400.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Study, Robert, , , Date of Receipt Mailing Address 6 Beall Spring Court 25 2017 City State Zip Code Transaction ID: SA11AI.12023 MD Potomac 20854 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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

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

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Study, Robert, , , Date of Receipt Mailing Address 6 Beall Spring Court 11 2017 City State Zip Code Transaction ID: SA11AI.12126 MD Potomac 20854 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Study, Robert, , , Date of Receipt Mailing Address 6 Beall Spring Court 12 2017 City State Zip Code Transaction ID: SA11AI.12229 MD 20854 Potomac Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 550.00

		j					
Full Name of Individual (Last, First, Middle In Study, Robert, , ,	nitial) or Full Org	ganization Name	Date of Receipt				
Mailing Address 6 Beall Spring Court							
City	State	Zip Code	Transaction ID : SA11AI.12332				
Potomac	MD	20854	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		50.00				
Name of Employer (for Individual)	Occup	pation (for Individual)	Memo Item				
First Colonies Anesthesia	Physi	cian	Payroll deduction				
Receipt For: Primary General Other (specify)	Aggregate Y	/ear-to-Date ▼					

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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)

FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle In Sullivan, Lisa, , ,	nitial) or Full Org	ganization Name	Date of Receipt
Mailing Address 4639 Teen Barnes Road			07 25 2017
City Frederick	State MD	Zip Code 21703	Transaction ID : SA11AI.11761  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occup Physi	oation (for Individual) cian	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	rear-to-Date ▼	
Full Name of Individual (Last, First, Middle In Sullivan, Lisa, , ,	nitial) or Full Org	ganization Name	Date of Receipt
Mailing Address 4639 Teen Barnes Road			08 25 2017
City Frederick	State MD	Zip Code 21703	Transaction ID : SA11AI.11869  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occup Phys	oation (for Individual) ician	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 350.00	
Full Name of Individual (Last, First, Middle In Sullivan, Lisa, , ,	nitial) or Full Org	ganization Name	Date of Receipt
Mailing Address 4639 Teen Barnes Road		T: 0 !	09 25 2017
City Frederick	State MD	Zip Code 21703	Transaction ID : SA11AI.11970  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occup Physic	pation (for Individual) cian	Memo Item Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate Y	'ear-to-Date ▼ 400.00	
			150.00

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

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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)

$\rangle$	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA		_ ACTION COMMITTEE
Α.	Full Name of Individual (Last, First, Middle Initial Sullivan, Lisa, , ,  Mailing Address 4639 Teen Barnes Road  City Frederick  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify)	Date of Receipt  10 25 2017  Transaction ID : SA11AI.12072  Amount of Each Receipt this Period  50.00  Memo Item  Payroll deduction	
3.	Primary General Other (specify) ▼	State Zip Code MD 21703  C  Occupation (for Individual) Physician  Aggregate Year-to-Date   500.00	Date of Receipt  11
<b>&gt;</b> .	Full Name of Individual (Last, First, Middle Initial Sullivan, Lisa, , ,  Mailing Address 4639 Teen Barnes Road  City Frederick  FEC ID number of contributing federal political committee.  Name of Employer (for Individual)  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code MD 21703  C Occupation (for Individual) Physician  Aggregate Year-to-Date   550.00	Date of Receipt  12 22 2017  Transaction ID: SA11AI.12278  Amount of Each Receipt this Period  50.00  Memo Item  Payroll deduction
S	UBTOTAL of Receipts This Page (optional)	<u> </u>	150.00
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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Sullivan, Lisa, , , Date of Receipt Mailing Address 4639 Teen Barnes Road 2017 City Zip Code State Transaction ID: SA11AI.12380 MD Frederick 21703 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Sullivan, Robert, , , Date of Receipt Mailing Address 4639 Teen Barnes Road 2017 City State Zip Code Transaction ID: SA11AI.11762 MD Frederick 21703 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Sullivan, Robert, , , Date of Receipt Mailing Address 4639 Teen Barnes Road 25 2017 City State Zip Code Transaction ID: SA11AI.11870 MD Frederick 21703 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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

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or for commercial purposes, other than using t	the name and address of any political committee	to solicit contributions from such confiffittee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Sullivan, Robert, , ,  Mailing Address 4639 Teen Barnes Road  City Frederick  FEC ID number of contributing federal political committee.	Initial) or Full Organization Name  State Zip Code MD 21703	Date of Receipt  09 25 2017  Transaction ID : SA11AI.11971  Amount of Each Receipt this Period  50.00
Name of Employer (for Individual)  First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼	Memo Item Payroll deduction	
Full Name of Individual (Last, First, Middle Sullivan, Robert, , ,  Mailing Address 4639 Teen Barnes Road  City Frederick  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) First Colonies Anesthesia  Receipt For:  Primary General Other (specify)   Other (specify)	Initial) or Full Organization Name  State Zip Code MD 21703  C  Occupation (for Individual) Physician  Aggregate Year-to-Date ▼	Date of Receipt  10 25 2017  Transaction ID: SA11AI.12073  Amount of Each Receipt this Period  50.00  Memo Item  Payroll deduction
Full Name of Individual (Last, First, Middle Sullivan, Robert, , ,  Mailing Address 4639 Teen Barnes Road  City Frederick  FEC ID number of contributing federal political committee.  Name of Employer (for Individual) First Colonies Anesthesia Receipt For:  Primary General Other (specify)	Initial) or Full Organization Name  State Zip Code 21703  C  Occupation (for Individual) Physician  Aggregate Year-to-Date ▼	Date of Receipt  11 25 2017  Transaction ID: SA11AI.12176  Amount of Each Receipt this Period  50.00  Memo Item  Payroll deduction
SUBTOTAL of Receipts This Page (optional).	<b>&gt;</b>	150.00
TOTAL This Period (last page this line number	er only)	

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Sullivan, Robert, , , Date of Receipt Mailing Address 4639 Teen Barnes Road 2017 City Zip Code State Transaction ID: SA11AI.12279 MD Frederick 21703 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Sullivan, Robert, , , Date of Receipt Mailing Address 4639 Teen Barnes Road 2017 City State Zip Code Transaction ID: SA11AI.12381 MD Frederick 21703 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 600.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Swann, Louis, , , Date of Receipt Mailing Address PO Box 6081 25 2017 City Zip Code State Transaction ID: SA11AI.11710 VAMcLean 22106 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify)

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Swann, Louis, , , Date of Receipt Mailing Address PO Box 6081 2017 City Zip Code State Transaction ID: SA11AI.11820 VA McI ean 22106 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Swann, Louis, , , Date of Receipt Mailing Address PO Box 6081 2017 City State Zip Code Transaction ID: SA11AI.11922 VA McLean 22106 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 400.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Swann, Louis, , , Date of Receipt Mailing Address PO Box 6081 25 2017 City Zip Code State Transaction ID: SA11AI.12024 VAMcLean 22106 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

Name of Employer (for Individual)

General

First Colonies Anesthesia

Other (specify)

Receipt For:

Т

Primary

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Swann, Louis, , , Date of Receipt Mailing Address PO Box 6081 2017 City Zip Code State Transaction ID: SA11AI.12127 VA McI ean 22106 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Swann, Louis, , , Date of Receipt Mailing Address PO Box 6081 2017 City State Zip Code Transaction ID: SA11AI.12230 VA McLean 22106 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 550.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Tan, Rojack, , , Date of Receipt Mailing Address 507 Goodland Place 25 2017 City State Zip Code Transaction ID: SA11AI.11711 MD Rockville 20850 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee.

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300.00

Occupation (for Individual)

Physician

Aggregate Year-to-Date ▼

Memo Item

Payroll deduction

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

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

or for commercial purposes, other than u	ising the name and address of any political committe	ee to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANES	THESIA ASSOCIATES LLC POLITIC	CAL ACTION COMMITTEE				
Full Name of Individual (Last, First, Mi Tan, Rojack, , , Mailing Address 507 Goodland Place	liddle Initial) or Full Organization Name	Date of Receipt				
City Rockville	State Zip Code MD 20850	7 Transaction ID : SA11AI.11821  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	50.00				
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼						
Full Name of Individual (Last, First, Mingle State 1)  Tan, Rojack, , ,  Mailing Address 507 Goodland Place	liddle Initial) or Full Organization Name	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City Rockville	Transaction ID : SA11AI.11923  Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	ů l					
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00					
Tan, Rojack, , ,	liddle Initial) or Full Organization Name	Date of Receipt				
Mailing Address 507 Goodland Place	State 7's Code	10 25 2017				
City Rockville	State Zip Code MD 20850	Transaction ID : SA11AI.12025  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer (for Individual) First Colonies Anesthesia	Memo Item Payroll deduction					
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 450.00					
SUBTOTAL of Receipts This Page (option	ional)	150.00				
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Other (specify)

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

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Tan, Rojack,,, Date of Receipt Mailing Address 507 Goodland Place 2017 City Zip Code State Transaction ID: SA11AI.12128 MD Rockville 20850 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Tan, Rojack, , , Date of Receipt Mailing Address 507 Goodland Place 2017 City State Zip Code Transaction ID: SA11AI.12231 MD Rockville 20850 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 550.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Tan, Rojack, , , Date of Receipt Mailing Address 507 Goodland Place 29 2017 City Zip Code State Transaction ID: SA11AI.12333 MD Rockville 20850 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General

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600.00

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			e to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSO	CIATES LLC POLITIC	AL ACTION COMMITTEE				
Full Name of Individual (Last, First, Middle Uberoi, Francecsa, , ,  Mailing Address 2901 Boulderton Court	e Initial) or Full Or	ganization Name	Date of Receipt  07 07 2017				
City Baltimore	State MD	Zip Code 21209	Transaction ID : SA11AI.11660  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		25.00				
Name of Employer (for Individual)  First Colonies Anesthesia  Receipt For:  □ Primary □ General  Other (specify) ▼	Phys	pation (for Individual) ician ⁄ear-to-Date ▼ 350.00	Memo Item Payroll deduction				
Full Name of Individual (Last, First, Middle Uberoi, Francecsa, , ,  Mailing Address 2901 Boulderton Court	e Initial) or Full Or	ganization Name	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City Baltimore	State MD	Zip Code 21209	Transaction ID : SA11AI.11661  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	25.00						
Name of Employer (for Individual) First Colonies Anesthesia	Occu Phys	pation (for Individual) sician	Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Receipt For:  Aggregate Year-to-Date ▼  Primary General						
Full Name of Individual (Last, First, Middle C. Uberoi, Francecsa, , ,	e Initial) or Full Or	ganization Name	Date of Receipt				
Mailing Address 2901 Boulderton Court			08 04 2017				
City Baltimore	State MD	Zip Code 21209	Transaction ID : SA11AI.11662  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		25.00				
Name of Employer (for Individual) First Colonies Anesthesia Receipt For:	Physi		Memo Item Payroll deduction				
Primary General Other (specify)	Primary General Aggregate real-to-bate V						
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# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Uberoi, Francecsa, , , Date of Receipt Mailing Address 2901 Boulderton Court 18 2017 City State Zip Code Transaction ID: SA11AI.11663 MD **Baltimore** 21209 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 425.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Uberoi, Francecsa, , , Date of Receipt Mailing Address 2901 Boulderton Court 09 2017 City State Zip Code Transaction ID: SA11AI.11664 **Baltimore** MD 21209 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify)

Care (openly) V	-	4 14	
Full Name of Individual (Last, First, Middle In Uberoi, Francecsa, , ,	itial) or Full Orga	nization Name	Date of Receipt
Mailing Address 2901 Boulderton Court		09 15 2017	
City	State	Zip Code	Transaction ID : SA11AI.11665
Baltimore	MD	21209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer (for Individual)	Occupa	tion (for Individual)	Memo Item
First Colonies Anesthesia	Physicia	an	Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate Yea	ar-to-Date ▼ 475.00	
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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Uberoi, Francecsa, , , Date of Receipt Mailing Address 2901 Boulderton Court 2017 City Zip Code State Transaction ID: SA11AI.11666 MD **Baltimore** 21209 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Uberoi, Francecsa, , , Date of Receipt Mailing Address 2901 Boulderton Court 10 13 2017 City State Zip Code Transaction ID: SA11AI.11667 MD **Baltimore** 21209 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 525.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Uberoi, Francecsa, , , Date of Receipt

Mailing Address 2901 Boulderton Court 2017 City State Zip Code Transaction ID: SA11AI.11668 MD **Baltimore** 21209 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify)

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NAME OF COMMITTEE (In Full)

$\left. \right\rangle$	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA	AS	SOCI	ATES LLC POLITICAL	_ ACTION COMMITTEE
Α.	Full Name of Individual (Last, First, Middle Initial) Uberoi, Francecsa, , ,  Mailing Address 2901 Boulderton Court	or F	ull Orga	nization Name	Date of Receipt  M = M = / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
	City	State	)	Zip Code	Transaction ID : SA11AI.11669
	Baltimore	MD		21209	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			25.00
	Name of Employer (for Individual)			tion (for Individual)	Memo Item
	First Colonies Anesthesia		Physicia	an	Payroll deduction
	Receipt For:  Primary General	Aggre	gate Yea	ar-to-Date ▼	
	Other (specify) ▼		1-4	575.00	
В.	Full Name of Individual (Last, First, Middle Initial) Uberoi, Francecsa, , ,	or Fi	ull Orga	nization Name	Date of Receipt
	Mailing Address 2901 Boulderton Court	T -			11 22 2017
	City	State	)	Zip Code	Transaction ID : SA11AI.11670
	Baltimore	MD		21209	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			25.00
	Name of Employer (for Individual) First Colonies Anesthesia		Occupa Physici	tion (for Individual) an	Memo Item Payroll deduction
		Aggre	gate Yea	ar-to-Date ▼	
	Primary General Other (specify) ▼		. 4	600.00	
<del></del> С.	Full Name of Individual (Last, First, Middle Initial) Uberoi, Francecsa, , ,	or F	ull Orga	nization Name	Date of Receipt
	Mailing Address 2901 Boulderton Court				12 08 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	)	Zip Code	Transaction ID : SA11AI.11671
	Baltimore	IVID		21209	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			25.00
	Name of Employer (for Individual)			tion (for Individual)	Memo Item
	First Colonies Anesthesia Receipt For:		Physicia		Payroll deduction
	Primary General Other (specify)	Aggre	gate Yea	ar-to-Date ▼ 625.00	
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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)

$\rangle$	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA	A ASSOCI	IATES LLC POLITICA	L ACTION COMMITTEE					
Α.	Full Name of Individual (Last, First, Middle Initial Uberoi, Francecsa, , ,	l) or Full Orga	inization Name	Date of Receipt					
	Mailing Address 2901 Boulderton Court			12 21 2017					
	City Baltimore	State MD	Zip Code 21209	Transaction ID : SA11Al.11672  Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		25.00					
	Name of Employer (for Individual) First Colonies Anesthesia	Occupa Physici	ation (for Individual)	Memo Item Payroll deduction					
	Descint Form	Aggregate Yea		Payroll deduction					
В.	Full Name of Individual (Last, First, Middle Initial Underwood, Reed, , ,  Mailing Address 2030 8th Street NW, #512	l) or Full Orga	nization Name	Date of Receipt  07 25 2017					
	City Washington	State DC	Zip Code 20001	Transaction ID : SA11AI.11696  Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		50.00					
	Name of Employer (for Individual) First Colonies Anesthesia	Occupa Physici	ation (for Individual) ian	Memo Item Payroll deduction					
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 300.00						
<u> </u>	Full Name of Individual (Last, First, Middle Initial Underwood, Reed, , ,	l) or Full Orga	nization Name	Date of Receipt					
	Mailing Address 2030 8th Street NW, #512			08					
	City Washington	State DC	Zip Code 20001	Transaction ID : SA11AI.11807  Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		50.00					
	Name of Employer (for Individual) First Colonies Anesthesia Receipt For:	Physicia		Memo Item Payroll deduction					
	Primary General Other (specify)	Aggregate Yea	ar-to-Date ▼ 350.00						
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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Underwood, Reed, , , Date of Receipt Mailing Address 2030 8th Street NW, #512 2017 City Zip Code State Transaction ID: SA11AI.11909 DC Washington 20001 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Underwood, Reed, , , Date of Receipt Mailing Address 2030 8th Street NW, #512 10 2017 City State Zip Code Transaction ID: SA11AI.12011 DC Washington 20001 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 450.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Underwood, Reed, , , Date of Receipt Mailing Address 2030 8th Street NW, #512 25 2017 City Zip Code State Transaction ID: SA11AI.12114 DC Washington 20001 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Underwood, Reed, , , Date of Receipt Mailing Address 2030 8th Street NW, #512 2017 City State Zip Code Transaction ID: SA11AI.12217 DC Washington 20001 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Underwood, Reed, , , Date of Receipt Mailing Address 2030 8th Street NW, #512 12 2017 City State Zip Code Transaction ID: SA11AI.12320 Washington DC 20001 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General

Other (specify) ▼		600.00	
Full Name of Individual (Last, First, Middle In Valedon, Arnaldo, , , ,  Mailing Address 22 Woodfield Court	itial) or Full Or	ganization Name	Date of Receipt  07 25 2017
City Reisterstown	State	Zip Code 21136	Transaction ID : SA11AI.11744
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period  50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occup Physi	oation (for Individual) cian	Memo Item Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate \	Year-to-Date ▼ 300.00	
AIDTOTAL of Descripto This Descriptoral			150.00

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

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Valedon, Arnaldo, , , Date of Receipt Mailing Address 22 Woodfield Court 2017 City Zip Code State Transaction ID: SA11AI.11852 MD 21136 Reisterstown Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Valedon, Arnaldo, , , Date of Receipt Mailing Address 22 Woodfield Court 2017 City State Zip Code Transaction ID: SA11AI.11953 MD Reisterstown 21136 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 400.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Valedon, Arnaldo, , , Date of Receipt Mailing Address 22 Woodfield Court 25 2017 City Zip Code State Transaction ID: SA11AI.12055 MD Reisterstown 21136 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician

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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name of Individual (Last, First, Middle In Valedon, Arnaldo, , ,  Mailing Address 22 Woodfield Court	itial) or Full Organization Name	Date of Receipt
City	State Zip Code	11 25 2017 Transaction ID : SA11AI.12158
Reisterstown	MD 21136	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
First Colonies Anesthesia	Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name of Individual (Last, First, Middle In Valedon, Arnaldo, , ,  Mailing Address 22 Woodfield Court	itial) or Full Organization Name	Date of Receipt
		12 22 2017
City	State Zip Code	Transaction ID : SA11AI.12261
Reisterstown	MD 21136	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name of Individual (Last, First, Middle In Valedon, Arnaldo, , ,	itial) or Full Organization Name	Date of Receipt
Mailing Address 22 Woodfield Court		12 29 2017
City	State Zip Code MD 21136	Transaction ID : SA11AI.12363
Reisterstown	MD 21136	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	600.00	
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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Vanguri, Sanjay, , , Date of Receipt Mailing Address 4109 Celtic Way 2017 City Zip Code State Transaction ID: SA11AI.12080 MD Frederick 21704 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Vanguri, Sanjay, , , Date of Receipt Mailing Address 4109 Celtic Way 2017 11 City State Zip Code Transaction ID: SA11AI.12183 MD Frederick 21704 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Vanguri, Sanjay, , , Date of Receipt Mailing Address 4109 Celtic Way 22 2017 City Zip Code State Transaction ID: SA11AI.12286 MD Frederick 21704 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional).....

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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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Vanguri, Sanjay, , , Date of Receipt Mailing Address 4109 Celtic Way 2017 City Zip Code State Transaction ID: SA11AI.12388 MD Frederick 21704 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Visnich Jr., Nicholus, , , Date of Receipt Mailing Address 10816 Willow Run Court 10 2017 City State Zip Code Transaction ID: SA11AI.12003 MD 20854 Potomac Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 225.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Visnich Jr., Nicholus, , , Date of Receipt Mailing Address 10816 Willow Run Court 25 2017 City Zip Code State Transaction ID: SA11AI.12106 MD Potomac 20854 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional).....

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Visnich Jr., Nicholus, , , Date of Receipt Mailing Address 10816 Willow Run Court 2017 City Zip Code State Transaction ID: SA11AI.12209 MD Potomac 20854 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Visnich Jr., Nicholus, , , Date of Receipt Mailing Address 10816 Willow Run Court 2017 City State Zip Code Transaction ID: SA11AI.12312 MD 20854 Potomac Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Vogt, Mark, , , Date of Receipt Mailing Address 1152 Colonial Road 25 2017 City State Zip Code Transaction ID: SA11AI.11712 VAMcLean 22101 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 100.00 SUBTOTAL of Receipts This Page (optional).....

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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Vogt, Mark, , , Date of Receipt Mailing Address 1152 Colonial Road 2017 City Zip Code State Transaction ID: SA11AI.11822 VA McI ean 22101 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Vogt, Mark, , , Date of Receipt Mailing Address 1152 Colonial Road 2017 City State Zip Code Transaction ID: SA11AI.11924 VA McLean 22101 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 400.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Vogt, Mark, , , Date of Receipt Mailing Address 1152 Colonial Road 25 2017 City State Zip Code Transaction ID: SA11AI.12026 VAMcLean 22101 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOC	CIATES LLC POLITICA	AL ACTION COMMITTEE
Α.	Full Name of Individual (Last, First, Middle Ini Vogt, Mark, , ,  Mailing Address 1152 Colonial Road	tial) or Full Org	ganization Name	Date of Receipt
	City	State	Zip Code	11 25 2017  Transaction ID : SA11AI.12129
	McLean	VA	22101	_ Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual)	Occup	pation (for Individual)	Memo Item
	First Colonies Anesthesia	Phys	ician	Payroll deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate \	/ear-to-Date ▼ 500.00	
В.	Full Name of Individual (Last, First, Middle Ini Vogt, Mark, , ,  Mailing Address 1152 Colonial Road	tial) or Full Org	ganization Name	Date of Receipt
	City	State	Zip Code	12 22 2017
	McLean	VA	22101	Transaction ID : SA11AI.12232  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) First Colonies Anesthesia	Occu Phys	pation (for Individual) iician	Memo Item Payroll deduction
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate Y	/ear-to-Date ▼ 550.00	
<del>-</del>	Full Name of Individual (Last, First, Middle Ini Vogt, Mark, , ,	tial) or Full Org	ganization Name	Date of Receipt
	Mailing Address 1152 Colonial Road			12 29 2017
	City McLean	State VA	Zip Code 22101	Transaction ID : SA11AI.12334  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer (for Individual) First Colonies Anesthesia	Occup Physi	pation (for Individual) cian	Memo Item Payroll deduction
	Receipt For: Primary General Other (specify)	Aggregate \	/ear-to-Date ▼ 600.00	
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FOR LINE NUMBER:					PAGE	2	11 OF	 254	
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		13		14		15		16	17

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150.00

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				PAGE	2	12 OF	: :	254		
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		13		14		15		16		17

Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Wahlgren, Christopher, , , Date of Receipt Mailing Address 1200 Colvin Meadows Lane 2017 City Zip Code State Transaction ID: SA11AI.12004 VA **Great Falls** 22066 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Wahlgren, Christopher, , , Date of Receipt Mailing Address 1200 Colvin Meadows Lane 2017 11 City State Zip Code Transaction ID: SA11AI.12107 **Great Falls** VA 22066 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Wahlgren, Christopher, , , Date of Receipt Mailing Address 1200 Colvin Meadows Lane 22 2017 City Zip Code State Transaction ID: SA11AI.12210 VA**Great Falls** 22066 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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FOR LINE NUMBER:				PAGE	2	13 OF	254		
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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOC	IATES LLC POLITIC	AL ACTION COMMITTEE					
Full Name of Individual (Last, First, Middle In Wahlgren, Christopher, , ,  Mailing Address 1200 Colvin Meadows Lane	Date of Receipt							
	Ta:	T=	12 29 2017					
City	State VA	Zip Code	Transaction ID : SA11AI.12313					
Great Falls	VA	22066	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		50.00					
Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item					
First Colonies Anesthesia	Physic	ian	Payroll deduction					
Receipt For:	Aggregate Ye	ear-to-Date ▼						
Primary General Other (specify) ▼		600.00						
Full Name of Individual (Last, First, Middle Ir Wheeler, David, , ,	nitial) or Full Orga	anization Name	Date of Receipt					
Mailing Address 7108 Collingwood Ct	07 25 7 2017							
City	State	Zip Code 21075	Transaction ID : SA11AI.11727					
Elkridge	IVID	21075	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		50.00					
Name of Employer (for Individual) First Colonies Anesthesia	Occupa Physic	ation (for Individual) sian	Memo Item Payroll deduction					
Receipt For:	Aggregate Ye	ear-to-Date ▼						
Primary General Other (specify) ▼	4	300.00						
Full Name of Individual (Last, First, Middle In Wheeler, David, , ,	nitial) or Full Orga	anization Name	Date of Receipt					
Mailing Address 7108 Collingwood Ct			08 / 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City	State	Zip Code	Transaction ID : SA11AI.11837					
Elkridge	MD	21075	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.								
Name of Employer (for Individual)	Memo Item							
First Colonies Anesthesia	Payroll deduction							
Receipt For:								
Primary General Other (specify)	7	350.00						
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Other (specify) ▼		450.00				
Full Name of Individual (Last, First, Middle In Wheeler, David, , , ,  Mailing Address 7108 Collingwood Ct	itial) or Full Orç	ganization Name	Date of Receipt  M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y			
City Elkridge	State Zip Code MD 21075		Transaction ID : SA11AI.12143  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		50.00			
Name of Employer (for Individual) First Colonies Anesthesia	Occup Physi	oation (for Individual) cian	Memo Item Payroll deduction			
Receipt For: Primary General Other (specify)	Aggregate Y	ear-to-Date ▼ 500.00				
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	the name and address of any political committee					
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITIC	AL ACTION COMMITTEE				
Full Name of Individual (Last, First, Middle Wheeler, David, , ,  Mailing Address 7108 Collingwood Ct	e Initial) or Full Organization Name	Date of Receipt				
		12 22 2017				
City	Transaction ID : SA11AI.12246					
Elkridge	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	ů III					
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
First Colonies Anesthesia	Physician	Payroll deduction				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	550.00					
Full Name of Individual (Last, First, Middle 3. Wheeler, David, , ,	e Initial) or Full Organization Name	Date of Receipt				
Mailing Address 7108 Collingwood Ct		12 29 2017				
City	State Zip Code	Transaction ID : SA11AI.12348				
Elkridge	Elkridge MD 21075					
FEC ID number of contributing federal political committee.	50.00					
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  600.00					
Full Name of Individual (Last, First, Middle C. Wherry, Thomas, , ,	e Initial) or Full Organization Name	Date of Receipt				
Mailing Address 611 W. 2nd Street		07 25 2017				
City	State Zip Code MD 21701	Transaction ID : SA11AI.11748				
Frederick	MD 21701	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
First Colonies Anesthesia	Physician	Payroll deduction				
Receipt For:    Primary   General						
Other (specify)	300.00					
SUBTOTAL of Receipts This Page (optional	)	150.00				
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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE			
Full Name of Individual (Last, First, Middle Ir Wherry, Thomas, , ,	Date of Receipt				
Mailing Address 611 W. 2nd Street		08 25 2017			
City	State Zip Code	Transaction ID : SA11AI.11856			
Frederick	MD 21701	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item			
First Colonies Anesthesia	Physician	Payroll deduction			
Receipt For:	Aggregate Year-to-Date ▼				
Primary General  Other (specify) ▼	350.00				
Full Name of Individual (Last, First, Middle Ir Wherry, Thomas, , ,	itial) or Full Organization Name	Date of Receipt			
Mailing Address 611 W. 2nd Street		09 25 2017			
City	State Zip Code	Transaction ID : SA11AI.11957			
Frederick	MD 21701	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00				
Full Name of Individual (Last, First, Middle Ir Wherry, Thomas, , ,	nitial) or Full Organization Name	Date of Receipt			
Mailing Address 611 W. 2nd Street		10 25 2017			
City	State Zip Code	Transaction ID : SA11AI.12059			
Frederick	MD 21701	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	ů l				
Name of Employer (for Individual) First Colonies Anesthesia	Memo Item Payroll deduction				
Receipt For:	7				
Primary General Other (specify)	450.00				
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	X	11a		11b		11c		12		
		13		14		15		16		17

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F	OR	LINE	NU	<b>MBER</b>	PAGE	2	18 OF		254		
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		13		14		15		16		17	

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Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
First Colonies Anesthesia  Receipt For:  Primary General  Other (specify)	Physician  Aggregate Year-to-Date ▼  400.00	Payroll deduction
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	150.00
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		FEC <b>Schedule A (Form 3X)</b> Rev. 06/2

Receipt For:

Primary

Other (specify)

General

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

		LINE			PAGE	254		
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	X	11a		11b		11c	12	
		13		14		15	16	17

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550.00

Aggregate Year-to-Date ▼

Name of Employer (for Individual)

First Colonies Anesthesia

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

F	OR	LINE	NU	<b>MBER</b>	PAGE		254			
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	X	11a		11b		11c		12		
		13		14		15		16		17

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Occupation (for Individual)

Physician

Memo Item

Payroll deduction

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	_	R LINE			PAGE	: :	254			
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Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Wolf, Monford, , , Date of Receipt Mailing Address 4822 Tilly Drive 2017 City Zip Code State Transaction ID: SA11AI.11956 MD Sykesville 21784 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Wolf, Monford, , , Date of Receipt Mailing Address 4822 Tilly Drive 10 2017 City State Zip Code Transaction ID: SA11AI.12058 MD Sykesville 21784 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 450.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Wolf, Monford, , , Date of Receipt Mailing Address 4822 Tilly Drive 25 2017 City Zip Code State Transaction ID: SA11AI.12161 MD Sykesville 21784 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE
Full Name of Individual (Last, First, Middl Wolf, Monford, , ,  Mailing Address 4822 Tilly Drive	e Initial) or Full Organization Name	Date of Receipt  12 22 2017
City	State Zip Code MD 21784	Transaction ID : SA11AI.12264
Sykesville  FEC ID number of contributing federal political committee.	C 21704	Amount of Each Receipt this Period  50.00
Name of Employer (for Individual)  First Colonies Anesthesia  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation (for Individual) Physician  Aggregate Year-to-Date ▼  550.00	Memo Item Payroll deduction
Full Name of Individual (Last, First, Middl B. Wolf, Monford, , ,  Mailing Address 4822 Tilly Drive	e Initial) or Full Organization Name	Date of Receipt  12 29 2017
City Sykesville FEC ID number of contributing federal political committee.	State Zip Code 21784	Transaction ID : SA11AI.12366  Amount of Each Receipt this Period  50.00
Name of Employer (for Individual) First Colonies Anesthesia  Receipt For:  Primary General Other (specify) ▼	Occupation (for Individual) Physician  Aggregate Year-to-Date ▼  600.00	Memo Item Payroll deduction
Full Name of Individual (Last, First, Middle C. Wright, Leon, , ,  Mailing Address 2411 Tufton Springs Land	e Initial) or Full Organization Name	Date of Receipt  07 25 2017  Transaction ID: SA11AI.11771
Reisterstown  FEC ID number of contributing federal political committee.	MD 21136	Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) First Colonies Anesthesia Receipt For: Primary General Other (specify)	Occupation (for Individual) Physician  Aggregate Year-to-Date ▼  300.00	Memo Item Payroll deduction
	nber only)	150.00

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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Wright, Leon, , ,  Mailing Address 2411 Tufton Springs Lane	Initial) or Full Organization Name	Date of Receipt
City Reisterstown	State Zip Code MD 21136	7 Transaction ID : SA11AI.11879  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual)  First Colonies Anesthesia  Receipt For:  □ Primary □ General  □ Other (specify) ▼	Occupation (for Individual) Physician  Aggregate Year-to-Date ▼  350.00	Memo Item Payroll deduction
Full Name of Individual (Last, First, Middle Wright, Leon, , ,  Mailing Address 2411 Tufton Springs Lane	Initial) or Full Organization Name	Date of Receipt
City Reisterstown FEC ID number of contributing federal political committee.	State Zip Code 21136	Transaction ID : SA11AI.11980 Amount of Each Receipt this Period  50.00
Name of Employer (for Individual) First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼	Occupation (for Individual) Physician  Aggregate Year-to-Date ▼  400.00	Memo Item Payroll deduction
Full Name of Individual (Last, First, Middle Wright, Leon, , ,  Mailing Address 2411 Tufton Springs Lane  City	Initial) or Full Organization Name  State Zip Code	Date of Receipt    M = M
Reisterstown  FEC ID number of contributing federal political committee.	MD 21136	Amount of Each Receipt this Period  50.00
Name of Employer (for Individual)  First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify)	Occupation (for Individual) Physician  Aggregate Year-to-Date ▼  450.00	Memo Item Payroll deduction
SUBTOTAL of Receipts This Page (optional).	•	150.00
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FO	R LINE	NUMBE	PAGE	2	24 OF		254				
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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name of Individual (Last, First, Middle In Wright, Leon, , ,	itial) or Full Organization Name	Date of Receipt
Mailing Address 2411 Tufton Springs Lane		11 25 2017
City Reisterstown	State Zip Code MD 21136	Transaction ID : SA11AI.12185
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name of Individual (Last, First, Middle In Wright, Leon, , ,  Mailing Address 2411 Tufton Springs Lane	itial) or Full Organization Name	Date of Receipt
City Reisterstown	State Zip Code MD 21136	Transaction ID : SA11AI.12288  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  550.00	
Full Name of Individual (Last, First, Middle In	itial) or Full Organization Name	Date of Receipt
Mailing Address 2411 Tufton Springs Lane		12 29 2017
City Reisterstown	State Zip Code MD 21136	Transaction ID : SA11AI.12390  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia Receipt For:	Occupation (for Individual) Physician	Memo Item Payroll deduction
Primary General Other (specify)	Aggregate Year-to-Date ▼  600.00	
SUBTOTAL of Receipts This Page (optional)	·····	150.00
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	FO	PAGE	2	25 OF	 254				
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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITIC	AL ACTION COMMITTEE				
Full Name of Individual (Last, First, Middle Wu, You, , ,  Mailing Address 910 Dunlavin Ct	Initial) or Full Organization Name	Date of Receipt				
200		07 25 2017				
City Timonium	State Zip Code MD 21093	Transaction ID : SA11AI.11728				
	21093	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
First Colonies Anesthesia	Physician	Payroll deduction				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General  Other (specify) ▼	300.00					
Full Name of Individual (Last, First, Middle 3. Wu, You, , ,	Date of Receipt					
Mailing Address 910 Dunlavin Ct		08 25 2017				
City	State Zip Code	Transaction ID : SA11AL11838				
Timonium	MD 21093	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00					
Full Name of Individual (Last, First, Middle . Wu, You, , ,	Initial) or Full Organization Name	Date of Receipt				
Mailing Address 910 Dunlavin Ct		09 25 2017				
City	State Zip Code	Transaction ID : SA11AI.11939				
Timonium	MD 21093	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
First Colonies Anesthesia	Physician	Payroll deduction				
Receipt For:  Primary  General	Aggregate Year-to-Date ▼					
Other (specify)	400.00					
SUBTOTAL of Receipts This Page (optional)	•	150.00				
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						PAGE	2	26 OF		254
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	X	11a		11b		11c		12		
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	the name and address of any political committee	
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITIC	AL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Wu, You, , ,  Mailing Address 910 Dunlavin Ct	Initial) or Full Organization Name	Date of Receipt
200		10 25 2017
City Timonium	State Zip Code MD 21093	Transaction ID : SA11AI.12041
	21093	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
First Colonies Anesthesia	Physician	Payroll deduction
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	450.00	
Full Name of Individual (Last, First, Middle Wu, You, , ,	Date of Receipt	
Mailing Address 910 Dunlavin Ct		11 25 2017
City	State Zip Code	Transaction ID : SA11AL12144
Timonium	MD 21093	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name of Individual (Last, First, Middle . Wu, You, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 910 Dunlavin Ct		12 22 2017
City	State Zip Code	Transaction ID : SA11AI.12247
Timonium	MD 21093	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
First Colonies Anesthesia	Physician	Payroll deduction
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify)	550.00	
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	150.00
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Use separate schedule(s) for each category of the Detailed Summary Page

FO	R LINE	NUMBER	PAGE	2	27 OF		254	
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	13	14		15		16		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)

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$\geq$	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA	ASS	SOCI	ATES LLC POLITICAL	_ ACTION COMMITTEE				
Α.	Full Name of Individual (Last, First, Middle Initial) Wu, You, , ,  Mailing Address 910 Dunlavin Ct	or Fu	ıll Orga	nization Name	Date of Receipt  12 29 2017				
	City	State		Zip Code	Transaction ID : SA11AI.12349				
	Timonium	MD		21093	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С			50.00				
	Name of Employer (for Individual)			tion (for Individual)	Memo Item				
	First Colonies Anesthesia Receipt For:		Physicia		Payroll deduction				
	Primary General	Aggreg	ate Yea	ar-to-Date ▼					
	Other (specify) ▼		-	600.00					
— В.	Full Name of Individual (Last, First, Middle Initial) Yang, Shao, , ,	) or Fu	ıll Orga	nization Name	Date of Receipt				
	Mailing Address 703 Firestone Drive		07 25 2017						
	City	State Zip Code MD 20905			Transaction ID : SA11AI.11738				
	Silver Spring	20905	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С			50.00				
	Name of Employer (for Individual) First Colonies Anesthesia		Occupa Physici	tion (for Individual) an	Memo Item Payroll deduction				
		Aggreg	ate Yea	ar-to-Date ▼					
	Primary General  Other (specify) ▼		•	300.00					
<del></del> С.	Full Name of Individual (Last, First, Middle Initial) Yang, Shao, , ,	) or Fu	ıll Orga	nization Name	Date of Receipt				
	Mailing Address 703 Firestone Drive				08 25 2017				
	City Silver Spring	State MD		Zip Code	Transaction ID : SA11AI.11847				
	Silver Spring	IVID		20905	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С			50.00				
	Name of Employer (for Individual)		•	tion (for Individual)	Memo Item				
	First Colonies Anesthesia Receipt For:		Physicia		Payroll deduction				
	Primary General Other (specify)	y General							
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	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSOC	CIATES LLC POLITICA	AL ACTION COMMITTEE		
Α.	Full Name of Individual (Last, First, Middle Init Yang, Shao, , , Mailing Address 703 Firestone Drive	ial) or Full Org	ganization Name	Date of Receipt		
	City	State	Zip Code	09 25 2017 Transaction ID : SA11Al.11948		
	Silver Spring	MD	20905	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		50.00		
	Name of Employer (for Individual)	Occup	pation (for Individual)	Memo Item		
	First Colonies Anesthesia	,				
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 400.00			
В.	Full Name of Individual (Last, First, Middle Init Yang, Shao, , , Mailing Address 703 Firestone Drive	Date of Receipt  10 25 2017				
	City	State	Zip Code	Transaction ID : SA11AI.12050		
	Silver Spring	MD	20905	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		50.00		
	Name of Employer (for Individual) First Colonies Anesthesia	Occup Physi	oation (for Individual) ician	Memo Item Payroll deduction		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 450.00			
<del>-</del>	Full Name of Individual (Last, First, Middle Init Yang, Shao, , ,	ial) or Full Org	ganization Name	Date of Receipt		
	Mailing Address 703 Firestone Drive			11 25 2017		
	City Silver Spring	State MD	Zip Code 20905	Transaction ID : SA11AI.12153  Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		50.00		
	Name of Employer (for Individual) First Colonies Anesthesia	Occup Physic	oation (for Individual) cian	Memo Item Payroll deduction		
	Receipt For: Primary General Other (specify)	Aggregate Y	ear-to-Date ▼ 500.00			
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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE			
Full Name of Individual (Last, First, Middle Ini Yang, Shao, , , Mailing Address 703 Firestone Drive	tial) or Full Organization Name	Date of Receipt			
City	State Zip Code	12 22 2017  Transaction ID : SA11AI.12256			
Silver Spring	MD 20905	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual)  Physician	Memo Item Payroll deduction			
Receipt For:  Primary General  Other (specify)   Other	Aggregate Year-to-Date ▼  550.00	1 ayroll deduction			
Full Name of Individual (Last, First, Middle Ini Yang, Shao, , ,  Mailing Address 703 Firestone Drive	tial) or Full Organization Name	Date of Receipt			
City Silver Spring FEC ID number of contributing federal political committee.	State Zip Code MD 20905	12 29 2017  Transaction ID : SA11Al.12358  Amount of Each Receipt this Period  50.00			
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00				
Full Name of Individual (Last, First, Middle Ini	tial) or Full Organization Name	Date of Receipt			
Mailing Address 13508 Gumspring Road		07 25 2017			
City Rockville	State Zip Code 20850	Transaction ID : SA11AI.11690  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer (for Individual) First Colonies Anesthesia	Occupation (for Individual) Physician	Memo Item Payroll deduction			
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 300.00				
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	150.00			
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Use separate schedule(s) for each category of the Detailed Summary Page

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		13		14		15		16		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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Yu, Aiqin, , , Date of Receipt Mailing Address 13508 Gumspring Road 2017 City Zip Code State Transaction ID: SA11AI.11801 MD Rockville 20850 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Yu, Aiqin, , , Date of Receipt Mailing Address 13508 Gumspring Road 2017 City State Zip Code Transaction ID: SA11AI.11903 MD 20850 Rockville Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 400.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **C.** Yu, Aiqin, , , Date of Receipt Mailing Address 13508 Gumspring Road 25 2017 City Zip Code State Transaction ID: SA11AI.12005 MD Rockville 20850 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

				PAGE	2	31 OF	254		
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		13		14		15		16	17

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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCI	ATES LLC POLITIC	AL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Yu, Aiqin, , ,  Mailing Address 13508 Gumspring Road	Initial) or Full Orgar	nization Name	Date of Receipt  11 25 2017
City	State	Zip Code	Transaction ID : SA11AI.12108
Rockville	MD	20850	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer (for Individual)	Occupat	ion (for Individual)	Memo Item
First Colonies Anesthesia	Physicia	an	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Yea	r-to-Date ▼ 500.00	
Full Name of Individual (Last, First, Middle Yu, Aiqin, , , Mailing Address 13508 Gumspring Road	Date of Receipt		
			12 22 2017
City	State	Zip Code	Transaction ID : SA11AI.12211
Rockville	MD	20850	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual) First Colonies Anesthesia	Occupat Physicia	tion (for Individual) an	Memo Item Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Yea	r-to-Date ▼ 550.00	]
Full Name of Individual (Last, First, Middle Yu, Aiqin, , ,	Initial) or Full Organ	nization Name	Date of Receipt
Mailing Address 13508 Gumspring Road			12 29 2017
City	State	Zip Code	Transaction ID : SA11AI.12314
Rockville	MD	20850	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer (for Individual)	Occupat	ion (for Individual)	Memo Item
First Colonies Anesthesia	Physicia	ın	Payroll deduction
Receipt For: Primary General Other (specify)	Aggregate Yea	r-to-Date ▼ 600.00	]
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		13		14		15		16	17

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	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA	A ASSO	CIATES LLC POLITICA	AL ACTION COMMITTEE		
A.	Full Name of Individual (Last, First, Middle Initia Yun, Jungim, , , Mailing Address 2057 Thurston Road	l) or Full Or	ganization Name	Date of Receipt		
		Otata	7in Oada	07 25 2017		
	City Frederick	State Zip Code 21704		Transaction ID : SA11AI.11763  Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		50.00		
	Name of Employer (for Individual) First Colonies Anesthesia	Occu Phys	pation (for Individual) iician	Memo Item Payroll deduction		
	Receipt For:  Primary General  Other (specify) ▼					
В.	Full Name of Individual (Last, First, Middle Initia Yun, Jungim, , , Mailing Address 2057 Thurston Road	l) or Full Or	ganization Name	Date of Receipt  08 25 2017		
	City Frederick	State MD	Zip Code 21704	Transaction ID : SA11AI.11871  Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	50.00				
	Name of Employer (for Individual) First Colonies Anesthesia	l	pation (for Individual) sician	Memo Item Payroll deduction		
	Receipt For:  Primary General  Other (specify) ▼					
	Full Name of Individual (Last, First, Middle Initia Yun, Jungim, , ,	l) or Full Or	ganization Name	Date of Receipt		
	Mailing Address 2057 Thurston Road			09 25 2017		
	City Frederick	State MD	Zip Code 21704	Transaction ID : SA11AI.11972  Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		50.00		
	Name of Employer (for Individual) First Colonies Anesthesia Receipt For:	Phys		Memo Item Payroll deduction		
	Primary General Other (specify)	Aggregate	Year-to-Date ▼			
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Name of Employer (for Individual)

General

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

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First Colonies Anesthesia

Receipt For:

Primary

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

F					PAGE	2	33 OF		254	
(0	(check only one)									
	×	11a		11b		11c		12		
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Payroll deduction

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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Yun, Jungim, , , Date of Receipt Mailing Address 2057 Thurston Road 2017 City State Zip Code Transaction ID: SA11AI.12074 MD Frederick 21704 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Yun, Jungim, , , Date of Receipt Mailing Address 2057 Thurston Road 11 2017 City State Zip Code Transaction ID: SA11AI.12177 Frederick MD 21704 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item

Occupation (for Individual)

Physician

Aggregate Year-to-Date ▼

Other (specify) ▼		500.00	
Full Name of Individual (Last, First, Middle In Yun, Jungim, , ,  Mailing Address 2057 Thurston Road	itial) or Full Org	ganization Name	Date of Receipt  12 / Date / Yayayaya
City	State	Zip Code	Transaction ID : SA11AI.12280
Frederick	MD	21704	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer (for Individual)	Occup	pation (for Individual)	Memo Item
First Colonies Anesthesia	Physi	cian	Payroll deduction
Receipt For: Primary General Other (specify)			
IIDTOTAL of Descints This Daws (entires)			150.00

Use separate schedule(s) for each category of the

l					PAGE	2	34 OF	254		
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l			13		14		15		16	17

Detailed Summary Page 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) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Yun, Jungim, , , Date of Receipt Mailing Address 2057 Thurston Road 2017 City Zip Code State Transaction ID: SA11AI.12382 MD Frederick 21704 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Physician Payroll deduction Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Yurka, Heather, , , Date of Receipt Mailing Address 1200 Stewart Street 10 2017 City State Zip Code Transaction ID: SA11AI.12084 MD **Baltimore** 21230 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) First Colonies Anesthesia Payroll deduction Physician Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 225.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Yurka, Heather, , , Date of Receipt Mailing Address 1200 Stewart Street 25 2017 City State Zip Code Transaction ID: SA11AI.12187 MD **Baltimore** 21230 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Payroll deduction First Colonies Anesthesia Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify)

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

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

100.00

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

FOR LINE NUMBER:					PAGE	2	35 OF	: :	254	
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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.

$\geq$	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA	ASSOCI	ATES LLC POLITICAI	L ACTION COMMITTEE
Α.	Full Name of Individual (Last, First, Middle Initial Yurka, Heather, , , , Mailing Address 1200 Stewart Street	) or Full Orga	nization Name	Date of Receipt
	City Baltimore	State MD	Zip Code 21230	12 22 2017  Transaction ID : SA11AI.12290  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer (for Individual) First Colonies Anesthesia	Occupa Physici	tion (for Individual) an	Memo Item Payroll deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 275.00	
В.	Full Name of Individual (Last, First, Middle Initial Yurka, Heather, , , Mailing Address 1200 Stewart Street	) or Full Orga	nization Name	Date of Receipt
	City	State	Zip Code	12 29 2017  Transaction ID : SA11AI.12392
	Baltimore  FEC ID number of contributing federal political committee.	C	21230	Amount of Each Receipt this Period  25.00
	Name of Employer (for Individual) First Colonies Anesthesia	Occupa Physic	ution (for Individual) ian	Memo Item Payroll deduction
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 300.00	
<del></del> С.	Full Name of Individual (Last, First, Middle Initial	) or Full Orga	nization Name	Date of Receipt
	Mailing Address			M = M / D = D / Y = Y = Y
	City	State	Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer (for Individual)	Occupa	tion (for Individual)	Memo Item
	Receipt For: Primary General Other (specify)	Aggregate Yea	ar-to-Date ▼	
s	UBTOTAL of Receipts This Page (optional)		<u>\</u>	50.00

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

35864.66

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 236 OF 254		
ITEMIZED DISBURSEMENTS	Use separate schedule	(s) check only	/ one)		
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NAME OF COMMITTEE (In Full)					
> FIRST COLONIES ANESTHESIA	ASSOCIATES LLC	C POLITICA	L ACTION COMMITTEE		
/					
Full Name (Last, First, Middle Initial)			Date of Disbursement		
A. Andy Harris For Congress			M M / D D / Y Y Y Y		
Mailing Address PO Box 604			09 27 2017		
011	<u> </u>				
City Bel Air	State Zip Code MD 21014		FEC Identification Number		
Purpose of Disbursement	21014		C		
•		11 1	Transaction ID : SB23.12465		
Candidate Name		Category/	Amount of Each Disbursement this Period		
		Type	2000.00		
0	ement For: 2018	ı	2200.00		
Senate x	Primary General Other (specify)	l			
State: District:	Culor (opcomy)		Memo Item		
Full Name (Last, First, Middle Initial)					
B. Andy Harris For Congress			Date of Disbursement		
			M = M / D = D / Y = Y = Y		
Mailing Address PO Box 604			09 29 2017		
City	State Zip Code		FEC Identification Number		
Bel Air Purpose of Disbursement	MD 21014	T			
			C		
Candidate Name		Category/	Transaction ID : SB23.12466 Amount of Each Disbursement this Period		
		Type			
	ement For: 2018		2700.00		
Senate President	Primary General Other (specify)				
State: District:	Other (specify)		Memo Item		
Full Name (Last, First, Middle Initial)					
C.			Date of Disbursement		
Moiling Addysos			M M M / D D / Y M Y M Y		
Mailing Address					
City	State Zip Code		FEC Identification Number		
Purpose of Disbursement			C		
•			O		
Candidate Name		Category/	Amount of Each Disbursement this Period		
Office Occupies		Type			
Office Sought: House Disburse Senate	ement For:	ı			
Senate President	Primary General Other (specify) ▼	ı	п		
State: District:	Cirior (opcomy)		Memo Item		
<u> </u>					
SUBTOTAL of Disbursements This Page (optional).		·····•	4900.00		
	,		4900.00		
TOTAL This Period (last page this line number only	/)		4300.00		

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 237 OF 254			
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only	<i>,</i>			
		Summary Page	21b 28a	28b 28c <b>x</b> 29 30b			
Any information copied from such Reports and State	 ments_may_r	not be sold or use					
or for commercial purposes, other than using the nar							
NAME OF COMMITTEE (In Full)							
FIRST COLONIES ANESTHESIA	ASSOC	IATES LLC	POLITICA	L ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)							
A. Barbara Marx Brocato & Associate	es			Date of Disbursement			
Mailing Address 18 Pinkney Street				07 19 2017			
City	Stata	Zin Codo					
City Annapolis	State MD	Zip Code 21401		FEC Identification Number			
Purpose of Disbursement				С			
Lobbying			L I	Transaction ID : SB29.12401			
Candidate Name			Category/	Amount of Each Disbursement this Period			
Office Sought: House Disburse	ment For:		Туре	2083.33			
Senate Disburse	Primary	General		2000.00			
President	Other (spec			Memo Item			
State: District:				Interno item			
Full Name (Last, First, Middle Initial)							
B. Barbara Marx Brocato & Associate		Date of Disbursement					
Mailing Address 18 Pinkney Street				08 07 2017			
		_					
City	State MD	Zip Code		FEC Identification Number			
Annapolis Purpose of Disbursement	MD 21401			C			
·				Transaction ID : SB29.12414			
Candidate Name			Category/	Amount of Each Disbursement this Period			
Office Country   House			Type	2244 52			
Office Sought: House Disburse Senate	ment For: Primary	General		2241.52			
President	Other (spec						
State: District:				Memo Item			
Full Name (Last, First, Middle Initial)							
C. Barbara Marx Brocato & Associate	es			Date of Disbursement			
Mailing Address 18 Pinkney Street				09 12 2017			
		T= :					
City Annapolis	State MD	Zip Code 21401		FEC Identification Number			
Purpose of Disbursement	IVID	21401		C			
				Transaction ID : SB29.12415			
Candidate Name			Category/	Amount of Each Disbursement this Period			
Office Country   House			Туре	2131.65			
Office Sought: House Disburse Senate	ment For: Primary	General		2131.03			
President	Other (spec			□ u			
State: District:	(-1,-	•, •		Memo Item			
SUBTOTAL of Disbursements This Page (optional)			······•	6456.50			
TOTAL This Period (last page this line number only							

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 238 OF 254			
ITEMIZED DISBURSEMENTS		parate schedule(s)	(check only	y one)			
		category of the Summary Page	21b				
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NAME OF COMMITTEE (In Full)							
FIRST COLONIES ANESTHES	IA ASSOC	IATES LLC	POLITICAI	L ACTION COMMITTEE			
<u> </u>			-				
Full Name (Last, First, Middle Initial)  A. Barbara Marx Brocato & Associ	otos			Date of Disbursement			
Daivara Warx Diucato & ASSOCI	ales			M M / D D / Y Y Y Y			
Mailing Address 18 Pinkney Street				10 23 2017			
City	State	Zip Code					
Annapolis	MD	21401		FEC Identification Number			
Purpose of Disbursement				C			
Oandidata Nama				Transaction ID : SB29.12417			
Candidate Name			Category/	Amount of Each Disbursement this Period			
Office Sought: House Disbu	ursement For:		Туре	2083.33			
Senate	Primary	General		7 7			
President	Other (spe	ecify) ▼		Memo Item			
State: District:				_			
Full Name (Last, First, Middle Initial)  B. Barbara Marx Brocato & Associ	atos			Date of Disbursement			
- Daibaia Waix Diucato & ASSOCI	aits			M M / D D / Y Y Y Y			
Mailing Address 18 Pinkney Street				11 03 2017			
City	City State Zip Code						
Annapolis	MD	21401		FEC Identification Number			
Purpose of Disbursement				C			
Out distant Nove				Transaction ID : SB29.12439			
Candidate Name			Category/	Amount of Each Disbursement this Period			
Office Sought: House Disbu	ursement For:		Туре	2083.33			
Senate	Primary	General		4 4			
President	Other (spe	ecify)		Memo Item			
State: District:							
Full Name (Last, First, Middle Initial)	otoo			Date of Disbursement			
C. Barbara Marx Brocato & Associ	ales			M M / D D / Y Y Y Y			
Mailing Address 18 Pinkney Street				12 01 2017			
City	State	Zip Code					
Annapolis	MD	21401		FEC Identification Number			
Purpose of Disbursement				C			
Condidate Name				Transaction ID : SB29.12447			
Candidate Name			Category/	Amount of Each Disbursement this Period			
Office Sought: House Disbu	ursement For:		Туре	2083.33			
Senate	Primary	General		4 4			
President	Other (spe	ecify) 🔻		Memo Item			
State: District:				ш			
CUPTOTAL of Dishurasments This Dass (setting	val\			6249.99			
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SCHEDULE B (FEC Form 3X)			FOR LINE	PAGE 239 OF 254								
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NAME OF COMMITTEE (In Full)		ponti										
FIRST COLONIES ANESTHESIA	ASSOC	IATES LLC	POLITICAI	L ACTION COMMITTEE								
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Full Name (Last, First, Middle Initial)				Date of Disbursement								
A. Barbara Marx Brocato & Associat	es											
Mailing Address 18 Pinkney Street				12 27 2017								
	1	1										
City Annapolis	State MD	Zip Code 21401		FEC Identification Number								
Purpose of Disbursement	IVID	21401		C								
·				Transaction ID : SB29.12435								
Candidate Name	andidate Name Category/											
Office Sought: House Disburs	Type											
Senate Dispurs												
President		Memo Item										
State: District:				Wienio item								
Full Name (Last, First, Middle Initial)												
B. Chesapeake PAC	Date of Disbursement											
Mailing Address 617 E Custis Avenue	12 27 2017											
Mailing Address 017 E Gustis Avenue				12 27 2017								
City	State	Zip Code		FEC Identification Number								
Alexandria Purpose of Disbursement	VA	22301										
				C Transaction ID : SB29.12436								
Candidate Name			Category/	Amount of Each Disbursement this Period								
			Type	5000.00								
Office Sought: House Disburs Senate	ement For:  Primary	General		5000.00								
President	Other (spec			П.,								
State: District:		,,		Memo Item								
Full Name (Last, First, Middle Initial)												
C. Citizens for Andrew Platt				Date of Disbursement								
Mailing Address 58 Beacon Hil Court				12 20 2017								
City	State	Zip Code		FEC Identification Number								
Gaithersburg Purpose of Disbursement	MD	20878		C								
·				Transaction ID : SB29.12451								
Candidate Name			Category/	Amount of Each Disbursement this Period								
Office Sought: House Disburs	ement For:		Туре	250.00								
Senate Disburs	Primary	General		250.00								
President	Other (spec		Memo Item									
State: District:				I WIGHTO ITEM								
				7404 44								
SUBTOTAL of Disbursements This Page (optional)	)		·····•	7484.41								
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F	NAME OF COMMITTEE (In Full)	and addit	oos or any ponti		Solid Solid Salar									
$ \rangle$	FIRST COLONIES ANESTHESIA	ASSOCI	ATESTIC	POLITICAL	ACTION COMMITTEE									
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_	Full Name (Last, First, Middle Initial)													
Α.	Citizens for Bryan Simonaire				Date of Disbursement									
	Mailing Address 441 Shady Lane				11 10 2017									
	Mailing Address 441 Chady Lane													
	City	State	Zip Code		FEC Identification Number									
	Pasadena Piahuraanan	MD	21122											
	Purpose of Disbursement				C									
	Candidate Name				Transaction ID : SB29.12441									
				Category/ Type	Amount of Each Disbursement this Period									
	Office Sought: House Disburser	ment For:	I	, , , , , , , , , , , , , , , , , , ,	250.00									
	Senate	Primary	General											
	President		Memo Item											
_	State: District:													
В.	Full Name (Last, First, Middle Initial)  Citizens for Maggie McIntosh				Date of Disbursement									
	Citizens for iviaggle ivicintosit		M M / D D / Y Y Y Y											
	Mailing Address 1050 Hull Street		11 10 2017											
	Suite 120		1											
	City Baltimore	State MD	Zip Code 21230		FEC Identification Number									
	Purpose of Disbursement	IVID	21230		C									
	·				Transaction ID : SB29.12440									
	Candidate Name			Category/	Amount of Each Disbursement this Period									
				Туре	500.00									
	Office Sought: House Disburser		Conoral		500.00									
	Senate President	Primary Other (speci	General											
	State: District:	outer (open	,,		Memo Item									
_	Full Name (Last, First, Middle Initial)													
C.	Citizens for Paul Pinsky				Date of Disbursement									
					M M / D D / Y Y Y Y									
	Mailing Address 4115 Hamilton Street				12 20 2017									
	City	State	Zip Code		EEC Identification Number									
	Hyattsville	MD	20781		FEC Identification Number									
	Purpose of Disbursement				C									
	Candidate Name		Transaction ID : SB29.12431											
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period									
	Office Sought: House Disburser	ment For:		1,700	250.00									
	Senate	Primary	General											
	President		Memo Item											
	State: District:				<u> </u>									
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	ny information copied from such Reports and Stater for commercial purposes, other than using the nar												
<u> </u>	NAME OF COMMITTEE (In Full)												
$ \; angle$	FIRST COLONIES ANESTHESIA	ASSOC	IATESTIC	POLITICAL	ACTION COMMITTEE								
$\angle$													
^	Full Name (Last, First, Middle Initial)				Data of Dishursoment								
Α.	Citizens for Robinson				Date of Disbursement								
	Mailing Address 2212 Dalewood Road				12 01 2017								
	,	State	Zip Code		FEC Identification Number								
	Timonium Purpose of Disbursement	MD	21093										
	Tulpose of Disbursement				C								
	Candidate Name			Category/	Transaction ID : SB29.12446  Amount of Each Disbursement this Period								
		Type											
	Office Sought: House Disburser		6000.00										
	Senate President												
	State: District:	Other (spe	City) $\blacktriangledown$		Memo Item								
_	Full Name (Last, First, Middle Initial)												
В.					Date of Disbursement								
		M M / D D / Y M Y M Y											
	Mailing Address 1215 E Fort Ave STE 203				07 26 2017								
	,	State	Zip Code		FEC Identification Number								
	Baltimore Purpose of Disbursement	MD	21230		C								
					Transaction ID : SB29.12411								
	Candidate Name			Category/	Amount of Each Disbursement this Period								
	0/5			Type	500.00								
	Office Sought: House Disburser Senate	ment For: Primary	General		500.00								
	President	Other (spe			П.,								
	State: District:		•		Memo Item								
	Full Name (Last, First, Middle Initial)												
C.	Citizens Helping Elect Cheryl Kaga	an			Date of Disbursement								
	Mailing Address 1048 Wintergreen Terrace				07 26 2017								
	Walling Address 1046 Willergreen Terrace				20 2017								
	•	State	Zip Code		FEC Identification Number								
	Rockville Purpose of Disbursement	MD	20850										
	Tarpose of Dispursement		C										
	Candidate Name	Transaction ID: SB29.12412  Amount of Each Disbursement this Period											
		Category/ Type											
	Office Sought: House Disburser		250.00										
	Senate President	Senate Primary General  President Other (specify) ▼											
	State: District:	Other (she	ony) ▼		Memo Item								
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s	SUBTOTAL of Disbursements This Page (optional)			·····•	6750.00								
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SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER:	PAGE 242 OF 254							
ITEMIZED DISBURSEMENTS		ate schedule(s) ategory of the	(check only	′								
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NAME OF COMMITTEE (In Full)												
FIRST COLONIES ANESTHESIA	ASSOCI/	ATES LLC F	POLITICAL	ACTION CO	MMITTEE							
<u> </u>												
Full Name (Last, First, Middle Initial)  A. Committee to Flect Fric Bromwell				Date of Disburse	ment							
A. Committee to Elect Eric Bromwell				M M / D D / Y Y Y Y								
Mailing Address 1 Minte Drive				10 31 2017								
City Baltimore	State MD	Zip Code 21236		FEC Identification	n Number							
Purpose of Disbursement	IVID	21236										
r dipose of Biobardemone				C								
Candidate Name			Category/		ID: SB29.12419 Disbursement this Period							
			Type	Amount of Lacif	Disbursement this renou							
Office Sought: House Disburser	nent For:	<u>'</u>			250.00							
Senate	Primary	General			,							
State: District:	Other (specif	fy) <b>▼</b>		Memo Item								
Full Name (Last, First, Middle Initial)												
B. Committee to Elect Susan K. McCo	omas			Date of Disburse	ment							
Committee to Elect Gusan R. Week	Jilias			M M / D	D / Y Y Y Y							
Mailing Address PO Box 1204		10 3	1 2017									
City Bel Air	State MD	Zip Code 21014		FEC Identification	Number							
Purpose of Disbursement	IVID	21014		С								
				Transaction ID : SB29.12421 Amount of Each Disbursement this Peri								
Candidate Name			Category/									
			Type									
Office Sought: House Disburser Senate	nent For: Primary	General		1 1 75 1	250.00							
President	Other (specif			П.,								
State: MD District:	outer (opeon	.37		Memo Item								
Full Name (Last, First, Middle Initial)												
C. Delegate Matt Morgan				Date of Disburse	ment							
W. W. A.I.I. 222				M M / D =								
Mailing Address PO Box 136				07 20	2017							
City	State	Zip Code		FEC Identification	Number							
Charlotte Hall	MD	20622		FEC Identification	i Number							
Purpose of Disbursement												
Candidate Name					ID : SB29.12406							
Candidate Name			Category/ Type	Amount of Each	Disbursement this Period							
Office Sought: House Disburser	nent For:		.,,,,		250.00							
Senate	Primary	General			4 4							
President	Other (specif	fy) ▼		Memo Item								
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					750.00							
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SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 243 OF 254			
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check only				
		Summary Page	21b 28a	22 23 26 27 28b 28c <b>x</b> 29 30b			
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NAME OF COMMITTEE (In Full)							
FIRST COLONIES ANESTHESIA	ASSOCI	IATES LLC I	POLITICAL	_ ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)							
A. Ed Kasemeyer for Senate Commit	tee 			Date of Disbursement			
Mailing Address 1200 Light Street Unit B				10 31 2017			
City	State	Zip Code		FEC Identification Number			
Baltimore	MD	21230					
Purpose of Disbursement							
Candidate Name				Transaction ID : SB29.12424			
Candidate Name			Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disburser	ment For:		туре	250.00			
Senate							
President	Other (spec	cify) 🔻		Memo Item			
State: District:							
Full Name (Last, First, Middle Initial)							
B. Friends Of Big Ed Reilly				Date of Disbursement			
Mailing Address 1749 Urby Drive				12 20 7 2017			
City	State	Zip Code		FFO Identification Number			
Crofton	MD	21114		FEC Identification Number			
Purpose of Disbursement							
Candidate Name				Transaction ID : SB29.12427			
Candidate Manie			Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disburser	ment For:		Турс	500.00			
x Senate	Primary	General		4 4			
President	Other (spec	cify)		Memo Item			
State: MD District:				I meme nem			
Full Name (Last, First, Middle Initial)				Date of Disbursement			
C. Friends of Chris West				M M / D D / Y Y Y Y			
Mailing Address PO Box 144				10 31 2017			
City	State	Zip Code		FEC Identification Number			
Riderwood	MD	21139		TEO Identification Number			
Purpose of Disbursement							
Candidate Name				Transaction ID : SB29.12418			
Candidate Name			Category/ Type	Amount of Each Disbursement this Period			
Office Sought: House Disburser	ment For:		1300	500.00			
Senate	Primary	General		7 7			
President	Other (spec	cify) 🔻		Memo Item			
State: MD District:							
				1250.00			
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SCHEDULE B (FEC Form 3X)		FOR LINE	R LINE NUMBER: PAGE 244 OF 254									
ITEMIZED DISBURSEMENTS	Use separate schedu	ule(s) (check only	NOMBETT.									
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NAME OF COMMITTEE (In Full)												
FIRST COLONIES ANESTHESIA	ASSOCIATES L	LC POLITICA	L ACTION COMMITTEE									
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Full Name (Last, First, Middle Initial)			Date of Disbursement									
A. Friends of Clarence Lam			M M / D D / Y Y Y Y									
Mailing Address PO Box 891			12 20 2017									
-												
City Columbia	State Zip Code MD 21044		FEC Identification Number									
Purpose of Disbursement	21044		C									
·			Transaction ID : SB29.12452									
Candidate Name	Candidate Name Category/											
Office Sought House Bishing	mont For:	Туре	500.00									
Office Sought: House Disburse Senate												
President	Memo Item											
State: District:	1		Memo rem									
Full Name (Last, First, Middle Initial)												
B. Friends of Craig Zucker	Date of Disbursement											
Mailing Address PO Box 1037	12 20 2017											
City	State Zip Code		FEC Identification Number									
Olney Purpose of Disbursement	MD 20830		C									
			Transaction ID : SB29.12462									
Candidate Name		Category/	Amount of Each Disbursement this Period									
Office Cought	mant Fau	Type	250.00									
Office Sought: House Disburse Senate	ement For:    Primary	eral	250.00									
President	Other (specify)	v. wi	Mama Itans									
State: District:			Memo Item									
Full Name (Last, First, Middle Initial)												
C. Friends of Erek L. Barron			Date of Disbursement									
Mailing Address 1050 Hull Street			12 20 2017									
Suite 120												
City	State Zip Code		FEC Identification Number									
Baltimore Purpose of Disbursement	MD 21230		C									
•		Transaction ID : SB29.12453										
Candidate Name	Amount of Each Disbursement this Period											
Office Sought: House Dishurse	Office Sought: House Disbursement For:											
Senate Dispurse												
President	Other (specify)		Memo Item									
State: District:			Memo item									
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SCHEDULE B (FEC Form 3X)		FOR LINE	R LINE NUMBER: PAGE 245 OF 254									
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Full Name (Last, First, Middle Initial)												
A. Friends of Gail Bates			Date of Disbursement									
Mailing Address DO Boy 20			10 31 2017									
Mailing Address PO Box 39			2017									
City	State Zip Code MD 21737		FEC Identification Number									
Glenelg Purpose of Disbursement	MD 21737	T										
. alposo of biobaloomone			C Transaction ID - CD20 42425									
Candidate Name		Category/	Transaction ID : SB29.12425 Amount of Each Disbursement this Period									
	Туре											
	Office Sought: House Disbursement For: Senate Primary General											
President		Memo Item										
State: MD District:	1		I Memo Item									
Full Name (Last, First, Middle Initial)			Data of Dishumana									
B. Friends of George C. Edwards	Date of Disbursement											
Mailing Address PO Box 658	12 20 2017											
	Z											
City Grantsville	State Zip Code MD 21536		FEC Identification Number									
Purpose of Disbursement	21000		C									
			Transaction ID : SB29.12428									
Candidate Name		Category/	Amount of Each Disbursement this Period									
Office Sought: House Disburse	ment For:	Туре	250.00									
Senate	Primary General		7 7									
President	Other (specify)		Memo Item									
State: District:  Full Name (Last, First, Middle Initial)			_									
C. Friends of J.B. Jennings			Date of Disbursement									
			M M / D D / Y Y Y Y									
Mailing Address PO Box 1037			07 26 2017									
City	State Zip Code		FEC Identification Number									
Belcamp Burness of Disbursement	MD 21017	T										
Purpose of Disbursement		C										
Candidate Name	Category/	Transaction ID: SB29.12413  Amount of Each Disbursement this Period										
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Office Sought: House Disburse Senate	ment For:		250.00									
President												
State: District:			Memo Item									
			750.00									
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^	Full Name (Last, First, Middle Initial)									Date of Disbursement									
Α.	Friends of Jim Mathias																		
	Mailing Address 3546 Figgs Landing Road								12 20 7 2017										
	City	State	Zip Code				FF	=C 14	lonti	ficatio		Nur	nhar						
	Snow Hill	MD	21863					_0 10	Ellu	licatio	711	INUI	ilbei	-	-				
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	Candidate Name				_	_							SB29.						
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	Senate Primary General									7		+	7		-76-				
	President Other (specify) ▼								mo	Item									
	State: District:	4					_	IVIC	,,,,,	110111									
_	Full Name (Last, First, Middle Initial)						_												
В.	B. Friends of Jim Rosapepe								f Di	sburse	em	ient							
	Mailing Address PO Box 700							и = м 10	1		о 31	-	Y	201	Y = Y 7	1			
	Intalling Address PO Box 700	11692 PO BOX 700							1	L	) I			201		-			
	City	State	Zip Code				FF	-C Id	lenti	ficatio	n n	Nur	nher						
	College Park	MD	20740				FEC Identification Number												
	Purpose of Disbursement																		
	Candidate Name					-11	Transaction ID : SB29.12426 Amount of Each Disbursement this Period												
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	Office Sought: House Disburse	ment For:	I		71		500.00												
	Senate	Primary	General																
	President	Other (spe	cify)				П	Me	emo	Item									
_	State: District:							_			_	_							
_	Full Name (Last, First, Middle Initial)						D.	ata o	f Di	sburse	om	ant							
О.	Friends of Joanne Benson								_		_			V	Y Y	-			
	Mailing Address PO Box 4700						Ľ	12		2	20		Ľ	201					
	City	State	Zip Code					-0 .		e - ··	_	h :							
	Capitol Heights	MD	20791				Ft	=C Id	lenti	ficatio	'n	Nur	nber		_				
	Purpose of Disbursement				_	$\neg$													
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	Candidate Name				egor ype	y/	Ar	moun	t of	Each	D	isbı	ursem	ent th	nis Pe	riod			
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	NAME OF COMMITTEE (In Full)																		
	FIRST COLONIES ANESTHESIA	ASSOCI	IATES LLC F	POL	ITI.	CAL	. ACT	101	N C(	1C _	MN —	/IITT	EE ——						
^	Full Name (Last, First, Middle Initial)									Date of Disbursement									
Α.	Friends of Joseline Pena-Melnyk																		
	Mailing Address 6011 Gettysburg Lane								12 20 2017										
	City	State	Zip Code					Idon	tification		NI	mbor							
	College Park	MD	20740				FEC	iden	tificatio	וזכ	INU	mber	_						
	Purpose of Disbursement				-	$\neg$	C												
	Candidate Name			Ц.				rans	saction	n li	D:	SB29.	12454						
	Candidate Name				egor	y/	Amo	unt o	f Each	ı C	)isb	ursem	ent thi	s Per	iod				
	Office Sought: House Disburse	ment For:		- 1	ype						Т		1000	0.00	П.				
	Senate Primary General							_	7	-	+	7	_	-	_				
	President Other (specify) ▼							/lem/	o Item										
	State: District:						ш	VIOTIN	7 110111										
_	Full Name (Last, First, Middle Initial)																		
B. Friends of Karen Lewis Young							Date	of D	isburs	en	nen	i							
	Mailing Address PO Box 3662							12 20 2017											
	Walling Address PO Box 3002	9 / Mai 200								20	-		2017	_					
	City	State	Zip Code				FEC	Iden	tificatio	n n	Nu	mher							
	Frederick								FEC Identification Number										
	Purpose of Disbursement						C												
	Candidate Name				-	_	Transaction ID : SB29.1245												
					egor ype	y/	Amount of Each Disbursement this Period												
	Office Sought: House Disburse	ment For:	I		-		500.00												
	Senate	Primary	General				7 7 7												
	President	Other (spec	cify)				Ш	Лет	) Item										
_	State: District:						_				_								
C	Full Name (Last, First, Middle Initial)  Friends Of Kathy Klausmeier						Dat≏	of C	isburs	en	nen	t							
٥.	Friends Of Kathy Klausmelei						M			D			Y	V					
	Mailing Address 17 W Courtland Street						10			31			2017						
	Suite 210																		
	City Bel Air	State MD	Zip Code 21014				FEC	Iden	tificatio	on	Nu	mber							
	Purpose of Disbursement	IVID	21014			_	С				T			1					
									actio	n I	<b>D</b> ·	SB29.	12/38						
	Candidate Name Category/											ursem		s Per	iod				
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	Office Sought: House Disburse	Comerci								500	0.00								
	X Senate President	Primary General Other (specify) ▼																	
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SCHEDULE B (FEC Form 3X)		EOR LINE	R LINE NUMBER: PAGE 248 OF 254								
ITEMIZED DISBURSEMENTS	Use separate schedule	e(s) (check only	TO MEET !								
	for each category of the Detailed Summary Page	ge   $\square^{210}$	22 23 26 27								
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NAME OF COMMITTEE (In Full)											
FIRST COLONIES ANESTHESIA	ASSOCIATES LL	C POLITICA	L ACTION COMMITTEE								
Full Name (Lock First Middle India)											
Full Name (Last, First, Middle Initial)  A. Friends Of Kathy Szeliga			Date of Disbursement								
- Herida Of Ratify Ozeliga			M M / D D / Y Y Y Y								
Mailing Address PO Box 40			12 12 2017								
City	State Zip Code		FFC Identification Number								
Kingsville	MD 21087		FEC Identification Number								
Purpose of Disbursement			C								
Candidate Name			Transaction ID : SB29.12449 Amount of Each Disbursement this Period								
	Category/ Type										
Office Sought: House Disburse	0.5										
Senate	al										
State: MD District:	State: MD District: Other (specify) ▼										
Full Name (Last, First, Middle Initial)											
B. Friends Of Kirill Reznik			Date of Disbursement								
	M = M / D = D / Y = Y = Y										
Mailing Address 18469 Stone Hollow Drive			12 20 2017								
City	State Zip Code MD 20874		FEC Identification Number								
Germantown Purpose of Disbursement	MD 20874		C								
			Transaction ID : SB29.12456								
Candidate Name		Category/	Amount of Each Disbursement this Period								
Office Sought: House Disburse	ment For:	Туре	250.00								
Senate	Primary Genera	al									
President	Other (specify)		Memo Item								
State: MD District: 39			<u> </u>								
Full Name (Last, First, Middle Initial)  C. Friends of Mary Roth Carazza			Date of Disbursement								
C. Friends of Mary Beth Carozza			M M / D D / Y Y Y Y								
Mailing Address PO Box 428			12 20 2017								
City	State Zip Code		FEC Identification Number								
Ocean City	MD 21843										
Purpose of Disbursement		C									
Candidate Name	Category/	Transaction ID : SB29.12457 Amount of Each Disbursement this Period									
		Type	250.00								
Senate President	Primary General Gener	aı	п., .								
State: District:			Memo Item								
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NAME OF COMMITTEE (In Full)																
FIRST COLONIES ANESTHESIA	A ASSOC	CIATES LLC F	POLITIO	CAL	. ACTI	ON	CO	MI	МІТТІ	EE						
Full Name (Last, First, Middle Initial)																
A. Friends Of Mike Busch			Date of Disbursement													
Mailing Address PO Box 824					11 10 2017											
City	State	Zip Code			FEC Id	ontifi	ication	NI.	ımbor							
Annapolis	MD	21404			I LO IU	CHUIII	icatioi	INU	iiiibei							
Purpose of Disbursement					C											
					Tra	ansa	ction	ID :	SB29.1	2444						
Candidate Name			Category	//	Amoun	t of I	Each	Disk	ourseme	ent this P	eriod					
Office Sought: House Disburs	ement For:		Туре		500.00											
Senate Sought.	Primary	General				-		_	7							
President		П.,														
State: District:		•, •			IVIE	mo l	item									
Full Name (Last, First, Middle Initial)																
B. Friends Of Nic Kipke					Date of	f Dis	burse	mer	nt							
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Mailing Address PO Box 862							12 12 2017									
City	State	Zip Code			FEC Id	entifi	icatior	ı Nı	ımber							
Pasadena Purpose of Disbursement	MD	21123														
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Candidate Name			Catagony	./					SB29.1		Pariod					
			Category Type	"	Amount of Each Disbursement this Peri											
Office Sought: House Disburs	ement For:			1500.00							0					
Senate	Primary	General			7 7 7											
President	Other (sp	ecify)			Me	mo l	Item									
State: District:																
Full Name (Last, First, Middle Initial)					Data	. D:-										
C. Friends of Ric Metzgar					Date of						_					
Mailing Address 1716 Kirkland Road				-	10	/	3		/ Y	2017	Y					
Maining / Marioso 17 To Miniaria Modu																
City	State	Zip Code			FEC Id	entifi	ication	ı Nı	ımber							
Dundalk	MD	21222														
Purpose of Disbursement				7	C			_								
Candidate Name	_	Transaction ID : SB29.12423 Amount of Each Disbursement this Period														
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Office Sought: House Disburs	.,,,,		1					250.00	0							
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President	Other (sp	ecify) 🔻			Me Me	mo l	ltem									
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NAME OF COMMITTEE (In Full)														
	ASSOC	IATES LLC I	C POLITICAL ACTION COMMITTEE											
Full Name (Last, First, Middle Initial)				Date of Disbursement										
A. Friends Of Ron Young														
Mailing Address PO Box 724				12 20 2017										
City	State	Zip Code		FEC Identification Number										
Frederick	MD	21705												
Purpose of Disbursement														
Candidate Name			Cotomici	Transaction ID : SB29.12432 Amount of Each Disbursement this Period										
			Category/ Type	Amount of Each dispursement this Period										
Office Sought: House Disburse														
Senate														
State: President State:	Other (spec	Cify) ▼		Memo Item										
Full Name (Last, First, Middle Initial)														
B. Friends Of Shirley Nathan-Pullian	า			Date of Disbursement										
			M   M   / D   D   / Y   Y   Y   Y											
Mailing Address PO Box 31785				11 10 2017										
City	State	Zip Code		FEC Identification Number										
Baltimore Purpose of Disbursement	MD	21207												
,				C Transaction ID + SP20 12442										
Candidate Name			Category/	Transaction ID: SB29.12443  Amount of Each Disbursement this Period										
			Type											
	ement For:	Concret		250.00										
Senate   President	Primary Other (spec	General												
State: District:	(opor	] /		Memo Item										
Full Name (Last, First, Middle Initial)														
C. Friends of Steve Hershey				Date of Disbursement										
Mailling Address 19111 19				M M / D D / Y Y Y Y										
Mailing Address 104 Wye View Road				12 20 2017										
City	State	Zip Code		FEC Identification Number										
Queenstown	MD	21658												
Purpose of Disbursement				C										
Candidate Name	Transaction ID : SB29.12433 Amount of Each Disbursement this Period													
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Office Sought: House Disburse	ement For:		Туре	500.00										
Senate	Primary	General												
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	for commercial purposes, other than using the nar					
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٨	Full Name (Last, First, Middle Initial)				Data of Dichureament	
۸.	Friends of Steve Waugh	Date of Disbursement				
	Mailing Address PO Box 1805	12 20 2017				
	Maning Addition 1 or Box 1000					
	City State Zip Code				FEC Identification Number	
	California	MD	20619			
	Purpose of Disbursement					
	Condidate Name			ا لـــــا ا	Transaction ID : SB29.12434	
	Candidate Name				Amount of Each Disbursement this Period	
	Office Sought: House Disburse	ment For:		Туре	250.00	
	Senate Disburse	Primary	General		100.00	
	President Other (specify)				Manager Name	
	State: District:	(-)	<i>,</i> , <del>,</del>		Memo Item	
_	Full Name (Last, First, Middle Initial)					
В.	•	•			Date of Disbursement	
					M M / D D / Y Y Y Y	
	Mailing Address 5835 Monroe Avenue				12 20 2017	
		<u> </u>	T :			
	City Eldersburg	State MD	Zip Code 21784		FEC Identification Number	
	Purpose of Disbursement		С			
	•					
	Candidate Name			Category/	Transaction ID : SB29.12459  Amount of Each Disbursement this Period	
					Amount of Each Diobulocition tills I dilou	
					500.00	
			General			
	President Other (specify)				Memo Item	
_	State: District:					
_	Full Name (Last, First, Middle Initial)				Data of Diaburgament	
U.	Friends to Re-Elect Addie Eckardt	Date of Disbursement				
	Mailing Address 900 Marshy Cove	12 20 2017				
	Unit #304					
	City	FEC Identification Number				
	Cambridge MD 21613					
	Purpose of Disbursement					
	Candidate Name				Transaction ID : SB29.12461	
	Candidate Ivalie			Category/	Amount of Each Disbursement this Period	
	Office Sought: House Disbursement For:			Туре	250.00	
	Senate Disburse				4 4	
	President	Other (spec			Mama Itam	
	State: District:		-		Memo Item	
	<u> </u>			·		
8	SUBTOTAL of Disbursements This Page (optional)				1000.00	
$\vdash$				<u> </u>		
Ιт	OTAL This Period (last nage this line number only	)				

# 17

SC	HEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 252 OF 254		
ITE	MIZED DISBURSEMENTS	Use separate schedule(s)		-	(check only one)	
			for each category of the  Detailed Summary Page		22 23 26 27	
				28a	28b 28c <b>x</b> 29 30b	
	information copied from such Reports and Stater					
$\overline{}$	or commercial purposes, other than using the nan	ne and addre	ess of any politic	cal committee to	solicit contributions from such committee.	
I \	NAME OF COMMITTEE (In Full)	400001	ATEQ 110		A OTION COMMITTEE	
/	FIRST COLONIES ANESTHESIA	ASSOCI	ATES LLC	POLITICAL	ACTION COMMITTEE	
<u>Г</u>	full Name (Last, First, Middle Initial)					
	Hogan for Governor	Date of Disbursement				
_		M M / D D / Y Y Y Y				
N	Nailing Address PO Box 6559	10 11 2017				
-	s					
	City Annapolis	State MD	Zip Code 21401		FEC Identification Number	
	Purpose of Disbursement	IVID	21401		C	
7	Candidate Name			Category/	Transaction ID : SB29.12416  Amount of Each Disbursement this Period	
7	Office Sought: House Disburser				2000.00	
	Senate	Primary	General			
c	President State: District:	Other (spec	city) 🔻		Memo Item	
_						
_	Full Name (Last, First, Middle Initial)				Date of Disbursement	
٥.	Morales for Delegate				M M / D D / Y Y Y	
N	Mailing Address 19347 Liberty Heights Lane				10 31 2017	
	g					
	,	State	Zip Code		FEC Identification Number	
	Germantown MD 20874					
'	Purpose of Disbursement				C	
7	didate Name			Catananii	Transaction ID : SB29.12422	
			Category/ Type	Amount of Each Disbursement this Period		
ō	Office Sought: House Disburser	I.		250.00		
	Senate		General			
	President	Other (spec	cify)		Memo Item	
	State: District:				<u> </u>	
	Full Name (Last, First, Middle Initial)				Data of Diaburgament	
<b>U.</b>	People For Pendergrass	Date of Disbursement				
	Mailing Address PO Box 6711	12 20 2017				
Ċ	City		FEC Identification Number			
-	Columbia	MD	21045			
F	Purpose of Disbursement				C	
7	Candidate Name				Transaction ID : SB29.12458	
	Category/ Type				Amount of Each Disbursement this Period	
(	Office Sought: House Disbursement For:			.,,,,	500.00	
	Senate	Primary	General		4 4	
	President	Other (spec	cify) 🔻		Memo Item	
	State: MD District:					
					0750.00	
SU	BTOTAL of Disbursements This Page (optional)			·····•	2750.00	
T0	TAI This Pariod (last page this line number only)					

SCHEDULE B (FEC Form 3X)	FOR L			NE NUMBER: PAGE 253 OF 254	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the		(check only		
		Summary Page	21b 28a	22 23 26 27 28b 28c <b>x</b> 29 30b	
Anni information popular from such Departs and Otata					
Any information copied from such Reports and States or for commercial purposes, other than using the nar					
NAME OF COMMITTEE (In Full)					
FIRST COLONIES ANESTHESIA	ASSOCI	ATES LLC F	POLITICAL	L ACTION COMMITTEE	
Full Name (Last, First, Middle Initial)					
A. Sailing for Senate				Date of Disbursement	
	M M / D D / Y Y Y Y				
Mailing Address 103 Dundalk Avenue	10 31 2017				
City					
Baltimore	State MD	Zip Code 21222		FEC Identification Number	
Purpose of Disbursement				C	
				Transaction ID : SB29.12437	
Candidate Name	Cate		Category/	Amount of Each Disbursement this Period	
Office Country   House			Туре	250.00	
Office Sought: House Disburser Senate	ment For: Primary	General		230.00	
President	Other (spec				
State: District:	\ 1	, v		Memo Item	
Full Name (Last, First, Middle Initial)					
B. Sheree Sample-Hughes Campaign	n Fund			Date of Disbursement	
Mailine Address DOD 2000				M M / D D / Y Y Y Y	
Mailing Address PO Box 2889	10 31 2017				
City	State	Zip Code		FEC Identification Number	
Salisbury	MD	21802			
Purpose of Disbursement				C	
Candidate Name	Candidate Name  Category/ Type			Transaction ID : SB29.12420	
Canadato Name				Amount of Each Disbursement this Period	
Office Sought: House Disburser					
Senate Primary Ge				7 7	
President Other (specify)				Memo Item	
Full Name (Last, First, Middle Initial)  C. Supporters Of Thomas 'Mac' Middle Middle Initial)	Date of Disbursement				
5. Supporters of Thomas Mac Midd	M M / D D / Y Y Y Y				
Mailing Address PO Box 2502	11 10 2017				
City	State	Zin Codo			
City La Plata	MD	Zip Code 20646		FEC Identification Number	
Purpose of Disbursement	Purpose of Disbursement				
				C Transaction ID : SB29.12442	
Candidate Name Category/				Amount of Each Disbursement this Period	
Office Sought: House Disbursement For:				500.00	
Senate Disbursement For:  Senate Primary General				300.00	
President	Other (spec				
State: District:				Memo Item	
SUBTOTAL of Disbursements This Page (optional)				1250.00	
TOTAL This Period (last page this line number only	<b>\</b>				

S	CHEDULE B (FEC Form 3X)	EOD I		FOR LINE	NUMBER: PAGE 254 OF 254
ΙΤ	EMIZED DISBURSEMENTS	Use separate schedule(s)			
		for each category of the Detailed Summary Page		21b	22 23 26 27
				28a	28b 28c <b>x</b> 29 30b
	ly information copied from such Reports and Staten for commercial purposes, other than using the name				
<u> </u>	NAME OF COMMITTEE (In Full)	and dudit	oos or any point		Solicit Solicitations from Sasin Solicitation.
$ \rangle$	FIRST COLONIES ANESTHESIA	ASSOCI	ATESTIC	POLITICAL	ACTION COMMITTEE
$\angle$					
_	Full Name (Last, First, Middle Initial)		B (B) .		
Α.	The Committee To Elect Ted Soph	Date of Disbursement			
	Mailing Address 6584 Brentwood Road				12 20 2017
	Maining / Marcocc cock Distriction				
	City State Zip Code				FEC Identification Number
	Linthicum  Rurness of Dishursement	MD	21090		
	Purpose of Disbursement				C
	Candidate Name		L		Transaction ID : SB29.12460
				Category/ Type	Amount of Each Disbursement this Period
	Office Sought: House Disburser	ment For:			250.00
	Senate	Primary	General		
	State: District:	President Other (specify) ▼			Memo Item
_	Full Name (Last, First, Middle Initial)				
В.	ruii Name (Last, First, Middle Illitial)				Date of Disbursement
					M M / D D / Y Y Y Y
	Mailing Address				
			T		
	City	State Zip Code			FEC Identification Number
	Purpose of Disbursement				C
	Candidate Name  Office Sought: House Disbursement For: Senate Primary General Other (specify)			Category/	Amount of Each Disbursement this Period
				Туре	
	State: District:	(0)	,,		Memo Item
	Full Name (Last, First, Middle Initial)				
C.		Date of Disbursement			
	-	M M / D D / Y Y Y Y			
	Mailing Address				
	City	State	Zip Code		EEC Identification Number
					FEC Identification Number
	Purpose of Disbursement				C
	Candidate Name				
	Candidate Name	Category/ Type	Amount of Each Disbursement this Period		
	Office Sought: House Disbursement For:				
	Senate Primary Genera				7 7
	President	Other (spec	ify) ▼		Memo Item
_	State: District:				Ц
					250.00
S	UBTOTAL of Disbursements This Page (optional)			·····•	250.00
ļ,	OTAL This Period (last page this line number only)				45690.90
Ι'	VIAL THIS I ENDU (IAST PAYE THIS HITE HUTTINET OFHY)	•••••			