

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 6640 Carothers Parkway  
Suite 500  
 Check if different than previously reported. (ACC)  
Franklin TN 37067

2. **FEC IDENTIFICATION NUMBER** C00407684  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 04 01 2010 through 06 30 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Brent Turner

Signature of Treasurer Electronically Filed by Brent Turner Date 07 09 2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only								
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**FEC FORM 3X**  
(Rev. 12/2004)

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

Write or Type Committee Name  
PSYCHIATRIC SOLUTIONS INC. FED PAC

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		141605.00
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	130605.00									
(c) Total Receipts (from Line 19) .....	0.00	0.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	130605.00	141605.00								
7. Total Disbursements (from Line 31) .....	28300.00	39300.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	102305.00	102305.00								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
PSYCHIATRIC SOLUTIONS INC. FED PAC

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	28300.00	39300.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	28300.00	39300.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	28300.00	39300.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)  
PSYCHIATRIC SOLUTIONS INC. FED PAC

A.

Full Name (Last, First, Middle Initial)  
LAMAR ALEXANDER

Transaction ID: SB23.4660  
Date of Disbursement

Mailing Address 228 S WASHINGTON STREET SUITE 115

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	4		2	0	1	0

City ALEXANDRIA State VA Zip Code 22314

Amount of Each Disbursement this Period

Purpose of Disbursement

011
Category/ Type

5000.00
---------

Candidate Name  
LAMAR ALEXANDER

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: TN District: 00

B.

Full Name (Last, First, Middle Initial)  
MARSHA MRS. BLACKBURN

Transaction ID: SB23.4666  
Date of Disbursement

Mailing Address P.O. Box 3750

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	1	0

City Brentwood State TN Zip Code 37027

Amount of Each Disbursement this Period

Purpose of Disbursement

011
Category/ Type

5000.00
---------

Candidate Name  
MARSHA MRS. BLACKBURN

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: TN District: 07

C.

Full Name (Last, First, Middle Initial)  
JOHN N BOOZMAN

Transaction ID: SB23.4667  
Date of Disbursement

Mailing Address 34 CHAMPIONS (PO BOX 671)  
PO BOX 671

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	1		2	0	1	0

City ROGERS State AR Zip Code 72758

Amount of Each Disbursement this Period

Purpose of Disbursement

011
Category/ Type

5000.00
---------

Candidate Name  
JOHN N BOOZMAN

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: AR District: 03

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

15000.00
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TOTAL This Period (last page this line number only) .....

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
PSYCHIATRIC SOLUTIONS INC. FED PAC

A.	Full Name (Last, First, Middle Initial) JOHN CORNYN	Transaction ID: SB23.4654 Date of Disbursement MM / DD / YYYY 04 / 30 / 2010
	Mailing Address 6850 AUSTIN CENTER BLVD STE 180	Amount of Each Disbursement this Period 2500.00
	City AUSTIN State TX Zip Code 78731	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name JOHN CORNYN	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) LINCOLN EDWARD DAVIS	Transaction ID: SB23.4658 Date of Disbursement MM / DD / YYYY 05 / 24 / 2010
	Mailing Address PO BOX 350	Amount of Each Disbursement this Period 5000.00
	City JAMESTOWN State TN Zip Code 38556	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name LINCOLN EDWARD DAVIS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) LLOYD REP. DOGGETT	Transaction ID: SB23.4664 Date of Disbursement MM / DD / YYYY 06 / 02 / 2010
	Mailing Address 1157 San Bernard St	Amount of Each Disbursement this Period 1000.00
	City Austin State TX Zip Code 78702	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name LLOYD REP. DOGGETT	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 25	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	8500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
PSYCHIATRIC SOLUTIONS INC. FED PAC

**A.** Full Name (Last, First, Middle Initial)  
JEFFREY ALAN ALAN HARTLINE

Mailing Address 1107 BRENLAN COURT

City MT JULIET State TN Zip Code 37122

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
JEFFREY ALAN ALAN HARTLINE

Office Sought:  House  Senate  President  
State: TN District: 05  
Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.4656  
Date of Disbursement

04 / 30 / 2010

Amount of Each Disbursement this Period

2400.00

**B.** Full Name (Last, First, Middle Initial)  
JIM TRACY FOR CONGRESS

Mailing Address PO BOX 331677

City MURFREESBORO State TN Zip Code 37133

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
JIM TRACY FOR CONGRESS

Office Sought:  House  Senate  President  
State: TN District: 06  
Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.4662  
Date of Disbursement

06 / 02 / 2010

Amount of Each Disbursement this Period

1400.00

**C.** Full Name (Last, First, Middle Initial)  
REPUBLICAN PARTY OF KENTUCKY

Mailing Address P.O. BOX 1068

City FRANKFORT State KY Zip Code 40602

Purpose of Disbursement

003  
Category/  
Type

Candidate Name  
REPUBLICAN PARTY OF KENTUCKY

Office Sought:  House  Senate  President  
State: District:  
Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.4652  
Date of Disbursement

04 / 13 / 2010

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

4800.00

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

28300.00