



**Child Health
Corporation of America**

6803 West 64th Street, Suite 208
Shawnee Mission, KS 66202
913/262-1436 • (Fax) 913/262-1575
www.chca.com

RECEIVED
FEC MAIL CENTER

2008 APR 15 AM 9:32

April 7, 2008

Federal Election Commission
Attn: Julie Fleming, Campaign Finance Analyst
999 E Street NW
Washington DC 20463

RE: Amended Mid-Year Report (1/01/07-6/30/07) and
Year-End Report (7/01/07-12/31/07)

Identification Number: C00430587

Dear Julie:

In response to your letters dated March 21, 2008 (copies enclosed), please find enclosed two amended FEC Form 3X which should replace all previously filed forms. We apologize for the inconvenience and hope we have completed these returns correctly.

If you have questions, please contact Brian Humphreys or me at (913) 262-1436.

Sincerely,

Craig F. Fischer
Senior Vice President

Enclosures

28039683872



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-2

March 21, 2008

Craig F. Fischer, Treasurer
Child Health Corporation of America PAC
6803 West 64th Street Suite 208
Shawnee Mission, KS 66202

**Response Due Date:
April 21, 2008**

Identification Number: C00430587

Reference: Year-End Report (7/01/07 – 12/31/07)

Dear Treasurer:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. This notice requests information essential to full public disclosure of your federal election campaign finances. **Failure to adequately respond by the response date noted above could result in an audit or enforcement action.** Additional information is needed for the following item:

-The totals listed on Lines 11(a)(i) and 11(a)(ii), Column B of the Detailed Summary Page(s) appear to be incorrect. Please be advised that you should add the "Calendar Year-to-Date" total from your previous report to the current "Total This Period" figure from Column A to derive the correct Column B totals. Please amend your report and any subsequent reports that may be affected by this correction.


Please note, you will not receive an additional notice from the Commission on this matter. Adequate responses must be received by the Commission on or before the due date noted above to be taken into consideration in determining whether audit action will be initiated. Failure to comply with the provisions of the Act may also result in an enforcement action against the committee. Any response submitted by your committee will be placed on the public record and will be considered by the Commission prior to taking enforcement action. **Requests for extensions of time in which to respond will not be considered.**

Electronic filers must file amendments (to include statements, designations and reports) in an electronic format and must submit an amended report in its entirety, rather than just those portions of the report that are being amended. If you should have any questions regarding this matter or wish to verify the adequacy of your response, please

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contact me on our toll-free number (800) 424-9530 (at the prompt press 5 to reach the Reports Analysis Division) or my local number (202) 694-1206.

Sincerely,

A handwritten signature in cursive script that reads "Julie Fleming". The signature is written in black ink and is positioned above the printed name.

Julie Fleming
Campaign Finance Analyst
Reports Analysis Division

229

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**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

CHILD HEALTH CORPORATION OF AMERICA - PAC

ADDRESS (number and street)

6803 WEST 64 STREET SUITE 203

Check if different than previously reported. (ACC)

SHAWNEE MISSION KS 66202

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00430587

3. IS THIS REPORT NEW (N) OR AMENDED (A)

TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

- (b) Monthly Report Due On:
- Feb 20 (M2) 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

07 / 01 / 2007 through 12 / 31 / 2007

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

Type or Print Name of Treasurer Craig F. Fischer

Signature of Treasurer

Craig F. Fischer

Date

04 / 07 / 2008

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

Office Use Only

FEC FORM 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Child Health Corporation of America - PAC

Report Covering the Period: From: 07 / 01 / 2007 To: 12 / 31 / 2007

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2007		00
(b) Cash on Hand at Beginning of Reporting Period.....	6,485.00	
(c) Total Receipts (from Line 19).....	2,650.00	12,150.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	9,135.00	12,150.00
7. Total Disbursements (from Line 31).....	1,000.00	4,015.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	8,135.00	8,135.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Child Health Corporation of America - PAC

Report Covering the Period: From:

MM ' DD ' YYYY
07 ' 01 ' 2007

To:

MM ' DD ' YYYY
12 ' 31 ' 2007

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).....

2,400.00

1,160.00

(ii) Unitemized.....

250.00

550.00

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

2,650.00

1,215.00

(b) Political Party Committees.....

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

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

2,650.00

1,215.00

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

13. All Loans Received.....

14. Loan Repayments Received.....

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

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

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

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account
(from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

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

2,650.00

1,215.00

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

2,650.00

1,215.00

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DETAILED SUMMARY PAGE
of Disbursements

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II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		1,500
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1,000.00	4,000.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	1,000.00	4,015.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1,000.00	4,015.00

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)	2,650.00	12,150.00
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2,650.00	12,150.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))		
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)		

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

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

NAME OF COMMITTEE (In Full)

Child Health Corporation of America - PAC

Full Name (Last, First, Middle Initial)

A. Gardner, Larry

Mailing Address

10132 N Bradford Ave

City

Kansas City North

State

Mo

Zip Code

64154

FEC ID number of contributing federal political committee.

C

Name of Employer

CHCA

Occupation

Vice President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

07 / 16 / 2007

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. McPhail, James R

Mailing Address

5310 W 166 Terrace

City

Stillwell

State

KS

Zip Code

66085

FEC ID number of contributing federal political committee.

C

Name of Employer

CHCA

Occupation

Vice President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

09 / 07 / 2007

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

C. Rindner Edna

Mailing Address

5535 Suwanee Rd

City

Fairway

State

KS

Zip Code

66205 3304

FEC ID number of contributing federal political committee.

C

Name of Employer

CHCA

Occupation

Vice President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 17 / 2007

Amount of Each Receipt this Period

500.00

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

1200.00

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

2003968300

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

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

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

NAME OF COMMITTEE (In Full)
Child Health Corporation of America - PAC

A. Full Name (Last, First, Middle Initial)
Kveser, Jacqueline

Mailing Address
8010 NW Breckenridge Drive

City **Parkville** State **MO** Zip Code **64152**

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

Name of Employer **CHCA** Occupation **Vice President**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1,000.00

Date of Receipt
09 / 11 / 2007

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Collins, Katherine A

Mailing Address
14019 W 56 Street

City **Shawnee KS** State **KS** Zip Code **66216**

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

Name of Employer **CHCA** Occupation **Vice President**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1,400.00

Date of Receipt
09 / 28 / 2007

Amount of Each Receipt this Period
700.00

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶ **1,200.00**

TOTAL This Period (last page this line number only).....▶ **2,400.00**

18889968082

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

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

FOR LINE NUMBER:
(check only one)

PAGE OF

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

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

NAME OF COMMITTEE (In Full)

Child Health Corporation of America - PAC

Full Name (Last, First, Middle Initial)

A.

Full Name (Last, First, Middle Initial)
Citizens for Arlen Specter

Mailing Address
203 Maryland Ave NE

City **Washington DC** State _____ Zip Code **20002**

Purpose of Disbursement
Contribution

Candidate Name
Arlen Specter

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement

MM / DD / YYYY
09 / 27 / 2007

Amount of Each Disbursement this Period

Amount: **1,000.00**

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City _____ State _____ Zip Code _____

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Amount: _____

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City _____ State _____ Zip Code _____

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Amount: _____

SUBTOTAL of Disbursements This Page (optional).....▶ **1,000.00**

TOTAL This Period (last page this line number only).....▶ **1,000.00**

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

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)
4/7/08

USPS Priority Mail Postmarked
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

Jm P
 PREPARER
 (3/2005)

4/15/08
 DATE PREPARED

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