

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 PHYSICIAN HOSPITALS OF AMERICA POLITICAL ACTION COMMITTEE

ADDRESS (number and street) PO Box 70980 Check if different than previously reported. (ACC) Washington DC 20024

2. FEC IDENTIFICATION NUMBER C00394163 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 02 01 2010 through 02 28 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 John Richardson

Signature of Treasurer Electronically Filed by John Richardson Date 06 28 2011

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

Table with 7 columns and 1 row for Office Use Only

FEC FORM 3X (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
PHYSICIAN HOSPITALS OF AMERICA POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	2

D	D
2	8

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>X</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>	X	Y	Y	Y	2	0	1	0		107325.01
X	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	100825.01									
(c) Total Receipts (from Line 19)	0.00	5000.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	100825.01	112325.01								
7. Total Disbursements (from Line 31)	23000.00	34500.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	77825.01	77825.01								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

PHYSICIAN HOSPITALS OF AMERICA POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	2

D	D
2	8

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	5000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	5000.00
(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	5000.00
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	5000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	0.00	5000.00

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	23000.00	34500.00
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))..	23000.00	34500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	23000.00	34500.00

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	5000.00
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	5000.00
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)
PHYSICIAN HOSPITALS OF AMERICA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
**BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMEN-
TS PAC (BRIDGE PAC)**

Mailing Address 499 SOUTH CAPITOL ST SW SUITE 422

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB23.7143
Date of Disbursement

/

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
CASTLE CAMPAIGN FUND

Mailing Address PO Box 133

City Wilmington State DE Zip Code 19899

Purpose of Disbursement Contribution

Candidate Name
MICHAEL N. CASTLE

Office Sought: House Senate President
State: DE District:

Disbursement For: 2010 Primary General Other (specify) ▼

Transaction ID: SB23.7148
Date of Disbursement

/

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
CASTLE CAMPAIGN FUND

Mailing Address PO Box 133

City Wilmington State DE Zip Code 19899

Purpose of Disbursement Contribution

Candidate Name
MICHAEL N. CASTLE

Office Sought: House Senate President
State: DE District:

Disbursement For: 2010 Primary General Other (specify) ▼

Transaction ID: SB23.7151
Date of Disbursement

/

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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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)
PHYSICIAN HOSPITALS OF AMERICA POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) COOPER FOR CONGRESS	Transaction ID: SB23.7154 Date of Disbursement 02 / 28 / 2010
	Mailing Address c/o Davidson, Golden & Lundy P.O. Box 927	Amount of Each Disbursement this Period 1000.00
	City Brentwood State TN Zip Code 37024	
	Purpose of Disbursement Contribution	Category/Type
	Candidate Name JAMES H.S. COOPER	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) GIFFORDS FOR CONGRESS	Transaction ID: SB23.7159 Date of Disbursement 02 / 28 / 2010
	Mailing Address PO Box 12886	Amount of Each Disbursement this Period 1000.00
	City Tucson State AZ Zip Code 85732	
	Purpose of Disbursement Contribution	Category/Type
	Candidate Name GABRIELLE GIFFORDS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 08	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) HOOSIERS FOR HILL	Transaction ID: SB23.7152 Date of Disbursement 02 / 26 / 2010
	Mailing Address PO Box 1071	Amount of Each Disbursement this Period 1000.00
	City Seymour State IN Zip Code 47274	
	Purpose of Disbursement Contribution	Category/Type
	Candidate Name BARON P HILL	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 09	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

TOTAL 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)
PHYSICIAN HOSPITALS OF AMERICA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
JIM GERLACH FOR CONGRESS COMMITTEE

Mailing Address PO Box 87

City Uwchland State PA Zip Code 19480

Purpose of Disbursement
Contribution

Candidate Name
JIM GERLACH

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: PA District: 06

Transaction ID: SB23.7146

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
MICHAEL BURGESS FOR CONGRESS

Mailing Address PO Box 2334

City Denton State TX Zip Code 76202

Purpose of Disbursement
Contribution

Candidate Name
Dr. MICHAEL C. BURGESS

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: TX District: 26

Transaction ID: SB23.7150

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
MIKE ROSS FOR CONGRESS COMMITTEE

Mailing Address PO Box 360

City Prescott State AR Zip Code 71857

Purpose of Disbursement
Contribution

Candidate Name
MICHAEL AVERY ROSS

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: AR District: 04

Transaction ID: SB23.7158

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

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

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

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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)
PHYSICIAN HOSPITALS OF AMERICA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
PERLMUTTER FOR CONGRESS

Mailing Address 3440 Youngfield St #264

City Wheat Ridge State CO Zip Code 80033

Purpose of Disbursement
Contribution

Candidate Name
EDWIN PERLMUTTER

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CO District: 07

Transaction ID: SB23.7153

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
PRICE FOR CONGRESS

Mailing Address PO BOX 425

City ROSWELL State GA Zip Code 30077

Purpose of Disbursement
Contribution

Candidate Name
THOMAS EDMUNDS PRICE, MD

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: GA District: 06

Transaction ID: SB23.7145

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
RICHARD BURR COMMITTEE

Mailing Address POST OFFICE BOX 5928

City WINSTON-SALEM State NC Zip Code 27113

Purpose of Disbursement
Contribution

Candidate Name
RICHARD M BURR

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NC District:

Transaction ID: SB23.7147

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

TOTAL 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)

PAGE 10 / 10

<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)
PHYSICIAN HOSPITALS OF AMERICA POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
SHEILA JACKSON LEE FOR CONGRESS

Mailing Address 4412 ALMEDA

City HOUSTON State TX Zip Code 77004

Purpose of Disbursement
Contribution

Candidate Name
SHEILA JACKSON LEE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: TX District: 18

Transaction ID: SB23.7138

Date of Disbursement

02 / 03 / 2010

Amount of Each Disbursement this Period

5000.00

B. Full Name (Last, First, Middle Initial)
TUESDAY GROUP POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 40385

City WASHINGTON State DC Zip Code 20016

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.7137

Date of Disbursement

02 / 02 / 2010

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) ►

10000.00

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

23000.00