

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 3000 RIVERCHASE GALLERIA  
SUITE 500  
BIRMINGHAM AL 35244

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00440743

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 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)
  - Mar 20 (M3)
  - Apr 20 (M4)
  - May 20 (M5)
  - Jun 20 (M6)
  - Jul 20 (M7)
  - Aug 20 (M8)
  - Sep 20 (M9)
  - Oct 20 (M10)
  - Nov 20 (M11) (Non-Election Year Only)
  - Dec 20 (M12) (Non-Election Year Only)
  - 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 [11] / [25] / [2014] through [12] / [31] / [2014]

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 Richard L. Sharff Jr.

Signature of Treasurer Richard L. Sharff Jr. [Electronically Filed] Date 01 / 17 / 2015

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="23060.21"/>	<input type="text" value="23060.21"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="37937.08"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="11224.66"/>	<input type="text" value="56201.53"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="49161.74"/>	<input type="text" value="79261.74"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="0.00"/>	<input type="text" value="30100.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="49161.74"/>	<input type="text" value="49161.74"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

**SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE**

Report Covering the Period: From:  /  /  To:  /  /

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).....	10672.90	40323.22
(ii) Unitemized .....	545.55	15846.10
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	11218.45	56169.32
(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) .....	11218.45	56169.32
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.).....	6.21	32.21
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 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))..... ▶	11224.66	56201.53
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	11224.66	56201.53

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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 .....	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.....	0.00	28100.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (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	2000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	0.00	30100.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	30100.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....	11218.45	56169.32
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	11218.45	56169.32
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 31
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
**SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Wanda Allison</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5014</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 30.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C		Payroll deduction \$10.00 biweekly
Name of Employer Surgical Care Affiliates	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>B. Jacquelin Belcher</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5015</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 57.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C		Payroll deduction \$19.00 biweekly
Name of Employer Surgical Care Affiliates	Occupation Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 494.00	

Full Name (Last, First, Middle Initial) <b>C. Richard Brisson</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5018</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 45.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C		Payroll deduction \$15.00 biweekly
Name of Employer Surgical Care Affiliates	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	132.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE**

**A. Mary Beth Brust**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Riverchase Galleria  
Suite 500

City Birmingham State AL Zip Code 35244

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

Name of Employer Surgical Care Affiliates Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  
12 / 31 / 2014  
**Transaction ID : SA11AI.5020**

Amount of Each Receipt this Period  
60.00

Payroll deduction \$20.00 biweekly

**B. Kenneth Bulow**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Riverchase Galleria  
Suite 500

City Birmingham State AL Zip Code 35244

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

Name of Employer Surgical Care Affiliates Occupation Group Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  
12 / 31 / 2014  
**Transaction ID : SA11AI.5021**

Amount of Each Receipt this Period  
60.00

Payroll deduction 210.00 biweekly

**C. Sandra K. Bunch**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Riverchase Galleria  
Suite 500

City Birmingham State AL Zip Code 35244

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

Name of Employer Surgical Care Affiliates Occupation Administrator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
485.00

Date of Receipt  
12 / 31 / 2014  
**Transaction ID : SA11AI.5022**

Amount of Each Receipt this Period  
30.00

Payroll deduction \$10.00 biweekly

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 150.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 31
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Vicki Burns</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5023</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 57.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C		Payroll deduction \$19.00 biweekly
Name of Employer Surgical Care Affiliates	Occupation Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 494.00	

Full Name (Last, First, Middle Initial) <b>B. Ajay Chokski</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5025</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 150.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C		Payroll deduction \$50.00 biweekly
Name of Employer Surgical Care Affiliates	Occupation Group Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

Full Name (Last, First, Middle Initial) <b>C. Peter J. Clemens</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5026</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 346.14
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C		Payroll deduction \$115.38 biweekly
Name of Employer Surgical Care Affiliates	Occupation Chief Financial Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2999.88	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	553.14
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 31
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE**

**A. Joseph E. Colbert**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Riverchase Galleria  
Suite 500

City Birmingham State AL Zip Code 35244

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

Name of Employer Surgical Care Affiliates Occupation Administrator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
12 / 31 / 2014  
Transaction ID : SA11AI.5027

Amount of Each Receipt this Period 60.00

Payroll deduction \$20.00 biweekly

**B. John H. Cole**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Riverchase Galleria  
Suite 500

City Birmingham State AL Zip Code 35244

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

Name of Employer Surgical Care Affiliates Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
12 / 31 / 2014  
Transaction ID : SA11AI.5028

Amount of Each Receipt this Period 30.00

Payroll deduction \$10.00 biweekly

**C. Kelli Collins**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Riverchase Galleria  
Suite 500

City Birmingham State AL Zip Code 35244

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

Name of Employer Surgical Care Affiliates Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 494.00

Date of Receipt  
12 / 31 / 2014  
Transaction ID : SA11AI.5029

Amount of Each Receipt this Period 57.00

Payroll deduction \$19.00 biweekly

**SUBTOTAL** of Receipts This Page (optional).....▶ 147.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 31
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Cindy L. Davis</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5031</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 300.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C		Payroll deduction \$10.00 biweekly
Name of Employer Surgical Care Affiliates	Occupation Business Office Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>B. Elizabeth A. Davis</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5032</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 300.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C		Payroll deduction \$10.00 biweekly
Name of Employer Surgical Care Affiliates	Occupation Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>C. Thomas R. Dixon</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5033</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 75.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C		Payroll deduction \$25.00 biweekly
Name of Employer Surgical Care Affiliates	Occupation Vice President, Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	135.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 31
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Ann L. Dugan</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5034</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 75.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C		Payroll deduction \$25.00 biweekly
Name of Employer Surgical Care Affiliates	Occupation Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) <b>B. Marie Edler</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5036</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 75.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C		Payroll deduction \$25.00 biweekly
Name of Employer Surgical Care Affiliates	Occupation SDR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) <b>C. Viva Elia</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5038</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 231.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C		Payroll deduction \$77.00 biweekly
Name of Employer Surgical Care Affiliates	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2002.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	381.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 31
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE**

**A. Christian D. Ellison**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Riverchase Galleria  
Suite 500

City Birmingham State AL Zip Code 35244

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

Name of Employer Surgical Care Affiliates Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2990.00

Date of Receipt  
12 / 31 / 2014  
**Transaction ID : SA11AI.5039**

Amount of Each Receipt this Period 345.00

Payroll deduction \$115.00 biweekly

**B. Ronald E. Erb**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Riverchase Galleria  
Suite 500

City Birmingham State AL Zip Code 35244

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

Name of Employer Surgical Care Affiliates Occupation Administrator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
12 / 31 / 2014  
**Transaction ID : SA11AI.5040**

Amount of Each Receipt this Period 30.00

Payroll deduction \$10.00 biweekly

**C. Jim Evely**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Riverchase Galleria  
Suite 500

City Birmingham State AL Zip Code 35244

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

Name of Employer Surgical Care Affiliates Occupation Administrator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
12 / 31 / 2014  
**Transaction ID : SA11AI.5041**

Amount of Each Receipt this Period 30.00

Payroll deduction \$10.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	405.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 31
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Karen S. Fillner</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5043</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 30.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C		Payroll deduction \$10.00 biweekly
Name of Employer Surgical Care Affiliates	Occupation Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>B. Lisa A. Flinn</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5044</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 75.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C		Payroll deduction \$25.00 biweekly
Name of Employer Surgical Care Affiliates	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) <b>C. Mary A. Gamez</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5048</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 30.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C		Payroll deduction \$10.00 biweekly
Name of Employer Surgical Care Affiliates	Occupation Business Office Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	135.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 31
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE**

**A. Gabriel M. Garcia**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Riverchase Galleria  
Suite 500

City Birmingham State AL Zip Code 35244

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

Name of Employer Surgical Care Affiliates Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
12 / 31 / 2014  
**Transaction ID : SA11AI.5049**

Amount of Each Receipt this Period  
300.00

Payroll deduction \$10.00 biweekly

**B. Diana Geoghegan**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Riverchase Galleria  
Suite 500

City Birmingham State AL Zip Code 35244

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

Name of Employer Surgical Care Affiliates Occupation Administrator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
12 / 31 / 2014  
**Transaction ID : SA11AI.5050**

Amount of Each Receipt this Period  
300.00

Payroll deduction \$10.00 biweekly

**c. Margaret George**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Riverchase Galleria  
Suite 500

City Birmingham State AL Zip Code 35244

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

Name of Employer Surgical Care Affiliates Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  
12 / 31 / 2014  
**Transaction ID : SA11AI.5051**

Amount of Each Receipt this Period  
60.00

Payroll deduction \$20.00 biweekly

**SUBTOTAL** of Receipts This Page (optional).....▶ 120.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 31
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Roy Georgia</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5052</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 75.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C	Name of Employer Surgical Care Affiliates	Occupation Chief Information Officer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
		Payroll deduction \$25.00 biweekly

Full Name (Last, First, Middle Initial) <b>B. Jennifer Graham</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5053</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 45.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C	Name of Employer Surgical Care Affiliates	Occupation Administrator
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	
		Payroll deduction \$15.00 biweekly

Full Name (Last, First, Middle Initial) <b>C. David L. Grantham</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5054</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 45.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C	Name of Employer Surgical Care Affiliates	Occupation Administrator
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	
		Payroll deduction \$15.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	165.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 31
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE**

**A. Kevin M. Hamers**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3000 Riverchase Galleria  
 Suite 500  
 City Birmingham State AL Zip Code 35244  
 Name of Employer Surgical Care Affiliates Occupation Administrator  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 312.00

Date of Receipt 12 / 31 / 2014  
**Transaction ID : SA11AI.5055**  
 Amount of Each Receipt this Period 36.00  
 Payroll deduction \$12.00 biweekly

**B. Andrew P. Hayek**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 500 Adams Avenue  
 City Glencoe State IL Zip Code 60022-1865  
 Name of Employer Surgical Care Affiliates Occupation President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 05 / 2014  
**Transaction ID : SA11AI.5119**  
 Amount of Each Receipt this Period 5000.00

**C. Jeffrey W. Hayes**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3000 Riverchase Galleria  
 Suite 500  
 City Birmingham State AL Zip Code 35244  
 Name of Employer Surgical Care Affiliates Occupation Administrator  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2014  
**Transaction ID : SA11AI.5057**  
 Amount of Each Receipt this Period 30.00  
 Payroll deduction \$10.00 biweekly

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5066.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE**

**A. Huong Ho**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Riverchase Galleria  
Suite 500

City Birmingham State AL Zip Code 35244

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

Name of Employer Surgical Care Affiliates Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  
12 / 31 / 2014  
**Transaction ID : SA11AI.5058**

Amount of Each Receipt this Period  
60.00

Payroll deduction \$20.00 biweekly

**B. Jenny Hunter**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Riverchase Galleria  
Suite 500

City Birmingham State AL Zip Code 35244

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

Name of Employer Surgical Care Affiliates Occupation Administrator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
12 / 31 / 2014  
**Transaction ID : SA11AI.5060**

Amount of Each Receipt this Period  
30.00

Payroll deduction \$10.00 biweekly

**C. Jenifer S. Kimbrough**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Riverchase Galleria  
Suite 500

City Birmingham State AL Zip Code 35244

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

Name of Employer Surgical Care Affiliates Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
780.00

Date of Receipt  
12 / 31 / 2014  
**Transaction ID : SA11AI.5061**

Amount of Each Receipt this Period  
90.00

Payroll deduction \$30.00 biweekly

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 180.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 31
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Christopher Klassen</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5062</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 60.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C		Payroll deduction \$20.00 biweekly
Name of Employer Surgical Care Affiliates	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

Full Name (Last, First, Middle Initial) <b>B. Brian Konieczny</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5064</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 30.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C		Payroll deduction \$10.00 biweekly
Name of Employer Surgical Care Affiliates	Occupation Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>C. Alan B. Kravitz</b>		Date of Receipt 12 / 02 / 2014 <b>Transaction ID : SA11AI.5117</b>
Mailing Address 11119 Rockville Pike Suite 105		Amount of Each Receipt this Period 500.00
City Rockville	State MD	Zip Code 20852
FEC ID number of contributing federal political committee. C		
Name of Employer Montgomery Surgery Center	Occupation Physician Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	590.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 31
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Joy Kurosaka</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5065</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 57.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C	Payroll deduction \$19.00 biweekly	
Name of Employer Surgical Care Affiliates	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 494.00	

Full Name (Last, First, Middle Initial) <b>B. Thomas J. Lally</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5068</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 60.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C	Payroll deduction \$20.00 biweekly	
Name of Employer Surgical Care Affiliates	Occupation Regional Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

Full Name (Last, First, Middle Initial) <b>C. Julie A. Lineberger</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5069</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 30.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C	Payroll deduction \$10.00 biweekly	
Name of Employer Surgical Care Affiliates	Occupation Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	147.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 31
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE**

**A. Debbie Loeffler**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3000 Riverchase Galleria  
 Suite 500  
 City Birmingham State AL Zip Code 35244  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Surgical Care Affiliates Occupation Administrator  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2014  
**Transaction ID : SA11AI.5070**  
 Amount of Each Receipt this Period 30.00  
 Payroll deduction \$10.00 biweekly

**B. Dana Lord Younts**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3000 Riverchase Galleria  
 Suite 500  
 City Birmingham State AL Zip Code 35244  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Surgical Care Affiliates Occupation HR Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2014  
**Transaction ID : SA11AI.5071**  
 Amount of Each Receipt this Period 30.00  
 Payroll deduction \$10.00 biweekly

**C. Lindsay Lowder**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3000 Riverchase Galleria  
 Suite 500  
 City Birmingham State AL Zip Code 35244  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Surgical Care Affiliates Occupation Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 31 / 2014  
**Transaction ID : SA11AI.5072**  
 Amount of Each Receipt this Period 30.00  
 Payroll deduction \$10.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	90.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 31
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Kristine Lowther</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2014 <b>Transaction ID : SA11AI.5073</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 75.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee.	C	
Name of Employer Surgical Care Affiliates	Occupation Vice President	Payroll deduction \$25.00 biweekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) <b>B. Jeffrey Lozier</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 30 / 2014 <b>Transaction ID : SA11AI.5120</b>
Mailing Address 17787 Del Paso Drive		Amount of Each Receipt this Period 100.00
City Poway	State CA	Zip Code 92064
FEC ID number of contributing federal political committee.	C	
Name of Employer Surgical Care Affiliates	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. Brian Mathis</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2014 <b>Transaction ID : SA11AI.5077</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 75.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee.	C	
Name of Employer Surgical Care Affiliates	Occupation Vice President	Payroll deduction \$25.00 biweekly
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 575.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Adrienne McCall</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5078</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 300.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C		Payroll deduction \$10.00 biweekly
Name of Employer Surgical Care Affiliates	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>B. Dawn McLane-Onofrio</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5082</b>
Mailing Address 1129 Hillside Lane		Amount of Each Receipt this Period 300.00
City Louisville	State CO	Zip Code 80027-2909
FEC ID number of contributing federal political committee. C		Payroll deduction \$10.00 biweekly
Name of Employer Surgical Care Affiliates	Occupation Dir. Integration Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>C. Dare Meeks</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5083</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 75.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C		Payroll deduction \$25.00 biweekly
Name of Employer Surgical Care Affiliates	Occupation Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	135.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 31
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE**

**A. Robert Midelton**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Riverchase Galleria  
Suite 500

City Birmingham State AL Zip Code 35244

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

Name of Employer Surgical Care Affiliates Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **364.00**

Date of Receipt  
**12 / 31 / 2014**

**Transaction ID : SA11AI.5084**

Amount of Each Receipt this Period  
**42.00**

Payroll deduction \$14.00 biweekly

**B. Audra E. Morgan**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Riverchase Galleria  
Suite 500

City Birmingham State AL Zip Code 35244

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

Name of Employer Surgical Care Affiliates Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt  
**12 / 31 / 2014**

**Transaction ID : SA11AI.5085**

Amount of Each Receipt this Period  
**30.00**

Payroll deduction \$10.00 biweekly

**C. Thomas Nelson**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Riverchase Galleria  
Suite 500

City Birmingham State AL Zip Code 35244

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

Name of Employer Surgical Care Affiliates Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt  
**12 / 31 / 2014**

**Transaction ID : SA11AI.5086**

Amount of Each Receipt this Period  
**30.00**

Payroll deduction \$10.00 biweekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>102.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Bryan Olson</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2014 <b>Transaction ID : SA11AI.5089</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 75.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. <b>C</b>		Payroll deduction \$25.00 biweekly
Name of Employer Surgical Care Affiliates	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) <b>B. Louise M Pace</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2014 <b>Transaction ID : SA11AI.5090</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 60.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. <b>C</b>		Payroll deduction \$20.00 biweekly
Name of Employer Surgical Care Affiliates	Occupation Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

Full Name (Last, First, Middle Initial) <b>C. Candace A. Pitts</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2014 <b>Transaction ID : SA11AI.5091</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 30.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. <b>C</b>		Payroll deduction \$10.00 biweekly
Name of Employer Surgical Care Affiliates	Occupation Business Office Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	165.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE**

**A. Phillip R. Prince**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Riverchase Galleria  
Suite 500

City Birmingham State AL Zip Code 35244

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

Name of Employer Surgical Care Affiliates Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **520.00**

Date of Receipt  
**12 / 31 / 2014**

**Transaction ID : SA11AI.5092**

Amount of Each Receipt this Period  
**60.00**

Payroll deduction \$20.00 biweekly

**B. Leslie J. Raskin**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Riverchase Galleria  
Suite 500

City Birmingham State AL Zip Code 35244

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

Name of Employer Surgical Care Affiliates Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt  
**12 / 31 / 2014**

**Transaction ID : SA11AI.5093**

Amount of Each Receipt this Period  
**45.00**

Payroll deduction \$15.00 biweekly

**C. Peggy Rhoads**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Riverchase Galleria  
Suite 500

City Birmingham State AL Zip Code 35244

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

Name of Employer Surgical Care Affiliates Occupation Administrator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt  
**12 / 31 / 2014**

**Transaction ID : SA11AI.5094**

Amount of Each Receipt this Period  
**30.00**

Payroll deduction \$10.00 biweekly

**SUBTOTAL** of Receipts This Page (optional)..... **135.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE**

**A. Cory P Roberts**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Riverchase Galleria  
Suite 500

City Birmingham State AL Zip Code 35244

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

Name of Employer Surgical Care Affiliates Occupation VP, Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **999.96**

Date of Receipt **12 / 31 / 2014**

**Transaction ID : SA11AI.5095**

Amount of Each Receipt this Period **115.38**

Payroll deduction \$38.46 biweekly

**B. Joanne Roche**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Riverchase Galleria  
Suite 500

City Birmingham State AL Zip Code 35244

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

Name of Employer Surgical Care Affiliates Occupation Administrator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **12 / 31 / 2014**

**Transaction ID : SA11AI.5096**

Amount of Each Receipt this Period **30.00**

Payroll deduction \$10.00 biweekly

**C. Andrew J. Rosen**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Riverchase Galleria  
Suite 500

City Birmingham State AL Zip Code 35244

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

Name of Employer Surgical Care Affiliates Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt **12 / 31 / 2014**

**Transaction ID : SA11AI.5097**

Amount of Each Receipt this Period **75.00**

Payroll deduction \$25.00 biweekly

**SUBTOTAL** of Receipts This Page (optional)..... **220.38**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 31
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE**

**A. Michael A. Rucker**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Riverchase Galleria  
Suite 500

City Birmingham State AL Zip Code 35244

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

Name of Employer Surgical Care Affiliates Occupation Executive Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1963.38

Date of Receipt  
12 / 31 / 2014  
**Transaction ID : SA11AI.5098**

Amount of Each Receipt this Period  
192.38

Payroll deduction \$57.69 biweekly

**B. Kelli Ruiz**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Riverchase Galleria  
Suite 500

City Birmingham State AL Zip Code 35244

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

Name of Employer Surgical Care Affiliates Occupation Administrator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
650.00

Date of Receipt  
12 / 31 / 2014  
**Transaction ID : SA11AI.5099**

Amount of Each Receipt this Period  
75.00

Payroll deduction \$25.00 biweekly

**C. Ann M Schilleci**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Riverchase Galleria  
Suite 500

City Birmingham State AL Zip Code 35244

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

Name of Employer Surgical Care Affiliates Occupation Director, Compliance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  
12 / 31 / 2014  
**Transaction ID : SA11AI.5101**

Amount of Each Receipt this Period  
30.00

Payroll deduction \$10.00 biweekly

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 297.38

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 28 OF 31
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Richard L. Sharff Jr.</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5103</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 375.00 Payroll deduction \$125.00 biweekly
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C		
Name of Employer Surgical Care Affiliates	Occupation EVP & Gen Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3250.00	

Full Name (Last, First, Middle Initial) <b>B. Brian K. Shelton</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5104</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 75.00 Payroll deduction \$25.00 biweekly
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C		
Name of Employer Surgical Care Affiliates	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) <b>C. Susan L. Sorg</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5105</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 45.00 Payroll deduction \$15.00 biweekly
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C		
Name of Employer Surgical Care Affiliates	Occupation Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	495.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 29 OF 31
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Jeanette Stack</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5106</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 45.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C		Payroll deduction \$15.00 biweekly
Name of Employer Surgical Care Affiliates	Occupation Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

Full Name (Last, First, Middle Initial) <b>B. Carla F. Stephanie</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5107</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 45.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C		Payroll deduction \$15.00 biweekly
Name of Employer Surgical Care Affiliates	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

Full Name (Last, First, Middle Initial) <b>C. Jason J. Strauss</b>		Date of Receipt 12 / 31 / 2014 <b>Transaction ID : SA11AI.5109</b>
Mailing Address 3000 Riverchase Galleria Suite 500		Amount of Each Receipt this Period 240.00
City Birmingham	State AL	Zip Code 35244
FEC ID number of contributing federal political committee. C		Payroll deduction \$80.00 biweekly
Name of Employer Surgical Care Affiliates	Occupation Group Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2080.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	330.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 30 OF 31
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE**

**A. Timothy D. Szott**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Riverchase Galleria  
Suite 500

City Birmingham State AL Zip Code 35244

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

Name of Employer Surgical Care Affiliates Occupation Administrator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
12 / 31 / 2014  
Transaction ID : SA11AI.5110

Amount of Each Receipt this Period 30.00

Payroll deduction \$10.00 biweekly

**B. Leslie Wachsmann**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Riverchase Galleria  
Suite 500

City Birmingham State AL Zip Code 35244

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

Name of Employer Surgical Care Affiliate Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 494.00

Date of Receipt  
12 / 31 / 2014  
Transaction ID : SA11AI.5112

Amount of Each Receipt this Period 57.00

Payroll deduction \$19.00 biweekly

**C. Kristi Waite**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Riverchase Galleria  
Suite 500

City Birmingham State AL Zip Code 35244

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

Name of Employer Surgical Care Affiliates Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
12 / 31 / 2014  
Transaction ID : SA11AI.5113

Amount of Each Receipt this Period 30.00

Payroll deduction \$10.00 biweekly

**SUBTOTAL** of Receipts This Page (optional).....▶ 117.00

**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 31 OF 31  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**SURGICAL CARE AFFILIATES POLITICAL ACTION COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
**Albert J. Zahn**

Mailing Address 3000 Riverchase Galleria,  
Suite 500

City Birmingham State AL Zip Code 35244

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

Name of Employer Surgical Care Affiliates Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2014

**Transaction ID : SA11AI.5116**

Amount of Each Receipt this Period  
30.00

Payroll deduction \$10.00 biweekly

**B.** 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  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**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  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> This Period (last page this line number only).....▶	10672.90