

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

National Nurses United PAC - A Fund for a Healthy America

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="2012"/>		37626.84
(b) Cash on Hand at Beginning of Reporting Period.....	42560.69	
(c) Total Receipts (from Line 19)	5535.20	35151.89
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	48095.89	72778.73
7. Total Disbursements (from Line 31).....	8089.60	32772.44
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	40006.29	40006.29
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

National Nurses United PAC - A Fund for a Healthy America

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).....	988.00	5028.00
(ii) Unitemized	4456.50	29528.50
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5444.50	34556.50
(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)	5444.50	34556.50
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).....	90.70	595.39
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 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))..... ▶	5535.20	35151.89
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	5535.20	35151.89

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	89.60	772.44
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	89.60	772.44
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8000.00	31000.00
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	1000.00
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)) ..	8089.60	32772.44
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8089.60	32772.44

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)	5444.50	34556.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5444.50	34556.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	89.60	772.44
37. Offsets to Operating Expenditures (from Line 15, page 3).....	90.70	595.39
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-1.10	177.05

**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 23
<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)
National Nurses United PAC - A Fund for a Healthy America

A. James R. R. Bialke
 Full Name (Last, First, Middle Initial)
 Mailing Address 2234 Stinson Blvd
 City Minneapolis State MN Zip Code 55418-4039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer National Nurses United Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 16 / 2012
Transaction ID : C4343622
 Amount of Each Receipt this Period 20.00

B. James R. R. Bialke
 Full Name (Last, First, Middle Initial)
 Mailing Address 2234 Stinson Blvd
 City Minneapolis State MN Zip Code 55418-4039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer National Nurses United Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 31 / 2012
Transaction ID : C4433758
 Amount of Each Receipt this Period 20.00

C. Carolyn Bowden
 Full Name (Last, First, Middle Initial)
 Mailing Address 7908 Winthorpe St
 City Oakland State CA Zip Code 94605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CA Nurses Asso. Occupation Labor Rep
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 16 / 2012
Transaction ID : C4343605
 Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
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 7 OF 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Nurses United PAC - A Fund for a Healthy America

Full Name (Last, First, Middle Initial)
A. Carolyn Bowden

Mailing Address 7908 Winthorpe St

City State Zip Code
 Oakland CA 94605

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

Name of Employer Occupation
 CA Nurses Asso. Labor Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 800.00

Date of Receipt
 08 / 31 / 2012
Transaction ID : C4433741

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
B. Deborah Burger

Mailing Address 13172 Dupont Rd

City State Zip Code
 Sebastopol CA 95472-9786

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

Name of Employer Occupation
 California Nurses Asso RN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 08 / 14 / 2012
Transaction ID : C4334721

Amount of Each Receipt this Period
 30.00

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

Mailing Address 1026 Pleasant View

City State Zip Code
 Venice CA 90291

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

Name of Employer Occupation
 CA Nurses Asso. Nursing Practice Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 560.00

Date of Receipt
 08 / 16 / 2012
Transaction ID : C4343606

Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 115.00

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 8 OF 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Nurses United PAC - A Fund for a Healthy America

Full Name (Last, First, Middle Initial)
A. Kathy Carder

Mailing Address 1026 Pleasant View

City State Zip Code
Venice CA 90291

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

Name of Employer Occupation
CA Nurses Asso. Nursing Practice Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
560.00

Date of Receipt
08 / 31 / 2012
Transaction ID : C4433742

Amount of Each Receipt this Period
35.00

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

Mailing Address 5029 Rosecrest Drive

City State Zip Code
Pittsburg PA 60608

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

Name of Employer Occupation
CA Nurses Asso. Labor Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt
08 / 16 / 2012
Transaction ID : C4343607

Amount of Each Receipt this Period
20.00

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

Mailing Address 5029 Rosecrest Drive

City State Zip Code
Pittsburg PA 60608

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

Name of Employer Occupation
CA Nurses Asso. Labor Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt
08 / 31 / 2012
Transaction ID : C4433743

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

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 9 OF 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Nurses United PAC - A Fund for a Healthy America

A. Farah Davari
 Full Name (Last, First, Middle Initial)
 Mailing Address 10516 Almayo Ave
 City Los Angeles State CA Zip Code 90064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CA Nurses Asso. Occupation Labor Rep
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 08 / 16 / 2012
Transaction ID : C4343608
 Amount of Each Receipt this Period 30.00

B. Farah Davari
 Full Name (Last, First, Middle Initial)
 Mailing Address 10516 Almayo Ave
 City Los Angeles State CA Zip Code 90064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CA Nurses Asso. Occupation Labor Rep
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt 08 / 31 / 2012
Transaction ID : C4433744
 Amount of Each Receipt this Period 30.00

C. Thomas Dunne
 Full Name (Last, First, Middle Initial)
 Mailing Address 3050 Stanton Ave
 City Berkeley State CA Zip Code 91222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NNU Occupation Labor Rep
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 16 / 2012
Transaction ID : C4343623
 Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00
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 10 OF 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Nurses United PAC - A Fund for a Healthy America

A. Thomas Dunne
 Full Name (Last, First, Middle Initial)
 Mailing Address 3050 Stanton Ave
 City Berkeley State CA Zip Code 91222
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NNU Occupation Labor Rep
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 31 / 2012
Transaction ID : C4433759
 Amount of Each Receipt this Period 50.00

B. Elisabeth Fiekowsky
 Full Name (Last, First, Middle Initial)
 Mailing Address 2855 Old Gravenstein Hwy
 City Sebastapol State CA Zip Code 95473
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CA Nurses Asso. Occupation Labor Rep
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 16 / 2012
Transaction ID : C4343609
 Amount of Each Receipt this Period 25.00

C. Elisabeth Fiekowsky
 Full Name (Last, First, Middle Initial)
 Mailing Address 2855 Old Gravenstein Hwy
 City Sebastapol State CA Zip Code 95473
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CA Nurses Asso. Occupation Labor Rep
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 31 / 2012
Transaction ID : C4433745
 Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
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 11 OF 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Nurses United PAC - A Fund for a Healthy America

Full Name (Last, First, Middle Initial)
A. Carmen Figueroa

Mailing Address 245 So. 12th Street

City San Jose State CA Zip Code 95112

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

Name of Employer CA Nurses Asso. Occupation Labor Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 16 / 2012

Transaction ID : C4343610

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
B. Carmen Figueroa

Mailing Address 245 So. 12th Street

City San Jose State CA Zip Code 95112

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

Name of Employer CA Nurses Asso. Occupation Labor Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2012

Transaction ID : C4433746

Amount of Each Receipt this Period
20.00

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

Mailing Address 753 Keeler Ave

City Berkeley State CA Zip Code 94708

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

Name of Employer CA Nurses Asso. Occupation Labor Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
08 / 16 / 2012

Transaction ID : C4343611

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **60.00**

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 12 OF 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Nurses United PAC - A Fund for a Healthy America

Full Name (Last, First, Middle Initial)
A. Jerry Fillingim

Mailing Address 753 Keeler Ave

City Berkeley State CA Zip Code 94708

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

Name of Employer CA Nurses Asso. Occupation Labor Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2012
Transaction ID : C4433747

Amount of Each Receipt this Period
20.00

Full Name (Last, First, Middle Initial)
B. Deanna Furman

Mailing Address 2115 25th Street

City Sacramento State CA Zip Code 95991

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

Name of Employer NNU Occupation Lobbyist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **480.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2012
Transaction ID : C4343624

Amount of Each Receipt this Period
30.00

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

Mailing Address 2115 25th Street

City Sacramento State CA Zip Code 95991

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

Name of Employer NNU Occupation Lobbyist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **480.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2012
Transaction ID : C4433760

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **80.00**

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 13 OF 23
	<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)
National Nurses United PAC - A Fund for a Healthy America

A. Vera George
Full Name (Last, First, Middle Initial)

Mailing Address 2526 Sherwood Drive

City San Bruno State CA Zip Code 94066

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

Name of Employer CA Nurses Asso. Occupation Secretary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 16 / 2012

Transaction ID : C4343612

Amount of Each Receipt this Period
 20.00

B. Vera George
Full Name (Last, First, Middle Initial)

Mailing Address 2526 Sherwood Drive

City San Bruno State CA Zip Code 94066

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

Name of Employer CA Nurses Asso. Occupation Secretary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2012

Transaction ID : C4433748

Amount of Each Receipt this Period
 20.00

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

Mailing Address 50 Landers St

City San Francisco State CA Zip Code 94114

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

Name of Employer CA Nurses Asso. Occupation Educator/Researcher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 16 / 2012

Transaction ID : C4343613

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **60.00**

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 14 OF 23
<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)
National Nurses United PAC - A Fund for a Healthy America

A. Michelle Grisat
Full Name (Last, First, Middle Initial)

Mailing Address 50 Landers St

City San Francisco State CA Zip Code 94114

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

Name of Employer CA Nurses Asso. Occupation Educator/Researcher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt **08 / 31 / 2012**

Transaction ID : C4433749

Amount of Each Receipt this Period **200.00**

B. Olga Hasan
Full Name (Last, First, Middle Initial)

Mailing Address 107 Calle Nivel

City Los Gatos State CA Zip Code 95032-1164

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

Name of Employer Information Requested Occupation Nurse

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **08 / 14 / 2012**

Transaction ID : C4334709

Amount of Each Receipt this Period **30.00**

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

Mailing Address 561 Oakland Ave #107

City Oakland State CA Zip Code 94611

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

Name of Employer CA Nurses Asso. Occupation Labor Rep

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **08 / 16 / 2012**

Transaction ID : C4343614

Amount of Each Receipt this Period **25.00**

SUBTOTAL of Receipts This Page (optional)..... **75.00**

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 23
<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)
National Nurses United PAC - A Fund for a Healthy America

A. Mohammad Kashmiri
Full Name (Last, First, Middle Initial)

Mailing Address 561 Oakland Ave #107

City Oakland	State CA	Zip Code 94611
-----------------	-------------	-------------------

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

Name of Employer CA Nurses Asso.	Occupation Labor Rep
-------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	31	/	2012

Transaction ID : C4433750

Amount of Each Receipt this Period

25.00

B. Paula Littles
Full Name (Last, First, Middle Initial)

Mailing Address 5712 Netleaf Rd

City Austin	State TX	Zip Code 78724
----------------	-------------	-------------------

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

Name of Employer CA Nurses Asso.	Occupation Organizer
-------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	16	/	2012

Transaction ID : C4343615

Amount of Each Receipt this Period

25.00

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

Mailing Address 5712 Netleaf Rd

City Austin	State TX	Zip Code 78724
----------------	-------------	-------------------

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

Name of Employer CA Nurses Asso.	Occupation Organizer
-------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	31	/	2012

Transaction ID : C4433751

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 16 OF 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Nurses United PAC - A Fund for a Healthy America

Full Name (Last, First, Middle Initial)
A. Kay McVay
 Mailing Address 3644 S Ranchford Ct
 City State Zip Code
 Concord CA 94520-1416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Information Requested Nurse
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2012
Transaction ID : C4334704
 Amount of Each Receipt this Period
 30.00

Full Name (Last, First, Middle Initial)
B. Lynn E. O'Connor
 Mailing Address 1001 Eagle Avenue
 City State Zip Code
 Alameda CA 94501-1110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Kaiser Alameda MOB Staff Charge Nurse Iii
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 246.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 03 / 2012
Transaction ID : C4315303
 Amount of Each Receipt this Period
 5.00

Full Name (Last, First, Middle Initial)
C. Lynn E. O'Connor
 Mailing Address 1001 Eagle Avenue
 City State Zip Code
 Alameda CA 94501-1110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Kaiser Alameda MOB Staff Charge Nurse Iii
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 246.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2012
Transaction ID : C4334726
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 55.00
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 17 OF 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Nurses United PAC - A Fund for a Healthy America

A. Lynn E. O'Connor
 Full Name (Last, First, Middle Initial)
 Mailing Address 1001 Eagle Avenue
 City Alameda State CA Zip Code 94501-1110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Kaiser Alameda MOB Occupation Staff Charge Nurse Iii
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 246.00

Date of Receipt 08 / 17 / 2012
Transaction ID : C4343469
 Amount of Each Receipt this Period 5.00

B. Lynn E. O'Connor
 Full Name (Last, First, Middle Initial)
 Mailing Address 1001 Eagle Avenue
 City Alameda State CA Zip Code 94501-1110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Kaiser Alameda MOB Occupation Staff Charge Nurse Iii
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 246.00

Date of Receipt 08 / 24 / 2012
Transaction ID : C4434330
 Amount of Each Receipt this Period 5.00

C. Lynn E. O'Connor
 Full Name (Last, First, Middle Initial)
 Mailing Address 1001 Eagle Avenue
 City Alameda State CA Zip Code 94501-1110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Kaiser Alameda MOB Occupation Staff Charge Nurse Iii
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 246.00

Date of Receipt 08 / 31 / 2012
Transaction ID : C4434006
 Amount of Each Receipt this Period 3.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 13.00
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 18 OF 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
National Nurses United PAC - A Fund for a Healthy America

A. Renee Ruiz
 Full Name (Last, First, Middle Initial)
 Mailing Address 2104 Spencer St.
 City Las Vegas State NV Zip Code 89104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CA Nurses Asso. Occupation Organizer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 16 / 2012
Transaction ID : C4343619
 Amount of Each Receipt this Period 20.00

B. Renee Ruiz
 Full Name (Last, First, Middle Initial)
 Mailing Address 2104 Spencer St.
 City Las Vegas State NV Zip Code 89104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CA Nurses Asso. Occupation Organizer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 31 / 2012
Transaction ID : C4433755
 Amount of Each Receipt this Period 20.00

C. Christina Swift
 Full Name (Last, First, Middle Initial)
 Mailing Address 4550 N. Wishon Ave
 City Fresno State CA Zip Code 97304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NNU Occupation Labor Rep
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 16 / 2012
Transaction ID : C4343625
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
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 19 OF 23
(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)
National Nurses United PAC - A Fund for a Healthy America

A. Christina Swift
Full Name (Last, First, Middle Initial)
Mailing Address 4550 N. Wishon Ave
City Fresno State CA Zip Code 97304
FEC ID number of contributing federal political committee. C
Name of Employer NNU Occupation Labor Rep
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 320.00

Date of Receipt 08 / 31 / 2012
Transaction ID : C4433761
Amount of Each Receipt this Period 20.00

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
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
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	20.00
TOTAL This Period (last page this line number only).....▶	988.00

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

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

FOR LINE NUMBER: PAGE 20 OF 23
(check only one)

<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 checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
National Nurses United PAC - A Fund for a Healthy America

A. National Nurses United
Full Name (Last, First, Middle Initial)
Mailing Address 2000 Franklin Street
City Oakland State CA Zip Code 94612
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
595.39

Date of Receipt
08 / 03 / 2012
Transaction ID : C4438567
Amount of Each Receipt this Period
90.70
Admin & overhead reimbursement

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
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
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	90.70
TOTAL This Period (last page this line number only).....▶	90.70

**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 checked="" 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

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NAME OF COMMITTEE (In Full)
National Nurses United PAC - A Fund for a Healthy America

Full Name (Last, First, Middle Initial)

A. First Data Merchant Services

Mailing Address 5565 Glenridge Connector NE, Suite

City Atlanta State GA Zip Code 30342

Purpose of Disbursement
Credit card processing fees for PAC

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 03 / 2012

Transaction ID : D465375

Amount of Each Disbursement this Period

44.65

Full Name (Last, First, Middle Initial)

B. First Data Merchant Services

Mailing Address 5565 Glenridge Connector NE, Suite

City Atlanta State GA Zip Code 30342

Purpose of Disbursement
Credit card processing fees for PAC

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
08 / 14 / 2012

Transaction ID : D465377

Amount of Each Disbursement this Period

44.95

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

89.60

89.60

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)

National Nurses United PAC - A Fund for a Healthy America

Full Name (Last, First, Middle Initial)

A. A WHOLE LOT OF PEOPLE FOR GRIJALVA CONGRESSIONAL COMMITTEE

Date of Disbursement

Mailing Address PO BOX 1242

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	22	/	2012

City	State	Zip Code
TUCSON	AZ	85702

Transaction ID : D463019

Purpose of Disbursement
Contribution

Amount of Each Disbursement this Period

Candidate Name

RAUL M GRIJALVA

Category/
Type

2500.00

Office Sought: House
 Senate
 President

State: AZ District: 07

Disbursement For: 2012

Primary General
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City	State	Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category/
Type

--

Office Sought: House
 Senate
 President

State: District:

Disbursement For:

Primary General
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City	State	Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category/
Type

--

Office Sought: House
 Senate
 President

State: District:

Disbursement For:

Primary General
 Other (specify) ▼

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

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

2500.00

8000.00
