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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines MEDICAL FACILITIES OF AMERICA INC PAC 2917 PENN FOREST BOULEVARD STE 200 ADDRESS (number and street) PO BOX 29600 Check if different than previously **ROANOKE** VA 24018 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. ZIPCODE 🛋 CITY A IS THIS **AMENDED** NEW C00405472 Х REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year Х (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 0 1 0 1 2007 06 30 2007 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. **Novel Martin** Type or Print Name of Treasurer Electronically Filed by Novel Martin 07 27 2007 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003) Only

FEC Form 3X (Rev. 02/2003)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

Page 2

Write or Type Committee Name MEDICAL FACILITIES OF AMERICA INC PAC [®] D " D 0 1 0 1 2007 0.6 3 0 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand [°]2007 3199.61 January 1 (b) Cash on Hand at 3199.61 Begining of Reporting Period 22453.36 22453.36 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 25652.97 25652.97 6(a) and 6(c) for Column B) 22750.00 22750.00 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 2902.97 2902.97 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D) 0.00 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name

MEDICAL FACILITIES OF AMERICA INC PAC

(subtract Line 18(c) from Line 19)

0 1 3^D0 м N 0 1 м м 0 6 2007 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 19677.61 19677.61 (i) Itemized (use Schedule A) 2775.75 2775.75 (ii) Unitemized (iii) TOTAL (add 22453.36 22453.36 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 22453.36 22453.36 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 22453.36 22453.36 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 22453.36 22453.36

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) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	0.00	0.00
	Expenditures(c) Total Operating Expenditures	0.00	0.00
	(add 21(a)(i), (a)(ii) and (b))	0.00	0.00
2.	Transfers to Affiliated/Other Party	0.00	0.00
3.	Committees Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	22750.00	22750.00
4.	Independent Expenditure		
5.	(use Schedule E)	0.00	0.00
J .	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
		0.00	0.00
6.	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
8.	Refunds of Contributions To: (a) Individuals/Persons Other	0.00	0.00
	Than Political Committees		
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees	0.00	0.00
	(such as PACs)(d) Total Contribution Refunds	0.00	0.00
	(add Lines 28(a), (b), and (c))	0.00	0.00
a	Other Disbursements	0.00	0.00
		5.50	0.00
0.	Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity		
	(from Schedule H6)		
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely		
	With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	22750.00	22750.00
2.	Total Federal Disbursements		
≤.	(subtract Line 21(a)(ii) from Line 30(a)(ii)		
	from Line 31)	22750.00	22750.00

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)	22453.36	22453.36
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
85. Net Contributions (other than loans) (subtract Line 34 from Line 33)	22453.36	22453.36
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)		Use separate schedule(s)		E 6/24	
ITEMIZED RECEIPTS			or each category of the	(check only one)	
••	LIMIZED HEOLII 10		Detailed Summary Page	X 11a 11b 11c	12 16 17
۸۰	y information copied from such Reports and St	estamenta mai	, not be cold or used by any nerge	n for the purpose of policiting con-	
or	for commercial purposes, other than using the	solicit contributions from such con	mmittee.		
	NAME OF COMMITTEE (In Full)				
\rangle	MEDICAL FACILITIES OF AMERICA I	NC PAC			
Α.	Full Name (Last, First, Middle Initial) Tony Abela			Date of Receipt	
	Mailing Address 2400 E. Parham Rd.			M M / D D / Y 0 3 19	2007
	City	State	Zip Code	Transaction ID: SA11A1.	4492
	Richmond	VA	23228	Amount of Each Receipt this	s Period
	FEC ID number of contributing federal political committee.	C			120.00
	Name of Employer Parham Health and Rehab	Occupation Administr		political contribution	
	Receipt For:		e Year-to-Date ▼		
	Primary General	00 0			
	Other (specify) ▼	0 0	240.00		
— В.	Full Name (Last, First, Middle Initial) Tony Abela			Date of Receipt	
	Mailing Address 2400 E. Parham Rd.			0 4	2007
City		State	Zip Code	Transaction ID: SA11A1.	4493
	Richmond	VA	23228	Amount of Each Receipt this	s Period
	FEC ID number of contributing federal political committee.	C			120.00
	Name of Employer Parham Health and Rehab	Occupation Administrator		political contribution	
	Receipt For:		Year-to-Date ▼		
	Primary General	riggrogate	, real to Bate V		
	Other (specify) ▼	0 0	360.00		
C.	Full Name (Last, First, Middle Initial) Tony Abela			Date of Receipt	
	Mailing Address 2400 E. Parham Rd.			05 25	2007
	City	State	Zip Code	Transaction ID: SA11A1.	4494
	Richmond	VA	23228	Amount of Each Receipt this	
	FEC ID number of contributing federal political committee.				120.00
Name of Employer Parham Health and Rehab Receipt For:		Occupation Administr		political contribution	
		Aggregate	e Year-to-Date ▼		
Primary General Other (specify) ▼			480.00		
			400.00		
s	UBTOTAL of Receipts This Page (optional)				360.00
\vdash					
T	OTAL This Period (last page this line number	only)			

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 7/24				
ITEMIZED RECEIPTS			or each category of the	(check only one)			
•			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17			
Ar	ny information copied from such Reports and State	ments may	not be sold or used by any perso	on for the purpose of soliciting contributions			
or	for commercial purposes, other than using the nan	ne and add	dress of any political committee to	solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full)						
/	MEDICAL FACILITIES OF AMERICA INC	PAC					
<u></u>	Full Name (Last, First, Middle Initial)						
A.	Tony Abela			Date of Receipt			
	Mailing Address 2400 E. Parham Rd.			06 15 Y Y Y Y Y Y			
	City	State	Zip Code	Transaction ID: SA11A1.4495			
	Richmond	VA	23228	Amount of Each Receipt this Period			
	FEC ID number of contributing	С		40.00			
	federal political committee.	<u></u>					
	Name of Employer	Occupation	1	political contribution			
	Parham Health and Rehab	Administ	rator				
		Aggregate	e Year-to-Date ▼				
	Primary General Other (specify) ▼		520.00				
	Cale. (Cpos.ij) V	0 0		1			
_	Full Name (Last, First, Middle Initial)						
В.	Jim Bicking Mailing Address BO Barr 800			Date of Receipt			
	Mailing Address PO Box 398			06 15 2007			
	City	State	Zip Code	Transaction ID: SA11A1.4454			
	Lovingston	VA	22949	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee		* * * * * *	346.17			
	federal political committee.	•					
	Name of Employer Lovingston Healthcare Cen-	Occupation	1	political contribution			
	ter	Administ					
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼				
	Other (specify)		519.24				
_	Full Name (Last, First, Middle Initial)			Date of Boosist			
C.	Kurt Dullnig Mailing Address 2917 Penn Forest Bouleva	ord		Date of Receipt			
	Z917 FeIII I Olest Bouleva	aiu		03 2007			
	City State Roanoke VA		Zip Code	Transaction ID: SA11A1.4459			
			24018	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		420.00			
				political contribution			
Medical Facilities of America VP of C		Occupation		political contribution			
			nsus Development Year-to-Date	-			
Primary General Other (specify) ▼				1			
			420.00				
_							
_	IIPTOTAL of Descripts This Descriptors		_	806.17			
S	UBTOTAL of Receipts This Page (optional)						
Т.	TOTAL This Period (last page this line number only)						

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) or each category of the Detailed Summary Page	Check only one
Ar	y information copied from such Reports and Statements for commercial purposes, other than using the name and	may not be sold or used by any perso address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDICAL FACILITIES OF AMERICA INC PAC		
Α.	Full Name (Last, First, Middle Initial) Kurt Dullnig		Date of Receipt
	Mailing Address 2917 Penn Forest Boulevard		05 / 25 / 4 2007
	City State Roanoke VA	Zip Code 24018	Transaction ID: SA11A1.4460 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		240.00
	lica	Census Development	political contribution
	Receipt For: Primary General Other (specify) ▼	gate Year-to-Date ▼ 660.00	
В.	Full Name (Last, First, Middle Initial) Kurt Dullnig		Date of Receipt
	Mailing Address 2917 Penn Forest Boulevard	06 15 2007	
	City State Roanoke VA	Zip Code 24018	Transaction ID: SA11A1.4461 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	2-1010	120.00
	Name of Employer Medical Facilities of America Occup VP of	ation Census Development	political contribution
	Receipt For: Primary General Other (specify)	gate Year-to-Date ▼ 780.00	
<u>с</u> .	Full Name (Last, First, Middle Initial) W. Heywood Fralin		Date of Receipt
	Mailing Address P.O. Box 20069		03 / 19 / Y Y Y Y Y Y Y
	City State Roanoke VA	Zip Code 24018	Transaction ID: SA11A1.4439 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	2-1010	5000.00
	lica	President	political contribution
	Receipt For: Primary Other (specify)	gate Year-to-Date ▼ 5000.00	
s	UBTOTAL of Receipts This Page (optional)		5360.00
Т	OTAL This Period (last page this line number only)	>	

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 9 / 24					
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a					
		, ,	13 14 15 16 17					
Any information copied from such Reports and Sta or for commercial purposes, other than using the n	atements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)								
MEDICAL FACILITIES OF AMERICA IN	IC PAC							
Full Name (Last, First, Middle Initial) A. William Fralin, Jr.			Date of Receipt					
Mailing Address P.O. Box 20487			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City	State	Zip Code	Transaction ID: SA11A1.4496					
Roanoke	VA	24018	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		2000.00					
Name of Employer Medical Facilities of Ame- rica	Occupation EVP	1	political contribution					
Receipt For:	Aggregate	e Year-to-Date ▼						
Primary General Other (specify) ▼	0 0	2000.00						
Full Name (Last, First, Middle Initial) B. Keith Helmer			Date of Receipt					
Mailing Address 242 Butler Court			03 / 30 / 2007					
City	State	Zip Code	Transaction ID: SA11A1.4456					
<u>Daleville</u>	VA	24083	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		1346.17 — political contribution					
Name of Employer Medical Facilities of Ame- rica	Occupation COO	n	political contribution					
Receipt For:	Aggregate	e Year-to-Date ▼						
Primary General Other (specify) ▼		1346.17]					
Full Name (Last, First, Middle Initial) C. Keith Helmer			Date of Receipt					
Mailing Address 242 Butler Court			05 25 2007					
City	State	Zip Code	Transaction ID: SA11A1.4457					
<u>Daleville</u> VA		24083	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C		769.24					
			political contribution					
		e Year-to-Date ▼						
Primary General Other (specify) ▼		2115.41						
SUBTOTAL of Receipts This Page (optional)			4115.41					
TOTAL This Period (last page this line number or	TOTAL This Period (last page this line number only)							

TTEMIZED RECEIPTS Description Descript	S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 10 / 24
Any information copied from such Reports and Statements may not be sold or used by any person of the purpose of soliciting contributions of for commercial purposes, other than using the name and address of any political committee to solicit croimbulions from such recommittee. NAME OF COMMITTEE (in Full) NAME OF ACCIMITIES OF AMERICA INC PAC Full Name (Last, First, Middle Initial) A. Reith Hether Mailing Address 242 Butter Court City State Zip Code Date of Receipt Transaction ID: SA11A1.4458 Amount of Each Receipt his Period FEC ID number of contributing federal political committee. Name of Employer Mailing Address 1801 Camelot Drive City State Zip Code Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) B. Michaele Hinners Mailing Address 1801 Camelot Drive City State Zip Code VA 2499.97 FEC ID number of contributing federal political committee. C Use State Zip Code Virginia Beach VA 23454 FEC ID number of contributing federal political committee. C Use State Zip Code Virginia Beach Fiesth & Administrator Recopit For: Primary General Other (specify) ▼ Michael Hinners Address 1801 Camelot Drive City State Zip Code Virginia Beach Fiesth & Administrator Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ State Zip Code Virginia Beach VA 23454 FEC ID number of contributing federal political committee. C Use State Zip Code Virginia Beach Fiesth & Administrator Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ State Zip Code Virginia Beach VA 23454 FEC ID number of contributing federal political committee. C Use State Zip Code Virginia Beach VA 23454 FEC ID number of contributing federal political committee. C Use State Zip Code Virginia Beach VA 23454 FEC ID number of contributing federal political committee. C Use State Zip Code Virginia Beach VA 23454 FEC ID number of contributing federal political committee. C Use State Zip Code Virginia Beach VA 23454 FEC ID number of contributing federal political committee.	· ·				(check only one)
Apply information copied from such Reports and Statements may not be sold or used by any person for the purpose of saliciting contributions or for commercial purposes, of their hausuing the name and address of any political committee to solicit contributions from such committees. NAME OF COMMITTEE (In Full) MEDICAL FACILITIES OF AMERICA INC PAC	••	EMIZED RECEIL TO		Detailed Summary Page	
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) MEDICAL FACILITIES OF AMERICA INC PAC Full Name (Last, First, Middle Initial) City State Zg Code VA 24983 FEC ID number of contributing federal political committee. Name of Employer Aggregate Vear-to-Date ▼ Primary General Other (specify) ▼ 2499.97 Full Name (Last, First, Middle Initial) Michaelle Arimons Midling Address 1801 Carnelot Drive City Virginia Beach VA 23494 FEC ID number of contributing federal political committee. Cood Tanasaction ID: SA11A1.4458 Amount of Each Receipt in Political contribution Date of Receipt Transaction ID: SA11A1.4458 Amount of Each Receipt in Political contribution Date of Receipt Transaction ID: SA11A1.4475 Amount of Each Receipt in Political contribution Date of Receipt Transaction ID: SA11A1.4475 Amount of Each Receipt in Political contribution Date of Receipt Transaction ID: SA11A1.4475 Amount of Each Receipt in Political contribution Date of Receipt Transaction ID: SA11A1.4475 Amount of Each Receipt in Political contribution Date of Receipt Sa11A1.4475 Amount of Each Receipt in Political Contribution Date of Receipt Sa11A1.4475 Amount of Each Receipt in Political Contribution Date of Receipt Sa11A1.4475 Amount of Each Receipt in Political Contribution Date of Receipt Sa11A1.4476 Amount of Each Receipt in Political Contribution Date of Receipt Sa11A1.4476 Amount of Each Receipt in Political Contribution Date of Receipt Sa11A1.4476 Amount of Each Receipt in Political Contribution Date of Receipt Sa11A1.4476 Amount of Each Receipt in Political Contribution Date of Receipt Sa11A1.4476 Amount of Each Receipt in Political Contribution Date of Receipt Sa11A1.4476 Amount of Each Receipt in Political Contribution Date of Receipt Sa11A1.4476 Amount of Each Receipt in Political Contribution Date of Receipt Sa11A1.4476 Amount of Each Receipt in Political Contribution Date of	Δr	ny information conied from such Reports and St	atomonte may	unot he cold or used by any nere	
MEDICAL FACILITIES OF AMERICA INC PAC Full Name (Last, First, Middle Initial) A Keith Heimer Mailing Address 242 Butler Court City State VA 24983 FEC ID number of contributing federal pollical committee. Name of Employer Medical Facilities of Americal Mailing Address 1801 Carmelot Drive City State COO B. Mailing Address 1801 Carmelot Drive City Virginia Beach VA 23454 FEC ID number of contributing federal pollical committee. Name of Employer Mailing Address 1801 Carmelot Drive City Virginia Beach Va 23454 FEC ID number of contributing federal pollical committee. Name of Employer Mailing Address 1801 Carmelot Drive City Virginia Beach Va 23454 FEC ID number of contributing federal pollical committee. C Interview of the state of the sta	or	for commercial purposes, other than using the	o solicit contributions from such committee.		
Full Name (Last, First, Middle Initial) A. Keith Helmer Mailing Address 242 Butler Court City State Zip Code Daleville VA 24983 FEC ID number of contributing federal political contribution FEC ID number of contributing federal political contributing federal political contribution City State Zip Code Daleville VA 24983 Amount of Each Receipt Is Period Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) B. Michelle Hinners Mailing Address 1801 Camelot Drive City State Zip Code VIrginia Beach Fedath & Administrator Receipt For: Perinary General Other (specify) ▼ Full Name (Last, First, Middle Initial) C. Michelle Hinners Mailing Address 1801 Camelot Drive City State Zip Code VIrginia Beach Fedath & Administrator Receipt For: Perinary General Other (specify) ▼ Full Name (Last, First, Middle Initial) C. Michelle Hinners Mailing Address 1801 Camelot Drive City State Zip Code VIrginia Beach Fedath & First, Middle Initial) C. Michelle Hinners Mailing Address 1801 Camelot Drive City State Zip Code VIrginia Beach Fedath & First, Middle Initial) C. Michelle Hinners Mailing Address 1801 Camelot Drive City State Zip Code VIrginia Beach Fedath & First, Middle Initial) C. Michelle Hinners Mailing Address 1801 Camelot Drive City State Zip Code VIrginia Beach Fedath & First, Middle Initial) C. Michelle Hinners Mailing Address 1801 Camelot Drive City State Zip Code VIrginia Beach Fedath & First, Middle Initial) C. Michelle Hinners Mailing Address 1801 Camelot Drive City State Zip Code VIrginia Beach Fedath & First, Middle Initial) C. Michelle Hinners Mailing Address 1801 Camelot Drive City State Zip Code VIrginia Beach Fedath & First, Middle Initial) C. Michelle Hinners Mailing Address 1801 Camelot Drive City State Zip Code VIrginia Beach Fedath & First, Middle Initial) C. Michelle Hinners Mailing Address 1801 Camelot Drive City State Zip Code VIrginia Beach Fedath & First, Middle Initial) Date of Receipt Transaction ID SA11A1.4475 Am	\setminus	NAME OF COMMITTEE (In Full)			
A. Keilh Halmer Mailing Address 242 Butler Court City Dateville VA 24053 FEC ID number of contributing federal political committee. Name of Employer Virginia Beach PEC ID number of contributing FEC ID number of contributing Primary General Other (specify) ▼ State Zip Code VA 2499.97 Date of Receipt this Period Primary General Other (specify) ▼ State Zip Code VA 23454 FEC ID number of contributing FEC ID number of		MEDICAL FACILITIES OF AMERICA I	NC PAC		
City State Zip Code Dateville VA 24083 FEC ID number of contributing federal political committee. Name of Employer Medical Facilities of Ame- Dica. Receipt For: Primary General Other (specify) ▼ 2499.97 Full Name (Last, First, Middle Initial) B. Michelle Himners Mailing Address 1801 Carmelot Drive City State Zip Code Virginia Beach Feath & Receipt Tor: Primary General Other (specify) ▼ 2490.00 Date of Receipt Date of Receipt Transaction ID: SA11A1.4458 Amount of Each Receipt this Period Date of Receipt Date of Receipt Transaction ID: SA11A1.4475 Amount of Each Receipt His Period Date of Receipt Date of Receipt Transaction ID: SA11A1.4475 Amount of Each Receipt His Period Date of Receipt Transaction ID: SA11A1.4475 Amount of Each Receipt His Period Date of Receipt Transaction ID: SA11A1.4475 Amount of Each Receipt His Period Date of Receipt Transaction ID: SA11A1.4475 Amount of Each Receipt His Period Date of Receipt Transaction ID: SA11A1.4476 Transaction ID: SA11A1.4476 Amount of Each Receipt His Period Date of Receipt Transaction ID: SA11A1.4476 Transaction ID: SA11	A.	Keith Helmer			Date of Receipt
Date of Receipt this Period		Mailing Address 242 Butler Court			
FEC ID number of contributing federal political committee. Name of Employer Medical Facilities of Ame- Modical Contribution Date of Receipt Modical Contribution Date of Receipt Modical Contribution Dolitical Contribution Date of Receipt Modical Facilities of Ame- Modical Contribution Dolitical Contribution Date of Receipt Modical Facilities of Ame- Modical Contribution Dolitical Cont		City	State	Zip Code	Transaction ID: SA11A1.4458
Substant		Daleville	VA	24083	Amount of Each Receipt this Period
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Receipt For:		Name of Employer Medical Facilities of Ame-		n	political contribution
Primary General Other (specify)		rica		Voor to Data	_
Substotal of Receipt Substotal Substotal of Receipt Substot			Aggregate	e fear-to-Date ▼	7
B. Michelle Hinners Mailing Address 1801 Camelot Drive City Virginia Beach FEC ID number of contributing federal political committee. Name of Employer Virginia Beach C. Michelle Hinners Mailing Address 1801 Camelot Drive C. Michelle Hinners Mailing Address 1801 Camelot Drive C. Michelle Hinners Mailing Address 1801 Camelot Drive City City City State Zip Code Virginia Beach Aggregate Year-to-Date ▼ 240.00 Date of Receipt Amount of Each Receipt this Period FULL Name (Last, First, Middle Initial) C. Michelle Hinners Mailing Address 1801 Camelot Drive City Virginia Beach FEC ID number of contributing federal political committee. Name of Employer Virginia Beach FEC ID number of contributing federal political committee. Name of Employer Virginia Beach Health & Rehab Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ SubstortAL of Receipts This Page (optional) Aggregate Year-to-Date ▼ SubstortAL of Receipts This Page (optional)		Other (specify) ▼			
City Virginia Beach VA State Virginia Beach VA State VA Says44 FEC ID number of contributing federal political committee. Name of Employer Virginia Beach Health & Receipt For: Primary General Other (specify) ▼ City Virginia Beach VA State VIrginia Beach VA State VA State VIrginia Beach VA State VIrginia	В.				Date of Receipt
Virginia Beach FEC ID number of contributing federal political committee. Name of Employer Virginia Beach Health & Rehab Receipt For: Primary General Other (specify) ▼ City State Zip Code Virginia Beach VA 23454 FEC ID number of contributing federal political committee. Name of Employer Virginia Beach C Michelle Hinners Mailing Address 1801 Camelot Drive City State Zip Code VA 23454 FEC ID number of contributing federal political committee. Name of Employer Virginia Beach Health & Rehab Receipt For: Primary General Occupation Administrator Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) Amount of Each Receipt this Period Date of Receipt Date of Receipt Transaction ID: SA11A1.4476 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Administrator Aggregate Year-to-Date ▼ SUBTOTAL of Receipts This Page (optional)		Mailing Address 1801 Camelot Drive			
FEC ID number of contributing federal political committee. Name of Employer Virginia Beach Health & Receipt For: Primary General Other (specify) ▼		City	State	Zip Code	Transaction ID: SA11A1.4475
Name of Employer Virginia Beach Health & Receipt For: Primary General Occupation Administrator Other (specify) ▼ Aggregate Year-to-Date ▼ Other (specify) ▼ Date of Receipt Other (specify) ▼ Date of Receipt Other (specify) ▼ Other (specify)		Virginia Beach VA		23454	Amount of Each Receipt this Period
Cocupation Name of Employer Virginia Beach Health & Receipt For: Primary General Gene			C		
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Date of Receipt Mailing Address 1801 Camelot Drive City State Zip Code Virginia Beach VA 23454 FEC ID number of contributing federal political committee. Name of Employer Virginia Beach Health & Receipt For: Primary General Other (specify) ▼ Substock Administrator Aggregate Year-to-Date ▼ Substock Aggregate Year-to-Date ▼		Virginia Beach Health &	· · ·		political contribution
Primary General Other (specify) ▼					
Full Name (Last, First, Middle Initial) C. Michelle Hinners Mailing Address 1801 Camelot Drive City State Zip Code Virginia Beach FEC ID number of contributing federal political committee. Name of Employer Virginia Beach Health & Receipt For: Primary General Other (specify) State Zip Code VA 23454 Transaction ID: SA11A1.4476 Amount of Each Receipt this Period FOCCupation Administrator Aggregate Year-to-Date SUBTOTAL of Receipts This Page (optional)		Primary General			7
C. Michelle Hinners Mailing Address 1801 Camelot Drive City State Zip Code Virginia Beach VA 23454 FEC ID number of contributing federal political committee. Name of Employer Virginia Beach Health & Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		Other (specify) ▼	0 0	240.00	
City Virginia Beach VA 23454 FEC ID number of contributing federal political committee. Name of Employer Virginia Beach Health & Receipt For: Primary General Other (specify) ▼ Substotical contribution Occupation Administrator Aggregate Year-to-Date ▼ Substotical contribution Occupation Administrator Aggregate Year-to-Date ▼ Substotical contribution Foundation ID: SA11A1.4476 Amount of Each Receipt this Period Foundation ID: SA11A1.4476 Amount of Each Receipt this Period Foundation ID: SA11A1.4476 Amount of Each Receipt this Period Foundation ID: SA11A1.4476 Amount of Each Receipt this Period Foundation ID: SA11A1.4476 Amount of Each Receipt this Period Foundation ID: SA11A1.4476 Amount of Each Receipt this Period Foundation ID: SA11A1.4476 Amount of Each Receipt this Period Foundation ID: SA11A1.4476 Amount of Each Receipt this Period Foundation ID: SA11A1.4476 Amount of Each Receipt this Period Foundation ID: SA11A1.4476 Amount of Each Receipt this Period Foundation ID: SA11A1.4476 Amount of Each Receipt this Period Foundation ID: SA11A1.4476 Foundation ID: SA11A1.4476 Foundation ID: SA11A1.4476 Amount of Each Receipt this Period Foundation ID: SA11A1.4476 Foundation ID: SA11A1.	C.				Date of Receipt
Virginia Beach FEC ID number of contributing federal political committee. Name of Employer Virginia Beach Health & Rehab Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) Amount of Each Receipt this Period 60.00 political contribution Administrator Aggregate Year-to-Date ▼ 504.56		Mailing Address 1801 Camelot Drive			
FEC ID number of contributing federal political committee. Name of Employer Virginia Beach Health & Administrator Receipt For: Primary General Other (specify) SUBTOTAL of Receipts This Page (optional) 60.00 political contribution 460.00 political contribution		City	State	Zip Code	Transaction ID: SA11A1.4476
Name of Employer Virginia Beach Health & Administrator		Virginia Beach	VA	23454	Amount of Each Receipt this Period
Name of Employer Virginia Beach Health & Rehab Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) Occupation Administrator Aggregate Year-to-Date ▼ 300.00					
Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) Aggregate Year-to-Date ▼ 300.00		Name of Employer Virginia Beach Health & Rehab			political contribution
Other (specify) ▼ 300.00 SUBTOTAL of Receipts This Page (optional)	Receipt For:		Aggregate	e Year-to-Date ▼	
SUBTUTAL of Receipts This Page (optional)				300.00	
	s	UBTOTAL of Receipts This Page (optional)			504.56
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 11 / 24			
ITEMIZED RECEIPTS			or each category of the	(check only one)		
•			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17		
Ar	ny information copied from such Reports and S	tatements may	y not be sold or used by any person	on for the purpose of soliciting contributions		
or	for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) MEDICAL FACILITIES OF AMERICA					
	MEDICAL FACILITIES OF AMERICA	ING PAG				
_	Full Name (Last, First, Middle Initial)			5. 75 1.		
Α.	Cleopatra Kitt Mailing Address 720 Orchard Ave.			Date of Receipt		
	Walling Address 720 Orchard Ave.			06 29 2007		
	City	State	Zip Code	Transaction ID: SA11A1.4434		
	Rocky Mount	VA	24151	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		300.00		
	Name of Employer Franklin Healthcare Center	Occupation Administ		political contribution		
	Receipt For:		e Year-to-Date ▼			
	Primary General		300.00	1		
	Other (specify) ▼	0 0				
В.	Full Name (Last, First, Middle Initial) Novel Martin			Date of Receipt		
	Mailing Address 6129 St. Ives Court			03 30 2007		
	City	State	Zip Code	Transaction ID: SA11A1.4478		
	Roanoke	VA	24018	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		280.00		
	Name of Employer Medical Facilities of America	Occupation CFO	n	political contribution		
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General Other (specify) ▼	' '	280.00	1		
	Other (specify)	0 0		1		
<u> </u>	Full Name (Last, First, Middle Initial) Novel Martin			Date of Receipt		
Ο.	Mailing Address 6129 St. Ives Court			M M / D D / Y Y Y Y		
				05 25 2007		
	City	State VA	Zip Code	Transaction ID: SA11A1.4479		
			24018	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		160.00		
	Name of Employer Medical Facilities of America	Occupation CFO	n	political contribution		
	Receipt For: Aggrega		e Year-to-Date ▼			
Primary General Other (specify) ▼			440.00			
	Culoi (Specify) \		0 0 0 0 0 0 0	1		
	UBTOTAL of Receipts This Page (optional)			740.00		
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 12 / 24	
ITEMIZED RECEIPTS			or each category of the	(check only one) X 11a 11b 11c 12
			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
An	y information copied from such Reports and St	atements may	not be sold or used by any perso	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	solicit contributions from such committee.		
\rangle	MEDICAL FACILITIES OF AMERICA I	NC PAC		
Α.	Full Name (Last, First, Middle Initial) Novel Martin			Date of Receipt
	Mailing Address 6129 St. Ives Court			06 15 2007
	City	State	Zip Code	Transaction ID: SA11A1.4480
	Roanoke	VA	24018	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		80.00
	Name of Employer Medical Facilities of Ame- rica	Occupation CFO	1	political contribution
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		520.00	
В.	Full Name (Last, First, Middle Initial) Brenda Moore			Date of Receipt
	Mailing Address 4241 Kings Court Drive	9		03 30 2007
	City	State	Zip Code	Transaction ID: SA11A1.4430
	Roanoke	VA	24014	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		269.22
	Name of Employer Medical Facilities of Ame-	Occupation EVP of IS		political contribution
	rica Receipt For:	_ !	e Year-to-Date ▼	
	Primary General Other (specify) ▼		269.22	
<u> </u>	Full Name (Last, First, Middle Initial) Brenda Moore			Date of Receipt
	Mailing Address 4241 Kings Court Drive)		05 25 2007
	City		Zip Code	Transaction ID: SA11A1.4431
	Roanoke	VA	24014	Amount of Each Receipt this Period
Name of Employer Medical Facilities of America Receipt For:		C		153.84
		Occupation EVP of IS		political contribution
		Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼			423.06	
s	UBTOTAL of Receipts This Page (optional)			503.06
T (OTAL This Period (last page this line number of	only)	.	

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 13/24
	ITEMIZED RECEIPTS		or each category of the	(check only one)
••			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Δr	y information copied from such Reports and Sta	itemente mai	y not be sold or used by any pers	
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	MEDICAL FACILITIES OF AMERICA IN	IC PAC		
<u>/</u>	Full Name (Last, First, Middle Initial)			
Α.	Brenda Moore			Date of Receipt
	Mailing Address 4241 Kings Court Drive			06 15 2007
	City	State	Zip Code	Transaction ID: SA11A1.4432
	Roanoke	VA	24014	Amount of Each Receipt this Period
	FEC ID number of contributing	С		76.92
	federal political committee.			
	Name of Employer Medical Facilities of Ame-	Occupation	1	political contribution
	rica	EVP of IS	3	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		499.98	
	Carior (openity)			1
_	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address 2917 Penn Forest Blvd.			06 29 2007
	City	State	Zip Code	Transaction ID: SA11A1.4423
	Roanoke	VA	24018	Amount of Each Receipt this Period
	FEC ID number of contributing			400.00
	federal political committee.	C		
	Name of Employer	Occupation	1	political contribution
	Medical Facilitiés of America	VP of Pu	rchasing	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		400.00	
	Cutch (Speedily)	0 0		1
<u>С.</u>	Full Name (Last, First, Middle Initial) Michael Perry			Date of Receipt
٥.	Mailing Address 2917 Penn Forest Boule	evard		M M / D D / Y Y Y Y
			03 30 2007	
	City	State	Zip Code	Transaction ID: SA11A1.4468
	Roanoke	VA	24018	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		538.44
	Name of Freedom	10		political contribution
	Name of Employer Medical Facilities of Ame-	Occupation VP of Op		l'
	rica Receipt For:		Year-to-Date V	
	Primary General			1
	Other (specify)	0 0	538.44	
s	UBTOTAL of Receipts This Page (optional)		.	1015.36
\vdash	: _ :			
lτ	OTAL This Period (last page this line number of	nlv)		

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 14 / 24	
	·		Use separate schedule(s) or each category of the	(check only one)	
Ш	EMIZED RECEIPTS	Detailed Summary Page		X 11a 11b 11c 12	
			2 station 5 attitudes 1 age	13 14 15 16 17	
Ar	y information copied from such Reports and St	atements may	not be sold or used by any perso	on for the purpose of soliciting contributions	
or	for commercial purposes, other than using the	solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full)				
	MEDICAL FACILITIES OF AMERICA I	NC PAC			
A.	Full Name (Last, First, Middle Initial) Michael Perry			Date of Receipt	
	Mailing Address 2917 Penn Forest Boul	evard		05 25 2007	
	City	State	Zip Code	Transaction ID: SA11A1.4469	
	Roanoke	VA	24018	Amount of Each Receipt this Period	
	FEC ID number of contributing	С		307.68	
	federal political committee.				
	Name of Employer Medical Facilities of Ame-	Occupation		political contribution	
	rica	VP of Op			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General		846.12		
	Other (specify)	0 0			
_	Full Name (Last, First, Middle Initial)				
В.				Date of Receipt	
	Mailing Address 2917 Penn Forest Boul	evard		06 15 2007	
	City	State	Zip Code	Transaction ID: SA11A1.4470	
	Roanoke	VA	24018	Amount of Each Receipt this Period	
	FEC ID number of contributing				
	federal political committee.	C		153.84	
	Name of Employer	Occupation	<u> </u>	political contribution	
	Medical Facilities of Ame-	VP of Op			
	rica Receipt For:		e Year-to-Date ▼		
	Primary General			1	
	Other (specify) ▼		999.96		
_	Full Name (Last, First, Middle Initial)			1	
C.	Jennifer Pressman			Date of Receipt	
	Mailing Address 2401 Lee Highway			05 25 2007	
	City	State	Zip Code	Transaction ID: SA11A1.4449	
	Pulaski	VA	24301	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	С		57.69	
	recerai politicai committee.			political contribution	
	Name of Employer Pulaski Healthcare Center	Occupation		political contribution	
			rator	_	
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		230.76		
	□ Strict (Specify) ▼	0 0	0 0 0 0 0 0 0	1	
s	UBTOTAL of Receipts This Page (optional)			519.21	
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SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER	R: PAGE 15/24
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••			Detailed Summary Page	X 11a 11b	11c 12 15 16 17
Δr	ny information copied from such Reports and St	atomonte may	unot be sold or used by any perso		
or	for commercial purposes, other than using the	dress of any political committee to	solicit contributions from	n such committee.	
\setminus	NAME OF COMMITTEE (In Full)				
\rangle	MEDICAL FACILITIES OF AMERICA I	NC PAC			
_	Full Name (Last, First, Middle Initial)				
Α.	Jennifer Pressman			Date of Receipt	
	Mailing Address 2401 Lee Highway			0 6 1	
	City	State	Zip Code	Transaction ID: S	
	<u>Pulaski</u>	VA	24301		Receipt this Period
	FEC ID number of contributing				· · · · · · · · · · · · · · · · · · ·
	federal political committee.	C			38.46
	Name of Employer	Occupation		political contribu	tion
	Name of Employer Pulaski Healthcare Center	Administ			
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General	1 1	269.22	1	
	Other (specify)	0 0	209.22		
	Full Name (Last First Middle Initial)				
В.	Full Name (Last, First, Middle Initial) Richard Roark			Date of Receipt	
	Mailing Address 456 East Main Street			M M / D I	D / Y Y Y Y
				06 1	5 2007
	City	State	Zip Code	Transaction ID: 5	
	Waverly	VA	23890	Amount of Each F	Receipt this Period
	FEC ID number of contributing federal political committee.	C			500.00
				political contribu	tion
	Name of Employer Waverly Healthcare Center	Occupation		political continuu	tion
	-	Administ		_	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	1	
	Other (specify)		500.00		
				·	
_	Full Name (Last, First, Middle Initial)				
C.	Karen H. Waldron			Date of Receipt	
	Mailing Address Walnut Grove 290 Boners Run Rd.			0 5 1	
	City	State Zip Code		Transaction ID: \$	SA11A1.4455
	Shawsville	VA	24162	Amount of Each F	Receipt this Period
	FEC ID number of contributing	С			5000.00
	federal political committee. Name of Employer				
			n	political contribu	tion
Medical Facilities of America Receipt For:		Senior V	ice President		
		Aggregate	e Year-to-Date ▼		
Primary General			5000.00	1	
	Other (specify)				
Г					
s	UBTOTAL of Receipts This Page (optional)		_		5538.46
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 16 / 24
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Any information copied from such Reports and State	emente may	y not be cold or used by any perso	
or for commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
MEDICAL FACILITIES OF AMERICA INC	C PAC		
Full Name (Last, First, Middle Initial)			
A. Jackie Wood			Date of Receipt
Mailing Address 2917 Penn Forest Blvd.			05 25 2007
City	State	Zip Code	Transaction ID: SA11A1.4441
Roanoke	VA	24018	Amount of Each Receipt this Period
FEC ID number of contributing	С		76.92
federal political committee.			
Name of Employer Medical Facilities of Ame-	Occupation	1	political contribution
Medical Facilities of America	VP of Pro	ogram Development	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General		211.53	
Other (specify)			
Full Name (Last, First, Middle Initial)			
B. Jackie Wood			Date of Receipt
Mailing Address 2917 Penn Forest Blvd.			06 15 2007
City	State	Zip Code	Transaction ID: SA11A1.4442
Roanoke	VA	24018	Amount of Each Receipt this Period
FEC ID number of contributing		21010	
federal political committee.	C		38.46
Name of Employer	Occupation	`	political contribution
Name of Employer Medical Facilities of Ame-	Occupation VP of Pro	ogram Development	
rica I Receipt For:		Year-to-Date ▼	
Primary General		040.00	1
Other (specify)	0 0	249.99	
F. II Nicoco (Local First Middle Letter)			
Full Name (Last, First, Middle Initial) C. Todd Yacovone			Date of Receipt
Mailing Address 5573 Richmond Road			M M / D D / Y Y Y Y
011	01-1-	7'- 0-4-	05 25 2007
City Warsaw	State VA	Zip Code 22572	Transaction ID: SA11A1.4489
	VA	22312	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		60.00
	0		political contribution
Name of Employer Warsaw Healthcare Center	Occupation Administr		1
Receipt For:		Year-to-Date ▼	_
Primary General	33 15		1
Other (specify) ▼		240.00	
CURTOTAL of Decides This C. (1911)			175.38
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 17/24 Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 14 16 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) MEDICAL FACILITIES OF AMERICA INC PAC Full Name (Last, First, Middle Initial) Todd Yacovone Date of Receipt Mailing Address 5573 Richmond Road 06 15 2007 City Zip Code State Transaction ID: SA11A1.4490 Warsaw VA 22572 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. political contribution Name of Employer Warsaw Healthcare Center Occupation Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 280.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	40.00
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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	ĮĖ.	21b 27		´ -	X 23		24 28c	П	25 29	П	26 30b	
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or for commercial purposes, other than using the name	e and address of any political co	omm	ittee to s	olicit	contrib	outions	s fror	n such d	comn	nittee			
NAME OF COMMITTEE (In Full)													
/ MEDICAL FACILITIES OF AMERICA INC	PAC												
Full Name (Last, First, Middle Initial)				1	Γransa	ction	ID: S	SB23.4	512				
A. AMERIPAC: THE FUND FOR A GREATE	R AMERICA				Date of				/ · V	· V	V		
Mailing Address 499 S. CAPITOL ST. S.	V. #414			05 M / D17 / Y 2007									
City WASHINGTON	State Zip Code DC 20003				Amoun	t of Ea	ach [Disburse	men	t this P	erio	d	
Purpose of Disbursement	20003			-					2	500.0	00		
political contribution			.										
Candidate Name			egory/ /pe										
	ement For:												
Senate President	Primary General Other (specify)												
State: District:] (op-os)/ V												
Full Name (Last, First, Middle Initial)				1	Γransa	ction	ID: S	SB23.4	525				
GOLEMAN FOR SENATE 08					Date of								
Mailing Address 7300 HUDSON BLVD S	JITE 270A				0 6]	^D 1	1 / [ž	0 ŏ 7	Y		
City ST PAUL	State Zip Code MN 55128				Amoun	t of Ea	ach [Disburse	men	t this P	erio	d	
Purpose of Disbursement political contribution		*							. 1	0.000	00		
Candidate Name			egory/ /pe										
· -	ement For: 2008 Primary General												
State: MN District: 00	Other (specify)												
Full Name (Last, First, Middle Initial) COMMITTEE FOR THE PRESERVATION	OF CAPITALISM (CPC). T	ГНЕ	:		Γransa Date of			SB23.4	510				
	——————————————————————————————————————		-		м м	_	D 1 :		, Y	0 ŏ 7	Υ		
Mailing Address P.O. Box 65314					0 6		1 :	5	. 2	0 0 7	_		
City Washington	State Zip Code DC 20036				Amoun	t of Ea	ach [Disburse	men	t this P	erio	b	
Purpose of Disbursement political contribution							-		_	750.0	00		
Candidate Name			egory/ /pe										
	ement For:												
Senate President	Primary General Other (specify) ▼												
State: District:	Carol (opooliy)												
'									Α.	050.0	· ·	$\overline{}$	
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or for commercial purposes, other than using the nat	ne and address of any political co	ommı	ittee to s	olicit c	ontribu	itions fro	om such (comr	nittee							
NAME OF COMMITTEE (In Full)	N D A O															
/ MEDICAL FACILITIES OF AMERICA INC	PAC															
Full Name (Last, First, Middle Initial)				Tr	ansac	tion ID:	SB23.4	498								
DAVE CAMP FOR CONGRESS 2008				_		Disburse / D		v · v	V .	V						
	5915 EASTMAN AVE. SUITE 100						0 3 M / D 1 6 / Y 2 0 0 7									
City MIDLAND	State Zip Code MI 48640			A	mount	of Each	Disburse	emen	t this F	erio	t					
Purpose of Disbursement			-	1 L				1	000.0	00						
political contribution																
Candidate Name		Cate Ty	gory/ pe													
	sement For: 2008 X Primary General															
President	Other (specify)															
State: MI District: 04	() () () () () () () ()															
Full Name (Last, First, Middle Initial)				Tr	ansac	tion ID:	SB23.4	532								
B- ESHOO, ANNA						Disburse	ement									
Mailing Address 555 Capitol Mall Suite	 425				M M	[/] 0	6 /	ž	0 ŏ 7	Υ						
·																
City Sacramento	State Zip Code CA 95814			Aı	mount	of Each	Disburse	emen	t this F	erio	t					
Purpose of Disbursement political contribution	<u> </u>							1	500.0	00						
Candidate Name		Cate	gory/													
		Ту	ре													
· —	sement For: 2008															
President	X Primary General Other (specify) ▼															
State: CA District: 14	o arrest (epoders))															
Full Name (Last, First, Middle Initial)	_						SB23.4	400								
FRIENDS OF DICK DURBIN COMMITTE	:E					Disburse	ement	· · · · · ·	· \/ °	V/						
Mailing Address PO BOX 1949) 4	0	6 /	ž	0 ŏ 7	Y						
City SPRINGFIELD	State Zip Code IL 62705			Aı	mount	of Each	Disburse	emen	t this F	erio	t					
Purpose of Disbursement		v		1 L				. 1	000.0	00						
political contribution		2 .														
Candidate Name	'	Cate Ty	gory/ pe													
Office Sought: House Disbur	sement For: 2008		-	1												
21	X Primary General															
President State: IL District: 00	Other (specify)															
State. IL DISTRICT. 00				_						_	_					
SUBTOTAL of Disbursements This Page (optional)		•					3	500.0	0						
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TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	F	21b 27	22	_	23 28b	24 28c	R	25 29	П	26 30b
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or for commercial purposes, other than using the name	e and address of any political co	omm	ittee to s	Olicit c	ontribu	itions tro	om such (comr	nittee		
NAME OF COMMITTEE (In Full) MEDICAL FACILITIES OF AMERICA INC	PAC										
Full Name (Last, First, Middle Initial)				Tr	ansac	tion ID:	SB23.4	528			
FRIENDS OF JAY ROCKEFELLER				_	ate of [Disburse		/ · V	V	V	
Mailing Address PO BOX 1909					6 "	1	5 /	2	0 ŏ 7		
City CHARLESTON	State Zip Code WV 25327			Ar	nount	of Each	Disburse	emen	t this P	erio	t
Purpose of Disbursement	Г	v	-						500.0	00	
political contribution Candidate Name		Cate	gory/								
cardidate Name			pe								
	ment For: 2008										
X Senate X President	Primary General Other (specify) ▼										
State: WV District: 00											
Full Name (Last, First, Middle Initial)							SB23.4	396			
FRIENDS OF JIM CLYBURN				1 -		Disburse		/ · · ·	· V	V	
Mailing Address PO Box 12567					3 M	1	6 / C	2	0 0 7	_	
City Columbia	State Zip Code SC 29211			Ar	nount	of Each	Disburse	emen	t this P	erio	k
Purpose of Disbursement political contribution	Г	-						1	000.0	00	_
Candidate Name			gory/ pe								
Senate X President	ment For: 2008 Primary General Other (specify)										
State: SC District: 6											
Full Name (Last, First, Middle Initial) FRIENDS OF MAX BAUCUS				Da	ate of [Disburse		516			
Mailing Address PO BOX 586) 4	[/] 2	5 /	ž	0 0 7	Y	
City HELENA	State Zip Code MT 59624			Ar	nount	of Each	Disburse	emen	t this P	erio	k
Purpose of Disbursement political contribution	Г							3	3500.0	00	
Candidate Name		Cate	gory/ pe								
X Senate X President	ment For: 2008 Primary General Other (specify)	<u>-</u>									
State: MT District: 00											
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NAME OF COMMITTEE (In Full)	DAC										
/ MEDICAL FACILITIES OF AMERICA INC	PAC										
Full Name (Last, First, Middle Initial)				Tra	nsac	tion ID:	SB23.4	398			
FRIENDS OF ROY BLUNT				Dat M		Disburse / D		v · v	V .	V	
Mailing Address PO Box 50100 PO Box 50100				O	3 "	1	6 /	2	0 ŏ 7		
City Springfield	State Zip Code MO 65805			Am	ount	of Each	Disburse	emen	t this F	erio	d
Purpose of Disbursement	100 03003			$+$ Γ				1	000.0	00	
political contribution											
Candidate Name		Cate Ty	gory/ pe								
	ement For: 2008										
Senate X	Primary General Other (specify) ▼										
State: MO District: 7	Carlor (opcomy)										
Full Name (Last, First, Middle Initial)				Tra	nsac	tion ID:	SB23.4	521			
3. JOHN LEWIS FOR CONGRESS				Dat	e of D	Disburse	ement				
Mailing Address 2015 Wallace Rd.				0 ^M	2 ^M	[/] 2	5 /	ž	0 ŏ 7	Y	
City Atlanta	State Zip Code GA 30331			Am	ount	of Each	Disburse	emen	t this F	erio	d
Purpose of Disbursement political contribution	5555.			1 L					750.0	00	
Candidate Name		Cate	gory/								
		Ту	ре								
· -	ement For: 2008 Primary General										
President	Other (specify)										
State: GA District: 5	(- /) \										
Full Name (Last, First, Middle Initial)							SB23.4	518			
PAT ROBERTS FOR SENATE				Dat		Disburse		· · · · · ·	• \/ •	V	
Mailing Address PO BOX 433				O	5 ^M	/ <u>1</u>	7 /	ž	0 ŏ 7	· *	
City GREAT BEND	State Zip Code KS 67530			Am	ount	of Each	Disburse	emen	t this F	erio	d
Purpose of Disbursement	10 07330								750.0	00	
political contribution		-									
Candidate Name		Cate Ty	gory/ pe								
Office Sought: House Disburs	ement For: 2008		-								
	Primary General										
President State: KS District: 00	Other (specify)										
State No Biotriot. 00				_	-			-		_	_
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/ MEDICAL FACILITIES OF AMERICA IN	PAC										
Full Name (Last, First, Middle Initial)				Trai	nsact	ion ID:	SB23.4	538			
POMEROY FOR MINNESOTA CAMPAI	GN			Date	of C	Disburse / D		v v	V .	V	
Mailing Address PO BOX 3483 PO BOX 3483				O s	5 "	1	7 /	2	0 ŏ 7		
City MANKATO	State Zip Code MN 56002			Amo	ount o	of Each	Disburse	emen	t this P	erio	t
Purpose of Disbursement			-	1 L					750.0	00	
political contribution											
Candidate Name		Categ Typ									
·	sement For: 2008										
Senate President	X Primary General Other (specify) ▼										
State: MN District: 01	Other (Specify)										
Full Name (Last, First, Middle Initial)				Trai	neari	ion ID:	SB23.4	534			_
PORTER FOR CONGRESS				Date	of D	Disburse	ement			14	
Mailing Address 7840 Red Leaf Drive				0 4	1 ^M	[′] 0	6 /	ž	0 0 7	Y	
City Las Vegas	State Zip Code NV 89131			Amo	ount o	of Each	Disburse	emen	t this P	erio	t
Purpose of Disbursement political contribution	33101	·							750.0	00	
Candidate Name		Categ	iory/								
		Тур	-								
·	sement For: 2008										
<u></u>	X Primary General										
President State: NV District: 03	Other (specify)										
Full Name (Last, First, Middle Initial)				Trai	nsaci	ion ID:	SB23.4	536			
PORTER FOR CONGRESS						Disburse		000			
Mailing Address 7840 Red Leaf Drive				0 0	5 M	[′] 0	6 / C	ž	0 ŏ 7	Y	
City Las Vegas	State Zip Code NV 89131			Amo	ount o	of Each	Disburse	emen	t this P	erio	t
Purpose of Disbursement	35.61		-						750.0	00	
political contribution Candidate Name		0.1									
Candidate Name		Categ Typ	-								
·	sement For: 2008										
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State: NV District: 03	Other (specify)										
Cidio. 144 District. 00										_	=
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IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	,	(check only 21b 27	one) 22 28a	X 23 28b	24 28c	; <u> </u>	25 29	26 30b
	y Information copied from such Reports and S for commercial purposes, other than using the									S
\rangle	NAME OF COMMITTEE (In Full) MEDICAL FACILITIES OF AMERICA									
١.	Full Name (Last, First, Middle Initial) RANGEL FOR CONGRESS					ction ID	SB23.4	 1523		
	Mailing Address PO Box 5577 MANHATTANVILLE	STA			0 5	/ D	25	^Y 2	0 ŏ 7	, ^Y
	City New York	State Zip Code NY 10027			Amoun	t of Eac	h Disburs	emen	t this F	Period
	Purpose of Disbursement political contribution							2	2500.0	00
	Candidate Name		С	ategory/ Type						
	Office Sought: X House Senate President State: NY District: 15	sbursement For: 2008 X Primary General Other (specify)								
3.	Full Name (Last, First, Middle Initial) RYAN FOR CONGRESS					ction ID): SB23.4 sement	4514		
	Mailing Address P. O. Box 1919 P. O. Box 1919				0 6	/ D	15	^Y ^Y 2	0 ŏ 7	, ^Y
	City Janesville	State Zip Code WI 53547			Amount of Each Disbursement this					
	Purpose of Disbursement political contribution Candidate Name		C	ategory/ Type					500.0	00
	Office Sought: X House Senate President State: WI District: 01	sbursement For: 2008 X Primary General Other (specify)		,						
).	Full Name (Last, First, Middle Initial) STABENOW FOR US SENATE					ction ID): SB23.4 sement	 4392		
	Mailing Address PO BOX 4945				0 2	/ D	14	^Y ^Y 2	0 ŏ 7	, ^Y
	City EAST LANSING	State Zip Code MI 48826			Amoun	t of Eac	h Disburs	emen	t this F	Period
	Purpose of Disbursement political contribution		Г	•				1	500.0	00
	Candidate Name			ategory/ Type						
	X Senate President	sbursement For: 2012 X Primary General Other (specify)	•							
_	State: MI District: 00								500 1	<u> </u>
S	UBTOTAL of Disbursements This Page (opt	onal)		<u> </u>	-	-	•	4:	500.0	JU
т	OTAL This Period (last page this line number	r only)		.						

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5	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)		NUMBER: PAGE 24 / 24
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	y Information copied from such Reports and Sta for commercial purposes, other than using the n	•		
\rangle	NAME OF COMMITTEE (In Full) MEDICAL FACILITIES OF AMERICA IN	C PAC		
۱.	Full Name (Last, First, Middle Initial) TEAM SUNUNU Mailing Address PO BOX 500			Transaction ID: SB23.4530 Date of Disbursement O 6
	City RYE Purpose of Disbursement political contribution Candidate Name	State Zip Code NH 03870	Category/ Type	Amount of Each Disbursement this Period 750.00
	Office Sought: House Disbute Value President	rsement For: 2008 X Primary General Other (specify) ▼		

		750.00
SUBTOTAL of Disbursements This Page (optional)		750.00
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