10/18/2010 14:35

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

| FORIWI 3X | For Othe | r Than An Autho | rized Comm | nittee | | Office Use On | ıly |
|---|---|-----------------------------|--------------------------------------|------------------|-----------------|---|---------------------|
| NAME OF COMMITTEE (in full) | | MAILING LABEL OR PRINT 🗑 | Example:If typover the lines | ping, type | | | |
| TriWest Healthcare Alli | ance Corp. PAC (| TriWest Alliance PAC | ;) | | | | |
| | | | | | | | |
| ADDRESS (number and street | et) 16010 N | I. 28th Avenue | | | | 1 1 1 1 | |
| Check if different than previously reported. (ACC) | Phoenix | | | | L AZ | 85053 | |
| 2. FEC IDENTIFICATION | NUMBER 🔻 | CITY | A | | STATE | ZIPC | CODE A |
| C00459743 | | 3. IS 1 REI | THIS X | NEW (N) OR | | AMENDED A) | |
| 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Reports: Quarterly Reports: October 15 Quarterly Reports: January 31 Quarterly Report(Non-eyear Only) (Moneyear | port(Q1) (c) port(Q2) port(Q3) port(YE) (ear election (d) (f) | port Feb 20 e On: | Primary (Convention 1 1 General (| on (12C) | Se | (12S) in the State (30R) in the state of | te of Special (30S) |
| 5. Covering Period | 10 01 | 2010 | throug | gh 1 0 | 13 | 2010 | |
| Type or Print Name of Treas Signature of Treasurer | | n Cahill | ledge and belief | | and complete | | 2010 |
| NOTE : Submission of false | , erroneous, or inc | complete information n | nay subject the p | erson signing th | is Report to th | ne penalties of 2 | U.S.C 437g. |
| Office Use | | | | | | FEC FO | |

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) 2/6 Write or Type Committee Name TriWest Healthcare Alliance Corp. PAC (TriWest Alliance PAC) D D 1.0 2010 1 0 0 1 2010 13 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2010° 34103.38 January 1 (b) Cash on Hand at 51117.58 Begining of Reporting Period 0.00 27664.20 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 51117.58 61767.58 6(a) and 6(c) for Column B) 3400.00 14050.00 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 47717.58 47717.58 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 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. 06/2004) 3 / 6

Write or Type Committee Name

TriWest Healthcare Alliance Corp. PAC (TriWest Alliance PAC)

Report Covering the Period:

From:

D D D

2010

To:

м м 1 0 D D 13

Y Y Y Y 2 0 1 0

| | I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date | |
|----------|--|-------------------------------|-----------------------------------|--|
| 1. | Contributions (other than loans) From: (a) Individuals/Persons Other | | | |
| | Than Political Committees (i) Itemized (use Schedule A) | 0.00 | 26789.82 | |
| | (ii) Unitemized | 0.00 | 874.38 | |
| | (iii) TOTAL (add Lines 11(a)(i) and (ii) | 0.00 | 27664.20 | |
| | (b) Political Party Committees | 0.00 | 0.00 | |
| | (c) Other Political Committees (such as PACs) | 0.00 | 0.00 | |
| | 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | 0.00 | 27664.20 | |
| 2. | Transfers From Affiliated/Other Party Committees | 0.00 | 0.00 | |
| 3. | All Loans Received | 0.00 | 0.00 | |
| 4. 5. | Loan Repayments Received Offsets To Operating Expenditures | 0.00 | 0.00 | |
| 6. | (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made | 0.00 | 0.00 | |
| | to Federal candidates and Other Political Committees | 0.00 | 0.00 | |
| 7. | Other Federal Receipts (Dividends, Interest, etc.) | 0.00 | 0.00 | |
| 8. | Transfers from Non-Federal and Levin Funds | | | |
| | (a) Non-Federal Account (from Schedule H3) | 0.00 | 0.00 | |
| | (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 | |
| | (c) Total Transfer (add 18(a) and 18(b)). | 0.00 | 0.00 | |
| 9. | Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) | 0.00 | 27664.20 | |
|). | Total Federal Receipts (subtract Line 18(c) from Line 19) | 0.00 | 27664.20 | |

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

4/6

| | 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 | | |
| | (ii) Non-Federal Share(b) Other Federal Operating | 0.00 | 0.00 |
| | Expenditures | 0.00 | 0.00 |
| | (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) | 0.00 | 0.00 |
| 2. | Transfers to Affiliated/Other Party | | |
| 3. | Committees | 0.00 | 0.00 |
| | Federal Candidates/Committeesand Other Political Committees | 3400.00 | 14050.00 |
| 4. | Independent Expenditure (use Schedule E) | 0.00 | 0.00 |
| 5. | Coordinated Expenditures Made by Party | | |
| | Committees (2 U.S.C. 441a(d)) (use Schedule F) | 0.00 | 0.00 |
| 3. | Loan Repayments Made | 0.00 | 0.00 |
| | Loans Made | 0.00 | 0.00 |
| 3. | 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 (such as PACs) | 0.00 | 0.00 |
| | (d) Total Contribution Refunds | 0.00 | 0.00 |
| | (add Lines 28(a), (b), and (c)) | 0.00 | 0.00 |
| €. | Other Disbursements | 0.00 | 0.00 |
| Э. | 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 | 0.00 | 0.00 |
| | 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)) | 3400.00 | 14050.00 |
| 2. | Total Federal Disbursements | | |
| | (subtract Line 21(a)(ii) and Line 30(a)(ii) | 2400.00 | 14050.00 |
| | from Line 31) | 3400.00 | 14050.00 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 6

| | III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|-----|---|----------------------------|-----------------------------------|
| 33. | Total Contributions (other than loans) from Line 11(d), page 3) | 0.00 | 27664.20 |
| 34. | Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. | Net Contributions (other than loans) (subtract Line 34 from Line 33) | 0.00 | 27664.20 |
| 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 |

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|--------------------------|--|---|------------------------|----------------------|--|------------------------|--|--|
| SCHEDULE B (FEC Form 3X) | | Use separate schedule(s) | | FOR LINE (check only | | PAGE 6/6 | | |
| Τ | EMIZED DISBURSEMENTS | for each category of the Detailed Summary Page | | 21b 27 | 22 X 23 28a 28b | 24 25 26 28c 29 30b | | |
| | y Information copied from such Reports and Statem for commercial purposes, other than using the name | | | | | | | |
| \rangle | NAME OF COMMITTEE (In Full) TriWest Healthcare Alliance Corp. PAC (Tr | iWest Alliance | PAC) | | | | | |
| | Full Name (Last, First, Middle Initial) | | | | Transaction ID: 0 | 1008.E877 | | |
| | Susan Davis for Congress | | | | Date of Disbursemen | | | |
| | Mailing Address P.O. Box 84049 | | | | 10 / 06 | y y o y o y | | |
| | , | | Code 138- | | Amount of Each Dis | bursement this Period | | |
| | Purpose of Disbursement DIRECT CONTRIBUTION | | | | | 2400.00 | | |
| | Candidate Name SUSAN A DAVIS | | Category/ Type | | | | | |
| | Senate President | ment For: Primary Other (specify) | 2010 X General | | DIRECT CONTRI | BUTION | | |
| | State: CA District: 53 | | | | | | | |
| | Full Name (Last, First, Middle Initial) Committee to Re-Elect Trent Franks | | | | Transaction ID: 0 Date of Disbursement | nt | | |
| | Mailing Address P.O. Box 8105 | | | | | | | |
| | | | Code 312- | | Amount of Each Dis | bursement this Period | | |
| | Purpose of Disbursement DIRECT CONTRIBUTION | | | | | 1000.00 | | |
| | Candidate Name TRENT FRANKS | | | Category/ Type | | | | |
| | Office Sought: X House Disburse Senate President | ment For: Primary Other (specify) | 2010 X General ▼ | | DIRECT CONTRI | BUTION | | |

| | | 3400.00 |
|---|---|---------|
| SUBTOTAL of Disbursements This Page (optional) | | 3400.00 |
| | | |
| TOTAL This Period (last page this line number only) | • | 3400.00 |

State: AZ

District: 02