

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
Psychiatric Solutions, Inc. Fed PAC

ADDRESS (number and street) 6640 Carothers Parkway
Suite 500
 Check if different than previously reported. (ACC)
Franklin TN 37067

2. **FEC IDENTIFICATION NUMBER** C00407684
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 01 01 2008 through 03 31 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Brent Turner

Signature of Treasurer Electronically Filed by Brent Turner Date 04 15 2008

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 Use Only									
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FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Psychiatric Solutions, Inc. Fed PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		102925.00
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	102925.00									
(c) Total Receipts (from Line 19)	75550.00	75550.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	178475.00	178475.00								
7. Total Disbursements (from Line 31)	12000.00	12000.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	166475.00	166475.00								
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
Psychiatric Solutions, Inc. Fed PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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	75550.00	75550.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	75550.00	75550.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	75550.00	75550.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	75550.00	75550.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	75550.00	75550.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4000.00	4000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	8000.00	8000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	12000.00	12000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12000.00	12000.00

DETAILED SUMMARY PAGE
of Disbursements

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)	75550.00	75550.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	75550.00	75550.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**SCHEDULE 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 / 25
	<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

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)
Psychiatric Solutions, Inc. Fed PAC

A.	Full Name (Last, First, Middle Initial) Troy L. Bailey	Date of Receipt MM / DD / YYYY 03 / 31 / 2008
	Mailing Address 2501 Prudden Trace	Transaction ID: SA11AI.4998
	City State Zip Code Chesapeake VA 23323	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer First Home Care Occupation CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Mr. Jeff Barnett	Date of Receipt MM / DD / YYYY 03 / 20 / 2008
	Mailing Address 105 Caxton Court	Transaction ID: SA11AI.4971
	City State Zip Code Lexington SC 29072	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Three Rivers Behavioral Health Occupation CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) William Bay	Date of Receipt MM / DD / YYYY 03 / 26 / 2008
	Mailing Address 19 Bolton Court	Transaction ID: SA11AI.4991
	City State Zip Code Danville CA 94506	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Psychiatric Solutions, Inc. Occupation CFO - Fremont Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
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 7 / 25
	<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)
Psychiatric Solutions, Inc. Fed PAC

A.	Full Name (Last, First, Middle Initial) Kathy Bolmer		Date of Receipt	
	Mailing Address 3201 Aspen Grove A1		M M / D D / Y Y Y Y Y 03 / 24 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.4976
	Franklin	TN	37067	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		5000.00		
Name of Employer Psychiatric Solutions, Inc.		Occupation EVP- Quality & Compliance		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00		

B.	Full Name (Last, First, Middle Initial) Terrance Bridges		Date of Receipt	
	Mailing Address 4008 Nestledown Drive		M M / D D / Y Y Y Y Y 03 / 14 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.4942
	Franklin	TN	37067	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		5000.00		
Name of Employer Psychiatric Solutions, Inc.		Occupation Chief Operating Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00		

C.	Full Name (Last, First, Middle Initial) Gay Brooks		Date of Receipt	
	Mailing Address 2650 N. Oak Lane		M M / D D / Y Y Y Y Y 03 / 31 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.5002
	West Point	VA	23181	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		1000.00		
Name of Employer Psychiatric Solutions, Inc.		Occupation CEO - Cumberland		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional)	▶	11000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 25
	<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)
Psychiatric Solutions, Inc. Fed PAC

A.	Full Name (Last, First, Middle Initial) Mike Carney		Date of Receipt	
	Mailing Address 105 Muscadine Hill		M M / D D / Y Y Y Y Y 03 / 07 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.4948
	Madison	MS	39110	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		1500.00	
Name of Employer Psychiatric Solutions, Inc.		Occupation CEO - Brentwood MS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1500.00		

B.	Full Name (Last, First, Middle Initial) MiRhee Chun		Date of Receipt	
	Mailing Address 1901 Lenomar Court		M M / D D / Y Y Y Y Y 03 / 19 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.4968
	Rochester Hills	MI	48309	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
Name of Employer Psychiatric Solutions, Inc.		Occupation CFO - Havenwyck		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

C.	Full Name (Last, First, Middle Initial) Nancy Costello		Date of Receipt	
	Mailing Address 1125 Ascor Way		M M / D D / Y Y Y Y Y 03 / 25 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.4989
	Bartlett	IL	60103	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
Name of Employer Streamwood		Occupation CFO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
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 9 / 25
	<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)
Psychiatric Solutions, Inc. Fed PAC

A.	Full Name (Last, First, Middle Initial) Steve Davidson		Date of Receipt MM / DD / YYYY 03 / 07 / 2008		
	Mailing Address 3537 Crestridge Drive		Transaction ID: SA11AI.4936		
	City Nashville	State TN	Zip Code 37204	Amount of Each Receipt this Period 5000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Psychiatric Solutions, Inc.		Occupation Corporate - Chief Development Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00			

B.	Full Name (Last, First, Middle Initial) Cindy Dill		Date of Receipt MM / DD / YYYY 03 / 28 / 2008		
	Mailing Address 206 Scurlock Court		Transaction ID: SA11AI.4992		
	City Franklin	State TN	Zip Code 37067	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Psychiatric Solutions, Inc.		Occupation Corporate - HR Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

C.	Full Name (Last, First, Middle Initial) Richard England		Date of Receipt MM / DD / YYYY 03 / 15 / 2008		
	Mailing Address 411 Downey Meade Court		Transaction ID: SA11AI.4951		
	City Franklin	State TN	Zip Code 37064	Amount of Each Receipt this Period 750.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Psychiatric Solutions, Inc.		Occupation Corporate - Div. CFO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00			

SUBTOTAL of Receipts This Page (optional)	▶	6250.00
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 / 25
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Psychiatric Solutions, Inc. Fed PAC

A. Full Name (Last, First, Middle Initial)
Ron Fincher

Mailing Address 9129 Brentmeade Blvd.

City State Zip Code
Brentwood TN 37027

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

Name of Employer
Psychiatric Solutions, Inc.

Occupation
Corporate - Div. President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.4978

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
James Gallagher

Mailing Address 6 Westminster Drive

City State Zip Code
Annandale NJ 08801

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

Name of Employer
Psychiatric Solutions, Inc.

Occupation
CEO - Summit Oaks

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	0	/	2	0	0	8

Transaction ID: SA11AI.4972

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Robert Hanner

Mailing Address 2028 Wheat Street

City State Zip Code
Columbia SC 29205

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

Name of Employer
Corporate Hanner Division

Occupation
Division President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	8	/	2	0	0	8

Transaction ID: SA11AI.4960

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional) ► **5500.00**

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 / 25
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Psychiatric Solutions, Inc. Fed PAC

A. Full Name (Last, First, Middle Initial)
Pam Hendrickson

Mailing Address 7313 Damsel Lane

City State Zip Code
Fairview TN 37062

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

Name of Employer: Psychiatric Solutions, Inc.
Occupation: Corporate - Div. CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 03 / 13 / 2008
Transaction ID: SA11AI.4963
 Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Chris Howard

Mailing Address 939 Oak Valley Lane

City State Zip Code
Nashville TN 37220

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

Name of Employer: Psychiatric Solutions, Inc.
Occupation: EVP, Gen Counsel & Secretary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 25 / 2008
Transaction ID: SA11AI.4973
 Amount of Each Receipt this Period: 5000.00

C. Full Name (Last, First, Middle Initial)
Joey Jacobs

Mailing Address 9229 Hunterboro Drive

City State Zip Code
Brentwood TN 37027

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

Name of Employer: Psychiatric Solutions, Inc.
Occupation: Corporate - Chairman, Pres. & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 08 / 2008
Transaction ID: SA11AI.4939
 Amount of Each Receipt this Period: 5000.00

SUBTOTAL of Receipts This Page (optional) ► **11000.00**

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 12 / 25
	<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)
Psychiatric Solutions, Inc. Fed PAC

A.	Full Name (Last, First, Middle Initial) Robert A. Kercorian	Date of Receipt MM / DD / YYYY 03 / 11 / 2008
	Mailing Address 4962 Rivers Edge Dr.	Transaction ID: SA11AI.4952
	City State Zip Code Troy MI 48095	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Psychiatric Solutions, Inc. Occupation CEO - Havenwyck Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Mike Kistler	Date of Receipt MM / DD / YYYY 03 / 27 / 2008
	Mailing Address 313 South Poplar Avenue	Transaction ID: SA11AI.5005
	City State Zip Code Broken Arrow OK 74012	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Shadow Mountain/Riverside Occupation CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Anne Knapp	Date of Receipt MM / DD / YYYY 03 / 18 / 2008
	Mailing Address 695 Carmen Plaza	Transaction ID: SA11AI.4967
	City State Zip Code Greenwood IN 46143	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Psychiatric Solutions, Inc. Occupation CFO - Valle Vista Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	1750.00
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 / 25
	<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)
Psychiatric Solutions, Inc. Fed PAC

A.	Full Name (Last, First, Middle Initial) Gregory T. LaFrancois	Date of Receipt MM / DD / YYYY 03 / 11 / 2008
	Mailing Address 1059 Kacie Drive	Transaction ID: SA11AI.4946
	City State Zip Code Pleasant View TN 37146	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Cumberland Hospital CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Bryan Lett	Date of Receipt MM / DD / YYYY 03 / 27 / 2008
	Mailing Address 2607 Twixwood Lane	Transaction ID: SA11AI.5000
	City State Zip Code South Bend IN 46614	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Michiana CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Mr. Richard Lewis	Date of Receipt MM / DD / YYYY 03 / 28 / 2008
	Mailing Address 9210 Hunterboro Drive	Transaction ID: SA11AI.4987
	City State Zip Code Brentwood TN 37027	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Psychiatric Solutions, Inc. Div. CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	2000.00
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 14 / 25

(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

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)
Psychiatric Solutions, Inc. Fed PAC

A.

Full Name (Last, First, Middle Initial)
Lenard J. Lexier, M.D.

Mailing Address 3764 Jefferson Blvd.

City State Zip Code
Virginia Beach VA 23455

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

Name of Employer Occupation
Pines RTC/VIBS Psychiatrist

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2008

Transaction ID: SA11AI.4969

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Debbie Lyro

Mailing Address 1025 St. Georges Way

City State Zip Code
Franklin TN 37067

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

Name of Employer Occupation
Psychiatric Solutions, Inc. Corporate - Div. CFO

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2008

Transaction ID: SA11AI.4935

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
Jonathan MacDonald

Mailing Address 7450 Falazon Ct.

City State Zip Code
Nampa ID 83686

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

Name of Employer Occupation
Psychiatric Solutions, Inc. CFO - Intermountain

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 20 / 2008

Transaction ID: SA11AI.4964

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)

2250.00

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 15 / 25
(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
							17

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NAME OF COMMITTEE (In Full)
Psychiatric Solutions, Inc. Fed PAC

A.

Full Name (Last, First, Middle Initial)
Karen Maxwell

Mailing Address 18 Kelly Drive

City State Zip Code
Wheeling WV 26003

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

Name of Employer
Psychiatric Solutions, In-
c. Occupation
CEO - Fox Run

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2008

Transaction ID: SA11AI.4996

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Peggy Minnick

Mailing Address 718 E. California Blvd.

City State Zip Code
Pasadena CA 91106

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

Name of Employer
Psychiatric Solutions, In-
c. Occupation
CEO - Alhambra/Canyon Ridge

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2008

Transaction ID: SA11AI.4940

Amount of Each Receipt this Period
750.00

C.

Full Name (Last, First, Middle Initial)
John K. Penrod

Mailing Address 6009 E. 77th St

City State Zip Code
Tulsa OK 74136

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

Name of Employer
Psychiatric Solutions, In-
c. Occupation
Facility CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2008

Transaction ID: SA11AI.4984

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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 / 25

(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)
Psychiatric Solutions, Inc. Fed PAC

A.

Full Name (Last, First, Middle Initial)
George Perry

Mailing Address 4310 Creekside Blvd.
#2

City State Zip Code
Vienna OH 44473

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

Name of Employer Occupation
Psychiatric Solutions, In- CEO - Belmont Pines
c.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2008

Transaction ID: SA11AI.4954

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
Pamela Rhoads

Mailing Address 11727 59th Avenue SE
#5

City State Zip Code
Snohomish WA 98296

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

Name of Employer Occupation
Psychiatric Solutions, In- CFO - Fairfax
c.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 24 / 2008

Transaction ID: SA11AI.4983

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
Thomas Ryba

Mailing Address 9104 Gasser Way Court

City State Zip Code
Brentwood TN 37027

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

Name of Employer Occupation
Corporate Ryba Division Division President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2008

Transaction ID: SA11AI.4955

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional) ▶

2500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 25
	<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)
Psychiatric Solutions, Inc. Fed PAC

A.	Full Name (Last, First, Middle Initial) Mr. Mike Saul		Date of Receipt
	Mailing Address 1111 Lexington Ave. #837		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 27 / 2008
	City	State	Zip Code
	Flower Mound	TX	75028
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4979
Name of Employer Contract Management		Occupation President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 5000.00

B.	Full Name (Last, First, Middle Initial) Ms Fran Sauvageau		Date of Receipt
	Mailing Address 4815 National Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 24 / 2008
	City	State	Zip Code
	Myrtle Beach	SC	29579
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4975
Name of Employer Lighthouse Care Center of Berk		Occupation CEO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1000.00

C.	Full Name (Last, First, Middle Initial) Joseph Schmidt		Date of Receipt
	Mailing Address 66704 Scenic Valley Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 28 / 2008
	City	State	Zip Code
	St. Clairsville	OH	43950
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4997
Name of Employer Psychiatric Solutions, Inc.		Occupation CFO - Fox Run	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 6500.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 25
(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)
Psychiatric Solutions, Inc. Fed PAC

A.

Full Name (Last, First, Middle Initial) Mark Schor		Date of Receipt MM / DD / YYYY 03 / 25 / 2008
Mailing Address 272 Pennington-Titusville Road		Transaction ID: SA11AI.4988
City Pennington	State NJ	Zip Code 08534
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Psychiatric Solutions, In-c.	Occupation CEO - Brooke Glenn	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.

Full Name (Last, First, Middle Initial) Kay Seim		Date of Receipt MM / DD / YYYY 03 / 31 / 2008
Mailing Address 157 Lake Avenue West		Transaction ID: SA11AI.5003
City Kirkland	State WA	Zip Code 98033
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Psychiatric Solutions, In-c.	Occupation Division President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

C.

Full Name (Last, First, Middle Initial) Patrick Swoopes		Date of Receipt MM / DD / YYYY 03 / 18 / 2008
Mailing Address 1523 Littlewoods Drive		Transaction ID: SA11AI.4962
City Starkville	State MS	Zip Code 39759
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Psychiatric Solutions, In-c.	Occupation CEO - Diamond Grove	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	4000.00
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 19 / 25
	<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)
Psychiatric Solutions, Inc. Fed PAC

A.	Full Name (Last, First, Middle Initial) Mr. Don Thayer	Date of Receipt MM / DD / YYYY 03 / 27 / 2008
	Mailing Address 4008 Windermere Drive	Transaction ID: SA11AI.4986
	City State Zip Code Colleyville TX 76034	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Corporate - Texas Occupation Sr. VP Development Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) David Tropauer	Date of Receipt MM / DD / YYYY 03 / 26 / 2008
	Mailing Address 241 Poteat Place	Transaction ID: SA11AI.4980
	City State Zip Code Franklin TN 37064	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Psychiatric Solutions, Inc. Occupation Corporate - Operations Controller Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Brent Turner	Date of Receipt MM / DD / YYYY 03 / 31 / 2008
	Mailing Address 5325 Lysander Lane	Transaction ID: SA11AI.4993
	City State Zip Code Brentwood TN 37027	Amount of Each Receipt this Period 3000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Psychiatric Solutions, Inc. Occupation Corporate - EVP, Finance and Admin. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3000.00	

SUBTOTAL of Receipts This Page (optional)	9000.00
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 20 / 25
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Psychiatric Solutions, Inc. Fed PAC

A.	Full Name (Last, First, Middle Initial) Robert Turner	Date of Receipt MM / DD / YYYY 03 / 18 / 2008
	Mailing Address 3732 Amberwine Lane	Transaction ID: SA11AI.4965
	City State Zip Code Wake Forest NC 27587	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Holly Hill Hospital CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Arris S. Veronie	Date of Receipt MM / DD / YYYY 03 / 15 / 2008
	Mailing Address 113 North Bread Street 8-H	Transaction ID: SA11AI.4949
	City State Zip Code Philadelphia PA 19106	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Friends Hospital CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Bruce Waldo	Date of Receipt MM / DD / YYYY 03 / 25 / 2008
	Mailing Address 395 CR 2482	Transaction ID: SA11AI.4981
	City State Zip Code Mineola TX 75773	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Peak Behavioral Health Sv- cs. CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
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 21 / 25
(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)
Psychiatric Solutions, Inc. Fed PAC

A.

Full Name (Last, First, Middle Initial)
David Warmerdam

Mailing Address PO Box 557

City State Zip Code
Holly Ridge NC 28445

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

Name of Employer
Psychiatric Solutions, In-
c. Occupation
CFO - Brynn Marr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2008

Transaction ID: SA11AI.4985

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
Denise Webb

Mailing Address 1105 Tanager Trail
Suite 500

City State Zip Code
Virginia Beach VA 23451

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

Name of Employer
Psychiatric Solutions, In-
c. Occupation
CEO - VA Beach Psychiatric Center

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2008

Transaction ID: SA11AI.4941

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
Ingrid Whipple

Mailing Address 7849 Bermuda Dunes

City State Zip Code
Las Vegas NV 89113

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

Name of Employer
Psychiatric Solutions, In-
c. Occupation
Facility CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
03 / 14 / 2008

Transaction ID: SA11AI.4953

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **2300.00**

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 22 / 25
	(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)
Psychiatric Solutions, Inc. Fed PAC

A.

Full Name (Last, First, Middle Initial) Barry Willis		Date of Receipt MM / DD / YYYY 03 / 07 / 2008
Mailing Address 2284 Rolling Hills Dr		Transaction ID: SA11AI.4937
City Nolensville	State TN	Zip Code 37135
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Psychiatric Solutions, Inc.	Occupation Dir. Data Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.

Full Name (Last, First, Middle Initial) Sharon S. Worsham		Date of Receipt MM / DD / YYYY 03 / 24 / 2008
Mailing Address 4665 W. 103rd St. North		Transaction ID: SA11AI.4994
City Sperry	State OK	Zip Code 74073
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Psychiatric Solutions, Inc.	Occupation Division President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	▶	2250.00
TOTAL This Period (last page this line number only)	▶	75550.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 23 / 25

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Psychiatric Solutions, Inc. Fed PAC

A.

Full Name (Last, First, Middle Initial)
ALEXANDER FOR SENATE 2008 INC

Transaction ID: SB23.5026

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	2		2	0	0	8

Mailing Address 228 S WASHINGTON STREET SUITE 115

Amount of Each Disbursement this Period

3000.00

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Disbursement

011
Category/ Type

Candidate Name
LAMAR ALEXANDER

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: TN District: 00

B.

Full Name (Last, First, Middle Initial)
MARSHA BLACKBURN FOR CONGRESS INC.

Transaction ID: SB23.5029

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	2		2	0	0	8

Mailing Address PO Box 682185

Amount of Each Disbursement this Period

1000.00

City State Zip Code
Franklin TN 37068

Purpose of Disbursement

011
Category/ Type

Candidate Name
MARSHA MRS. BLACKBURN

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: TN District: 07

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

4000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Psychiatric Solutions, Inc. Fed PAC

A.	Full Name (Last, First, Middle Initial) Dan Gattis Campaign <hr/> Mailing Address P.O. Box 2856 <hr/> City Georgetown State TX Zip Code 78627 <hr/> Purpose of Disbursement TX State Representative Candidate Name Rep. Dan Gattis Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District:	Transaction ID: SB29.5038 Date of Disbursement 01 / 18 / 2008	Amount of Each Disbursement this Period 2500.00
B.	Full Name (Last, First, Middle Initial) Garnet Coleman Campaign <hr/> Mailing Address P.O. Box 88140 <hr/> City Houston State TX Zip Code 77288 <hr/> Purpose of Disbursement Garnet Coleman for TX State Representati Candidate Name Rep. Garnet Coleman Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District:	Transaction ID: SB29.5047 Date of Disbursement 02 / 28 / 2008	Amount of Each Disbursement this Period 1000.00
C.	Full Name (Last, First, Middle Initial) John Davis Campaign <hr/> Mailing Address 1 E Greenway Plaza Ste. 225 <hr/> City Houston State TX Zip Code 77046 <hr/> Purpose of Disbursement TX State Representative Candidate Name Rep. John Davis Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District:	Transaction ID: SB29.5035 Date of Disbursement 01 / 18 / 2008	Amount of Each Disbursement this Period 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER:
(check only one)

PAGE 25 / 25

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Psychiatric Solutions, Inc. Fed PAC

A.

Full Name (Last, First, Middle Initial)
Phil King Campaign

Transaction ID: SB29.5040

Date of Disbursement

Mailing Address P.O. Box 1913

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	8		2	0	0	8

City State Zip Code
Weatherford TX 76086

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
Phil King for TX State Representative

011
Category/ Type

Candidate Name
Rep. Phil King

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: TX District: 61

SUBTOTAL of Disbursements This Page (optional) ►

2000.00

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

8000.00
