Image# 14970077960 PAGE 1 / 221

### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	or other man	All Authorized	Committee			Office Use Only	
NAME OF     COMMITTEE (in full)	TYPE OR PRINT ▼		mple: If typir r the lines.	ng, type	12FE4M5		
FIRST COLONIES AND	ESTHESIA AS	SSOCIATES	LLC POL	ITICAL A	CTION C	OMMITTEE	
		1 1 1 1 1 1					1
ADDRESS (number and street)	7490 New Techno	logy Way					
Check if different					<u> </u>		
than previously reported. (ACC)	Frederick				MD	21703	
2. FEC IDENTIFICATION NU	MBER ▼	CITY 🛦		S	STATE A	ZIP CC	DDE 🛦
C C00416305		3. IS THIS REPORT	· ·	IEW N) <b>OR</b>	AN (A)	ENDED	
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:  April 15 Quarterly Report (Q2 Quarterly Report (Q3 Quarter	(c) 12-Day PRE-Ele Report (d) 30-Day	Election on		12C)	Sep	in the State of	Special (30S)
5. Covering Period 07	01	2013	through	12	31_	2013	
I certify that I have examined this Type or Print Name of Treasurer	•	e best of my kno	wledge and b	pelief it is true	e, correct and	l complete.	
orginature or rreasurer	remy Roth		[Electronically		ate 08	13	2014
NOTE: Submission of false, errone	ous, or incomplete i	nformation may su	ubject the pers	son signing th	is Report to th	e penalties of 2	U.S.C. §437g.
Office Use Only						FEC FOR Rev. 12/2	

#### **SUMMARY PAGE** OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
(a) Cash on Hand January 1, 2013		110013.41
(b) Cash on Hand at Beginning of Reporting Period	116198.20	
(c) Total Receipts (from Line 19)	33005.00	56380.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	149203.20	166393.41
Total Disbursements (from Line 31)	37849.80	55040.01
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	111353.40	111353.40
Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
This committee has qualified as a multican	didate committee. (see FEC FORM 1M)	

Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

#### FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICAL ACTION COMMITTEE

I. Receipts	COLUN Total This		COLUMN B Calendar Year-to-Date		
. Contributions (other than loans) From:		-			
(a) Individuals/Persons Other					
Than Political Committees		31840.00	37540.00		
(i) Itemized (use Schedule A)	7 7	01010.00	7		
(ii) Unitemized		1165.00	18840.00		
(iii) TOTAL (add					
Lines 11(a)(i) and (ii)▶		33005.00	56380.00		
(b) Political Party Committees		0.00	0.00		
(c) Other Political Committees		0.00	0.00		
(such as PACs)	7 7	0.00	0.00		
(d) Total Contributions (add Lines					
11(a)(iii), (b), and (c)) (Carry		33005.00	56380.00		
Totals to Line 33, page 5)  ∴ Transfers From Affiliated/Other	7 7	0000000			
Party Committees		0.00	0.00		
rany commission	7 7	2.00			
. All Loans Received		0.00	0.00		
	7				
Loan Repayments Received		0.00	0.00		
Offsets To Operating Expenditures	7 7		7		
(Refunds, Rebates, etc.)					
(Carry Totals to Line 37, page 5)		0.00	0.00		
6. Refunds of Contributions Made	,		,		
to Federal Candidates and Other			0.00		
Political Committees	7 7	0.00	0.00		
Other Federal Receipts (Dividends, Interest, etc.)		0.00	0.00		
Transfers from Non-Federal and Levin Funds		0.00	0.00		
(a) Non-Federal Account					
(from Schedule H3)		0.00	0.00		
( 1 11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	7		, , , ,		
(b) Levin Funds (from Schedule H5)		0.00	0.00		
(b) Leviii i ande (iiem Gonedale iie)	7				
(c) Total Transfers (add 18(a) and 18(b))		0.00	0.00		
			7		
Table Books to the College of Carlo					
Total Receipts (add Lines 11(d),		22005.00	50000.00		
12, 13, 14, 15, 16, 17, and 18(c))▶	7 7	33005.00	56380.00		
. Total Federal Receipts					
(subtract Line 18(c) from Line 19)▶		33005.00	56380.00		
(Subtract Line 10(0) Holli Line 10)		00000.00	20000.00		

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	Total This Period					
Operating Expenditures:  (a) Allocated Federal/Non-Federal	Total Tillo I Cilou	Calendar Year-to-Date				
Activity (from Schedule H4)	0.00	0.00				
(i) Federal Share	0.00	0.00				
(ii) Non-Federal Share	7899.80	17840.01				
(b) Other Federal Operating						
Expenditures	0.00	0.00				
(c) Total Operating Expenditures	7899.80	17840.01				
(add 21(a)(i), (a)(ii), and (b))	7899.00	17640.01				
Committees	0.00	0.00				
Contributions to	0.00	0.00				
Federal Candidates/Committees and Other Political Committees	0.00	2500.00				
Independent Expenditures						
(use Schedule E)	0.00	0.00				
Coordinated Party Expenditures (2 U.S.C. §441a(d))	0.00					
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00				
	0.00					
Loan Repayments Made	0.00	0.00				
Lance Mark	0.00	0.00				
Loans Made Refunds of Contributions To:	0.00	0.00				
(a) Individuals/Persons Other Than Political Committees	0.00	0.00				
Than Political Committees	0.00	4				
(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				
(add Eiriob Zo(a), (b), and (b),						
Other Disbursements	29950.00	34700.00				
		7				
Federal Election Activity (2 U.S.C. §431(20))						
(a) Allocated Federal Election Activity						
(from Schedule H6)	0.00	0.00				
(i) Federal Share	0.00	0.00				
(ii) III aviinII Chava	0.00	0.00				
(ii) "Levin" Share	0.00	3.00				
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00				
(c) Total Federal Election Activity (add	0.00	3.00				
Lines 30(a)(i), 30(a)(ii) and 30(b)) ►	0.00	0.00				
Total Disbursements (add Lines 21(c), 22,						
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	37849.80	55040.01				
Total Federal Disbursements						
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)						
from Line 31)	29950.00	37200.00				
	7					

#### **DETAILED SUMMARY PAGE**

of Disbursements

II. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Total Contributions (other than loans) (from Line 11(d), page 3)	33005.00	56380.00
. Total Contribution Refunds (from Line 28(d))	0.00	0.00
. Net Contributions (other than loans) (subtract Line 34 from Line 33)	33005.00	56380.00
Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	0.00
Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

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or for commercial purposes, other than using	the name and address of any political committee t	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  A. Hasan Abed  Mailing Address 15 Waterbird Court		Date of Receipt
City	State Zip Code	07 25 2013 Transaction ID : SA11Al.7635
Cockeysville	MD 21030	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial)  Hasan Abed	·	Date of Receipt
Mailing Address 15 Waterbird Court		08 23 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Cockeyeville	State Zip Code MD 21030	Transaction ID : SA11AI.7746
Cockeysville	1.000	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial)  . Hasan Abed		Date of Receipt
Mailing Address 15 Waterbird Court		09 25 2013
City Cockeysville	State Zip Code MD 21030	Transaction ID : SA11AI.7830  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	400.00	
SUBTOTAL of Receipts This Page (optiona	I)	150.00
TOTAL This Period (last page this line num	ber only)	

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

					PAGE		7	OF		221	
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		13		14		15		16	6		17

or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  A. Hasan Abed		Date of Receipt
Mailing Address 15 Waterbird Court		10 25 2013
City	State Zip Code	Transaction ID : SA11AI.7923
Cockeysville	MD 21030	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	450.00	
Full Name (Last, First, Middle Initial)  3. Hasan Abed		Date of Receipt
Mailing Address 15 Waterbird Court		11 25 2013
City	State Zip Code	Transaction ID : SA11AI.8017
Cockeysville	MD 21030	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial)  . Hasan Abed		Date of Receipt
Mailing Address 15 Waterbird Court		12 24 2013
City	State Zip Code	Transaction ID : SA11AI.8114
Cockeysville	MD 21030	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	550.00	
SUBTOTAL of Receipts This Page (optional)	· • • • • • • • • • • • • • • • • • • •	150.00
TOTAL This Period (last page this line number	r only)	

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

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or for commercial purposes, other than using t	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Hasan Abed  Mailing Address 15 Waterbird Court		Date of Receipt
City Cockeysville  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For:  □ Primary □ General □ Other (specify) ▼	State Zip Code MD 21030  C  Occupation Physician  Aggregate Year-to-Date ▼  600.00	Transaction ID : SA11AI.8207  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Marc Azran  Mailing Address 800 Hillsboro Drive  City	State Zip Code	Date of Receipt  07 25 2013
Silver Spring  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia	MD 20902  C Occupation Physician	Transaction ID : SA11AI.7604  Amount of Each Receipt this Period  50.00  Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  300.00	-
Full Name (Last, First, Middle Initial)  Marc Azran  Mailing Address 800 Hillsboro Drive  City  Silver Spring	State Zip Code MD 20902	Date of Receipt    M
FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  □ Primary □ General  Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  350.00	50.00 Payroll deduction
SUBTOTAL of Receipts This Page (optional).	<b>&gt;</b>	150.00
TOTAL This Period (last page this line number		

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

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or for commercial purposes, other than using the	ne name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Marc Azran  Mailing Address 800 Hillsboro Drive		Date of Receipt
City Silver Spring  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For:  □ Primary □ General □ Other (specify) ▼	State Zip Code MD 20902  C  Occupation Physician  Aggregate Year-to-Date ▼  400.00	Transaction ID : SA11AI.7799  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Marc Azran  Mailing Address 800 Hillsboro Drive  City	State Zip Code	Date of Receipt  10 25 2013
Silver Spring  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For:  Primary  General	MD 20902  C Occupation Physician Aggregate Year-to-Date ▼	Transaction ID : SA11AI.7893  Amount of Each Receipt this Period  50.00  Payroll deduction
Other (specify)  Full Name (Last, First, Middle Initial) Marc Azran Mailing Address 800 Hillsboro Drive  City	State Zip Code	Date of Receipt  11 25 2013  Transaction ID : SA11AI.7986
Silver Spring  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼	MD 20902  C Occupation Physician  Aggregate Year-to-Date ▼  500.00	Amount of Each Receipt this Period  50.00  Payroll deduction
SUBTOTAL of Receipts This Page (optional)	····	150.00
TOTAL This Period (last page this line number		

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

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or for commercial purposes, other than using	the name and address of any political committee t	to solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHI	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE				
Full Name (Last, First, Middle Initial)  Marc Azran  Mailing Address 800 Hillsboro Drive		Date of Receipt				
City Silver Spring  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For:  □ Primary □ General □ Other (specify) ▼	State Zip Code MD 20902  C  Occupation Physician  Aggregate Year-to-Date ▼  550.00	Transaction ID : SA11AI.8080  Amount of Each Receipt this Period  50.00  Payroll deduction				
Full Name (Last, First, Middle Initial)  Marc Azran  Mailing Address 800 Hillsboro Drive  City Silver Spring  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For: Primary  General	State Zip Code MD 20902  C Occupation Physician Aggregate Year-to-Date ▼	Date of Receipt  12 31 2013  Transaction ID: SA11AI.8175  Amount of Each Receipt this Period  50.00  Payroll deduction				
Other (specify) ▼  Full Name (Last, First, Middle Initial)  Dr. Maksim Barkinskiy  Mailing Address 10021 Dickens Avenue  City  Bethesda  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  General	State Zip Code MD 20814  C  Occupation Physician  Aggregate Year-to-Date   Aggregate Year-to-Date	Date of Receipt  07				
Other (specify) ▼  SUBTOTAL of Receipts This Page (optional	300.00	150.00				
TOTAL This Period (last page this line numl	per only)					

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

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Maksim Barkinskiy  Mailing Address 10021 Dickens Avenue		Date of Receipt
City	State Zip Code	08 23 2013
Bethesda	MD 20814	Transaction ID : SA11AI.7697  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For:	Physician  Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial)  3. Dr. Maksim Barkinskiy  Mailing Address 10004 Bidess Average		Date of Receipt
Mailing Address 10021 Dickens Avenue	09 25 2013	
City Bethesda	State Zip Code MD 20814	Transaction ID : SA11AI.7793  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation	Payroll deduction
Receipt For:	Physician  Aggregate Veer to Date	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial)  Dr. Maksim Barkinskiy		Date of Receipt
Mailing Address 10021 Dickens Avenue		10 25 2013 _
City Bethesda	State Zip Code MD 20814	Transaction ID : SA11AI.7887  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For:	Physician	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
SUBTOTAL of Receipts This Page (optional)	·····	150.00
TOTAL This Period (last page this line number	only)	

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

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	ng the name and address of any political committee t					
NAME OF COMMITTEE (In Full) FIRST COLONIES ANEST	HESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE				
Full Name (Last, First, Middle Initial) Dr. Maksim Barkinskiy  Mailing Address 10021 Dickens Avenue		Date of Receipt				
City	Stata 7in Codo	11 25 2013				
Bethesda	State Zip Code MD 20814	Transaction ID : SA11AI.7980				
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  50.00				
Name of Employer	Occupation	- Payroll deduction				
First Colonies Anesthesia	Physician					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00					
Full Name (Last, First, Middle Initial)  3. Dr. Maksim Barkinskiy		Date of Receipt				
Mailing Address 10021 Dickens Avenue		M = M / D = D / Y = Y = Y = Y				
City	State Zip Code	12 24 2013 Transaction ID : SA11Al.8071				
Bethesda	MD 20814	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	50.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia	Physician					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00					
Full Name (Last, First, Middle Initial)  Dr. Maksim Barkinskiy	1	Date of Receipt				
Mailing Address 10021 Dickens Avenue		12 31 2013				
City Bethesda	State Zip Code MD 20814	Transaction ID : SA11AI.8168  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia	Physician					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General  Other (specify) ▼	600.00					
SUBTOTAL of Receipts This Page (option	nal)	150.00				
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TOTAL This Period (last page this line nu	mber only)	I				

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

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or for commercial purposes, other than using the	ne name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  1. Dr. Marc Beck  Mailing Address 16 Norris Run Court		Date of Receipt
		07 25 2013
City Reisterstown	State Zip Code MD 21136	Transaction ID : SA11AI.7619  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼  300.00	
Full Name (Last, First, Middle Initial)  3. Dr. Marc Beck  Mailing Address 16 Norris Run Court		Date of Receipt  08 23 2013
City	State Zip Code MD 21136	Transaction ID : SA11AI.7761
Reisterstown  FEC ID number of contributing federal political committee.	MD 21136	Amount of Each Receipt this Period  50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial)  C. Dr. Marc Beck		Date of Receipt
Mailing Address 16 Norris Run Court		09 25 2013
City Reisterstown	State Zip Code MD 21136	Transaction ID : SA11AI.7815  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary  Other (specify)	Aggregate Year-to-Date ▼  400.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number	r only)	

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

FOR	PAGE	•	14	OF	:	221			
(check only one)									
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	13	14		15		16			17

or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Marc Beck  Mailing Address 16 Norris Run Court		Date of Receipt
City	State Zip Code	10 25 2013 Transaction ID : SA11AI.7908
Reisterstown	MD 21136	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For:	Physician  Aggregate Vegr-to-Date	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial)  3. Dr. Marc Beck		Date of Receipt
Mailing Address 16 Norris Run Court	11 25 2013	
City Reisterstown	State Zip Code MD 21136	Transaction ID : SA11AI.8002  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 21130	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial)  Dr. Marc Beck		Date of Receipt
Mailing Address 16 Norris Run Court		12 24 2013
City Reisterstown	State Zip Code MD 21136	Transaction ID : SA11AI.8099  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	150.00
TOTAL This Period (last page this line number	r only)	

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

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FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICA  Full Name (Last, First, Middle Initial)  Dr. Marc Beck  Mailing Address 16 Norris Run Court  City State Zip Code	Date of Receipt
A. Dr. Marc Beck  Mailing Address 16 Norris Run Court	<b>─</b>
	M M / D D / V - V - V
City State Zip Code	12 31 2013
	Transaction ID : SA11AI.8192
Reisterstown MD 21136	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	50.00
Name of Employer Occupation	Payroll deduction
First Colonies Anesthesia Physician	
Receipt For: Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼  600.00	
Full Name (Last, First, Middle Initial)  3. Dr. Jeffrey Briggs	Date of Receipt
Mailing Address 14952 Finegan Farm Rd.	07 25 2013
City State Zip Code	Transaction ID : SA11AI.7575
Germantown MD 20874	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	50.00
Name of Employer Occupation	Payroll deduction
First Colonies Anesthesia Physician	
Receipt For:  Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼  300.00	
Full Name (Last, First, Middle Initial)  Dr. Jeffrey Briggs	Date of Receipt
Mailing Address 14952 Finegan Farm Rd.	Date of Receipt
City State Zip Code	08 23 2013
Germantown MD 20874	Transaction ID : SA11AI.7674  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	50.00
Name of Employer Occupation	Payroll deduction
First Colonies Anesthesia Physician	
Receipt For:  Aggregate Year-to-Date ▼	7
Primary General 33 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
Other (specify) ▼ 350.00	
Other (specify) ▼ 350.00  SUBTOTAL of Receipts This Page (optional)	150.00

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

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	the name and address of any political committee t				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)  1. Dr. Jeffrey Briggs		Date of Receipt			
Mailing Address 14952 Finegan Farm Rd.		09 25 2013			
City Germantown	State Zip Code MD 20874	Transaction ID : SA11AI.7770			
FEC ID number of contributing federal political committee.	C 20014	Amount of Each Receipt this Period  50.00			
Name of Employer  First Colonies Anesthesia  Receipt For:	Occupation Physician  Aggregate Year-to-Date ▼	Payroll deduction			
Primary General Other (specify) ▼	400.00				
Full Name (Last, First, Middle Initial)  3. Dr. Jeffrey Briggs		Date of Receipt			
Mailing Address 14952 Finegan Farm Rd.		10 252013			
City	State Zip Code	Transaction ID : SA11AI.7864			
Germantown	MD 20874	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	50.00				
Name of Employer First Colonies Anesthesia	Occupation	Payroll deduction			
Receipt For:	Physician	_			
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00				
Full Name (Last, First, Middle Initial)  Dr. Jeffrey Briggs		Date of Receipt			
Mailing Address 14952 Finegan Farm Rd.		11 25 2013			
City Germantown	State Zip Code MD 20874	Transaction ID : SA11AI.7958  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Payroll deduction				
First Colonies Anesthesia	,				
Receipt For:  Primary  General	Aggregate Year-to-Date ▼				
Other (specify) ▼	500.00				
SUBTOTAL of Receipts This Page (optional).		150.00			
TOTAL This Period (last page this line number	er only)				

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

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAL	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Jeffrey Briggs  Mailing Address 14952 Finegan Farm Rd.		Date of Receipt
		12 24 2013
City Germantown	State Zip Code MD 20874	Transaction ID : SA11AI.8049  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For:	Physician	
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial)  Dr. Jeffrey Briggs  Mailing Address 14952 Finegan Farm Rd.		Date of Receipt
City	State Zip Code	12 31 2013 Transaction ID : SA11AI.8146
Germantown	MD 20874	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation	Payroll deduction
Receipt For:	Physician	
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  600.00	
Full Name (Last, First, Middle Initial)  Dr. John Bunker		Date of Receipt
Mailing Address 15229 National Pike		07 25 2013
City Hagerstown	State Zip Code MD 21740	Transaction ID : SA11AI.7659  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	300.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number	only)	

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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHI	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. John Bunker  Mailing Address 15229 National Pike		Date of Receipt
City Hagerstown  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code MD 21740  C  Occupation Physician  Aggregate Year-to-Date ▼  350.00	Transaction ID : SA11AI.7733  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. John Bunker  Mailing Address 15229 National Pike  City  Hagerstown  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify)	State Zip Code MD 21740  C  Occupation Physician  Aggregate Year-to-Date ▼  400.00	Date of Receipt    M
Full Name (Last, First, Middle Initial)  Dr. John Bunker  Mailing Address 15229 National Pike  City Hagerstown  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code MD 21740  C  Occupation Physician  Aggregate Year-to-Date ▼  450.00	Date of Receipt  10 25 2013  Transaction ID: SA11AI.7936  Amount of Each Receipt this Period  50.00  Payroll deduction
SUBTOTAL of Receipts This Page (optional)	<u> </u>	150.00
TOTAL This Period (last page this line numb	per only)	

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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. John Bunker  Mailing Address 15229 National Pike		Date of Receipt
City	State Zip Code	11 25 2013 Transaction ID : SA11AI.8030
Hagerstown	MD 21740	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial)  Dr. John Bunker  Mailing Address 45000 National Biles		Date of Receipt
Mailing Address 15229 National Pike  City	State Zip Code	12 24 2013 Transaction ID : \$A11A1 8127
Hagerstown	MD 21740	Transaction ID : SA11AI.8127  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial)  Dr. John Bunker		Date of Receipt
Mailing Address 15229 National Pike		12 31 2013
City Hagerstown	State Zip Code MD 21740	Transaction ID : SA11AI.8221  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	600.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number	· only)	

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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Rachel Cappuccino  Mailing Address 2811 Sommersby Rd.		Date of Receipt
City Mt. Airy  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anestheisa  Receipt For:  Primary General Other (specify)	State Zip Code MD 21771  C  Occupation Physician  Aggregate Year-to-Date ▼  225.00	Transaction ID: SA11AI.7930  Amount of Each Receipt this Period  25.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Rachel Cappuccino  Mailing Address 2811 Sommersby Rd.  City	State Zip Code	Date of Receipt  11 25 2013  Transaction ID: SA11AI.8024
Mt. Airy  FEC ID number of contributing federal political committee.	MD 21771	Amount of Each Receipt this Period 25.00
Name of Employer First Colonies Anestheisa  Receipt For:  Primary General  Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  250.00	Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Rachel Cappuccino  Mailing Address 2811 Sommersby Rd.  City Mt. Airy	State Zip Code MD 21771	Date of Receipt  12
FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anestheisa  Receipt For:  Primary  General  Other (specify)	Occupation Physician  Aggregate Year-to-Date   275.00	Amount of Each Receipt this Period  25.00  Payroll deduction
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	75.00
TOTAL This Period (last page this line numb	per only)	

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	the name and address of any political committee				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)  Dr. Rachel Cappuccino  Mailing Address 2811 Sommersby Rd.		Date of Receipt			
City	State Zip Code	12 31 2013 Transaction ID : SA11AI.8215			
Mt. Airy	MD 21771	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	25.00			
Name of Employer First Colonies Anestheisa	Occupation Physician	Payroll deduction			
Receipt For:	Aggregate Year-to-Date ▼	_			
Primary General Other (specify) ▼	300.00				
Full Name (Last, First, Middle Initial)  3. Dr. Donald Charney		Date of Receipt			
Mailing Address 3707 Meadowhill Court		07 25 _2013 _			
City	State Zip Code	Transaction ID : SA11AI.7620			
Phoenix	MD 21131	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer First Colonies Anesthesia	Occupation	Payroll deduction			
Receipt For:	Physician Pate 7	_			
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00				
Full Name (Last, First, Middle Initial)  Dr. Donald Charney		Date of Receipt			
Mailing Address 3707 Meadowhill Court		08 23 2013			
City Phoenix	State Zip Code MD 21131	Transaction ID : SA11AI.7760  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia	,				
Receipt For:  Primary  General	Aggregate Year-to-Date ▼				
Other (specify) ▼	350.00				
SUBTOTAL of Receipts This Page (optional	)	125.00			
TOTAL This Period (last page this line numl	ber only)				

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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Donald Charney  Mailing Address 3707 Meadowhill Court		Date of Receipt
City	State Zip Code	09 25 2013
Phoenix	MD 21131	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial)  Dr. Donald Charney  Mailing Address 3707 Meadowhill Court		Date of Receipt  10 25 2013
City Phoenix	State Zip Code MD 21131	Transaction ID : SA11AI.7909  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial)  Dr. Donald Charney		Date of Receipt
Mailing Address 3707 Meadowhill Court		11 25 2013
City Phoenix	State Zip Code MD 21131	Transaction ID : SA11AI.8003  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number	only)	

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	the name and address of any political committee					
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE				
Full Name (Last, First, Middle Initial)  A. Dr. Donald Charney		Date of Receipt				
Mailing Address 3707 Meadowhill Court	7:0.1	12 24 2013				
City Phoenix	State Zip Code MD 21131	Transaction ID : SA11AI.8100				
FEC ID number of contributing federal political committee.	C 21131	Amount of Each Receipt this Period  50.00				
Name of Employer First Colonies Anesthesia	Payroll deduction					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00					
Full Name (Last, First, Middle Initial)  Dr. Donald Charney		Date of Receipt				
Mailing Address 3707 Meadowhill Court		12 31 _2013 _				
City Phoenix						
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period  50.00				
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00					
Full Name (Last, First, Middle Initial)  Dr. Satyam Chary		Date of Receipt				
Mailing Address 9 Alterwood Lane		07 25 2013				
City Owings Mill	State Zip Code MD 21117	Transaction ID : SA11AI.7621  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00 Payroll deduction				
Name of Employer	Name of Employer Occupation					
First Colonies Anesthesia						
Receipt For:  Primary General  Other (specify) —	Aggregate Year-to-Date ▼ 300.00					
Other (specify) ▼	300.00					
SUBTOTAL of Receipts This Page (optional).	<b>_</b>	150.00				
TOTAL This Period (last page this line number	er only)					

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	g the name and address of any political committee				
, ,	HESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE			
Full Name (Last, First, Middle Initial) Dr. Satyam Chary		Date of Receipt			
Mailing Address 9 Alterwood Lane		08 23 2013			
City Owings Mill	State Zip Code MD 21117	Transaction ID : SA11AI.7759			
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  50.00			
Name of Employer  First Colonies Anesthesia  Receipt For:	Occupation Physician	Payroll deduction			
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00				
Full Name (Last, First, Middle Initial)  3. Dr. Satyam Chary		Date of Receipt			
Mailing Address 9 Alterwood Lane		09 25 2013			
City	State Zip Code	Transaction ID : SA11AI.7817			
Owings Mill	MD 21117	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer First Colonies Anesthesia	Occupation	Payroll deduction			
Receipt For:	Physician				
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00				
Full Name (Last, First, Middle Initial)  Dr. Satyam Chary		Date of Receipt			
Mailing Address 9 Alterwood Lane		10 25 2013			
City Owings Mill	State Zip Code MD 21117	Transaction ID : SA11AI.7910  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00 Payroll deduction			
Name of Employer	Name of Employer Occupation				
First Colonies Anesthesia	,				
Receipt For: Primary General	Aggregate Year-to-Date ▼				
Other (specify) ▼	450.00				
SUBTOTAL of Receipts This Page (optional	al)	150.00			
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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Satyam Chary  Mailing Address 9 Alterwood Lane		Date of Receipt
City	State Zip Code	11 25 2013
Owings Mill	MD 21117	Transaction ID : SA11AI.8004  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼	Physician  Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial)  Dr. Satyam Chary  Mailing Address 9 Alterwood Lane		Date of Receipt  12 24 2013
City Owings Mill	State Zip Code MD 21117	Transaction ID : SA11AI.8101
Owings Mill  FEC ID number of contributing federal political committee.	MD 21117	Amount of Each Receipt this Period 50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial)  Dr. Satyam Chary	,	Date of Receipt
Mailing Address 9 Alterwood Lane		12 31 2013 _
City Owings Mill	State Zip Code MD 21117	Transaction ID : SA11AI.8194  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  600.00	
SUBTOTAL of Receipts This Page (optional)		150.00
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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Thomas Chau  Mailing Address 7204 Loch Edin Court		Date of Receipt
City	State Zip Code	07 25 2013 Transaction ID : SA11AI.7576
Potomac	MD 20854	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For:	Physician  Aggregate Vegr to Date	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  300.00	
Full Name (Last, First, Middle Initial)  3. Dr. Thomas Chau  Mailing Address 7204 Loch Edin Court		Date of Receipt
City	State Zip Code	08 23 2013
Potomac	MD 20854	Transaction ID : SA11AI.7675  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer First Colonies Anesthesia	Occupation	Payroll deduction
Receipt For:	Physician  Aggregate Vegr to Date	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial)  Dr. Thomas Chau		Date of Receipt
Mailing Address 7204 Loch Edin Court		09 25 2013
City Potomac	State Zip Code MD 20854	Transaction ID : SA11AI.7771  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify) ▼	400.00	
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	150.00
TOTAL This Period (last page this line number	· only)	

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	the name and address of any political committee	
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Thomas Chau  Mailing Address 7204 Loch Edin Court		Date of Receipt
City	State Zip Code	10 25 2013 Transaction ID : SA11AI.7865
Potomac  FEC ID number of contributing federal political committee.	MD 20854	Amount of Each Receipt this Period 50.00
Name of Employer  First Colonies Anesthesia  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  450.00	Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Thomas Chau  Mailing Address 7204 Loch Edin Court		Date of Receipt
City Potomac FEC ID number of contributing	State Zip Code MD 20854	Transaction ID : SA11AI.7959  Amount of Each Receipt this Period  50.00
Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician Aggregate Year-to-Date ▼	Payroll deduction
Primary General  Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Dr. Thomas Chau  Mailing Address 7204 Loch Edin Court		Date of Receipt  12 24 2013
City Potomac	State Zip Code MD 20854	Transaction ID : SA11AI.8050  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  550.00	
SUBTOTAL of Receipts This Page (optional	I) <b>&gt;</b>	150.00
TOTAL This Period (last page this line num	ber only)	

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Name of Employer First Colonies Anesthesia Receipt For:  Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)  Date of Receipt Tone  Aggregate Year-to-Date ▼  Physician  Date of Receipt  Other (specify) ▼  Date of Receipt  Other (specify) ▼  Transaction ID : SA11AL7597  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt Tone  Primary General  Other (specify) ▼  State Zip Code  MD 20850  Payroll deduction	or for commercial purposes, other than using	the name and address of any political committee	
A. Dr. Thomas Chau  Mailing Address 7204 Loch Edin Court  City State Zip Code MD 20854  FEC ID number of contributing feederal political committee.  Name of Employer Primary General Other (specify) ▼	,	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE
City Potomac MD 20854  Potomac MD 20854  Amount of Each Receipt this Period FEC ID number of contributing federal political committee.  Name of Employer   Occupation   Physician   Receipt Contributing federal political committee.  Full Name (Last, First, Middle Initial)  3. Dr. Dwayne Chen   MD 20850   MD 20850   MD 20850   Dr. Dwayne Chen   Physician   Physician   Receipt For:    Primary   General   G	Dr. Thomas Chau		M = M / D = D / Y = Y = Y
FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For:	-		Transaction ID : SA11AI.8147
Full Name (Last, First, Middle Initial)  Transaction ID : SA11AI.7597  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  Date of Receipt  Office (specify) ▼  Transaction ID : SA11AI.7597  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For:  Primary General Other (specify) ▼  State Zip Code  Aggregate Year-to-Date ▼  Payroll deduction  Payroll deduction  Date of Receipt  Transaction ID : SA11AI.7597  Amount of Each Receipt this Period  Payroll deduction  Payroll deduction  Date of Receipt  Transaction ID : SA11AI.7597  Amount of Each Receipt this Period  Date of Receipt  Transaction ID : SA11AI.7696  Amount of Each Receipt this Period  Date of Receipt  Transaction ID : SA11AI.7696  Amount of Each Receipt this Period  Date of Receipt  Transaction ID : SA11AI.7696  Amount of Each Receipt this Period  Date of Receipt  Aggregate Year-to-Date ▼  Payroll deduction  Payroll deduction  Payroll deduction	FEC ID number of contributing		Amount of Each Receipt this Period  50.00
Address 12808 Spring Drive  City Rockville  MD 20850  State MD 20850  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify) ▼  City State MD 20850  City Amount of Each Receipt this Period  Payroll deduction  Payroll deduction  Payroll deduction  Date of Receipt  Transaction ID: SA11AI.7597  Amount of Each Receipt this Period  Payroll deduction  Payroll deduction  Date of Receipt  Transaction ID: SA11AI.7597  Amount of Each Receipt this Period  Payroll deduction  Payroll deduction  Date of Receipt  Transaction ID: SA11AI.7696  Payroll deduction  Payroll deduction  Date of Receipt  Payroll deduction  Payroll deduction  Transaction ID: SA11AI.7696  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For: Primary General  Aggregate Year-to-Date ▼  Payroll deduction	First Colonies Anesthesia  Receipt For:  Primary  General	Physician  Aggregate Year-to-Date ▼  600.00	Payroll deduction
City State Zip Code MD 20850  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For:  Primary General Other (specify) ▼  City State Zip Code MD 20850  FEC ID number of contributing federal political committee.  City State Zip Code MD 20850  Fell Name (Last, First, Middle Initial)  City State Zip Code MD 20850  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Fec ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For:  Primary General Aggregate Year-to-Date ▼  Primary General Aggregate Year-to-Date ▼  Payroll deduction  Transaction ID : SA11AI.7597  Amount of Each Receipt this Period  Date of Receipt  M	B. Dr. Dwayne Chen		M = M / D = D / Y = Y = Y
Name of Employer First Colonies Anesthesia Receipt For:  Primary General Other (specify) ▼  Pull Name (Last, First, Middle Initial) Dr. Dwayne Chen Mailing Address 12808 Spring Drive  City State Zip Code Rockville  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For:  Primary General  Occupation Physician  Payroll deduction	Rockville	MD 20850	Transaction ID : SA11AI.7597  Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) Dr. Dwayne Chen  Mailing Address 12808 Spring Drive  City  Rockville  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  General  Date of Receipt  MMD 20850  Transaction ID: SA11Al.7696  Amount of Each Receipt this Period  Payroll deduction  Payroll deduction	Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician	
City State Zip Code MD 20850  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For: Primary General  State Zip Code MD 20850  Amount of Each Receipt this Period  Payroll deduction  Payroll deduction	Full Name (Last, First, Middle Initial)  Dr. Dwayne Chen	300.00	M = M / D = D / Y = Y = Y
Other (specify) ▼ 350.00	Rockville  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:	MD 20850  C Occupation Physician	Transaction ID : SA11AI.7696  Amount of Each Receipt this Period  50.00
SUBTOTAL of Receipts This Page (optional)	SUBTOTAL of Receipts This Page (ontional		150.00
TOTAL This Period (last page this line number only)		<u> </u>	

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Dwayne Chen  Mailing Address 12808 Spring Drive		Date of Receipt
City	State Zip Code	09 25 2013 Transaction ID : SA11AI.7792
Rockville  FEC ID number of contributing federal political committee.	MD 20850	Amount of Each Receipt this Period 50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia  Receipt For:  Primary  Other (specify)	Physician  Aggregate Year-to-Date ▼  400.00	
Full Name (Last, First, Middle Initial)  Dr. Dwayne Chen  Mailing Address 12808 Spring Drive		Date of Receipt  10 25 2013
City Rockville	State Zip Code MD 20850	Transaction ID : SA11AI.7886  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial)  Dr. Dwayne Chen		Date of Receipt
Mailing Address 12808 Spring Drive		11 25 2013
City Rockville	State Zip Code MD 20850	Transaction ID : SA11AI.7979  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number	only)	

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or for commercial purposes, other than using	the name and address of any political committee t	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Dwayne Chen  Mailing Address 12808 Spring Drive		Date of Receipt
City Rockville  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For:	State Zip Code MD 20850  C  Occupation Physician	Transaction ID : SA11AI.8070  Amount of Each Receipt this Period  50.00  Payroll deduction
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial)  3. Dr. Dwayne Chen  Mailing Address 12808 Spring Drive		Date of Receipt  12 31 2013
City Rockville FEC ID number of contributing federal political committee.	State Zip Code MD 20850	Transaction ID : SA11AI.8167  Amount of Each Receipt this Period  50.00
Name of Employer First Colonies Anesthesia  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  600.00	Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Edward Chen  Mailing Address 10209 Fleming Avenue		Date of Receipt  07 25 2013
City Bethesda  FEC ID number of contributing federal political committee.	State Zip Code MD 20814	Transaction ID : SA11AI.7577  Amount of Each Receipt this Period  50.00
Name of Employer  First Colonies Anesthesia  Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  300.00	Payroll deduction
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line numb	per only)	

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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHI	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Edward Chen  Mailing Address 10209 Fleming Avenue		Date of Receipt
City Bethesda  FEC ID number of contributing federal political committee.  Name of Employer	State Zip Code MD 20814  C Occupation	O8 23 2013  Transaction ID : SA11AI.7676  Amount of Each Receipt this Period  50.00  Payroll deduction
First Colonies Anesthesia  Receipt For: Primary General Other (specify)	Physician  Aggregate Year-to-Date ▼  350.00	
Full Name (Last, First, Middle Initial)  Dr. Edward Chen  Mailing Address 10209 Fleming Avenue	Ohaka Zin Ohaka	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  Bethesda  FEC ID number of contributing federal political committee.	State Zip Code MD 20814	Transaction ID : SA11AI.7772  Amount of Each Receipt this Period  50.00
Name of Employer First Colonies Anesthesia  Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  400.00	Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Edward Chen  Mailing Address 10209 Fleming Avenue  City	State Zip Code	Date of Receipt  10 25 2013  Transaction ID: SA11AI.7866
Bethesda  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:	MD 20814  C  Occupation Physician  Aggregate Year-to-Date ▼	Amount of Each Receipt this Period  50.00  Payroll deduction
Primary General Other (specify) ▼	450.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	150.00
TOTAL This Period (last page this line numb	per only)	

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or for commercial purposes, other than using th	e name and address of any political committee to	
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Edward Chen  Mailing Address 10209 Fleming Avenue		Date of Receipt
	Ctata 7in Cada	11 25 2013
City Bethesda	State Zip Code MD 20814	Transaction ID : SA11AI.7960
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial)  Dr. Edward Chen  Mailing Address 1999 Flyning Address		Date of Receipt
Mailing Address 10209 Fleming Avenue  City  Bethesda	State Zip Code MD 20814	12 24 2013  Transaction ID : SA11AI.8051  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial)	ı	Date of Receipt
Mailing Address 10209 Fleming Avenue		12 31 2013 _
City Bethesda	State Zip Code MD 20814	Transaction ID : SA11AI.8148  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  600.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number	<u> </u>	

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. William Chester  Mailing Address 13771 Lemberting Place		Date of Receipt
Mailing Address 13771 Lambertina Place		07 25 2013
City Rockville	State Zip Code MD 20850	Transaction ID : SA11AI.7578  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For:	Physician	
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  300.00	
Full Name (Last, First, Middle Initial)  3. Dr. William Chester  Mailing Address 13771 Lambertina Place		Date of Receipt
City	08 23 2013 Transaction ID : SA11AI.7677	
Rockville	State Zip Code MD 20850	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation	Payroll deduction
Receipt For:	Physician	
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial)  Dr. William Chester		Date of Receipt
Mailing Address 13771 Lambertina Place		09 25 2013
City Rockville	State Zip Code MD 20850	Transaction ID : SA11AI.7773  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number	<u>·</u>	150.00
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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE				
Full Name (Last, First, Middle Initial)  Dr. William Chester  Mailing Address 13771 Lambertina Place		Date of Receipt				
	State 7in Code	10 25 2013				
City Rockville	State Zip Code MD 20850	Transaction ID : SA11AI.7867  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia  Receipt For:  Primary  Other (specify)	Physician  Aggregate Year-to-Date ▼  450.00					
Full Name (Last, First, Middle Initial)  Dr. William Chester  Mailing Address 13771 Lambertina Place		Date of Receipt  11 25 2013				
City Rockville	State Zip Code MD 20850	Transaction ID : SA11AI.7961				
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 50.00				
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00					
Full Name (Last, First, Middle Initial)  C. Dr. William Chester		Date of Receipt				
Mailing Address 13771 Lambertina Place		12 24 2013 _				
City Rockville	State Zip Code MD 20850	Transaction ID : SA11AI.8052  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction				
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼  550.00					
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	150.00				
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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	_ ACTION COMMITTEE				
Full Name (Last, First, Middle Initial)  Dr. William Chester  Mailing Address 13771 Lambertina Place		Date of Receipt				
City	State Zip Code	12 31 2013				
Rockville	MD 20850	Transaction ID : SA11AI.8149  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia Receipt For:	Physician Assessed Name Pate 7					
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  600.00					
Full Name (Last, First, Middle Initial)  Charles Ciolino		Date of Receipt				
Mailing Address 11008 South Glen Road						
City Potomac	State Zip Code MD 20854	Transaction ID : SA11AI.7599  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer First Colonies Anesthesia	Occupation	Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Physician  Aggregate Year-to-Date ▼  300.00					
Full Name (Last, First, Middle Initial)  Charles Ciolino		Date of Receipt				
Mailing Address 11008 South Glen Road		08 23 _ 2013 _				
City Potomac	State Zip Code MD 20854	Transaction ID : SA11AI.7698  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia	Physician					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00					
SUBTOTAL of Receipts This Page (optional)		150.00				
TOTAL This Period (last page this line number	only)					

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Charles Ciolino  Mailing Address 44000 South Clas Read		Date of Receipt
Mailing Address 11008 South Glen Road		09 25 2013
City Potomac	State Zip Code MD 20854	Transaction ID : SA11AI.7794  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For:	Physician	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial)  Charles Ciolino		Date of Receipt
Mailing Address 11008 South Glen Road  City	10 25 2013	
Potomac	State Zip Code MD 20854	Transaction ID : SA11AI.7888  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial)  Charles Ciolino		Date of Receipt
Mailing Address 11008 South Glen Road		11 25 2013 _
City Potomac	State Zip Code MD 20854	Transaction ID : SA11AI.7981  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	·····	150.00
TOTAL This Period (last page this line number	only)	

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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Charles Ciolino  Mailing Address 11008 South Glen Road		Date of Receipt
City	State Zip Code MD 20854	12 24 2013 Transaction ID : SA11Al.8072
Potomac  FEC ID number of contributing federal political committee.	C 20854	Amount of Each Receipt this Period  50.00
Name of Employer  First Colonies Anesthesia  Receipt For:  □ Primary □ General  Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  550.00	- Payroll deduction
Full Name (Last, First, Middle Initial)  Charles Ciolino  Mailing Address 11008 South Glen Road		Date of Receipt
City Potomac  FEC ID number of contributing federal political committee.	State Zip Code MD 20854	Transaction ID : SA11AI.8169  Amount of Each Receipt this Period  50.00
Name of Employer First Colonies Anesthesia  Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  600.00	Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Lincoln Coore  Mailing Address 11546 Fox River Road  City Ellicott City  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthsia Receipt For:	State Zip Code MD 21042  C  Occupation Physician  Aggregate Year-to-Date ▼	Date of Receipt  07
Primary General Other (specify) ▼	Aggregate rear-to-bate \$450.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	175.00
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or for commercial purposes, other than using	the name and address of any political committee t	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHI	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Lincoln Coore  Mailing Address 11546 Fox River Road		Date of Receipt
City Ellicott City	State Zip Code MD 21042	08 23 2013  Transaction ID : SA11AI.7752  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00 Payroll deduction
Name of Employer  First Colonies Anesthsia  Receipt For:	Occupation Physician  Aggregate Year-to-Date ▼	- ayron deduction
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	
Full Name (Last, First, Middle Initial)  Dr. Lincoln Coore  Mailing Address 11546 Fox River Road		Date of Receipt  M M M / D D / Y F Y F Y F Y F Y F Y F Y F Y F Y F Y
City Ellicott City	State Zip Code MD 21042	Transaction ID : SA11AI.7824  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer First Colonies Anesthsia Receipt For:	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial)  Dr. Lincoln Coore		Date of Receipt
Mailing Address 11546 Fox River Road	State Zin Code	10 25 2013
City Ellicott City	State Zip Code MD 21042	Transaction ID : SA11AI.7917  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer First Colonies Anesthsia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	
SUBTOTAL of Receipts This Page (optional)	<b></b>	225.00
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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Lincoln Coore  Mailing Address 11546 Fox River Road		Date of Receipt
City Ellicott City FEC ID number of contributing	State Zip Code MD 21042	11 25 2013  Transaction ID : SA11AI.8011  Amount of Each Receipt this Period  75.00
Receipt For:  Primary  Other (specify)  General	Occupation Physician  Aggregate Year-to-Date ▼  750.00	Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Lincoln Coore  Mailing Address 11546 Fox River Road	Ctoto Zin Codo	Date of Receipt  12 24 2013
City Ellicott City  FEC ID number of contributing federal political committee.	State Zip Code MD 21042	Transaction ID : SA11AI.8108  Amount of Each Receipt this Period  75.00
Name of Employer First Colonies Anesthsia  Receipt For:  Primary General  Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  825.00	Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Lincoln Coore  Mailing Address 11546 Fox River Road  City	State Zip Code	Date of Receipt  12 31 2013  Transaction ID: SA11Al.8201
Ellicott City  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthsia  Receipt For:  Primary General Other (specify)	MD 21042  C Occupation Physician  Aggregate Year-to-Date ▼  900.00	Amount of Each Receipt this Period  75.00  Payroll deduction
SUBTOTAL of Receipts This Page (optional)		225.00
TOTAL This Period (last page this line numb	er only)	

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

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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA  Full Name (Last, First, Middle Initial) Dr. Melvin Coursey  Mailing Address 18720 Shremor Drive  City Derwood	ASSOCIATES LLC POLITICAL	Date of Receipt
Mailing Address 18720 Shremor Drive  City		
City		
		07 25 2013
DelMood	State Zip Code	Transaction ID : SA11AI.7579
_	MD 20855	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer O	Occupation	Payroll deduction
	hysician	
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial)  3. Dr. Melvin Coursey		Date of Receipt
Mailing Address 18720 Shremor Drive		08 23 2013
City	State Zip Code	Transaction ID : SA11AI.7678
Derwood	MD 20855	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer O	Payroll deduction	
First Colonies Anesthesia Pr	hysician	
	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial)		Date of Deceint
Dr. Melvin Coursey  Mailing Address 18720 Shremor Drive		Date of Receipt
To Zo Siliemoi Dilve		09 25 2013
•	State Zip Code	Transaction ID : SA11AI.7774
Derwood	MD 20855	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer O	Occupation	Payroll deduction
	hysician	
	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	400.00	
SUBTOTAL of Receipts This Page (optional)		150.00

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	ng the name and address of any political committee t				
	HESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE			
Full Name (Last, First, Middle Initial) Dr. Melvin Coursey		Date of Receipt			
Mailing Address 18720 Shremor Drive		10 25 2013			
City	State Zip Code	Transaction ID : SA11AI.7868			
Derwood	MD 20855	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	- Payroll deduction			
First Colonies Anesthesia	Physician				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00				
Full Name (Last, First, Middle Initial)					
B. Dr. Melvin Coursey		Date of Receipt			
Mailing Address 18720 Shremor Drive		M = M / D = D / Y = Y = Y			
City	State Zip Code	11 25 2013			
Derwood	MD 20855	Transaction ID : SA11AI.7962  Amount of Each Receipt this Period			
FEC ID number of contributing		Amount of Lacif neceipt this Period			
federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia	Physician				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General  Other (specify) ▼	500.00				
Full Name (Last, First, Middle Initial)  Dr. Melvin Coursey	1	Date of Receipt			
Mailing Address 18720 Shremor Drive		12 24 2013			
City Derwood	State Zip Code MD 20855	Transaction ID : SA11AI.8053  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia	Physician				
Receipt For:	Aggregate Year-to-Date ▼	1			
Primary General	55 0				
Other (specify) ▼	550.00				
SUBTOTAL of Receipts This Page (option	nal)	150.00			
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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE		
Full Name (Last, First, Middle Initial)  Dr. Melvin Coursey  Mailing Address 18720 Shremor Drive		Date of Receipt		
City	State Zip Code	12 31 2013		
Derwood	MD 20855	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction		
Receipt For:	Aggregate Year-to-Date ▼	-		
Primary General Other (specify) ▼	600.00			
Full Name (Last, First, Middle Initial)  3. Dr. Lauren Deloach		Date of Receipt		
Mailing Address 15114 Pepperridge Drive		07 25 2013 _		
City	State Zip Code	Transaction ID : SA11AI.7669		
Bowie	MD 20721	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00  Payroll deduction		
Name of Employer First Colonies Anesthesia	Occupation	Payroll deduction		
Receipt For:	Physician	_		
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  300.00			
Full Name (Last, First, Middle Initial)  Dr. Lauren Deloach		Date of Receipt		
Mailing Address 15114 Pepperridge Drive		08 23 2013		
City	State Zip Code	Transaction ID : SA11AI.7742		
Bowie	MD 20721	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer	Occupation	Payroll deduction		
First Colonies Anesthesia Receipt For:	Physician	_		
Primary General	Aggregate Year-to-Date ▼			
Other (specify) ▼	350.00			
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	150.00		
TOTAL This Period (last page this line numbe	r only)			

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

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or for commercial purposes, other than using the	e name and address of any political committee to	o solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE			
Full Name (Last, First, Middle Initial) Dr. Lauren Deloach Mailing Address 15114 Pepperridge Drive		Date of Receipt			
City Bowie  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  □ Primary □ General  □ Other (specify) ▼	State Zip Code MD 20721  C  Occupation Physician  Aggregate Year-to-Date ▼  400.00	Transaction ID : SA11AI.7834  Amount of Each Receipt this Period  50.00  Payroll deduction			
Full Name (Last, First, Middle Initial)  Dr. Lauren Deloach  Mailing Address 15114 Pepperridge Drive  City	State Zip Code	Date of Receipt  10 25 2013			
Bowie  FEC ID number of contributing federal political committee.	Transaction ID : SA11AI.7927  Amount of Each Receipt this Period  50.00				
Name of Employer First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  450.00	Payroll deduction			
Full Name (Last, First, Middle Initial) Dr. Lauren Deloach Mailing Address 15114 Pepperridge Drive  City	State Zip Code	Date of Receipt  11 25 2013  Transaction ID: SA11Al.8021			
Bowie  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  □ Primary □ General  □ Other (specify) ▼	MD 20721  C Occupation Physician  Aggregate Year-to-Date ▼  500.00	Amount of Each Receipt this Period  50.00  Payroll deduction			
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	150.00			
TOTAL This Period (last page this line number	r only)				

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAL	L ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)  Dr. Lauren Deloach  Mailing Address 15114 Pepperridge Drive		Date of Receipt			
		12 24 2013			
City Bowie	State Zip Code MD 20721	Transaction ID : SA11AI.8118  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia  Receipt For:  Primary  Other (specify)	Physician  Aggregate Year-to-Date ▼  550.00				
Full Name (Last, First, Middle Initial)  Dr. Lauren Deloach  Mailing Address 15114 Pepperridge Drive	Date of Receipt  12 31 2013				
City Bowie	State Zip Code MD 20721	Transaction ID : SA11AI.8212  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  50.00			
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00				
Full Name (Last, First, Middle Initial)  Patrick Dono		Date of Receipt			
Mailing Address 17136 Wesley Chapel Rd.		10 25 2013 _			
City Monkton	State Zip Code MD 21111	Transaction ID : SA11AI.7911  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	25.00			
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  225.00				
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	125.00			
TOTAL This Period (last page this line number	only)				

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or for commercial purposes, other than using the	e name and address of any political committee to	o solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)  A. Patrick Dono  Mailing Address 17136 Wesley Chapel Rd.		Date of Receipt			
		11 25 2013			
City Monkton	State Zip Code MD 21111	Transaction ID : SA11AI.8005  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	25.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify)	Physician  Aggregate Year-to-Date ▼  250.00				
Full Name (Last, First, Middle Initial)  Patrick Dono  Mailing Address 17136 Wesley Chapel Rd.	Date of Receipt  12 24 2013				
City	State Zip Code	Transaction ID : SA11AI.8102			
Monkton  FEC ID number of contributing federal political committee.	MD 21111	Amount of Each Receipt this Period  25.00			
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00				
Full Name (Last, First, Middle Initial)  C. Patrick Dono		Date of Receipt			
Mailing Address 17136 Wesley Chapel Rd.		12 31 _ 2013 _			
City Monkton	State Zip Code MD 21111	Transaction ID : SA11AI.8195  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	25.00			
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  300.00				
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	75.00			
TOTAL This Period (last page this line number					

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or for commercial purposes, other than using t	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Ali Emamhosseini  Mailing Address 8370 Greensboro Drive  Apt #208  City  McLean  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General  Other (specify)   Full Name (Last, First, Middle Initial)	State Zip Code VA 22102  C Occupation Physician  Aggregate Year-to-Date ▼  300.00	Date of Receipt  O7 25 2013  Transaction ID : SA11AI.7603  Amount of Each Receipt this Period  50.00  Payroll deduction
Mailing Address 8370 Greensboro Drive  Apt #208  City  McLean  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼	State Zip Code VA 22102  C Occupation Physician Aggregate Year-to-Date ▼ 350.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  Dr. Ali Emamhosseini  Mailing Address 8370 Greensboro Drive  Apt #208  City  McLean  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify)	State Zip Code VA 22102  C Occupation Physician  Aggregate Year-to-Date ▼ 400.00	Date of Receipt  09 25 2013  Transaction ID : SA11AI.7798  Amount of Each Receipt this Period  50.00  Payroll deduction
SUBTOTAL of Receipts This Page (optional).	<u> </u>	150.00
TOTAL This Period (last page this line number	er only)	

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	ne name and address of any political committee to	
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Ali Emamhosseini  Mailing Address 8370 Greensboro Drive  Apt #208  City  McLean  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify)	State Zip Code VA 22102  C  Occupation Physician  Aggregate Year-to-Date ▼  450.00	Date of Receipt  10 25 2013  Transaction ID: SA11AI.7892  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Ali Emamhosseini  Mailing Address 8370 Greensboro Drive  Apt #208  City  McLean  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify) ▼	State Zip Code VA 22102  C  Occupation Physician  Aggregate Year-to-Date ▼  500.00	Date of Receipt  11 25 2013  Transaction ID : SA11AI.7985  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Ali Emamhosseini  Mailing Address 8370 Greensboro Drive  Apt #208  City  McLean  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify)	State Zip Code VA 22102  C  Occupation Physician  Aggregate Year-to-Date ▼  550.00	Date of Receipt  12 24 2013  Transaction ID: SA11AI.8079  Amount of Each Receipt this Period  50.00  Payroll deduction
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	150.00
TOTAL This Period (last page this line numbe	er only)	

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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)  Dr. Ali Emamhosseini		Date of Receipt			
Mailing Address 8370 Greensboro Drive Apt #208		12 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City McLean	State Zip Code VA 22102	Transaction ID : SA11AI.8174  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  600.00				
Full Name (Last, First, Middle Initial)  Dr. Todd Epstein  Mailing Address 11305 Struttman Terrace	Or. Todd Epstein				
City North Bethesda	State Zip Code MD 20852	07 25 2013  Transaction ID : SA11AI.7606  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00				
Full Name (Last, First, Middle Initial)  Dr. Todd Epstein		Date of Receipt			
Mailing Address 11305 Struttman Terrace		08 23 2013			
City North Bethesda	State Zip Code MD 20852	Transaction ID : SA11AI.7705  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction			
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼  350.00				
SUBTOTAL of Receipts This Page (optional)		150.00			
TOTAL This Period (last page this line number	only)				

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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE		
Full Name (Last, First, Middle Initial)  Dr. Todd Epstein		Date of Receipt		
Mailing Address 11305 Struttman Terrace		09 25 2013		
City	State Zip Code	Transaction ID : SA11AI.7801		
North Bethesda	MD 20852	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer	Occupation	Payroll deduction		
First Colonies Anesthesia	Physician			
Receipt For:	Aggregate Year-to-Date ▼			
Primary General  Other (specify) ▼	400.00			
Full Name (Last, First, Middle Initial)  Dr. Todd Epstein		Date of Receipt		
Mailing Address 11305 Struttman Terrace		10 25 2013		
City	State Zip Code	Transaction ID : SA11AI.7895		
North Bethesda	MD 20852	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С	50.00 Payroll deduction		
Name of Employer	·			
First Colonies Anesthesia	Physician			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00			
Full Name (Last, First, Middle Initial)				
Dr. Todd Epstein		Date of Receipt		
Mailing Address 11305 Struttman Terrace  City	State Zip Code	11 25 2013		
North Bethesda	MD 20852	Transaction ID : SA11AI.7988  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer	Occupation	Payroll deduction		
First Colonies Anesthesia	Physician			
Receipt For:	Aggregate Year-to-Date ▼			
Primary General  Other (specify) ▼	500.00			
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	the name and address of any political committee				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)  Dr. Todd Epstein		Date of Receipt			
Mailing Address 11305 Struttman Terrace		12 24 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City	State Zip Code	Transaction ID : SA11AI.8086			
North Bethesda	MD 20852	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia	Physician				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General Other (specify) ▼	550.00				
Full Name (Last, First, Middle Initial)  Dr. Todd Epstein	1	Date of Receipt			
Mailing Address 11305 Struttman Terrace		M = M / D = D / Y = Y = Y			
City	State Zip Code	12 31 2013			
North Bethesda	MD 20852	Transaction ID : SA11AI.8179  Amount of Each Receipt this Period			
	2002	Amount of Lacif neceipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia	Physician				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00				
Full Name (Last, First, Middle Initial)  Dr. Richard Evans		Date of Receipt			
Mailing Address 6436 West Langley Lane		07 25 2013			
City	State Zip Code	Transaction ID : SA11AI.7602			
McLean	VA 22101	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia	Physician				
Receipt For:	Aggregate Year-to-Date ▼	1			
Primary General					
Other (specify) ▼	300.00				
SUBTOTAL of Receipts This Page (optional	)	150.00			
TOTAL This Period (last page this line numl	ber only)				

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or for commercial purposes, other than using t	the name and address of any political committee t	o solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE				
Full Name (Last, First, Middle Initial)  Dr. Richard Evans  Mailing Address 6436 West Langley Lane		Date of Receipt				
City McLean  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code VA 22101  C  Occupation Physician  Aggregate Year-to-Date ▼  350.00	Transaction ID : SA11AI.7701  Amount of Each Receipt this Period  50.00  Payroll deduction				
Full Name (Last, First, Middle Initial)  Dr. Richard Evans  Mailing Address 6436 West Langley Lane  City	State Zip Code	Date of Receipt  09 25 2013  Transaction ID: SA11AI.7797				
McLean  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For:	VA 22101  C Occupation Physician	Amount of Each Receipt this Period  50.00  Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00					
Full Name (Last, First, Middle Initial)  Dr. Richard Evans  Mailing Address 6436 West Langley Lane  City McLean  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code VA 22101  C Occupation Physician Aggregate Year-to-Date ▼ 450.00	Date of Receipt  10 25 2013  Transaction ID : SA11Al.7891  Amount of Each Receipt this Period  50.00  Payroll deduction				
SUBTOTAL of Receipts This Page (optional).		150.00				
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or for commercial purposes, other than using	the name and address of any political committee t	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Richard Evans  Mailing Address 6436 West Langley Lane		Date of Receipt
City McLean  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code VA 22101  C  Occupation Physician  Aggregate Year-to-Date ▼  500.00	Transaction ID : SA11AI.7984  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Richard Evans  Mailing Address 6436 West Langley Lane  City	State Zip Code	Date of Receipt  12 24 2013  Transaction ID: SA11Al.8078
McLean  FEC ID number of contributing federal political committee.	VA 22101	Amount of Each Receipt this Period 50.00
Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  550.00	Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Richard Evans  Mailing Address 6436 West Langley Lane  City	State Zip Code	Date of Receipt  12 31 2013  Transaction ID : SA11AI.8173
McLean  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General  Other (specify)	VA 22101  C Occupation Physician Aggregate Year-to-Date ▼ 600.00	Amount of Each Receipt this Period 50.00 Payroll deduction
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	150.00
TOTAL This Period (last page this line numb	er only)	

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

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Philip Ferkler  Mailing Address 4107 Vickie Lynn Court		Date of Receipt
		08 23 2013
City Mt. Airy	State Zip Code MD 21771	Transaction ID : SA11AI.7730  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  210.00	
Full Name (Last, First, Middle Initial)  Dr. Philip Ferkler  Mailing Address 4107 Vickie Lynn Court		Date of Receipt  09 25 2013
City Mt. Airy	State Zip Code MD 21771	Transaction ID : SA11AI.7846
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  30.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  240.00	
Full Name (Last, First, Middle Initial)  C. Dr. Philip Ferkler		Date of Receipt
Mailing Address 4107 Vickie Lynn Court		10 25 2013 _
City Mt. Airy	State Zip Code MD 21771	Transaction ID : SA11AI.7939  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  270.00	
SUBTOTAL of Receipts This Page (optional)		90.00
TOTAL This Period (last page this line number	only)	

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or for commercial purposes, other than using the	he name and address of any political committee to	o solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE				
Full Name (Last, First, Middle Initial)  A. Ronald Flax		Date of Receipt				
Mailing Address 3715 Birchmere Ct.	10 25 2013					
City Owings Mills	State Zip Code MD 21117	Transaction ID : SA11AI.7912  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	25.00				
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction				
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼  225.00					
Full Name (Last, First, Middle Initial)  Ronald Flax  Mailing Address 3715 Birchmere Ct.		Date of Receipt  11 25 2013				
City Owings Mills	State Zip Code MD 21117	Transaction ID : SA11AI.8006  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	25.00				
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00					
Full Name (Last, First, Middle Initial)  C. Ronald Flax	<u> </u>	Date of Receipt				
Mailing Address 3715 Birchmere Ct.		12 24 2013				
City Owings Mills	State Zip Code MD 21117	Transaction ID : SA11AI.8103  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	25.00				
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction				
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼  275.00					
SUBTOTAL of Receipts This Page (optional)	· • • • • • • • • • • • • • • • • • • •	75.00				
TOTAL This Period (last page this line number	er only)					

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	the name and address of any political committee				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)  A. Ronald Flax	Ronald Flax				
	Mailing Address 3715 Birchmere Ct.				
City Owings Mills	State Zip Code MD 21117	Transaction ID : SA11AI.8196			
FEC ID number of contributing federal political committee.	C 21117	Amount of Each Receipt this Period  25.00			
Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician  Aggregate Year-to-Date ▼	Payroll deduction			
Primary General  Other (specify) ▼	300.00				
Full Name (Last, First, Middle Initial)  3. Dr. Tamara Gabrielli		Date of Receipt			
Mailing Address 504 Reserve Champion Driv	07 25 2013 _				
City					
Rockville	MD 20850	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	50.00			
Name of Employer	Payroll deduction				
First Colonies Anesthesia	Physician				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00				
Full Name (Last, First, Middle Initial)  C. Dr. Tamara Gabrielli		Date of Receipt			
Mailing Address 504 Reserve Champion Dri	ve	08 23 2013			
City Rockville	State Zip Code MD 20850	Transaction ID : SA11AI.7729  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	50.00			
Name of Employer	Payroll deduction				
First Colonies Anesthesia					
Receipt For:	Aggregate Year-to-Date ▼				
Primary General  Other (specify) ▼	350.00				
SUBTOTAL of Receipts This Page (optional).	•	125.00			
TOTAL This Period (last page this line number	er only)				

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE		
Full Name (Last, First, Middle Initial)  Dr. Tamara Gabrielli  Mailing Address 504 Reserve Champion Drive	•	Date of Receipt		
City	State Zip Code	09 25 2013		
Rockville  FEC ID number of contributing federal political committee.	MD 20850	Amount of Each Receipt this Period 50.00		
Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician  Aggregate Year-to-Date ▼	Payroll deduction		
Primary General Other (specify) ▼	400.00			
Full Name (Last, First, Middle Initial)  3. Dr. Tamara Gabrielli  Mailing Address 504 Reserve Champion Drive	,	Date of Receipt  10 25 2013		
City Rockville	State Zip Code MD 20850	Transaction ID : SA11AI.7940  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00			
Full Name (Last, First, Middle Initial) Dr. Tamara Gabrielli		Date of Receipt		
Mailing Address 504 Reserve Champion Drive		11 25 2013		
City Rockville	State Zip Code MD 20850	Transaction ID : SA11AI.8032  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00			
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	150.00		
TOTAL This Period (last page this line number	only)			

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE		
Full Name (Last, First, Middle Initial)  Dr. Tamara Gabrielli  Mailing Address 504 Reserve Champion Drive	)	Date of Receipt		
City	State Zip Code	12 24 2013 Transaction ID : SA11AI.8129		
Rockville	MD 20850	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer	Occupation	Payroll deduction		
First Colonies Anesthesia Receipt For:	Physician			
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00			
Full Name (Last, First, Middle Initial)  Dr. Tamara Gabrielli  Mailing Address 504 Reserve Champion Drive		Date of Receipt		
City	State Zip Code	12 31 2013 Transaction ID : SA11AI.8223		
Rockville	MD 20850	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer First Colonies Anesthesia	Occupation	Payroll deduction		
Receipt For:	Physician			
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  600.00			
Full Name (Last, First, Middle Initial)  Thomas Gambon		Date of Receipt		
Mailing Address 7700 Charleston Dr.		07 25 2013		
City Bethesda	State Zip Code MD 20817	Transaction ID : SA11AI.7644  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer	Occupation	Payroll deduction		
First Colonies Anesthesia	Physician			
Receipt For: Primary General	Aggregate Year-to-Date ▼			
Other (specify)	300.00			
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	150.00		
TOTAL This Period (last page this line number	only)			

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Thomas Gambon		Date of Receipt
Mailing Address 7700 Charleston Dr.		08 23 2013
City Bethesda	State Zip Code MD 20817	Transaction ID : SA11AI.7764  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial)  Thomas Gambon  Mailing Address 7700 Charleston Dr.		Date of Receipt  09 25 2013
City Bethesda	State Zip Code MD 20817	Transaction ID : SA11AI.7858  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial)  Thomas Gambon		Date of Receipt
Mailing Address 7700 Charleston Dr.		10 25 2013
City Bethesda	State Zip Code MD 20817	Transaction ID : SA11AI.7952  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	150.00
TOTAL This Period (last page this line numbe	r only)	

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Thomas Gambon		Date of Receipt
Mailing Address 7700 Charleston Dr.		11 25 2013
City Bethesda	State Zip Code MD 20817	Transaction ID : SA11AI.8043  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial)  Thomas Gambon  Mailing Address 7700 Charleston Dr.		Date of Receipt  12 24 2013
City Bethesda	State Zip Code MD 20817	Transaction ID : SA11AI.8140  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial)  C. Thomas Gambon		Date of Receipt
Mailing Address 7700 Charleston Dr.		12 31 2013
City Bethesda	State Zip Code MD 20817	Transaction ID : SA11AI.8234  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  600.00	
SUBTOTAL of Receipts This Page (optional)	·····	150.00
TOTAL This Period (last page this line number	r only)	

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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Steven Grube  Mailing Address 13895 Foxtower Road		Date of Receipt
City Thurmont  FEC ID number of contributing federal political committee.  Name of Employer	State Zip Code MD 21788  C Occupation	07 25 2013  Transaction ID : SA11AI.7654  Amount of Each Receipt this Period  50.00  Payroll deduction
First Colonies Anesthesia  Receipt For:  Primary General  Other (specify)	Physician  Aggregate Year-to-Date ▼  300.00	-
Full Name (Last, First, Middle Initial)  Dr. Steven Grube  Mailing Address 13895 Foxtower Road	Stato 7in Codo	Date of Receipt  08 23 2013
City Thurmont  FEC ID number of contributing federal political committee.	State Zip Code MD 21788	Transaction ID : SA11AI.7728  Amount of Each Receipt this Period  50.00
Name of Employer First Colonies Anesthesia  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  350.00	Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Steven Grube  Mailing Address 13895 Foxtower Road  City	State Zip Code	Date of Receipt  09 25 2013  Transaction ID : SA11AI.7848
Thurmont  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  □ Primary □ General  □ Other (specify) ▼	MD 21788  C Occupation Physician  Aggregate Year-to-Date ▼  400.00	Amount of Each Receipt this Period  50.00  Payroll deduction
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line numb	er only)	

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Steven Grube  Mailing Address 13895 Foxtower Road		Date of Receipt
	Chale 7th Co-1-	10 25 2013
City Thurmont	State Zip Code MD 21788	Transaction ID : SA11AI.7941  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼	Physician  Aggregate Year-to-Date ▼  450.00	
Full Name (Last, First, Middle Initial) 3. Dr. Steven Grube  Mailing Address 13895 Foxtower Road		Date of Receipt  11 25 2013
City	State Zip Code MD 21788	Transaction ID : SA11AI.8033
Thurmont  FEC ID number of contributing federal political committee.	MD 21788	Amount of Each Receipt this Period  50.00
Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician	Payroll deduction
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial)  C. Dr. Steven Grube		Date of Receipt
Mailing Address 13895 Foxtower Road		12 24 _ 2013 _
City Thurmont	State Zip Code MD 21788	Transaction ID : SA11AI.8130  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  550.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number	r only)	

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Steven Grube  Mailing Address 13895 Foxtower Road		Date of Receipt
	7.0	12 31 2013
City Thurmont	State Zip Code MD 21788	Transaction ID : SA11AI.8224  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia  Receipt For:  Primary  Other (specify)	Physician  Aggregate Year-to-Date ▼  600.00	
Full Name (Last, First, Middle Initial)  Dr. Keith Hairston  Mailing Address 12312 Highstakes Drive		Date of Receipt  07 25 2013
City Reisterstown	State Zip Code MD 21136	Transaction ID : SA11AI.7624  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial)  Dr. Keith Hairston		Date of Receipt
Mailing Address 12312 Highstakes Drive		08 23 2013
City Reisterstown	State Zip Code MD 21136	Transaction ID : SA11AI.7756  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary  Other (specify)	Aggregate Year-to-Date ▼  350.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	150.00
TOTAL This Period (last page this line number	only)	

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or for commercial purposes, other than using	ng the name and address of any political committee t				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTI	HESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)  Dr. Keith Hairston		Date of Receipt			
Mailing Address 12312 Highstakes Drive		09 25 2013			
City	State Zip Code	Transaction ID : SA11AI.7820			
Reisterstown	MD 21136	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	- Payroll deduction			
First Colonies Anesthesia	Physician				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General  Other (specify) ▼	400.00				
Full Name (Last, First, Middle Initial)  3. Dr. Keith Hairston		Date of Receipt			
Mailing Address 12312 Highstakes Drive		M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y			
City	State Zip Code	10 25 2013 Transaction ID : SA11Al.7913			
Reisterstown	MD 21136	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia	Physician				
Receipt For:	Aggregate Year-to-Date ▼	1			
Primary General  Other (specify) ▼	450.00				
Full Name (Last, First, Middle Initial)		Date of Brazila			
Dr. Keith Hairston		Date of Receipt			
Mailing Address 12312 Highstakes Drive	1	11 25 2013			
City	State Zip Code	Transaction ID : SA11AI.8007			
Reisterstown	MD 21136	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia	Physician				
Receipt For:	Aggregate Year-to-Date ▼	1			
Primary General	00 0				
Other (specify) ▼	500.00				
SUBTOTAL of Receipts This Page (option	nal)	150.00			
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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Keith Hairston  Mailing Address 12312 Highstakes Drive		Date of Receipt
City Reisterstown  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For:  Primary General Other (specify)	State Zip Code MD 21136  C  Occupation Physician  Aggregate Year-to-Date ▼  550.00	Transaction ID : SA11AI.8104  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Keith Hairston  Mailing Address 12312 Highstakes Drive  City	State Zip Code	Date of Receipt  12 31 2013  Transaction ID : SA11AI.8197
Reisterstown  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For: Primary General	MD 21136  C Occupation Physician Aggregate Year-to-Date ▼	Amount of Each Receipt this Period  50.00  Payroll deduction
Other (specify)  Full Name (Last, First, Middle Initial)  Shelly Hairston  Mailing Address 12312 Highstakes Drive  City	State Zip Code	Date of Receipt  07 25 2013  Transaction ID: SA11AI.7660
Reisterstown  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General  Other (specify)	MD 21136  C Occupation Physician Aggregate Year-to-Date ▼	Amount of Each Receipt this Period  50.00  Payroll deduction
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	150.00
TOTAL This Period (last page this line number		

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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Shelly Hairston  Mailing Address 12312 Highstakes Drive		Date of Receipt
City Reisterstown	State Zip Code MD 21136	08 23 2013  Transaction ID : SA11AI.7734  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer  First Colonies Anesthesia  Receipt For:	Occupation Physician  Aggregate Veer to Date	Payroll deduction
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial)  Shelly Hairston  Mailing Address 12312 Highstakes Drive		Date of Receipt
City Reisterstown	State Zip Code MD 21136	7
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician	Payroll deduction
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial)  Shelly Hairston		Date of Receipt
Mailing Address 12312 Highstakes Drive	State Zip Code	10 25 2013
City Reisterstown	MD 21136	Transaction ID : SA11AI.7935  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	150.00
TOTAL This Period (last page this line numb	per only)	

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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Shelly Hairston		Date of Receipt
Mailing Address 12312 Highstakes Drive		11 25 2013
City	State Zip Code MD 21136	Transaction ID : SA11AI.8029
Reisterstown	IVID 21130	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	- Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)  3. Shelly Hairston		Date of Receipt
Mailing Address 12312 Highstakes Drive		12 24 2013 _
City	State Zip Code	Transaction ID : SA11AI.8126
Reisterstown	MD 21136	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial)  C. Shelly Hairston		Date of Receipt
Mailing Address 12312 Highstakes Drive		12 312013
City	State Zip Code	Transaction ID : SA11AI.8220
Reisterstown	MD 21136	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	600.00	
SUBTOTAL of Receipts This Page (optional)		150.00
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Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using	g the name and address of any political committee	to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	IESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE					
Full Name (Last, First, Middle Initial)  Dr. John Hanna  Mailing Address 9310 Leigh Mill Ct.	Dr. John Hanna						
City Great Falls FEC ID number of contributing	State Zip Code VA 22066	07 25 2013  Transaction ID : SA11AI.7607  Amount of Each Receipt this Period  50.00					
Receipt For:  Primary  Other (specify) ▼  Name of Employer  First Colonies Anesthesia  Receipt For:  General  Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  300.00	Payroll deduction					
Full Name (Last, First, Middle Initial)  Dr. John Hanna  Mailing Address 9310 Leigh Mill Ct.		Date of Receipt  08 23 2013					
City Great Falls  FEC ID number of contributing federal political committee.	State Zip Code VA 22066	Transaction ID : SA11AI.7706  Amount of Each Receipt this Period  50.00					
Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  350.00	Payroll deduction					
Full Name (Last, First, Middle Initial) Dr. John Hanna Mailing Address 9310 Leigh Mill Ct.  City	State Zip Code	Date of Receipt  09 25 2013  Transaction ID: SA11AI.7802					
Great Falls  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:	VA 22066  C Occupation Physician Aggregate Year-to-Date ▼	Amount of Each Receipt this Period  50.00  Payroll deduction					
Primary General  Other (specify) ▼	400.00						
SUBTOTAL of Receipts This Page (optional	<u>                                      </u>	150.00					
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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) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE					
Full Name (Last, First, Middle Initial)  Dr. John Hanna  Mailing Address 9310 Leigh Mill Ct.	Dr. John Hanna						
City Great Falls	State Zip Code VA 22066	10 25 2013  Transaction ID : SA11Al.7896					
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  50.00					
Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician	Payroll deduction					
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00						
Full Name (Last, First, Middle Initial)  3. Dr. John Hanna  Mailing Address 9310 Leigh Mill Ct.		Date of Receipt  11 25 2013					
City Great Falls	State Zip Code VA 22066	Transaction ID : SA11AI.7989  Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	50.00					
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00						
Full Name (Last, First, Middle Initial) Dr. John Hanna		Date of Receipt					
Mailing Address 9310 Leigh Mill Ct.	7. 0.1	12 24 2013					
City Great Falls	State Zip Code VA 22066	Transaction ID : SA11AI.8087  Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	50.00					
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00						
SUBTOTAL of Receipts This Page (optional	l) <b>&gt;</b>	150.00					
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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE				
Full Name (Last, First, Middle Initial)  Dr. John Hanna  Mailing Address 9310 Leigh Mill Ct.		Date of Receipt				
City	State Zip Code	12 31 2013 Transaction ID : SA11AI.8180				
Great Falls	VA 22066	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction				
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	600.00					
Full Name (Last, First, Middle Initial)  3. Dr. Glen Hessinger		Date of Receipt				
Mailing Address 8101 Ruxton Crossing Road	07 25 2013 _					
City	State Zip Code	Transaction ID : SA11AI.7625				
Towson	MD 21204	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer First Colonies Anesthesia	Payroll deduction					
Receipt For:	Physician	_				
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00					
Full Name (Last, First, Middle Initial)  Dr. Glen Hessinger		Date of Receipt				
Mailing Address 8101 Ruxton Crossing Road		08 23 2013 _				
City Towson	State Zip Code MD 21204	Transaction ID : SA11AI.7755				
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  50.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia	Physician					
Receipt For: Primary General	Aggregate Year-to-Date ▼					
Other (specify)	350.00					
SUBTOTAL of Receipts This Page (optional)		150.00				
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or for commercial purposes, other than using the		osolicit contributions from such committee.				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE				
Full Name (Last, First, Middle Initial)  Dr. Glen Hessinger  Mailing Address 8101 Ruxton Crossing Road						
	09 25 2013					
City Towson	State Zip Code MD 21204	Transaction ID : SA11AI.7821  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	50.00				
Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  General	Occupation Physician Aggregate Year-to-Date ▼	Payroll deduction				
Other (specify) ▼	400.00					
Full Name (Last, First, Middle Initial)  3. Dr. Glen Hessinger	Date of Receipt					
Mailing Address 8101 Ruxton Crossing Road	10 25 2013					
City	State Zip Code MD 21204	Transaction ID : SA11AI.7914				
Towson  FEC ID number of contributing federal political committee.	MD 21204	Amount of Each Receipt this Period  50.00				
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00					
Full Name (Last, First, Middle Initial)  Dr. Glen Hessinger		Date of Receipt				
Mailing Address 8101 Ruxton Crossing Road		11 25 2013				
City Towson	State Zip Code MD 21204	Transaction ID : SA11AI.8008  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia	Physician					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00					
SUBTOTAL of Receipts This Page (optional)		150.00				
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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE				
Full Name (Last, First, Middle Initial) Dr. Glen Hessinger  Mailing Address 8101 Ruxton Crossing Road		Date of Receipt				
City	State Zip Code MD 21204	12 24 2013 Transaction ID : SA11AI.8105				
Towson  FEC ID number of contributing federal political committee.	C 21204	Amount of Each Receipt this Period 50.00				
Name of Employer  First Colonies Anesthesia  Receipt For:	Occupation Physician Aggregate Year-to-Date ▼	Payroll deduction				
Primary General Other (specify) ▼	550.00					
Full Name (Last, First, Middle Initial)  Dr. Glen Hessinger  Mailing Address 8101 Ruxton Crossing Road		Date of Receipt  12 31 2013				
City Towson	State Zip Code MD 21204	Transaction ID : SA11AI.8198  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	50.00				
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  600.00					
Full Name (Last, First, Middle Initial)  Dr. Jean-Max Hogarth		Date of Receipt				
Mailing Address 1614 Randallwood Court		07 25 2013				
City Jarretsville	State Zip Code MD 21084	Transaction ID : SA11AI.7626  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00					
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or for commercial purposes, other than using the	e name and address of any political committee to				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	_ ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)  Dr. Jean-Max Hogarth  Mailing Address 1614 Randallwood Court		Date of Receipt  08 23 2013			
City	State Zip Code				
Jarretsville	MD 21084	Transaction ID : SA11AI.7754  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	50.00			
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00				
Full Name (Last, First, Middle Initial)  Dr. Jean-Max Hogarth  Mailing Address 4544 Pandelly and Court		Date of Receipt			
Mailing Address 1614 Randallwood Court  City  Jarretsville	State Zip Code MD 21084	09 25 2013 Transaction ID : SA11Al.7822			
FEC ID number of contributing federal political committee.	C 21004	Amount of Each Receipt this Period  50.00			
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00				
Full Name (Last, First, Middle Initial)  Dr. Jean-Max Hogarth		Date of Receipt			
Mailing Address 1614 Randallwood Court		10 25 2013			
City Jarretsville	State Zip Code MD 21084	Transaction ID : SA11AI.7915  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia	Physician				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00				
SUBTOTAL of Receipts This Page (optional)		150.00			
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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE				
Full Name (Last, First, Middle Initial)  Dr. Jean-Max Hogarth  Mailing Address 1614 Randallwood Court		Date of Receipt				
	Olaka 75 Olak	11 25 2013				
City Jarretsville	State Zip Code MD 21084	Transaction ID : SA11AI.8009  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia  Receipt For:  Primary  Other (specify)	Physician  Aggregate Year-to-Date ▼  500.00					
Full Name (Last, First, Middle Initial)  3. Dr. Jean-Max Hogarth  Mailing Address 1614 Randallwood Court		Date of Receipt  12 24 2013				
City Jarretsville	State Zip Code MD 21084	Transaction ID : SA11AI.8106  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00					
Full Name (Last, First, Middle Initial)  Dr. Jean-Max Hogarth		Date of Receipt				
Mailing Address 1614 Randallwood Court		12 31 2013 _				
City Jarretsville	State Zip Code MD 21084	Transaction ID : SA11AI.8199  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia Receipt For:	Physician  Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	Aggregate rear-to-Date ▼					
SUBTOTAL of Receipts This Page (optional)		150.00				
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or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES  Full Name (Last, First, Middle Initial) Dr. Sung Hong Mailing Address 8525 Huntspring Drive  City Lutherville  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For:  Primary General Other (specify)  Full Name (Last, First, Middle Initial)	State Zip Code MD 21093  C  Occupation Physician  Aggregate Year-to-Date  300.00	Date of Receipt  Date of Receipt  O7 25 2013  Transaction ID: SA11AI.7627  Amount of Each Receipt this Period  50.00  Payroll deduction
Mailing Address 8525 Huntspring Drive  City  Lutherville  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify) ▼	State Zip Code MD 21093  C  Occupation Physician  Aggregate Year-to-Date ▼  350.00	Date of Receipt  08 23 2013  Transaction ID: SA11AI.7753  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Sung Hong  Mailing Address 8525 Huntspring Drive  City Lutherville  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code MD 21093  C Occupation Physician  Aggregate Year-to-Date ▼	Date of Receipt  09 25 2013  Transaction ID : SA11AI.7823  Amount of Each Receipt this Period  50.00  Payroll deduction
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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)  A. Dr. Sung Hong  Mailing Address 8525 Huntspring Drive		Date of Receipt			
City	State Zip Code MD 21093	10 25 2013 Transaction ID : SA11AI.7916			
Lutherville FEC ID number of contributing federal political committee.	C 21093	Amount of Each Receipt this Period  50.00			
Name of Employer  First Colonies Anesthesia  Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  450.00	Payroll deduction			
Full Name (Last, First, Middle Initial)  Dr. Sung Hong  Mailing Address 8525 Huntspring Drive		Date of Receipt			
City Lutherville	State Zip Code MD 21093	Transaction ID : SA11AI.8010  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia	Occupation	50.00  Payroll deduction			
Receipt For:  Primary General  Other (specify) ▼	Physician  Aggregate Year-to-Date ▼  500.00	_			
Full Name (Last, First, Middle Initial)  Dr. Sung Hong  Mailing Address 8525 Huntspring Drive		Date of Receipt			
City Lutherville	State Zip Code MD 21093	Transaction ID : SA11AI.8107  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00				
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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE  Full Name (Last, First, Middle Initial) Dr. Sung Hong Mailing Address 8525 Huntspring Drive  City Lutherville  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For:	State Zip Code MD 21093  C  Occupation Physician  Aggregate Year-to-Date   Aggregate Year-to-Date	Date of Receipt  12 31 2013  Transaction ID: SA11AI.8200  Amount of Each Receipt this Period  50.00  Payroll deduction
Primary General Other (specify) ▼	600.00	
Full Name (Last, First, Middle Initial)  Dr. Steven Hopper  Mailing Address 4550 N. Park Avenue #101  City Chevy Chase  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code MD 20815  C  Occupation Physician  Aggregate Year-to-Date ▼  300.00	Date of Receipt  07 25 2013  Transaction ID: SA11AI.7608  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Steven Hopper  Mailing Address 4550 N. Park Avenue #101 City Chevy Chase  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For: Primary General Other (specify)	State Zip Code MD 20815  C  Occupation Physician  Aggregate Year-to-Date ▼  350.00	Date of Receipt    Mark
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or for commercial purposes, other than using t	he name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Steven Hopper  Mailing Address 4550 N. Park Avenue  #101  City Chevy Chase  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code MD 20815  C  Occupation Physician  Aggregate Year-to-Date ▼  400.00	Date of Receipt  99 25 2013  Transaction ID: SA11AI.7804  Amount of Each Receipt this Period  50.00  Payroll deduction
Mailing Address 4550 N. Park Avenue #101 City Chevy Chase FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For:  Primary General Other (specify) ▼	State Zip Code MD 20815  C  Occupation Physician  Aggregate Year-to-Date ▼  450.00	Date of Receipt  10 25 2013  Transaction ID: SA11AI.7897  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Steven Hopper  Mailing Address 4550 N. Park Avenue #101  City Chevy Chase  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code MD 20815  C  Occupation Physician  Aggregate Year-to-Date ▼  500.00	Date of Receipt  11 25 2013  Transaction ID: SA11AI.7990  Amount of Each Receipt this Period  50.00  Payroll deduction
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	ne name and address of any political committee to	
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Steven Hopper  Mailing Address 4550 N. Park Avenue  #101  City Chevy Chase  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code MD 20815  C  Occupation Physician  Aggregate Year-to-Date ▼  550.00	Date of Receipt  12 24 2013  Transaction ID: SA11AI.8088  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Steven Hopper  Mailing Address 4550 N. Park Avenue #101  City Chevy Chase  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code MD 20815  C  Occupation Physician  Aggregate Year-to-Date ▼  600.00	Date of Receipt  12 31 2013  Transaction ID: SA11AI.8181  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Stuart Hough  Mailing Address 9110 Travener Circle  City Frederick  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code MD 21704  C  Occupation Physician  Aggregate Year-to-Date ▼  450.00	Date of Receipt  O7 25 2013  Transaction ID: SA11AI.7580  Amount of Each Receipt this Period  75.00  Payroll deduction
SUBTOTAL of Receipts This Page (optional)		175.00
TOTAL This Period (last page this line numbe	r only)	

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Stuart Hough  Mailing Address 9110 Travener Circle		Date of Receipt
City	State Zip Code	08 23 2013 Transaction ID : SA11AI.7679
Frederick FEC ID number of contributing	MD 21704	Amount of Each Receipt this Period
federal political committee.	C	75.00 Payroll deduction
Name of Employer First Colonies Anesthesia	Occupation Physician	•
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	
Full Name (Last, First, Middle Initial)  Dr. Stuart Hough  Mailing Address 9110 Travener Circle	Date of Receipt	
City Frederick	State Zip Code MD 21704	09 25 2013  Transaction ID : SA11AI.7775  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 21704	75.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial)  Dr. Stuart Hough		Date of Receipt
Mailing Address 9110 Travener Circle		10 25 2013
City Frederick	State Zip Code MD 21704	Transaction ID : SA11AI.7869  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  675.00	
SUBTOTAL of Receipts This Page (optional)		225.00
TOTAL This Period (last page this line number	only)	

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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE					
Full Name (Last, First, Middle Initial)  Dr. Stuart Hough  Mailing Address 9110 Travener Circle		Date of Receipt					
City	State Zip Code	11 25 2013 Transaction ID : SA11AI.7963					
Frederick	MD 21704	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С	75.00					
Name of Employer	Occupation	Payroll deduction					
First Colonies Anesthesia Receipt For:	Physician  Acquagate Vear-to-Date ▼						
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  750.00						
Full Name (Last, First, Middle Initial)  3. Dr. Stuart Hough	Dr. Stuart Hough						
Mailing Address 9110 Travener Circle  City	State Zip Code	12 24 2013 The state of the sta					
Frederick	MD 21704	Transaction ID : SA11AI.8054  Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С	75.00					
Name of Employer First Colonies Anesthesia	Occupation	Payroll deduction					
Receipt For:	Physician  Accregate Vear-to-Date ▼						
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 825.00						
Full Name (Last, First, Middle Initial) Dr. Stuart Hough		Date of Receipt					
Mailing Address 9110 Travener Circle		12 31 2013					
City Frederick	State Zip Code MD 21704	Transaction ID : SA11AI.8151  Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	75.00					
Name of Employer	Occupation	Payroll deduction					
First Colonies Anesthesia Receipt For:	Physician						
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00						
□ Salot (Specify) ▼	300.00						
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	225.00					
TOTAL This Period (last page this line number	· only)						

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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHI	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  1. Leo Hsiao		Date of Receipt
Mailing Address 212 Washington Ave Apt. #1217		07 25 2013
City Towson	State Zip Code MD 21204	Transaction ID : SA11AI.7636
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	- Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial)  Leo Hsiao  Mailing Address 212 Washington Ave Apt. #1217	Date of Receipt  08 23 2013	
City Towson	State Zip Code MD 21204	Transaction ID : SA11AI.7745
FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period  50.00	
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial)  C. Leo Hsiao		Date of Receipt
Mailing Address 212 Washington Ave Apt. #1217		09 25 2013
City Towson	State Zip Code MD 21204	Transaction ID : SA11AI.7831  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional)		150.00
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TOTAL This Period (last page this line numb	per only)	

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

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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Leo Hsiao		Date of Receipt
Mailing Address 212 Washington Ave Apt. #1217 City	State Zip Code	10 25 2013 Transaction ID : SA11Al.7924
Towson	MD 21204	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	- Payroll deduction
First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify) ▼	Physician  Aggregate Year-to-Date ▼  450.00	-
Full Name (Last, First, Middle Initial)  3. Leo Hsiao		Date of Receipt
Mailing Address 212 Washington Ave Apt. #1217 City	11 25 2013	
Towson	State Zip Code MD 21204	Transaction ID : SA11AI.8018  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial)  Leo Hsiao		Date of Receipt
Mailing Address 212 Washington Ave Apt. #1217		12 24 2013
City Towson	State Zip Code MD 21204	Transaction ID : SA11AI.8115  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optional	)	150.00
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	he name and address of any political committee t	
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Leo Hsiao  Mailing Address 212 Washington Ave  Apt. #1217  City  Towson  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  Other (specify)   Full Name (Last, First, Middle Initial)	State Zip Code MD 21204  C  Occupation Physician  Aggregate Year-to-Date ▼  600.00	Date of Receipt  12 31 2013  Transaction ID: SA11AI.8208  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  3. Dr. Sean Isaac  Mailing Address 7 Starlight Farm Drive  City	State Zip Code	Date of Receipt  07 25 2013
Phoenix  FEC ID number of contributing federal political committee.	Transaction ID : SA11AI.7634  Amount of Each Receipt this Period  50.00	
Name of Employer  First Colonies Anesthesia  Receipt For:  □ Primary □ General  Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  300.00	Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Sean Isaac  Mailing Address 7 Starlight Farm Drive  City Phoenix  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code MD 21131  C  Occupation Physician  Aggregate Year-to-Date ▼  350.00	Date of Receipt  08 23 2013  Transaction ID: SA11AI.7747  Amount of Each Receipt this Period  50.00  Payroll deduction
SUBTOTAL of Receipts This Page (optional)	•	150.00
TOTAL This Period (last page this line number	er only)	

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or for commercial purposes, other than using the	ne name and address of any political committee to	o solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE					
Full Name (Last, First, Middle Initial)  Dr. Sean Isaac  Mailing Address 7 Starlight Farm Drive		Date of Receipt					
	Ohana Zin Orda	09 25 2013					
City Phoenix	State Zip Code MD 21131	Transaction ID : SA11AI.7829  Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	50.00					
Name of Employer	Occupation Physician	Payroll deduction					
First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  400.00						
Full Name (Last, First, Middle Initial)  3. Dr. Sean Isaac  Mailing Address 7 Starlight Farm Drive	Date of Receipt  10 25 2013						
City Phoenix	State Zip Code MD 21131	Transaction ID : SA11AI.7922					
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 50.00					
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deductionPayroll deduction					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00						
Full Name (Last, First, Middle Initial)  Dr. Sean Isaac		Date of Receipt					
Mailing Address 7 Starlight Farm Drive		11 25 2013 _					
City Phoenix	State Zip Code MD 21131	Transaction ID : SA11AI.8016  Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	50.00					
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00						
SUBTOTAL of Receipts This Page (optional)		150.00					
TOTAL This Period (last page this line number	r only)						

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or for commercial purposes, other than using	the name and address of any political committee t	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Sean Isaac  Mailing Address 7 Starlight Farm Drive		Date of Receipt
City Phoenix  FEC ID number of contributing federal political committee.	State Zip Code MD 21131	Transaction ID : SA11AI.8113  Amount of Each Receipt this Period  50.00
Name of Employer  First Colonies Anesthesia  Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  550.00	Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Sean Isaac  Mailing Address 7 Starlight Farm Drive  City	State Zip Code	Date of Receipt  12 31 2013
Phoenix  FEC ID number of contributing federal political committee.	MD 21131	Transaction ID : SA11AI.8206  Amount of Each Receipt this Period  50.00
Name of Employer First Colonies Anesthesia  Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  600.00	Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Supriya Jagannath  Mailing Address 9657 Atterbury Lane  City Frederick	State Zip Code MD 21704	Date of Receipt  10 25 2013  Transaction ID : SA11AI.7955
Frederick  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General  Other (specify)	Occupation Physician  Aggregate Year-to-Date   225.00	Amount of Each Receipt this Period  25.00  Payroll deduction
SUBTOTAL of Receipts This Page (optional)		125.00
TOTAL This Period (last page this line numb	per only)	

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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Supriya Jagannath  Mailing Address 9657 Atterbury Lane		Date of Receipt
City Frederick  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For:  □ Primary □ General □ Other (specify) ▼	State Zip Code MD 21704  C  Occupation Physician  Aggregate Year-to-Date ▼  250.00	Transaction ID : SA11AI.8046  Amount of Each Receipt this Period  25.00  Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Supriya Jagannath Mailing Address 9657 Atterbury Lane  City Frederick  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For:	State Zip Code MD 21704  C  Occupation Physician  Aggregate Year-to-Date ▼	Date of Receipt  12 24 2013  Transaction ID: SA11Al.8143  Amount of Each Receipt this Period  25.00  Payroll deduction
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)	275.00	Data of Booking
City Frederick  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For:  Primary  Other (specify)	State Zip Code MD 21704  C  Occupation Physician  Aggregate Year-to-Date ▼  300.00	Date of Receipt  12 31 2013  Transaction ID: SA11AI.8237  Amount of Each Receipt this Period  25.00  Payroll deduction
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	75.00
TOTAL This Period (last page this line numb	per only)	

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	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. David Johnson		Date of Receipt
Mailing Address 5506 Bootjack Drive		07 25 2013
City	State Zip Code	Transaction ID : SA11AI.7653
Frederick	MD 21702	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼  300.00	
Full Name (Last, First, Middle Initial)  Dr. David Johnson		Date of Receipt
Mailing Address 5506 Bootjack Drive		08 23 2013
City	State Zip Code	Transaction ID : SA11AI.7727
Frederick	MD 21702	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial)  Dr. David Johnson		Date of Receipt
Mailing Address 5506 Bootjack Drive		09 25 2013
City Frederick	State Zip Code MD 21702	Transaction ID : SA11AI.7849  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	400.00	
SUBTOTAL of Receipts This Page (optional)		150.00

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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. David Johnson		Date of Receipt
Mailing Address 5506 Bootjack Drive		10 25 2013
City Frederick	State Zip Code MD 21702	Transaction ID : SA11AI.7943  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial)  3. Dr. David Johnson  Mailing Address 5506 Bootjack Drive		Date of Receipt  11 25 2013
City Frederick	State Zip Code MD 21702	Transaction ID : SA11AI.8034  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial)  Dr. David Johnson		Date of Receipt
Mailing Address 5506 Bootjack Drive		12 24 2013 _
City Frederick	State Zip Code MD 21702	Transaction ID : SA11AI.8131  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	150.00
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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. David Johnson  Mailing Address 5506 Bootjack Drive		Date of Receipt
	Otata 7' O '	12 31 2013
City Frederick	State Zip Code MD 21702	Transaction ID : SA11AI.8225  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia  Receipt For:  Primary  Other (specify)	Physician  Aggregate Year-to-Date ▼  600.00	
Full Name (Last, First, Middle Initial)  Dr. James Kaufman  Mailing Address 7514 Arrowwood Road		Date of Receipt  07 25 2013
City Bethesda	State Zip Code MD 20817	Transaction ID : SA11AI.7609
FEC ID number of contributing federal political committee.	C 20817	Amount of Each Receipt this Period 50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial)  Dr. James Kaufman		Date of Receipt
Mailing Address 7514 Arrowwood Road		08 23 _ 2013 _
City Bethesda	State Zip Code MD 20817	Transaction ID : SA11AI.7708  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For:	Physician  Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	350.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number	only)	

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAL	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. James Kaufman		Date of Receipt
Mailing Address 7514 Arrowwood Road		09 25 2013
City Bethesda	State Zip Code MD 20817	Transaction ID : SA11AI.7805  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	- Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial)  Dr. James Kaufman  Mailing Address 7514 Arrowwood Road		Date of Receipt  10 25 2013
City Bethesda	State Zip Code MD 20817	Transaction ID : SA11AI.7898  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial)  Dr. James Kaufman		Date of Receipt
Mailing Address 7514 Arrowwood Road		11 25 2013
City Bethesda	State Zip Code MD 20817	Transaction ID : SA11AI.7991  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00	
SUBTOTAL of Receipts This Page (optional)	•	150.00
TOTAL This Period (last page this line number	only)	

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE				
Full Name (Last, First, Middle Initial)  Dr. James Kaufman		Date of Receipt				
Mailing Address 7514 Arrowwood Road		12 24 2013				
City Bethesda	State Zip Code MD 20817	Transaction ID : SA11AI.8089  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00					
Full Name (Last, First, Middle Initial)  3. Dr. James Kaufman  Mailing Address 7514 Arrowwood Road		Date of Receipt  12 31 2013				
City Bethesda	State Zip Code MD 20817	Transaction ID : SA11AI.8182  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00					
Full Name (Last, First, Middle Initial)  Dr. Cynthia Kenol		Date of Receipt				
Mailing Address 6579 Prestwick Drive		07 25 2013				
City Highland	State Zip Code MD 20777	Transaction ID : SA11AI.7581  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	50.00				
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  300.00					
SUBTOTAL of Receipts This Page (optional)		150.00				
TOTAL This Period (last page this line number	only)					

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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE				
Full Name (Last, First, Middle Initial)  Dr. Cynthia Kenol  Mailing Address 6579 Prestwick Drive  City	State Zip Code MD 20777	Date of Receipt  08 23 2013  Transaction ID : SA11AI.7680				
Highland  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  350.00	Amount of Each Receipt this Period  50.00  Payroll deduction				
Full Name (Last, First, Middle Initial)  Dr. Cynthia Kenol  Mailing Address 6579 Prestwick Drive  City  Highland  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify)	State Zip Code MD 20777  C  Occupation Physician  Aggregate Year-to-Date ▼  400.00	Date of Receipt    M				
Full Name (Last, First, Middle Initial)  Dr. Cynthia Kenol  Mailing Address 6579 Prestwick Drive  City  Highland  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify)	State Zip Code MD 20777  C  Occupation Physician  Aggregate Year-to-Date ▼  450.00	Date of Receipt  10 25 2013  Transaction ID: SA11AI.7870  Amount of Each Receipt this Period  50.00  Payroll deduction				
SUBTOTAL of Receipts This Page (optional)		150.00				
TOTAL This Period (last page this line numb	er only)					

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE				
Full Name (Last, First, Middle Initial)  Dr. Cynthia Kenol  Mailing Address 6579 Prestwick Drive		Date of Receipt				
	Olate 7: O. d.	11 25 2013				
City Highland	State Zip Code MD 20777	Transaction ID : SA11AI.7964  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify)	Physician  Aggregate Year-to-Date ▼  500.00					
Full Name (Last, First, Middle Initial)  3. Dr. Cynthia Kenol  Mailing Address 6579 Prestwick Drive		Date of Receipt  12 24 2013				
City	State Zip Code	Transaction ID : SA11AI.8055				
Highland  FEC ID number of contributing federal political committee.	MD 20777	Amount of Each Receipt this Period 50.00				
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00					
Full Name (Last, First, Middle Initial)  Dr. Cynthia Kenol		Date of Receipt				
Mailing Address 6579 Prestwick Drive		12 31 2013 _				
City Highland	State Zip Code MD 20777	Transaction ID : SA11AI.8152  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  600.00					
SUBTOTAL of Receipts This Page (optional)		150.00				
TOTAL This Period (last page this line number	only)					

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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHI	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE				
Full Name (Last, First, Middle Initial)  HaengShik Kim  Mailing Address 11429 Twining Lane		Date of Receipt				
City Potomac  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For:  Primary  Other (specify)	State Zip Code MD 20854  C  Occupation Physician  Aggregate Year-to-Date ▼	O7 25 2013  Transaction ID : SA11AI.7600  Amount of Each Receipt this Period  50.00  Payroll deduction				
Full Name (Last, First, Middle Initial)  HaengShik Kim  Mailing Address 11429 Twining Lane  City	State Zip Code	Date of Receipt  08 23 2013  Transaction ID: SA11AI.7699				
Potomac  FEC ID number of contributing federal political committee.  Name of Employer	MD 20854  C Occupation	Amount of Each Receipt this Period  50.00  Payroll deduction				
First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼	Physician  Aggregate Year-to-Date ▼  350.00	_				
Full Name (Last, First, Middle Initial) HaengShik Kim Mailing Address 11429 Twining Lane  City Potomac	State Zip Code MD 20854	Date of Receipt  09 25 2013  Transaction ID : SA11AI.7795				
Potomac  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  □ Primary □ General □ Other (specify) ▼	MD 20854  C  Occupation Physician  Aggregate Year-to-Date ▼  400.00	Amount of Each Receipt this Period  50.00  Payroll deduction				
SUBTOTAL of Receipts This Page (optional)	<b></b>	150.00				
TOTAL This Period (last page this line numb	per only)					

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE				
Full Name (Last, First, Middle Initial)  A. HaengShik Kim  Mailing Address 11429 Twining Lane		Date of Receipt				
		10 25 2013				
City Potomac	State Zip Code MD 20854	Transaction ID : SA11AI.7889  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia	Physician					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00					
Full Name (Last, First, Middle Initial)  HaengShik Kim  Mailing Address 11429 Twining Lane		Date of Receipt				
City	City State Zip Code					
Potomac	MD 20854	Transaction ID : SA11AI.7982  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer First Colonies Anesthesia	Occupation	Payroll deduction				
Receipt For:	Physician Data T					
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00					
Full Name (Last, First, Middle Initial)  . HaengShik Kim		Date of Receipt				
Mailing Address 11429 Twining Lane		12 24 2013 _				
City Potomac	State Zip Code MD 20854	Transaction ID : SA11AI.8076  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia	Physician					
Receipt For:  Primary  General	Aggregate Year-to-Date ▼					
Other (specify) ▼	550.00					
SUBTOTAL of Receipts This Page (optional)		150.00				
TOTAL This Period (last page this line numbe	r only)					

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  A. HaengShik Kim  Mailing Address 11429 Twining Lane		Date of Receipt
		12 31 2013
City Potomac	State Zip Code MD 20854	Transaction ID : SA11AI.8171  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial)  3. James Kim  Mailing Address 4808 Moorland Lane		Date of Receipt
Apt. #803	Chata 7'- O-4-	07 25 2013
City Bethesda	State Zip Code MD 20814	Transaction ID : SA11AI.7605  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 20014	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial)  James Kim		Date of Receipt
Mailing Address 4808 Moorland Lane Apt. #803		08 23 2013
City Bethesda	State Zip Code MD 20814	Transaction ID : SA11AI.7704  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	350.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	150.00
TOTAL This Period (last page this line numbe	r only)	

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or for commercial purposes, other than using the	ne name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  1. James Kim		Date of Receipt
Mailing Address 4808 Moorland Lane Apt. #803	Obelo 7: O l	09 25 2013
City Bethesda	State Zip Code MD 20814	Transaction ID : SA11AI.7800  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial)  James Kim  Mailing Address 4808 Moorland Lane  Apt. #803		Date of Receipt  10 25 2013
City Bethesda	State Zip Code MD 20814	Transaction ID : SA11AI.7894  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician  Aggregate Year-to-Date ▼	Payroll deduction
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial)  James Kim		Date of Receipt
Mailing Address 4808 Moorland Lane Apt. #803		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Bethesda	State Zip Code MD 20814	Transaction ID : SA11AI.7987  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00	
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	150.00
TOTAL This Period (last page this line number	r only)	

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or for commercial purposes, other than using	the name and address of any political committee t	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  James Kim  Mailing Address 4808 Moorland Lane		Date of Receipt
Apt. #803 City Bethesda	State Zip Code MD 20814	12 24 2013  Transaction ID : SA11AI.8083  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer  First Colonies Anesthesia  Receipt For:	Occupation Physician	- Payroll deduction
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial)  James Kim  Mailing Address 4808 Moorland Lane  Apt. #803		Date of Receipt  12 31 2013
City Bethesda	State Zip Code MD 20814	Transaction ID : SA11AI.8177  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician	Payroll deduction
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Dr. Richard Ko	•	Date of Receipt
Mailing Address 6795 Stockwell Manor Dri	ve State Zip Code	07 25 2013
City Falls Church	VA 22043	Transaction ID : SA11AI.7582  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional	)	150.00
TOTAL This Period (last page this line number	per only)	

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	g the name and address of any political committee				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	IESIA ASSOCIATES LLC POLITIC.	AL ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)  Dr. Richard Ko  Mailing Address 6795 Stockwell Manor Dr	ive	Date of Receipt			
		08 23 2013			
City Falls Church	State Zip Code VA 22043	Transaction ID : SA11AI.7681  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer  First Colonies Anesthesia  Receipt For:	Occupation Physician	Payroll deduction			
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00				
Full Name (Last, First, Middle Initial)  Dr. Richard Ko  Mailing Address ergs 8: 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		Date of Receipt			
Mailing Address 6795 Stockwell Manor Dri	ive	09 25 2013			
City Falls Church	State Zip Code VA 22043	Transaction ID : SA11AI.7777			
FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period  50.00				
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00				
Full Name (Last, First, Middle Initial)		Date of Receipt			
Mailing Address 6795 Stockwell Manor Dr	rive	10 25 2013			
City Falls Church	State Zip Code VA 22043	Transaction ID : SA11AI.7871  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00 Payroll deduction			
Name of Employer	Name of Employer Occupation				
First Colonies Anesthesia Receipt For:	Physician				
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00				
SUBTOTAL of Receipts This Page (ontional	il)	150.00			
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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) FIRST COLONIES ANESTHES	IA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)  Dr. Richard Ko  Mailing Address 6795 Stockwell Manor Drive		Date of Receipt			
City	State Zip Code	11 25 2013			
Falls Church	VA 22043	Transaction ID : SA11AI.7965  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	50.00			
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00				
Full Name (Last, First, Middle Initial)  3. Dr. Richard Ko  Mailing Address 6795 Stockwell Manor Drive		Date of Receipt			
City Falls Church	12   24     State   Zip Code   Transaction ID : SA11A     VA   22043   Amount of Each Receipt				
FEC ID number of contributing federal political committee.	С	50.00 Payroll deduction			
Name of Employer First Colonies Anesthesia	Occupation Physician	Fayron deduction			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00				
Full Name (Last, First, Middle Initial)  Dr. Richard Ko		Date of Receipt			
Mailing Address 6795 Stockwell Manor Drive		12 31 _ 2013 _			
City Falls Church	State Zip Code VA 22043	Transaction ID : SA11AI.8153  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia	Physician				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00				
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or for commercial purposes, other than usin	g the name and address of any political committee	
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	HESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  A. Dr. Harkisan Laheri  Mailing Address 11722 Split Tree Circle		Date of Receipt
City	State Zip Code	07 25 2013 Transaction ID : SA11AI.7583
Potomac  FEC ID number of contributing federal political committee.	MD 20854	Amount of Each Receipt this Period 50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify)	Physician  Aggregate Year-to-Date ▼  300.00	
B. Dr. Harkisan Laheri Mailing Address 11722 Split Tree Circle		Date of Receipt
City Potomac	State Zip Code MD 20854	08 23 2013  Transaction ID : SA11AI.7682  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial)  C. Dr. Harkisan Laheri		Date of Receipt
Mailing Address 11722 Split Tree Circle		09 25 2013
City Potomac	State Zip Code MD 20854	Transaction ID : SA11AI.7778  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For:	Physician	_
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional TOTAL This Period (last page this line num	al)	150.00

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	g the name and address of any political committee	
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Harkisan Laheri  Mailing Address 11722 Split Tree Circle		Date of Receipt
City	State Zip Code	10 25 2013 Transaction ID : SA11Al.7872
Potomac	MD 20854	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	450.00	
Full Name (Last, First, Middle Initial)  Dr. Harkisan Laheri	·	Date of Receipt
Mailing Address 11722 Split Tree Circle		1,1 25 2013 _
City	State Zip Code	Transaction ID : SA11AI.7966
Potomac	MD 20854	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Payroll deduction	
Receipt For:	Physician	_
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial)  Dr. Harkisan Laheri		Date of Receipt
Mailing Address 11722 Split Tree Circle		12 24 _ 2013 _
City Potomac	State Zip Code MD 20854	Transaction ID : SA11AI.8057  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify) ▼	550.00	
SUBTOTAL of Receipts This Page (optional	ı) <b>&gt;</b>	150.00
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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHI	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE		
Full Name (Last, First, Middle Initial)  Dr. Harkisan Laheri  Mailing Address 11722 Split Tree Circle		Date of Receipt		
City	State Zip Code	12 31 2013 Transaction ID : SA11AI.8154		
Potomac	MD 20854	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer	Occupation	Payroll deduction		
First Colonies Anesthesia Receipt For:	Physician Pale 7	_		
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00			
Full Name (Last, First, Middle Initial)  3. Dr. Kathleen Leavitt	1	Date of Receipt		
Mailing Address 3467 North Venice Street	07 25 2013			
City Arlington	State Zip Code VA 22207	Transaction ID : SA11AI.7610		
FEC ID number of contributing		Amount of Each Receipt this Period		
federal political committee.		50.00		
Name of Employer	Payroll deduction			
First Colonies Anesthesia	Physician			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00			
Full Name (Last, First, Middle Initial)  Dr. Kathleen Leavitt		Date of Receipt		
Mailing Address 3467 North Venice Street		08 23 2013 _		
City	State Zip Code	Transaction ID : SA11AI.7709		
Arlington	VA 22207	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer	Occupation	Payroll deduction		
First Colonies Anesthesia	Physician	_		
Receipt For:    Primary   General	Aggregate Year-to-Date ▼			
Other (specify) ▼	350.00			
SUBTOTAL of Receipts This Page (optional)	· 	150.00		
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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE		
Full Name (Last, First, Middle Initial) Dr. Kathleen Leavitt  Mailing Address 3467 North Venice Street		Date of Receipt  09 25 2013		
City	State Zip Code VA 22207	Transaction ID : SA11AI.7806		
Arlington  FEC ID number of contributing federal political committee.	VA 22207	Amount of Each Receipt this Period  50.00		
Name of Employer  First Colonies Anesthesia  Receipt For:  □ Primary □ General  Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  400.00	Payroll deduction		
Full Name (Last, First, Middle Initial)  Dr. Kathleen Leavitt  Mailing Address 3467 North Venice Street		Date of Receipt		
City Arlington FEC ID number of contributing	State Zip Code VA 22207	Transaction ID : SA11AI.7899  Amount of Each Receipt this Period  50.00		
Receipt For:    Primary   General	Occupation Physician  Aggregate Year-to-Date ▼	Payroll deduction		
Other (specify) ▼  Full Name (Last, First, Middle Initial)  Dr. Kathleen Leavitt  Mailing Address 3467 North Venice Street	450.00	Date of Receipt  11 25 2013		
City Arlington  FEC ID number of contributing federal political committee.	State Zip Code VA 22207	Transaction ID : SA11AI.7992  Amount of Each Receipt this Period  50.00		
Name of Employer  First Colonies Anesthesia  Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  500.00	Payroll deduction		
SUBTOTAL of Receipts This Page (optional)	<b>_</b>	150.00		
TOTAL This Period (last page this line numbe				

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

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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA		
/ TINOT GOLONIES ANEST ILOIA	A ASSOCIATES LLC POLITICAL	ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Kathleen Leavitt  Mailing Address 3467 North Venice Street		Date of Receipt
		12 24 2013
City Arlington	State Zip Code VA 22207	Transaction ID : SA11AI.8090
Arlington  FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 50.00
First Colonies Anesthesia F	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial)  3. Dr. Kathleen Leavitt  Mailing Address 3467 North Venice Street		Date of Receipt
City Arlington	State Zip Code VA 22207	12 31 2013  Transaction ID : SA11AI.8183  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  600.00	
Full Name (Last, First, Middle Initial)  Dr. Thomas Malone		Date of Receipt
Mailing Address 11667 Fairmont Place		07 25 2013
City Ijamsville	State Zip Code MD 21754	Transaction ID : SA11AI.7652  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
' '	Occupation	Payroll deduction
Possint For:	Physician	
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
SUBTOTAL of Receipts This Page (optional)		175.00

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	the name and address of any political committee					
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE				
Full Name (Last, First, Middle Initial)  Dr. Thomas Malone		Date of Receipt				
Mailing Address 11667 Fairmont Place	08 23 2013					
City	State Zip Code	Transaction ID : SA11AI.7726				
Ijamsville	MD 21754	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	75.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia	Physician					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	525.00					
Full Name (Last, First, Middle Initial)  3. Dr. Thomas Malone	'	Date of Receipt				
Mailing Address 11667 Fairmont Place		09 25 2013				
City	State Zip Code	Transaction ID : SA11AI.7850				
Ijamsville	MD 21754	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	75.00					
Name of Employer	Payroll deduction					
First Colonies Anesthesia	Physician					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  600.00					
Full Name (Last, First, Middle Initial)  Dr. Thomas Malone		Date of Receipt				
Mailing Address 11667 Fairmont Place		10 25 2013				
City	State Zip Code	Transaction ID : SA11AI.7944				
Ijamsville	MD 21754	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	75.00 Payroll deduction				
Name of Employer	Name of Employer Occupation					
First Colonies Anesthesia						
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	675.00					
SUBTOTAL of Receipts This Page (optional	)	225.00				
TOTAL This Period (last page this line numl	ber only)					

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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) FIRST COLONIES ANESTHES	IA ASSOCIATES LLC POLITICAL	_ ACTION COMMITTEE		
Full Name (Last, First, Middle Initial)  Dr. Thomas Malone  Mailing Address 11667 Fairmont Place		Date of Receipt		
City	11			
ljamsville	MD 21754	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	75.00		
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00			
Full Name (Last, First, Middle Initial)  3. Dr. Thomas Malone		Date of Receipt		
Mailing Address 11667 Fairmont Place	12 24 2013			
City Ijamsville	State Zip Code MD 21754	Transaction ID : SA11AI.8132  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	75.00		
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 825.00			
Full Name (Last, First, Middle Initial)  Dr. Thomas Malone		Date of Receipt		
Mailing Address 11667 Fairmont Place		12 312013		
City Ijamsville	State Zip Code MD 21754	Transaction ID : SA11AI.8226  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	75.00		
Name of Employer	Occupation	Payroll deduction		
First Colonies Anesthesia	Physician			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00			
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number of	<u>^</u> _	225.00		

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or for commercial purposes, other than using	the name and address of any political committee					
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE				
Full Name (Last, First, Middle Initial)  1. Dr. Mollyann March		Date of Receipt				
	Mailing Address 6504 Greentree Road					
City	State Zip Code MD 20817	Transaction ID : SA11AI.7611				
Bethesda	IVID 20017	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	75.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia	Physician					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General  Other (specify) ▼	450.00					
Full Name (Last, First, Middle Initial)  3. Dr. Mollyann March	·	Date of Receipt				
Mailing Address 6504 Greentree Road	M = M / D = D / Y = Y = Y					
City	08 23 2013 Transaction ID : SA11Al.7710					
Bethesda	State Zip Code MD 20817	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	75.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia	Physician					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00					
Full Name (Last, First, Middle Initial)  Dr. Mollyann March		Date of Receipt				
Mailing Address 6504 Greentree Road		09 25 _ 2013 _				
City	State Zip Code	Transaction ID : SA11AI.7807				
Bethesda	MD 20817	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	75.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia						
Receipt For:	Aggregate Year-to-Date ▼					
Primary General  Other (specify) ▼	600.00					
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	225.00				
TOTAL This Period (last page this line numb	er only)					

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or for commercial purposes, other than using	the name and address of any political committee					
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE				
Full Name (Last, First, Middle Initial)  Dr. Mollyann March		Date of Receipt				
Mailing Address 6504 Greentree Road		10 25 2013				
City	State Zip Code	Transaction ID : SA11AI.7900				
Bethesda	MD 20817	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	75.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia	Physician					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General  Other (specify) ▼	675.00					
Full Name (Last, First, Middle Initial)  3. Dr. Mollyann March	Dr. Mollyann March					
Mailing Address 6504 Greentree Road	M M / D D / Y Y Y Y Y					
City	State Zip Code	11252013 Transaction ID : SA11AI.7993				
Bethesda	MD 20817	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	75.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia	Physician					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00					
Full Name (Last, First, Middle Initial)  Dr. Mollyann March		Date of Receipt				
Mailing Address 6504 Greentree Road		12 242013				
City	State Zip Code	Transaction ID : SA11AI.8091				
Bethesda	MD 20817	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	75.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia						
Receipt For:	Aggregate Year-to-Date ▼					
Primary General  Other (specify) ▼	825.00					
SUBTOTAL of Receipts This Page (optional).		225.00				
TOTAL This Period (last page this line number	er only)					

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	g the name and address of any political committee				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	IESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)  Dr. Mollyann March  Mailing Address 6504 Greentree Road		Date of Receipt			
City	State Zip Code	12 31 2013			
Bethesda	MD 20817	Transaction ID : SA11AI.8184  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	75.00			
Name of Employer First Colonies Anesthesia	Occupation  Physician	Payroll deduction			
Receipt For:	Aggregate Year-to-Date ▼				
Primary General  Other (specify) ▼	900.00				
Full Name (Last, First, Middle Initial)  3. Dr. Stephen Martin	Date of Receipt				
Mailing Address 3336 O Street, NW	07 25 2013 _				
City	State Zip Code	07 25 2013 Transaction ID : SA11AI.7584			
Washington	DC 20007	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer First Colonies Anesthesia	Occupation	Payroll deduction			
Receipt For:	Physician	_			
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  300.00				
Full Name (Last, First, Middle Initial)  Dr. Stephen Martin		Date of Receipt			
Mailing Address 3336 O Street, NW		08 23 _ 2013 _			
City Washington	State Zip Code DC 20007	Transaction ID : SA11AI.7683  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia	Physician				
Receipt For:  Primary  General	Aggregate Year-to-Date ▼				
Other (specify) ▼	350.00				
SUBTOTAL of Receipts This Page (optional	ıl)	175.00			
TOTAL This Period (last page this line num	nber only)				

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

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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESIA ASSOCIATES LLC POLITICA  Full Name (Last, First, Middle Initial) Dr. Stephen Martin  Mailing Address 3336 O Street, NW  City State Zip Code	AL ACTION COMMITTEE  Date of Receipt		
A. Dr. Stephen Martin  Mailing Address 3336 O Street, NW	Date of Receipt		
	<b></b>		
City State Zip Code	09 25 2013		
	Transaction ID : SA11AI.7779		
Washington DC 20007	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	50.00		
Name of Employer Occupation	Payroll deduction		
First Colonies Anesthesia Physician			
Receipt For:  Primary  Other (specify) ▼  Aggregate Year-to-Date ▼  400.00			
Full Name (Last, First, Middle Initial)  3. Dr. Stephen Martin	Date of Receipt		
Mailing Address 3336 O Street, NW	10 25 2013		
City State Zip Code	Transaction ID : SA11AI.7873		
Washington DC 20007	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	50.00		
Name of Employer Occupation	Payroll deduction		
First Colonies Anesthesia Physician			
Receipt For:  Primary  Other (specify) ▼  Aggregate Year-to-Date ▼  450.00			
Full Name (Last, First, Middle Initial)  Dr. Stephen Martin	Date of Receipt		
Mailing Address 3336 O Street, NW	11 25 2013		
CityStateZip CodeWashingtonDC20007	Transaction ID : SA11AI.7967  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	50.00		
Name of Employer Occupation	Payroll deduction		
First Colonies Anesthesia Physician			
Receipt For:  Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼ 500.00			
SUBTOTAL of Receipts This Page (optional)	150.00		

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

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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)  Dr. Stephen Martin  Mailing Address 3336 O Street, NW		Date of Receipt			
	State Zip Code	12 24 2013			
City Washington	State Zip Code DC 20007	Transaction ID : SA11AI.8058  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia Receipt For:	Physician  Aggregate Veer to Date				
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00				
Full Name (Last, First, Middle Initial)  3. Dr. Stephen Martin	Date of Receipt				
Mailing Address 3336 O Street, NW  City	12 31 2013 Transaction ID - SA11AL 2455				
Washington	State Zip Code DC 20007	Transaction ID : SA11AI.8155  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	50.00			
Name of Employer First Colonies Anesthesia	Occupation	Payroll deduction			
Receipt For:	Physician  Aggregate Vegr to Date				
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00				
Full Name (Last, First, Middle Initial)  Comid Moayed		Date of Receipt			
Mailing Address 8913 Cherbourg Drive		07 25 2013			
City Potomac	State Zip Code MD 20854	Transaction ID : SA11AI.7596  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia Receipt For:	Physician				
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  300.00				
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	150.00			
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		name and address of any political committee to	
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSOCIATES LLC POLITICAL	_ ACTION COMMITTEE
Α.	Full Name (Last, First, Middle Initial) Omid Moayed		Date of Receipt
	Mailing Address 8913 Cherbourg Drive		08 23 2013
	City	State Zip Code	Transaction ID : SA11AI.7695
	Potomac	MD 20854	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer	Occupation	Payroll deduction
	First Colonies Anesthesia	Physician	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	Aggregate real-to-bate ▼	
	Other (specify)	350.00	
В.	Full Name (Last, First, Middle Initial) Omid Moayed		Date of Receipt
	Mailing Address 8913 Cherbourg Drive		09 25 2013
	City	State Zip Code	Transaction ID : SA11AI.7791
	Potomac	MD 20854	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	Aggregate fear-to-Date ▼	
	Other (specify) ▼	400.00	
<u> </u>	Full Name (Last, First, Middle Initial) Omid Moayed		Date of Receipt
	Mailing Address 8913 Cherbourg Drive		10 25 2013
	City	State Zip Code	Transaction ID : SA11AI.7885
	Potomac	MD 20854	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer	Occupation	Payroll deduction
	First Colonies Anesthesia	Physician	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	Aggregate real-to-bate •	
	Other (specify) ▼	450.00	
s	UBTOTAL of Receipts This Page (optional)		150.00
Т	OTAL This Period (last page this line number	only)	

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		name and address of any political committee to					
	NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSOCIATES LLC POLITICAI	_ ACTION COMMITTEE				
Α.	·		Date of Receipt				
	Mailing Address 8913 Cherbourg Drive		11 25 2013				
	City	State Zip Code	Transaction ID : SA11AI.7978				
	Potomac	MD 20854	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	50.00				
	Name of Employer	Occupation	Payroll deduction				
	First Colonies Anesthesia	Physician					
	Receipt For:	Aggregate Year-to-Date ▼					
	Primary General	Aggregate real-to-Date ▼					
	Other (specify)	500.00					
В.	Full Name (Last, First, Middle Initial) Omid Moayed		Date of Receipt				
	Mailing Address 8913 Cherbourg Drive		12 24 2013				
	City	State Zip Code	Transaction ID : SA11AI.8069				
	Potomac	MD 20854	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	50.00				
	Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction				
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00					
<u> </u>	Full Name (Last, First, Middle Initial) Omid Moayed		Date of Receipt				
	Mailing Address 8913 Cherbourg Drive		12 31 _ 2013 _				
	City	State Zip Code	Transaction ID : SA11AI.8166				
	Potomac	MD 20854	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	50.00				
	Name of Employer	Occupation	Payroll deduction				
	First Colonies Anesthesia	Physician					
	Receipt For:	Aggregate Year-to-Date ▼					
	Primary General	Aggregate Tour to Bate ¥					
	Other (specify) ▼	600.00					
S	SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	150.00				
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	the name and address of any political committee			
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE		
Full Name (Last, First, Middle Initial) Dr. Danielle Mossman  Mailing Address 3709 Falling Green Way		Date of Receipt		
City	State Zip Code	07		
Mt. Airy	MD 21771	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction		
Receipt For:	Aggregate Year-to-Date ▼	_		
Primary General Other (specify) ▼	300.00			
Full Name (Last, First, Middle Initial)  Dr. Danielle Mossman	•	Date of Receipt		
Mailing Address 3709 Falling Green Way		08 23 2013 _		
City	Mt. Airy MD 21771			
FEC ID number of contributing federal political committee.	С	50.00 Payroll deduction		
Name of Employer First Colonies Anesthesia	Occupation			
Receipt For:	Physician	_		
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00			
Full Name (Last, First, Middle Initial)  Dr. Danielle Mossman		Date of Receipt		
Mailing Address 3709 Falling Green Way		09 25 2013 _		
City Mt. Airy	State Zip Code MD 21771	Transaction ID : SA11AI.7844  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer	Occupation	Payroll deduction		
First Colonies Anesthesia	,			
Receipt For:    Primary   General	Aggregate Year-to-Date ▼			
Other (specify) ▼	400.00			
SUBTOTAL of Receipts This Page (optional	) <b>&gt;</b>	150.00		
TOTAL This Period (last page this line num	ber only)			

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Danielle Mossman  Mailing Address 3709 Falling Green Way		Date of Receipt
		10 25 2013
City Mt. Airy	State Zip Code MD 21771	Transaction ID : SA11AI.7937  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial)  Dr. Danielle Mossman  Mailing Address 3709 Falling Green Way		Date of Receipt  11 25 2013
City Mt. Airy	State Zip Code MD 21771	Transaction ID : SA11AI.8031  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial)  C. Dr. Danielle Mossman		Date of Receipt
Mailing Address 3709 Falling Green Way		12 242013
City Mt. Airy	State Zip Code MD 21771	Transaction ID : SA11AI.8128  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  550.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number	only)	

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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.

or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Danielle Mossman  Mailing Address 3709 Falling Green Way		Date of Receipt
City	State Zip Code	12 31 2013 Transaction ID : SA11AI.8222
Mt. Airy	MD 21771	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  600.00	
Full Name (Last, First, Middle Initial)  Dr. Thomas Munro  Mailing Address 15310 Forest Lake Court		Date of Receipt  07 25 2013
City Darnestown	State Zip Code MD 20874	Transaction ID : SA11AI.7643  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial)  Dr. Thomas Munro		Date of Receipt
Mailing Address 15310 Forest Lake Court		08 23 2013
City Darnestown	State Zip Code MD 20874	Transaction ID : SA11AI.7765  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	75.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼  525.00	
SUBTOTAL of Receipts This Page (optional)		200.00
TOTAL This Period (last page this line number	only)	

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or for commercial purposes, other than using the	e name and address of any political committee to			
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	_ ACTION COMMITTEE		
Full Name (Last, First, Middle Initial)  Dr. Thomas Munro  Mailing Address, 15310 Forcet Lake Court		Date of Receipt		
Mailing Address 15310 Forest Lake Court		09 25 2013		
City  Darnestown	State Zip Code MD 20874	Transaction ID : SA11AI.7859		
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 75.00		
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00			
Full Name (Last, First, Middle Initial)  Dr. Thomas Munro  Mailing Address 15310 Forest Lake Court		Date of Receipt		
City  Darnestown	State Zip Code			
FEC ID number of contributing federal political committee.	C	75.00 Payroll deduction		
Name of Employer First Colonies Anesthesia	Occupation Physician			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00			
Full Name (Last, First, Middle Initial)  Dr. Thomas Munro		Date of Receipt		
Mailing Address 15310 Forest Lake Court		11 25 2013		
City Darnestown	State Zip Code MD 20874	Transaction ID : SA11AI.8044  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	75.00		
Name of Employer	Occupation	Payroll deduction		
First Colonies Anesthesia				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00			
SUBTOTAL of Receipts This Page (optional)	_	225.00		
TOTAL This Period (last page this line number	<u> </u>			

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Thomas Munro  Mailing Address 15310 Forest Lake Court		Date of Receipt
City	State Zip Code	12 24 2013 Transaction ID : SA11AI.8141
Darnestown	MD 20874	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia  Receipt For:  Primary  Other (specify)	Physician  Aggregate Year-to-Date ▼  825.00	
Full Name (Last, First, Middle Initial)  Dr. Thomas Munro  Mailing Address 15310 Forest Lake Court	Chale T. C.	Date of Receipt  12 31 2013
City Darnestown	State Zip Code MD 20874	Transaction ID : SA11AI.8235  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	
Full Name (Last, First, Middle Initial)  Dr. Anna Noriega-Nalls		Date of Receipt
Mailing Address 603 Queen Street #4		07 25 2013
City Alexandria	State Zip Code VA 22314	Transaction ID : SA11AI.7585  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For:	Physician  Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate real-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optional)		250.00
TOTAL This Period (last page this line number	only)	

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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Anna Noriega-Nalls  Mailing Address 603 Queen Street  #4  City Alexandria  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code VA 22314  C  Occupation Physician  Aggregate Year-to-Date ▼  700.00	Date of Receipt  08 23 2013  Transaction ID : SA11AI.7684  Amount of Each Receipt this Period  100.00  Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Anna Noriega-Nalls  Mailing Address 603 Queen Street #4  City Alexandria  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For: Primary General Other (specify)	State Zip Code VA 22314  C  Occupation Physician  Aggregate Year-to-Date ▼  800.00	Date of Receipt  109 25 2013  Transaction ID: SA11AI.7780  Amount of Each Receipt this Period  100.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Anna Noriega-Nalls  Mailing Address 603 Queen Street  #4  City Alexandria  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify)	State Zip Code VA 22314  C  Occupation Physician  Aggregate Year-to-Date ▼  900.00	Date of Receipt  10 25 2013  Transaction ID: SA11AI.7874  Amount of Each Receipt this Period  100.00  Payroll deduction
SUBTOTAL of Receipts This Page (optional	) <b>&gt;</b>	300.00
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	the name and address of any political committee t	
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Anna Noriega-Nalls  Mailing Address 603 Queen Street  #4  City Alexandria  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code VA 22314  C  Occupation Physician  Aggregate Year-to-Date ▼  1000.00	Date of Receipt  11 25 2013  Transaction ID : SA11AI.7968  Amount of Each Receipt this Period  100.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Anna Noriega-Nalls  Mailing Address 603 Queen Street  #4  City  Alexandria  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify)	State Zip Code VA 22314  C  Occupation Physician  Aggregate Year-to-Date ▼  1100.00	Date of Receipt  12 24 2013  Transaction ID: SA11AI.8059  Amount of Each Receipt this Period  100.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Anna Noriega-Nalls  Mailing Address 603 Queen Street  #4  City Alexandria  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify)	State Zip Code VA 22314  C  Occupation Physician  Aggregate Year-to-Date ▼  1200.00	Date of Receipt  12 31 2013  Transaction ID: SA11AI.8156  Amount of Each Receipt this Period  100.00  Payroll deduction
SUBTOTAL of Receipts This Page (optional	) <b>&gt;</b>	300.00
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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	IESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE				
Full Name (Last, First, Middle Initial)  Dr. Denis O'Fallon  Mailing Address 12123 Merricks Court	Dr. Denis O'Fallon					
City	State Zip Code	07 25 2013 Transaction ID : SA11Al.7651				
Monrovia	MD 21770	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction				
Receipt For:	Aggregate Year-to-Date ▼	7				
Primary General  Other (specify) ▼	300.00					
Full Name (Last, First, Middle Initial)  Dr. Denis O'Fallon		Date of Receipt				
Mailing Address 12123 Merricks Court	08 23 _2013 _					
City	State Zip Code	Transaction ID : SA11AI.7725				
Monrovia	MD 21770	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer First Colonies Anesthesia	Occupation	Payroll deduction				
Receipt For:	Physician	_				
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  350.00					
Full Name (Last, First, Middle Initial)  Dr. Denis O'Fallon		Date of Receipt				
Mailing Address 12123 Merricks Court		09 25 2013				
City Monrovia	State Zip Code MD 21770	Transaction ID : SA11AI.7851  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia	Physician	_				
Receipt For:  Primary  General	Aggregate Year-to-Date ▼					
Other (specify) ▼	400.00					
SUBTOTAL of Receipts This Page (optional	ul)	150.00				
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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE		
Full Name (Last, First, Middle Initial)  Dr. Denis O'Fallon  Mailing Address 12123 Merricks Court		Date of Receipt		
City	State Zip Code MD 21770	10 25 2013 Transaction ID : SA11AI.7945		
Monrovia  FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  50.00		
Name of Employer  First Colonies Anesthesia  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  450.00	Payroll deduction		
Full Name (Last, First, Middle Initial)  Dr. Denis O'Fallon  Mailing Address 12123 Merricks Court		Date of Receipt		
City Monrovia FEC ID number of contributing	Transaction ID : SA11AI.8036  Amount of Each Receipt this Period			
Receipt For:  Primary  General	Occupation Physician Aggregate Year-to-Date ▼	50.00  Payroll deduction		
Other (specify) ▼  Full Name (Last, First, Middle Initial)  Dr. Denis O'Fallon	500.00	Date of Receipt		
Mailing Address 12123 Merricks Court  City	State Zip Code	12 24 2013 Transaction ID : SA11Al.8133		
Monrovia  FEC ID number of contributing federal political committee.	MD 21770	Amount of Each Receipt this Period  50.00		
Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  550.00	Payroll deduction		
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	150.00		
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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAL	_ ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Denis O'Fallon  Mailing Address 12123 Merricks Court  City  Monrovia  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  General	State Zip Code MD 21770  C  Occupation Physician  Aggregate Year-to-Date ▼	Date of Receipt  12 31 2013  Transaction ID: SA11AI.8227  Amount of Each Receipt this Period  50.00  Payroll deduction
Other (specify) ▼  Full Name (Last, First, Middle Initial)	600.00	
Mailing Address 141 Adams Street, NW  City Washington  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code DC 20001  C  Occupation Physician  Aggregate Year-to-Date ▼  300.00	Date of Receipt  07 25 2013  Transaction ID : SA11AI.7586  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Philip Owens  Mailing Address 141 Adams Street, NW  City Washington  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code DC 20001  C  Occupation Physician  Aggregate Year-to-Date ▼	Date of Receipt  08 23 2013  Transaction ID: SA11AI.7685  Amount of Each Receipt this Period  50.00  Payroll deduction
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	150.00
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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.

or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE		
Full Name (Last, First, Middle Initial)  Dr. Philip Owens  Mailing Address 141 Adams Street, NW		Date of Receipt		
City	State Zip Code	09 25 2013		
Washington	DC 20001	Transaction ID : SA11AI.7781  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer	Occupation	Payroll deduction		
First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify)	Physician  Aggregate Year-to-Date ▼  400.00			
Full Name (Last, First, Middle Initial)  Dr. Philip Owens  Mailing Address 141 Adams Street, NW		Date of Receipt  10 25 2013		
City	State Zip Code DC 20001	Transaction ID : SA11AI.7875		
Washington  FEC ID number of contributing federal political committee.	C 20001	Amount of Each Receipt this Period 50.00		
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00			
Full Name (Last, First, Middle Initial)  Dr. Philip Owens		Date of Receipt		
Mailing Address 141 Adams Street, NW		11 25 2013 _		
City Washington	State Zip Code DC 20001	Transaction ID : SA11AI.7969  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00			
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	150.00		
TOTAL This Period (last page this line number	<u> </u>			

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or for commercial purposes, other than using	the name and address of any political committee t	to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE					
Full Name (Last, First, Middle Initial)  Dr. Philip Owens  Mailing Address 141 Adams Street, NW	Dr. Philip Owens						
City Washington  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  □ Primary □ General □ Other (specify) ▼	State Zip Code DC 20001  C  Occupation Physician  Aggregate Year-to-Date ▼  550.00	12 24 2013  Transaction ID : SA11AI.8060  Amount of Each Receipt this Period  50.00  Payroll deduction					
Full Name (Last, First, Middle Initial)  3. Dr. Philip Owens  Mailing Address 141 Adams Street, NW  City	State Zip Code	Date of Receipt  12 31 2013  Transaction ID: SA11AI.8157					
Washington  FEC ID number of contributing federal political committee.  Name of Employer	DC 20001  C Occupation	Amount of Each Receipt this Period  50.00  Payroll deduction					
First Colonies Anesthesia  Receipt For:  Primary General  Other (specify)	Physician  Aggregate Year-to-Date ▼  600.00	_					
Full Name (Last, First, Middle Initial) Dr. Kent Ozkum  Mailing Address 10720 Dern Road  City	State Zip Code	Date of Receipt    M = M					
Emmitsburg  FEC ID number of contributing federal political committee.  Name of Employer	MD 21727  C Occupation	Amount of Each Receipt this Period  50.00  Payroll deduction					
First Colonies Anesthesia  Receipt For:  Primary General  Other (specify)	Physician  Aggregate Year-to-Date ▼  300.00						
SUBTOTAL of Receipts This Page (optional)		150.00					
TOTAL This Period (last page this line numb	er only)						

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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	HESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE		
Full Name (Last, First, Middle Initial)  Or. Kent Ozkum  Mailing Address 10720 Dern Road		Date of Receipt		
		08 23 2013		
City Emmitsburg	State Zip Code MD 21727	Transaction ID : SA11AI.7766		
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  50.00		
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00			
Full Name (Last, First, Middle Initial)  Dr. Kent Ozkum  Mailing Address 40700 Pers Parallel	·	Date of Receipt		
Mailing Address 10720 Dern Road  City	State Zip Code	09 25 2013 Transaction ID : SA11Al.7860		
Emmitsburg	MD 21727	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00			
Full Name (Last, First, Middle Initial)  Dr. Kent Ozkum		Date of Receipt		
Mailing Address 10720 Dern Road		10 25 2013		
City Emmitsburg	State Zip Code MD 21727	Transaction ID : SA11AI.7954  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer	Occupation	Payroll deduction		
First Colonies Anesthesia	Physician			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00			
SUBTOTAL of Receipts This Page (options	al)	150.00		
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117	e name and address of any political committee to	o solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE		
Full Name (Last, First, Middle Initial)  1. Dr. Kent Ozkum		Date of Receipt		
Mailing Address 10720 Dern Road		11 25 2013		
City Emmitsburg	State Zip Code MD 21727	Transaction ID : SA11AI.8045		
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 50.00		
Name of Employer First Colonies Anesthesia	Occupation Physician	- Payroll deduction		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00			
Full Name (Last, First, Middle Initial)  Dr. Kent Ozkum  Mailing Address 10720 Dern Road		Date of Receipt		
City Emmitsburg	State Zip Code MD 21727	12 24 2013  Transaction ID : SA11Al.8142  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00 Payroll deduction		
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00			
Full Name (Last, First, Middle Initial)  Dr. Kent Ozkum		Date of Receipt		
Mailing Address 10720 Dern Road		12 31 _ 2013 _		
City Emmitsburg	State Zip Code MD 21727	Transaction ID : SA11AI.8236  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer	Occupation	Payroll deduction		
First Colonies Anesthesia	Physician			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00			
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number	<u> </u>	150.00		

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or for commercial purposes, other than using	the name and address of any political committee t	to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE		
Full Name (Last, First, Middle Initial)  Dr. Paul Park  Mailing Address 510 Golden Oak Terrace		Date of Receipt		
City Rockville  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For:	State Zip Code MD 20850  C  Occupation Physician  Aggregate Year-to-Date ▼	07 25 2013  Transaction ID : SA11AI.7587  Amount of Each Receipt this Period  50.00  Payroll deduction		
Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial)	300.00			
Dr. Paul Park  Mailing Address 510 Golden Oak Terrace		Date of Receipt  08 23 2013		
City  Rockville  FEC ID number of contributing	State Zip Code MD 20850	Transaction ID : SA11AI.7686  Amount of Each Receipt this Period  50.00		
Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician  Aggregate Year-to-Date ▼	Payroll deduction		
Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial)	350.00			
Dr. Paul Park  Mailing Address 510 Golden Oak Terrace		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Rockville	State Zip Code MD 20850	Transaction ID : SA11AI.7782  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	Occupation	50.00 Payroll deduction		
Name of Employer  First Colonies Anesthesia  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  400.00			
SUBTOTAL of Receipts This Page (optional)	····	150.00		
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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE		
Full Name (Last, First, Middle Initial)  Dr. Paul Park  Mailing Address 510 Golden Oak Terrace		Date of Receipt		
		10 25 2013		
City Rockville	State Zip Code MD 20850	Transaction ID : SA11AI.7876  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction		
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼  450.00			
Full Name (Last, First, Middle Initial)  3. Dr. Paul Park  Mailing Address 510 Golden Oak Terrace		Date of Receipt		
City Rockville	State Zip Code MD 20850	Transaction ID : SA11AI.7970  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C 20030	50.00		
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00			
Full Name (Last, First, Middle Initial)  Dr. Paul Park		Date of Receipt		
Mailing Address 510 Golden Oak Terrace		12 24 2013 _		
City Rockville	State Zip Code MD 20850	Transaction ID : SA11AI.8061  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction		
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼  550.00			
SUBTOTAL of Receipts This Page (optional)	·····	150.00		
TOTAL This Period (last page this line number	only)			

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Paul Park		Date of Receipt
Mailing Address 510 Golden Oak Terrace		12 31 2013
City Rockville	State Zip Code MD 20850	Transaction ID : SA11AI.8158  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  600.00	
Full Name (Last, First, Middle Initial)  Dr. Kestutis Pauliukonis  Mailing Address 1813 Solitaire Lane		Date of Receipt  07 25 2013
City McLean	State Zip Code VA 22101	Transaction ID : SA11AI.7588  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial)  Dr. Kestutis Pauliukonis		Date of Receipt
Mailing Address 1813 Solitaire Lane		08 23 2013
City McLean	State Zip Code VA 22101	Transaction ID : SA11AI.7687  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  350.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	150.00
TOTAL This Period (last page this line number	only)	

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)  Dr. Kestutis Pauliukonis  Mailing Address 1813 Solitaire Lane		Date of Receipt  09 25 2013  Transaction ID: SA11AI.7783			
City McLean	State Zip Code VA 22101				
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  50.00			
Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician  Aggregate Year-to-Date ▼	Payroll deduction			
Primary General Other (specify) ▼	400.00				
Full Name (Last, First, Middle Initial)  3. Dr. Kestutis Pauliukonis  Mailing Address 1813 Solitaire Lane		Date of Receipt  10 25 2013			
City McLean	State Zip Code VA 22101	Transaction ID : SA11AI.7877  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00				
Full Name (Last, First, Middle Initial)  Dr. Kestutis Pauliukonis		Date of Receipt			
Mailing Address 1813 Solitaire Lane		11 25 2013			
City McLean	State Zip Code VA 22101	Transaction ID : SA11AI.7971  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00				
SUBTOTAL of Receipts This Page (optional)		150.00			
TOTAL This Period (last page this line numbe	r only)				

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Kestutis Pauliukonis  Mailing Address 1813 Solitaire Lane		Date of Receipt
City	State Zip Code VA 22101	12 24 2013 Transaction ID : SA11AI.8062
McLean  FEC ID number of contributing federal political committee.	VA 22101	Amount of Each Receipt this Period 50.00
Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  General	Occupation Physician  Aggregate Year-to-Date ▼	Payroll deduction
Other (specify) ▼	550.00	
Full Name (Last, First, Middle Initial)  3. Dr. Kestutis Pauliukonis  Mailing Address 1813 Solitaire Lane		Date of Receipt  12 31 2013
City McLean	State Zip Code VA 22101	Transaction ID : SA11AI.8159  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial)  Dr. Michael Peck		Date of Receipt
Mailing Address 4 Farm Haven Court		07 25 2013
City Rockville	State Zip Code MD 20852	Transaction ID : SA11AI.7612  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	175.00
TOTAL This Period (last page this line numbe	r only)	

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or for commercial purposes, other than using	the name and address of any political committee t	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Michael Peck  Mailing Address 4 Farm Haven Court		Date of Receipt
City Rockville	State Zip Code MD 20852	08 23 2013  Transaction ID : SA11AI.7713  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00 Payroll deduction
Name of Employer  First Colonies Anesthesia  Receipt For:	Occupation Physician  Aggregate Veer to Date	_
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	
Full Name (Last, First, Middle Initial)  3. Dr. Michael Peck  Mailing Address 4 Farm Haven Court		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Rockville	State Zip Code MD 20852	Transaction ID : SA11AI.7808  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  600.00	
Full Name (Last, First, Middle Initial)  Dr. Michael Peck		Date of Receipt
Mailing Address 4 Farm Haven Court	State Zip Code	10 25 2013
City Rockville	MD 20852	Transaction ID : SA11AI.7901  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00 Payroll deduction
Name of Employer First Colonies Anesthesia	Occupation Physician	- Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	
SUBTOTAL of Receipts This Page (optional	)	225.00
TOTAL This Period (last page this line num	ber only)	

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or for commercial purposes, other than using t	he name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Michael Peck  Mailing Address 4 Farm Haven Court		Date of Receipt
City Rockville  FEC ID number of contributing federal political committee.  Name of Employer	State Zip Code MD 20852  C Occupation	Transaction ID : SA11AI.7995  Amount of Each Receipt this Period  75.00  Payroll deduction
First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼	Physician  Aggregate Year-to-Date ▼  750.00	_
Full Name (Last, First, Middle Initial)  Dr. Michael Peck  Mailing Address 4 Farm Haven Court  City	State Zip Code	Date of Receipt  12 24 2013
Rockville  FEC ID number of contributing federal political committee.	MD 20852	Transaction ID : SA11AI.8092  Amount of Each Receipt this Period  75.00
Name of Employer First Colonies Anesthesia  Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  825.00	Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Michael Peck  Mailing Address 4 Farm Haven Court  City  Rockville  FEC ID number of contributing federal political committee.	State Zip Code MD 20852	Date of Receipt  12 31 2013  Transaction ID : SA11AI.8185  Amount of Each Receipt this Period  75.00
Name of Employer  First Colonies Anesthesia  Receipt For:  □ Primary □ General  Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  900.00	Payroll deduction
SUBTOTAL of Receipts This Page (optional).		225.00
TOTAL This Period (last page this line number	er only)	

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	the name and address of any political committee				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)  Dr. Ramani Peruvemba  Mailing Address 8302 Fox Haven Drive		Date of Receipt  07 25 2013			
City McLean	State Zip Code VA 22102	Transaction ID : SA11AI.7589			
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  50.00			
Name of Employer  First Colonies Anesthesia  Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  300.00	Payroll deduction			
Full Name (Last, First, Middle Initial)  3. Dr. Ramani Peruvemba  Mailing Address 8302 Fox Haven Drive		Date of Receipt			
City  McLean  FEC ID number of contributing federal political committee.	State Zip Code VA 22102	O8 23 2013  Transaction ID : SA11AI.7688  Amount of Each Receipt this Period  50.00			
Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  350.00	Payroll deduction			
Full Name (Last, First, Middle Initial) Dr. Ramani Peruvemba Mailing Address 8302 Fox Haven Drive  City McLean  FEC ID number of contributing federal political committee.  Name of Employer	State Zip Code VA 22102  C Occupation	Date of Receipt  09 25 2013  Transaction ID : SA11AI.7784  Amount of Each Receipt this Period  50.00  Payroll deduction			
First Colonies Anesthesia  Receipt For:  Primary General  Other (specify)	Physician  Aggregate Year-to-Date ▼  400.00				
SUBTOTAL of Receipts This Page (optional).		150.00			
TOTAL This Period (last page this line numb	er only)				

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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Ramani Peruvemba  Mailing Address 8302 Fox Haven Drive		Date of Receipt
	Ctoto 7in Co-l-	10 25 2013
City McLean	State Zip Code VA 22102	Transaction ID : SA11AI.7878  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼	Physician  Aggregate Year-to-Date ▼  450.00	
Full Name (Last, First, Middle Initial)  Dr. Ramani Peruvemba  Mailing Address 8302 Fox Haven Drive		Date of Receipt  11 25 2013
City McLean	State Zip Code VA 22102	Transaction ID : SA11AI.7972
FEC ID number of contributing federal political committee.	C 22102	Amount of Each Receipt this Period  50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Ramani Peruvemba		Date of Receipt
Mailing Address 8302 Fox Haven Drive		12 24 2013
City McLean	State Zip Code VA 22102	Transaction ID : SA11AI.8063  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify) ▼	Physician  Aggregate Year-to-Date ▼  550.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number	only)	

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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Ramani Peruvemba  Mailing Address 8302 Fox Haven Drive		Date of Receipt
		12 31 2013
City McLean	State Zip Code VA 22102	Transaction ID : SA11AI.8160  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  600.00	
Full Name (Last, First, Middle Initial)  Dr. Eugen Pirovic  Mailing Address 3912 Calverton Drive		Date of Receipt  07 25 2013
City Hyattsville	State Zip Code MD 20782	Transaction ID : SA11AI.7618
FEC ID number of contributing federal political committee.	C 20762	Amount of Each Receipt this Period  50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial)  Dr. Eugen Pirovic		Date of Receipt
Mailing Address 3912 Calverton Drive		08 23 2013
City Hyattsville	State Zip Code MD 20782	Transaction ID : SA11AI.7762  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  350.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number	only)	

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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Eugen Pirovic  Mailing Address, 3012 Calverton Privo		Date of Receipt
Mailing Address 3912 Calverton Drive		09 25 2013
City Hyattsville	State Zip Code MD 20782	Transaction ID : SA11AI.7814  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial)  3. Dr. Eugen Pirovic  Mailing Address 3912 Calverton Drive		Date of Receipt  10 25 2013
City Hyattsville	State Zip Code MD 20782	Transaction ID : SA11AI.7907
FEC ID number of contributing federal political committee.	C 20762	Amount of Each Receipt this Period 50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial)  Dr. Eugen Pirovic		Date of Receipt
Mailing Address 3912 Calverton Drive		11 25 2013 _
City Hyattsville	State Zip Code MD 20782	Transaction ID : SA11AI.8001  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00	
SUBTOTAL of Receipts This Page (optional)		150.00
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or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	State Zip Code MD 20782  C  Occupation Physician  Aggregate Year-to-Date   550.00	to solicit contributions from such committee.
Dr. Eugen Pirovic  Mailing Address 3912 Calverton Drive  City Hyattsville  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify) ▼	State Zip Code MD 20782  C  Occupation Physician  Aggregate Year-to-Date ▼  600.00	Date of Receipt  12 31 2013  Transaction ID : SA11Al.8191  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Jeffrey Richman  Mailing Address 6906 Granite Ridge Ct.  City Baltimore  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code MD 21209  C Occupation Physician Aggregate Year-to-Date ▼ 300.00	Date of Receipt  07
SUBTOTAL of Receipts This Page (optional).  TOTAL This Period (last page this line number		150.00

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)  Dr. Jeffrey Richman  Mailing Address 6906 Granite Ridge Ct.		Date of Receipt			
	State 7in Codo	08 23 2013			
City Baltimore	State Zip Code MD 21209	Transaction ID : SA11AI.7748  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia Receipt For:	Physician				
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00				
Full Name (Last, First, Middle Initial)  Dr. Jeffrey Richman  Mailing Address 6906 Granite Ridge Ct.		Date of Receipt			
City	09 25 2013				
Baltimore	State Zip Code MD 21209	Transaction ID : SA11AI.7828  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	50.00			
Name of Employer First Colonies Anesthesia	Occupation	Payroll deduction			
Receipt For:	Physician				
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00				
Full Name (Last, First, Middle Initial)  Dr. Jeffrey Richman		Date of Receipt			
Mailing Address 6906 Granite Ridge Ct.		10 25 2013			
City Baltimore	State Zip Code MD 21209	Transaction ID : SA11AI.7921  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia	Physician				
Receipt For: Primary General	Aggregate Year-to-Date ▼				
Other (specify)	450.00				
SUBTOTAL of Receipts This Page (optional)		150.00			
TOTAL This Period (last page this line number	only)				

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or for commercial purposes, other than using	the name and address of any political committee				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHI	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)  Dr. Jeffrey Richman  Mailing Address 6906 Granite Ridge Ct.		Date of Receipt  1,1 25 2013			
City Baltimore	State Zip Code MD 21209	Transaction ID : SA11AI.8015			
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  50.00			
Name of Employer  First Colonies Anesthesia  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  500.00	Payroll deduction			
Full Name (Last, First, Middle Initial)  Dr. Jeffrey Richman  Mailing Address 6906 Granite Ridge Ct.		Date of Receipt			
City Baltimore	State Zip Code MD 21209	Transaction ID : SA11AI.8112 Amount of Each Receipt this Period  50.00  Payroll deduction			
FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia	Occupation				
Receipt For:  Primary General  Other (specify) ▼	Physician  Aggregate Year-to-Date ▼  550.00				
Full Name (Last, First, Middle Initial)  Dr. Jeffrey Richman  Mailing Address 6906 Granite Ridge Ct.		Date of Receipt  12 31 2013			
City Baltimore	State Zip Code MD 21209	Transaction ID : SA11AI.8205  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  600.00				
SUBTOTAL of Receipts This Page (optional)	)	150.00			
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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE				
Full Name (Last, First, Middle Initial)  Dr. Charles Rizzuto  Mailing Address 6409 Pinehurst Road		Date of Receipt				
City Baltimore  FEC ID number of contributing federal political committee.  Name of Employer First Colonis Anesthesia Receipt For:  □ Primary □ General □ Other (specify) ▼	State Zip Code MD 21212  C Occupation Physician  Aggregate Year-to-Date ▼  300.00	Transaction ID: SA11AI.7630  Amount of Each Receipt this Period  50.00  Payroll deduction				
Full Name (Last, First, Middle Initial) Dr. Charles Rizzuto  Mailing Address 6409 Pinehurst Road  City Baltimore  FEC ID number of contributing	State Zip Code MD 21212	Date of Receipt    M				
Receipt For:  Primary  Other (specify) ▼  Name of Employer  First Colonis Anesthesia  General  Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  350.00	Payroll deduction				
Full Name (Last, First, Middle Initial) Dr. Charles Rizzuto  Mailing Address 6409 Pinehurst Road  City Baltimore  FEC ID number of contributing federal political committee.  Name of Employer  First Colonis Anesthesia  Receipt For:	State Zip Code MD 21212  C Occupation Physician	Date of Receipt  09 25 2013  Transaction ID : SA11AI.7825  Amount of Each Receipt this Period  50.00  Payroll deduction				
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  400.00	150.00				
TOTAL This Period (last page this line numb	per only)					

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

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAL	L ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)  Dr. Charles Rizzuto  Mailing Address C400 Birahust Band		Date of Receipt			
Mailing Address 6409 Pinehurst Road		10 25 / Y Y Y Y Y Y			
City Baltimore	State Zip Code MD 21212	Transaction ID : SA11AI.7918  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	50.00			
Name of Employer First Colonis Anesthesia	Occupation Physician	Payroll deduction			
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼  450.00				
Full Name (Last, First, Middle Initial)  Dr. Charles Rizzuto  Mailing Address 6409 Pinehurst Road		Date of Receipt			
City Baltimore	State Zip Code MD 21212	11 25 2013  Transaction ID : SA11AI.8012  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	50.00			
Name of Employer First Colonis Anesthesia	Occupation Physician	Payroll deduction			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00				
Full Name (Last, First, Middle Initial)  Dr. Charles Rizzuto		Date of Receipt			
Mailing Address 6409 Pinehurst Road		12 24 2013			
City Baltimore	State Zip Code MD 21212	Transaction ID : SA11AI.8109  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer First Colonis Anesthesia	Occupation Physician	Payroll deduction			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  550.00				
SUBTOTAL of Receipts This Page (optional)		150.00			
TOTAL This Period (last page this line number	only)				

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)  Dr. Charles Rizzuto  Mailing Address 6409 Pinehurst Road		Date of Receipt			
	Clade 7th Code	12 31 2013			
City Baltimore	State Zip Code MD 21212	Transaction ID : SA11AI.8202  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer First Colonis Anesthesia	Occupation Physician	Payroll deduction			
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼  600.00				
Full Name (Last, First, Middle Initial)  James A Rothschild  Mailing Address 205 Woodlawn Road	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City Baltimore	State Zip Code MD 21210	Transaction ID : SA11AI.7832			
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period			
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  300.00				
Full Name (Last, First, Middle Initial)  C. James A Rothschild		Date of Receipt			
Mailing Address 205 Woodlawn Road		10 25 _ 2013 _			
City Baltimore	State Zip Code MD 21210	Transaction ID : SA11AI.7925  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	100.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼	Physician  Aggregate Year-to-Date ▼  400.00				
SUBTOTAL of Receipts This Page (optional)		250.00			
TOTAL This Period (last page this line number					

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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  James A Rothschild  Mailing Address 205 Wasdleyn Road		Date of Receipt
Mailing Address 205 Woodlawn Road		11 25 2013
City Baltimore	State Zip Code MD 21210	Transaction ID : SA11AI.8019  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial)  3. James A Rothschild  Mailing Address 205 Woodlawn Road	Date of Receipt  12 24 2013	
City Baltimore	State Zip Code MD 21210	Transaction ID : SA11AI.8116  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial)  C. James A Rothschild		Date of Receipt
Mailing Address 205 Woodlawn Road		12 31 2013
City Baltimore	State Zip Code MD 21210	Transaction ID : SA11AI.8209  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  700.00	
SUBTOTAL of Receipts This Page (optional)		300.00
TOTAL This Period (last page this line number	· only)	

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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Alexander Rubin  Mailing Address, 6644 Hunter Trail Way		Date of Receipt
Mailing Address 6611 Hunter Trail Way		07 25 2013
City Frederick	State Zip Code MD 21702	Transaction ID : SA11AI.7650  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  300.00	
Full Name (Last, First, Middle Initial)  Dr. Alexander Rubin  Mailing Address 6611 Hunter Trail Way	Date of Receipt  08 23 2013	
City Frederick	State Zip Code MD 21702	Transaction ID : SA11AI.7724  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial)  Dr. Alexander Rubin		Date of Receipt
Mailing Address 6611 Hunter Trail Way		09 25 2013
City Frederick	State Zip Code MD 21702	Transaction ID : SA11AI.7852  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number	only)	

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

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		o solicit contributions from such committee.
<u> </u>	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Alexander Rubin		Date of Receipt
Mailing Address 6611 Hunter Trail Way		10 25 2013
City	State Zip Code	Transaction ID : SA11AI.7946
Frederick	MD 21702	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	- Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	450.00	
Full Name (Last, First, Middle Initial)  Dr. Alexander Rubin	Date of Receipt	
Mailing Address 6611 Hunter Trail Way		M = M / D = D / Y = Y = Y
City	State Zip Code	11 25 2013
Frederick	MD 21702	Transaction ID : SA11AI.8037  Amount of Each Receipt this Period
FEC ID number of contributing		Amount of Each receipt this reflou
federal political committee.	C	50.00
Name of Employer	Payroll deduction	
First Colonies Anesthesia	Occupation Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)	I	Date of Receipt
Mailing Address 6611 Hunter Trail Way		12 24 2013
	State Zip Code	Transaction ID : SA11AI.8134
City		Transaction ib . OATTAL.0134
City Frederick	MD 21702	Amount of Each Receipt this Period
•	MD 21702	Amount of Each Receipt this Period 50.00
Frederick FEC ID number of contributing		Amount of Each Receipt this Period
Frederick  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia	C	Amount of Each Receipt this Period 50.00
Frederick  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:	Occupation	Amount of Each Receipt this Period 50.00
Frederick  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia	Occupation Physician	Amount of Each Receipt this Period 50.00
Frederick  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  General	C Occupation Physician Aggregate Year-to-Date ▼  550.00	Amount of Each Receipt this Period 50.00

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAL	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Alexander Rubin  Mailing Address 6611 Hunter Trail Way		Date of Receipt
	Chata 7th On the	12 31 2013
City Frederick	State Zip Code MD 21702	Transaction ID : SA11AI.8230  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	-50.00
Name of Employer	Occupation Physician	Payroll deduction
First Colonies Anesthesia  Receipt For:  Primary  Other (specify)	Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial)  Leudvig Sardarian  Mailing Address 11601 Brandy Hall Lane	Date of Receipt  07 25 2013	
City North Potomac	State Zip Code MD 20878	Transaction ID : SA11AI.7639
North Potomac  FEC ID number of contributing federal political committee.	C 20878	Amount of Each Receipt this Period 50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial)  C. Leudvig Sardarian		Date of Receipt
Mailing Address 11601 Brandy Hall Lane		08 23 _ 2013 _
City North Potomac	State Zip Code MD 20878	Transaction ID : SA11AI.7769  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For:	Physician  Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)		50.00
TOTAL This Period (last page this line number	only)	

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	statements may not be sold or used by any persole name and address of any political committee to	
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAL	_ ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Leudvig Sardarian  Mailing Address 11601 Brandy Hall Lane  City North Potomac	State Zip Code MD 20878	Date of Receipt  09 25 2013  Transaction ID: SA11AI.7863  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  Other (specify)	Occupation Physician  Aggregate Year-to-Date ▼  400.00	50.00 Payroll deduction
Full Name (Last, First, Middle Initial)  Leudvig Sardarian  Mailing Address 11601 Brandy Hall Lane  City  North Potomac  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code MD 20878  C  Occupation Physician  Aggregate Year-to-Date ▼  450.00	Date of Receipt  10 25 2013  Transaction ID : SA11AI.7957  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Leudvig Sardarian  Mailing Address 11601 Brandy Hall Lane  City  North Potomac  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify)	State Zip Code MD 20878  C Occupation Physician Aggregate Year-to-Date ▼	Date of Receipt  11 25 2013  Transaction ID: SA11AI.8048  Amount of Each Receipt this Period  50.00  Payroll deduction
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number	only)	

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	ne name and address of any political committee to				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)  Leudvig Sardarian  Mailing Address 11601 Brandy Hall Lane		Date of Receipt			
City	State Zip Code	12 24 2013 Transaction ID : SA11AI.8145			
North Potomac	MD 20878	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer First Colonies Anesthesia	Occupation Physician	- Payroll deduction			
Receipt For:		-			
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00				
Full Name (Last, First, Middle Initial)  Leudvig Sardarian		Date of Receipt			
Mailing Address 11601 Brandy Hall Lane	12 31 _ 2013 _				
City	State Zip Code	Transaction ID : SA11AI.8239			
North Potomac	MD 20878	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer First Colonies Anesthesia	Payroll deduction				
Receipt For:	Physician	-			
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  600.00				
Full Name (Last, First, Middle Initial)  Dr. Suzanne Scattergood		Date of Receipt			
Mailing Address 14700 Crossway Road		07 25 2013			
City Rockville	State Zip Code MD 20853	Transaction ID : SA11AI.7649  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	100.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia	Physician	_			
Receipt For:  Primary  General	Aggregate Year-to-Date ▼				
Other (specify) ▼	600.00				
SUBTOTAL of Receipts This Page (optional)		200.00			
TOTAL This Period (last page this line numbe	r only)				

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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE		
Full Name (Last, First, Middle Initial)  Dr. Suzanne Scattergood  Mailing Address 14700 Crossway Road		Date of Receipt		
City	08 23 2013 Transaction ID : SA11AI.7723			
Rockville FEC ID number of contributing	MD 20853	Amount of Each Receipt this Period		
federal political committee.  Name of Employer	Occupation	Payroll deduction		
First Colonies Anesthesia Receipt For:	Physician	_		
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  700.00			
Full Name (Last, First, Middle Initial)  Dr. Suzanne Scattergood	Date of Receipt			
Mailing Address 14700 Crossway Road	09 25 2013			
City Rockville	State Zip Code MD 20853	Transaction ID : SA11AI.7853  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С	100.00		
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  800.00			
Full Name (Last, First, Middle Initial)  Dr. Suzanne Scattergood		Date of Receipt		
Mailing Address 14700 Crossway Road		10 25 2013		
City Rockville	State Zip Code MD 20853	Transaction ID : SA11AI.7947  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	100.00		
Name of Employer First Colonies Anesthesia	Occupation Physician	_ Payroll deduction		
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼  900.00	_		
SUBTOTAL of Receipts This Page (optional).		300.00		
TOTAL This Period (last page this line number	<u>`</u>			

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or for commercial purposes, other than using	the name and address of any political committee						
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE					
Full Name (Last, First, Middle Initial)  Dr. Suzanne Scattergood  Mailing Address 14700 Crossway Road	Dr. Suzanne Scattergood						
City	State Zip Code	11 25 2013 Transaction ID : SA11Al.8038					
Rockville	MD 20853	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	100.00					
Name of Employer	Occupation	Payroll deduction					
First Colonies Anesthesia Receipt For:	Physician	_					
Primary General	Aggregate Year-to-Date ▼						
Other (specify) ▼	1000.00						
Full Name (Last, First, Middle Initial)  Dr. Suzanne Scattergood							
Mailing Address 14700 Crossway Road	12 24 _ 2013 _						
City	Transaction ID : SA11AI.8135						
Rockville	MD 20853	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	100.00					
Name of Employer	Payroll deduction						
First Colonies Anesthesia	Physician						
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00						
Full Name (Last, First, Middle Initial)  Dr. Suzanne Scattergood		Date of Receipt					
Mailing Address 14700 Crossway Road		12 312013					
City	State Zip Code	Transaction ID : SA11AI.8228					
Rockville	MD 20853	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	100.00					
Name of Employer	Occupation	Payroll deduction					
First Colonies Anesthesia	Physician						
Receipt For:  Primary  General	Aggregate Year-to-Date ▼						
Other (specify) ▼	1200.00						
SUBTOTAL of Receipts This Page (optional).	· · · · · · · · · · · · · · · · · · ·	300.00					
TOTAL This Period (last page this line number	er only)						

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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)  Dr. Mark Seymour  Mailing Address 2932 Thurston Rd.		Date of Receipt			
City	State Zip Code	07 25 2013			
Frederick	MD 21704	Transaction ID : SA11AI.7648  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation Physician	Payroll deduction			
First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  300.00				
Full Name (Last, First, Middle Initial)  3. Dr. Mark Seymour  Mailing Address 2932 Thurston Rd.	Date of Receipt  08 23 2013				
City	State Zip Code MD 21704	Transaction ID : SA11AI.7722			
Frederick  FEC ID number of contributing federal political committee.	MD 21704	Amount of Each Receipt this Period  50.00			
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00				
Full Name (Last, First, Middle Initial)  Dr. Mark Seymour		Date of Receipt			
Mailing Address 2932 Thurston Rd.		09 25 2013 _			
City Frederick	State Zip Code MD 21704	Transaction ID : SA11AI.7854  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  400.00				
SUBTOTAL of Receipts This Page (optional)		150.00			
TOTAL This Period (last page this line number	r only)				

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or for commercial purposes, other than using	g the name and address of any political committee					
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	IESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE				
Full Name (Last, First, Middle Initial)  Dr. Mark Seymour  Mailing Address 2932 Thurston Rd.		Date of Receipt				
City	State Zip Code	10 25 2013				
Frederick	MD 21704	Transaction ID : SA11AI.7948  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	50.00				
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00					
Full Name (Last, First, Middle Initial)  Dr. Mark Seymour  Mailing Address 2022 Thurston Bd	Date of Receipt					
Mailing Address 2932 Thurston Rd.  City Frederick	11 25 2013  Transaction ID : SA11AI.8039  Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	50.00					
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00					
Full Name (Last, First, Middle Initial)  Dr. Mark Seymour		Date of Receipt				
Mailing Address 2932 Thurston Rd.		12 24 _ 2013 _				
City Frederick	State Zip Code MD 21704	Transaction ID : SA11AI.8136  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia	,					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00					
SURTOTAL of Receipts This Page (ontions	al)	150.00				
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TOTAL This Period (last page this line nun	ider only)					

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or for commercial purposes, other than using	the name and address of any political committee t	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHI	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Mark Seymour  Mailing Address 2932 Thurston Rd.		Date of Receipt
City Frederick  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For:  □ Primary □ General □ Other (specify) ▼	State Zip Code MD 21704  C  Occupation Physician  Aggregate Year-to-Date ▼  600.00	Transaction ID : SA11AI.8229  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Nader Soliman  Mailing Address 22905 David Mill Road  City	Date of Receipt  07 25 2013  Transaction ID: SA11AI.7590	
Germantown  FEC ID number of contributing federal political committee.	State Zip Code MD 20876	Amount of Each Receipt this Period  50.00
Name of Employer First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  300.00	Payroll deduction
Full Name (Last, First, Middle Initial) Dr. Nader Soliman  Mailing Address 22905 David Mill Road  City	State Zip Code	Date of Receipt    M = M
Germantown  FEC ID number of contributing federal political committee.  Name of Employer	MD 20876  C Occupation	Amount of Each Receipt this Period  50.00  Payroll deduction
First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼	Physician  Aggregate Year-to-Date ▼  350.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	150.00
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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	IA ASSOCIATES LLC POLITICAI	_ ACTION COMMITTEE		
Full Name (Last, First, Middle Initial)  A. Dr. Nader Soliman		Date of Receipt		
Mailing Address 22905 David Mill Road		09 25 / Y Y Y Y Y		
City Germantown	State Zip Code MD 20876	Transaction ID : SA11AI.7785		
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  50.00		
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00			
Full Name (Last, First, Middle Initial)  Dr. Nader Soliman		Date of Receipt		
Mailing Address 22905 David Mill Road	01.1. 7. 0.1.	10 25 7 2013		
City Germantown	State Zip Code MD 20876	Transaction ID : SA11AI.7879		
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  50.00		
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00			
Full Name (Last, First, Middle Initial)  Dr. Nader Soliman		Date of Receipt		
Mailing Address 22905 David Mill Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Germantown	State Zip Code MD 20876	Transaction ID : SA11AI.7973  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer	Occupation	Payroll deduction		
First Colonies Anesthesia	Physician			
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼ 500.00			
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number	<u> </u>	150.00		

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or for commercial purposes, other than using the	e name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Nader Soliman  Mailing Address 22905 David Mill Road  City  Germantown	State Zip Code MD 20876	Date of Receipt  12 24 2013  Transaction ID : SA11AI.8064  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	Occupation Physician  Aggregate Year-to-Date   550.00	50.00 Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Nader Soliman  Mailing Address 22905 David Mill Road  City  Germantown  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code MD 20876  C  Occupation Physician  Aggregate Year-to-Date ▼  600.00	Date of Receipt  12 31 2013  Transaction ID: SA11Al.8161  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. James Sowry  Mailing Address 5008 Green Bridge Road  City Dayton  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code MD 21036  C  Occupation Physician  Aggregate Year-to-Date ▼  225.00	Date of Receipt  10 25 2013  Transaction ID: SA11AI.7929  Amount of Each Receipt this Period  25.00  Payroll deduction
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	125.00
TOTAL This Period (last page this line number	r only)	

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. James Sowry		Date of Receipt
Mailing Address 5008 Green Bridge Road		11 25 2013
City Dayton	State Zip Code MD 21036	Transaction ID : SA11AI.8023  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  Dr. James Sowry  Mailing Address 5008 Green Bridge Road		Date of Receipt  12 24 2013
City Dayton	State Zip Code MD 21036	Transaction ID : SA11AI.8120  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	
Full Name (Last, First, Middle Initial)  Dr. James Sowry		Date of Receipt
Mailing Address 5008 Green Bridge Road		12 31 _ 2013 _
City Dayton	State Zip Code MD 21036	Transaction ID : SA11AI.8214  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  300.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	75.00
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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE		
Full Name (Last, First, Middle Initial)  Dr. Robert Study  Mailing Address 6 Beall Spring Court		Date of Receipt		
City Potomac	State Zip Code MD 20854	07 25 2013  Transaction ID : SA11AI.7613  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer  First Colonies Anesthesia  Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  300.00	Payroll deduction		
Full Name (Last, First, Middle Initial)  3. Dr. Robert Study  Mailing Address 6 Beall Spring Court		Date of Receipt		
City Potomac  FEC ID number of contributing federal political committee.	State Zip Code MD 20854	7 Transaction ID : SA11AI.7714 Amount of Each Receipt this Period 50.00		
Name of Employer First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  350.00	Payroll deduction		
Full Name (Last, First, Middle Initial)  Dr. Robert Study  Mailing Address 6 Beall Spring Court  City	State Zip Code	Date of Receipt  09 25 2013  Transaction ID: SA11AI.7809		
Potomac  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify)	MD 20854  C  Occupation Physician  Aggregate Year-to-Date ▼	Amount of Each Receipt this Period  50.00  Payroll deduction		
		150.00		
SUBTOTAL of Receipts This Page (optional	l) <b>&gt;</b>	130.00		
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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE		
Full Name (Last, First, Middle Initial)  Dr. Robert Study  Mailing Address 6 Beall Spring Court		Date of Receipt		
City	State Zip Code	10 25 2013 Transaction ID : SA11AI.7902		
Potomac  FEC ID number of contributing federal political committee.	MD 20854	Amount of Each Receipt this Period  50.00		
Name of Employer  First Colonies Anesthesia  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  450.00	Payroll deduction		
Full Name (Last, First, Middle Initial)  3. Dr. Robert Study  Mailing Address 6 Beall Spring Court		Date of Receipt		
City Potomac FEC ID number of contributing	State Zip Code MD 20854	Transaction ID : SA11AI.7996  Amount of Each Receipt this Period  50.00		
federal political committee.  Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician  Aggregate Year-to-Date ▼	Payroll deduction		
Primary General Other (specify) ▼	500.00			
Full Name (Last, First, Middle Initial) Dr. Robert Study  Mailing Address 6 Beall Spring Court		Date of Receipt  12 24 2013		
City Potomac  FEC ID number of contributing	State Zip Code MD 20854	Transaction ID : SA11AI.8093  Amount of Each Receipt this Period		
federal political committee.  Name of Employer	Occupation	Payroll deduction		
First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify)	Physician  Aggregate Year-to-Date ▼  550.00			
SUBTOTAL of Receipts This Page (optional	)	150.00		
TOTAL This Period (last page this line num	ber only)			

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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE		
Full Name (Last, First, Middle Initial)  A. Dr. Robert Study  Mailing Address 6 Beall Spring Court		Date of Receipt		
City	State Zip Code	12 31 2013 Transaction ID : SA11Al.8186		
Potomac  FEC ID number of contributing federal political committee.	MD 20854	Amount of Each Receipt this Period  50.00		
Name of Employer  First Colonies Anesthesia  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  600.00	Payroll deduction		
Full Name (Last, First, Middle Initial)  Dr. Lisa Sullivan  Mailing Address 4639 Teen Barnes Road		Date of Receipt		
City Frederick  FEC ID number of contributing federal political committee.	State Zip Code MD 21703	7 25 2013  Transaction ID : SA11AI.7647  Amount of Each Receipt this Period  50.00		
Name of Employer First Colonies Anesthsia Receipt For: Primary General	Occupation Physician  Aggregate Year-to-Date ▼	Payroll deduction		
Other (specify) ▼  Full Name (Last, First, Middle Initial)  Dr. Lisa Sullivan  Mailing Address 4639 Teen Barnes Road	300.00	Date of Receipt		
City Frederick  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthsia  Receipt For:  Primary General Other (specify)	State Zip Code MD 21703  C  Occupation Physician  Aggregate Year-to-Date ▼  350.00	7 Transaction ID : SA11AI.7721  Amount of Each Receipt this Period  50.00  Payroll deduction		
SUBTOTAL of Receipts This Page (optional)		150.00		
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or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Lisa Sullivan  Mailing Address 4639 Teen Barnes Road		Date of Receipt
City Frederick  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthsia  Receipt For:  Primary General Other (specify)	State Zip Code MD 21703  C  Occupation Physician  Aggregate Year-to-Date ▼  400.00	Transaction ID: SA11AI.7855  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Lisa Sullivan  Mailing Address 4639 Teen Barnes Road  City Frederick  FEC ID number of contributing federal political committee.  Name of Employer	State Zip Code MD 21703  C Occupation	Date of Receipt  10 25 2013  Transaction ID: SA11AI.7949  Amount of Each Receipt this Period  50.00  Payroll deduction
First Colonies Anesthsia  Receipt For:  Primary General  Other (specify) ▼	Physician  Aggregate Year-to-Date ▼  450.00	
Full Name (Last, First, Middle Initial)  Dr. Lisa Sullivan  Mailing Address 4639 Teen Barnes Road  City Frederick  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthsia  Receipt For:  Primary General Other (specify)	State Zip Code MD 21703  C Occupation Physician  Aggregate Year-to-Date ▼	Date of Receipt  11
SUBTOTAL of Receipts This Page (optional).		150.00
TOTAL This Period (last page this line numb	er only)	

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Lisa Sullivan  Mailing Address 4639 Teen Barnes Road		Date of Receipt
City Frederick  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthsia Receipt For:  □ Primary □ General □ Other (specify) ▼	State Zip Code MD 21703  C  Occupation Physician  Aggregate Year-to-Date ▼  550.00	Transaction ID : SA11AI.8137  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Lisa Sullivan  Mailing Address 4639 Teen Barnes Road  City	State Zip Code	Date of Receipt  12 31 2013  Transaction ID : SA11AI.8231
Frederick  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthsia  Receipt For:  Primary  General	MD 21703  C Occupation Physician  Aggregate Year-to-Date ▼	Amount of Each Receipt this Period  50.00  Payroll deduction
Other (specify) ▼  Full Name (Last, First, Middle Initial)  Dr. Robert Sullivan  Mailing Address 4639 Teen Barnes Road  City Frederick	State Zip Code MD 21703	Date of Receipt    M
FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify)	Occupation Physician Aggregate Year-to-Date ▼	50.00 Payroll deduction
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	150.00
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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Robert Sullivan  Mailing Address 4639 Teen Barnes Road		Date of Receipt
		08 23 2013
City Frederick	State Zip Code MD 21703	Transaction ID : SA11AI.7720  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼  350.00	
Full Name (Last, First, Middle Initial)  Dr. Robert Sullivan  Mailing Address 4639 Teen Barnes Road		Date of Receipt  09 25 2013
City	State Zip Code MD 21703	Transaction ID : SA11AI.7856
Frederick  FEC ID number of contributing federal political committee.	MD 21703	Amount of Each Receipt this Period  50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial)  Dr. Robert Sullivan		Date of Receipt
Mailing Address 4639 Teen Barnes Road		10 25 2013 _
City Frederick	State Zip Code MD 21703	Transaction ID : SA11AI.7950  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
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or for commercial purposes, other than using	the name and address of any political committee	
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Robert Sullivan  Mailing Address 4639 Teen Barnes Road		Date of Receipt
City	State Zip Code	11 25 2013 Transaction ID : SA11AI.8041
Frederick	MD 21703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify)	500.00	
Full Name (Last, First, Middle Initial)  Dr. Robert Sullivan		Date of Receipt
Mailing Address 4639 Teen Barnes Road		M M / D D / Y Y Y Y Y
City	State Zip Code	12 24 2013 Transaction ID : SA11AI.8138
Frederick	MD 21703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  550.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 4639 Teen Barnes Road		12 31 _ 2013 _
City	State Zip Code	Transaction ID : SA11AI.8232
Frederick	MD 21703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify)	600.00	
SUBTOTAL of Receipts This Page (optional)	<b>_</b>	150.00
TOTAL This Period (last page this line numb	er only)	

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	g the name and address of any political committee	
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	HESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Or. Louis Swann  Mailing Address PO Box 6081  City	State Zip Code	Date of Receipt  07 25 2013  Transaction ID : SA11AI.7614
McLean	VA 22106	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial)  3. Dr. Louis Swann		Date of Receipt
Mailing Address PO Box 6081		08 23 _2013 _
City	State Zip Code	Transaction ID : SA11AI.7715
McLean	VA 22106	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  350.00	
Full Name (Last, First, Middle Initial)  Dr. Louis Swann		Date of Receipt
Mailing Address PO Box 6081		09 25 / Y Y Y Y Y Y
City McLean	State Zip Code VA 22106	Transaction ID : SA11AI.7810
	22100	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00 Payroll deduction
Name of Employer	Occupation	- Ayron doddonon
First Colonies Anesthesia	Physician	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify) ▼	400.00	
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or for commercial purposes, other than using th	ne name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Louis Swann  Mailing Address PO Box 6081		Date of Receipt
City McLean	State Zip Code VA 22106	10 25 2013 Transaction ID : SA11AI.7903
FEC ID number of contributing federal political committee.	C 22106	Amount of Each Receipt this Period  50.00
Name of Employer  First Colonies Anesthesia  Receipt For:	Occupation Physician  Aggregate Year-to-Date ▼	Payroll deduction
Primary General Other (specify) ▼	450.00	
Full Name (Last, First, Middle Initial)  3. Dr. Louis Swann  Mailing Address PO Box 6081		Date of Receipt  11 25 2013
City McLean	State Zip Code VA 22106	Transaction ID : SA11AI.7997  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial)  Dr. Louis Swann		Date of Receipt
Mailing Address PO Box 6081	Choko 7'- 0	12 24 2013
City McLean	State Zip Code VA 22106	Transaction ID : SA11AI.8094  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	150.00
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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Louis Swann  Mailing Address PO Box 6081  City McLean  FEC ID number of contributing	State Zip Code VA 22106	Date of Receipt  12 31 2013  Transaction ID: SA11AI.8187  Amount of Each Receipt this Period
federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date   600.00	— Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Rojack Tan  Mailing Address 507 Goodland Place  City  Rockville	Date of Receipt    M	
FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  300.00	50.00 Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Rojack Tan  Mailing Address 507 Goodland Place  City Rockville  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code MD 20850  C  Occupation Physician  Aggregate Year-to-Date ▼  350.00	Date of Receipt  08 23 2013  Transaction ID : SA11AI.7716  Amount of Each Receipt this Period  50.00  Payroll deduction
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or for commercial purposes, other than using the	e name and address of any political committee to					
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE				
Full Name (Last, First, Middle Initial)  Dr. Rojack Tan  Mailing Address 507 Goodland Place		Date of Receipt  09 25 2013				
City	State Zip Code MD 20850	Transaction ID : SA11AI.7811				
Rockville  FEC ID number of contributing federal political committee.	C 20850	Amount of Each Receipt this Period 50.00				
Name of Employer  First Colonies Anesthesia  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  400.00	Payroll deduction				
Full Name (Last, First, Middle Initial)  Dr. Rojack Tan  Mailing Address 507 Goodland Place	Date of Receipt					
City  Rockville  FEC ID number of contributing federal political committee.	Transaction ID : SA11AI.7904  Amount of Each Receipt this Period  50.00					
Name of Employer First Colonies Anesthesia  Receipt For:  □ Primary □ General  Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  450.00	Payroll deduction				
Full Name (Last, First, Middle Initial) Dr. Rojack Tan  Mailing Address 507 Goodland Place  City Rockville	Date of Receipt  11 25 2013  Transaction ID : SA11AI.7998  Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	Occupation Physician  Aggregate Year-to-Date ▼  500.00	50.00 Payroll deduction				
SUBTOTAL of Receipts This Page (optional)		150.00				
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Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Rojack Tan  Mailing Address 507 Goodland Place		Date of Receipt
		12 24 2013
City Rockville	State Zip Code MD 20850	Transaction ID : SA11AI.8095  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For:	Physician  Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate real-to-bate ▼ 550.00	
Full Name (Last, First, Middle Initial)  3. Dr. Rojack Tan	Date of Receipt	
Mailing Address 507 Goodland Place  City	12 31 2013 Transaction ID - SA11AL 9199	
Rockville	State Zip Code MD 20850	Transaction ID : SA11AI.8188  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  600.00	
Full Name (Last, First, Middle Initial)  Dr. Bernard Tsai		Date of Receipt
Mailing Address 10013 New London Drive		07 25 2013
City Potomac	State Zip Code MD 20854	Transaction ID : SA11AI.7591  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For:	Physician Pata 7	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  300.00	
SUBTOTAL of Receipts This Page (optional)	·····	150.00
TOTAL This Period (last page this line number	only)	

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	the name and address of any political committee				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE			
Full Name (Last, First, Middle Initial) Dr. Bernard Tsai  Mailing Address 10013 New London Drive		Date of Receipt			
City	State Zip Code	08			
Potomac	MD 20854	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction			
Receipt For: Primary General	Aggregate Year-to-Date ▼				
Other (specify) ▼	350.00				
Full Name (Last, First, Middle Initial)  Dr. Bernard Tsai	Date of Receipt				
Mailing Address 10013 New London Drive	09 25 2013				
City	State Zip Code MD 20854	Transaction ID : SA11AI.7786			
Potomac  FEC ID number of contributing	1000	Amount of Each Receipt this Period			
federal political committee.	C	50.00			
Name of Employer First Colonies Anesthesia	Occupation	Payroll deduction			
Receipt For:	Physician	_			
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00				
Full Name (Last, First, Middle Initial) C. Dr. Bernard Tsai		Date of Receipt			
Mailing Address 10013 New London Drive		10 25 _ 2013 _			
City Potomac	State Zip Code MD 20854	Transaction ID : SA11AI.7880  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia Receipt For:	Physician	_			
Primary General	Aggregate Year-to-Date ▼				
Other (specify) ▼	450.00				
SUBTOTAL of Receipts This Page (optional)		150.00			
TOTAL This Period (last page this line numb	per only)				

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	e name and address of any political committee to	os solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE		
Full Name (Last, First, Middle Initial)  Dr. Bernard Tsai  Mailing Address 10013 New London Drive		Date of Receipt		
	Ctoto 7in Code	11 25 2013		
City Potomac	State Zip Code MD 20854	Transaction ID : SA11AI.7974  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00			
Full Name (Last, First, Middle Initial)  Dr. Bernard Tsai  Mailing Address 10013 New London Drive	Date of Receipt			
City Potomac	12 24 2013  Transaction ID : SA11AI.8065  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	MD 20854	50.00		
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00			
Full Name (Last, First, Middle Initial)  Dr. Bernard Tsai		Date of Receipt		
Mailing Address 10013 New London Drive		12 31 _ 2013 _		
City Potomac	State Zip Code MD 20854	Transaction ID : SA11AI.8162  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer	Occupation	Payroll deduction		
First Colonies Anesthesia	Physician			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00			
SUBTOTAL of Receipts This Page (optional)		150.00		
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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Reed Underwood  Mailing Address 1518 T Street, NW		Date of Receipt
City Washington  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code DC 20009  C  Occupation Physician  Aggregate Year-to-Date ▼  300.00	Transaction ID : SA11AI.7601  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Reed Underwood  Mailing Address 1518 T Street, NW  City  Washington  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify)	State Zip Code DC 20009  C  Occupation Physician  Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  Dr. Reed Underwood  Mailing Address 1518 T Street, NW  City Washington  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code DC 20009  C Occupation Physician  Aggregate Year-to-Date ▼ 400.00	Date of Receipt  09 25 2013  Transaction ID: SA11AI.7796  Amount of Each Receipt this Period  50.00  Payroll deduction
SUBTOTAL of Receipts This Page (optional)	<u> </u>	150.00
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	HESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Reed Underwood		Date of Receipt
Mailing Address 1518 T Street, NW		10 25 2013
City	State Zip Code	Transaction ID : SA11AI.7890
Washington	DC 20009	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	450.00	
Full Name (Last, First, Middle Initial)  Dr. Reed Underwood		Date of Receipt
Mailing Address 1518 T Street, NW		1.1 25 2013 _
City	State Zip Code	Transaction ID : SA11AI.7983
Washington	DC 20009	Amount of Each Receipt this Period
FEC ID number of contributing	С	
federal political committee.	0	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	ragiogate real to Date ▼	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)	ı	Date of Receipt
Mailing Address 1518 T Street, NW		† ·
1310 1 3tieet, NVV		12 24 2013
City	State Zip Code	Transaction ID : SA11AI.8077
Washington	DC 20009	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	_ Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General	00 0	
Other (specify) ▼	550.00	
SUBTOTAL of Receipts This Page (ontion	al)	150.00
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or for commercial purposes, other than using the	ne name and address of any political committee to	solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE		
Full Name (Last, First, Middle Initial)  Dr. Reed Underwood  Mailing Address 1518 T Street, NW		Date of Receipt		
		12 31 2013		
City Washington	State Zip Code DC 20009	Transaction ID : SA11AI.8172  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00			
Full Name (Last, First, Middle Initial)  Dr. Arnaldo Valedon  Mailing Address 22 Woodfield Court		Date of Receipt		
City Reisterstown	State Zip Code MD 21136	7 25 2013 Transaction ID : SA11AI.7667 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00			
Full Name (Last, First, Middle Initial)  Dr. Arnaldo Valedon		Date of Receipt		
Mailing Address 22 Woodfield Court		08 23 2013		
City Reisterstown	State Zip Code MD 21136	Transaction ID : SA11AI.7741  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  350.00			
SUBTOTAL of Receipts This Page (optional)		150.00		
TOTAL This Period (last page this line numbe	r only)			

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or for commercial purposes, other than using	the name and address of any political committee				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)  Dr. Arnaldo Valedon  Mailing Address 22 Woodfield Court		Date of Receipt			
City	State Zip Code	09 25 2013 Transaction ID : SA11Al.7835			
Reisterstown	MD 21136	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia Receipt For:	Physician	_			
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00				
Full Name (Last, First, Middle Initial)  3. Dr. Arnaldo Valedon		Date of Receipt			
Mailing Address 22 Woodfield Court		10 25 2013			
City	State Zip Code	Transaction ID : SA11AI.7928			
Reisterstown	MD 21136	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia Receipt For:	Physician				
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00				
Full Name (Last, First, Middle Initial)  Dr. Arnaldo Valedon		Date of Receipt			
Mailing Address 22 Woodfield Court		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City Reisterstown	State Zip Code MD 21136	Transaction ID : SA11AI.8022  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia	Physician				
Receipt For:    Primary   General	Aggregate Year-to-Date ▼				
Other (specify) ▼	500.00				
SUBTOTAL of Receipts This Page (optional	1)	150.00			
TOTAL This Period (last page this line num	her only)				

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Arnaldo Valedon  Mailing Address 20 Way Wight Court		Date of Receipt
Mailing Address 22 Woodfield Court		12 24 2013
City Reisterstown	State Zip Code MD 21136	Transaction ID : SA11AI.8119  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial)  Dr. Arnaldo Valedon  Mailing Address 22 Woodfield Court		Date of Receipt
City Reisterstown	State Zip Code MD 21136	12 31 2013  Transaction ID : SA11AI.8213  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial)  Dr. Martha Van Clief		Date of Receipt
Mailing Address 405 Apple Grove Road		07 25 2013
City Silver Spring	State Zip Code MD 20904	Transaction ID : SA11AI.7662  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  300.00	
SUBTOTAL of Receipts This Page (optional)	<b></b>	150.00
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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Martha Van Clief  Mailing Address 405 Apple Grove Road		Date of Receipt
		08 23 2013
City Silver Spring	State Zip Code MD 20904	Transaction ID : SA11AI.7736  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial)  Dr. Martha Van Clief  Mailing Address 405 Apple Grove Road		Date of Receipt
	State 7in Code	09 25 2013
City Silver Spring	State Zip Code MD 20904	Transaction ID : SA11AI.7840  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial)  Dr. Martha Van Clief		Date of Receipt
Mailing Address 405 Apple Grove Road		10 25 2013 _
City Silver Spring	State Zip Code MD 20904	Transaction ID : SA11AI.7933  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify)	450.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	150.00
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	he name and address of any political committee t			
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE		
Full Name (Last, First, Middle Initial)  1. Dr. Martha Van Clief		Date of Receipt		
Mailing Address 405 Apple Grove Road		11 25 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Silver Spring	State Zip Code MD 20904	Transaction ID : SA11AI.8027		
FEC ID number of contributing federal political committee.	C 20904	Amount of Each Receipt this Period  50.00		
Name of Employer  First Colonies Anesthesia  Receipt For:	Occupation Physician	Payroll deduction		
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00			
Full Name (Last, First, Middle Initial)  3. Dr. Martha Van Clief	•	Date of Receipt		
Mailing Address 405 Apple Grove Road		12 24 _ 2013 _		
City Silver Spring	State Zip Code MD 20904	Transaction ID : SA11AI.8124  Amount of Each Receipt this Period  50.00		
FEC ID number of contributing federal political committee.	С			
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00			
Full Name (Last, First, Middle Initial)  Dr. Martha Van Clief		Date of Receipt		
Mailing Address 405 Apple Grove Road		12 312013		
City Silver Spring	State Zip Code MD 20904	Transaction ID : SA11AI.8218  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer	Occupation	Payroll deduction		
First Colonies Anesthesia	Physician			
Receipt For:  Primary General  Other (cnecify) —	Aggregate Year-to-Date ▼  600.00			
Other (specify) ▼	000.00			
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	the name and address of any political committee	to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHI	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE		
Full Name (Last, First, Middle Initial)  A. Dr. Sanjay Vanguri  Mailing Address 9657 Atterbury Lane		Date of Receipt		
City	State Zip Code	10 25 2013 Transaction ID : SA11AI.7956		
Frederick  FEC ID number of contributing federal political committee.	MD 21704	Amount of Each Receipt this Period  25.00		
Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  225.00	Payroll deduction		
Full Name (Last, First, Middle Initial)  Dr. Sanjay Vanguri  Mailing Address 9657 Atterbury Lane		Date of Receipt		
City Frederick FEC ID number of contributing	State Zip Code MD 21704	Transaction ID : SA11AI.8047 Amount of Each Receipt this Period  25.00		
Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician Aggregate Year-to-Date ▼	Payroll deduction		
Primary General Other (specify) ▼	250.00			
Full Name (Last, First, Middle Initial)  Dr. Sanjay Vanguri  Mailing Address 9657 Atterbury Lane		Date of Receipt  12 24 2013		
City Frederick	State Zip Code MD 21704	Transaction ID : SA11AI.8144  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	25.00		
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  275.00			
SUBTOTAL of Receipts This Page (optional)	)	75.00		
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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Sanjay Vanguri  Mailing Address 9657 Atterbury Lane		Date of Receipt
	01:1: 7:: 0 -	12 31 2013
City Frederick	State Zip Code MD 21704	Transaction ID : SA11AI.8238  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia  Receipt For:  □ Primary □ General  Other (specify) ▼	Physician  Aggregate Year-to-Date ▼  300.00	
Full Name (Last, First, Middle Initial)  Dr. Paul Van Nice  Mailing Address 7101 Meadow Lane		Date of Receipt  07 25 2013
City Chara Chara	State Zip Code MD 20815	Transaction ID : SA11AI.7592
Chevy Chase  FEC ID number of contributing federal political committee.	MD 20815	Amount of Each Receipt this Period  50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial)  Dr. Paul Van Nice		Date of Receipt
Mailing Address 7101 Meadow Lane		08 23 2013
City Chevy Chase	State Zip Code MD 20815	Transaction ID : SA11AI.7691  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For:	Physician	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  350.00	
SUBTOTAL of Receipts This Page (optional)	<b></b>	125.00
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or for commercial purposes, other than using t	he name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Paul Van Nice  Mailing Address 7101 Meadow Lane		Date of Receipt
City Chevy Chase  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For:  Primary General Other (specify) ▼	State Zip Code MD 20815  C  Occupation Physician  Aggregate Year-to-Date ▼  400.00	Transaction ID : SA11AI.7787  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  3. Dr. Paul Van Nice  Mailing Address 7101 Meadow Lane  City	State Zip Code	Date of Receipt  10 25 2013  Transaction ID: SA11Al.7881
Chevy Chase  FEC ID number of contributing federal political committee.  Name of Employer	MD 20815	Amount of Each Receipt this Period  50.00  Payroll deduction
First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼	Physician  Aggregate Year-to-Date ▼  450.00	-
Full Name (Last, First, Middle Initial)  Dr. Nicholas Visnich Jr.  Mailing Address 10816 Willow Run Circle  City	State Zip Code MD 20854	Date of Receipt  10 25 2013  Transaction ID : SA11AI.7882
Potomac  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  □ Primary □ General  Other (specify) ▼	MD 20854  C  Occupation Physician  Aggregate Year-to-Date ▼  225.00	Amount of Each Receipt this Period  25.00  Payroll deduction
SUBTOTAL of Receipts This Page (optional).		125.00
TOTAL This Period (last page this line number	er only)	

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Nicholas Visnich Jr.  Mailing Address, 10816 Willow Rup Circle		Date of Receipt
Mailing Address 10816 Willow Run Circle		11 25 2013
City Potomac	State Zip Code MD 20854	Transaction ID : SA11AI.7975  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial)  Dr. Nicholas Visnich Jr.  Mailing Address 10816 Willow Run Circle		Date of Receipt  12 24 2013
City Potomac	State Zip Code MD 20854	Transaction ID : SA11AI.8066  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  275.00	
Full Name (Last, First, Middle Initial)  Dr. Nicholas Visnich Jr.		Date of Receipt
Mailing Address 10816 Willow Run Circle		12 31 2013 _
City Potomac	State Zip Code MD 20854	Transaction ID : SA11AI.8163  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼  300.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	75.00
TOTAL This Period (last page this line number	only)	

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or for commercial purposes, other than using the	e name and address of any political committee to	
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  A. Dr. Mark Vogt  Mailing Address 1149 Colonial Road		Date of Receipt  07 25 2013
City	State Zip Code	Transaction ID : SA11AI.7616
McLean	VA 22101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial)  3. Dr. Mark Vogt		Date of Receipt
Mailing Address 1149 Colonial Road		M = M / D = D / Y = Y = Y
City	08 23 2013 Transaction ID : SA11AI.7717	
McLean	State Zip Code VA 22101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer	Payroll deduction	
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial)  Dr. Mark Vogt		Date of Receipt
Mailing Address 1149 Colonial Road		09 25 2013
City	State Zip Code	Transaction ID : SA11AI.7812
McLean	VA 22101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	400.00	
SUBTOTAL of Receipts This Page (optional)		150.00
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NAME OF COMMITTEE (In Full)	ng the name and address of any political committee t				
	HESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)  Dr. Mark Vogt		Date of Receipt			
Mailing Address 1149 Colonial Road		10 25 2013			
City	State Zip Code	Transaction ID : SA11AI.7905			
McLean	VA 22101	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia	Physician				
Receipt For:	Aggregate Year-to-Date ▼	1			
Primary General	1.99.09410 104.10 7				
Other (specify) ▼	450.00				
Full Name (Last, First, Middle Initial)		Date of Receipt			
Mailing Address 1149 Colonial Road		11 25 2013			
City	State Zip Code	Transaction ID : SA11AI.7999			
McLean	VA 22101	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Payroll deduction				
First Colonies Anesthesia	Physician				
Receipt For:	Aggregate Year-to-Date ▼	1			
Primary General Other (specify) ▼	500.00				
Full Name (Last, First, Middle Initial) Dr. Mark Vogt		Date of Receipt			
Mailing Address 1149 Colonial Road		†			
1149 Colonial Road		12 24 _ 2013 _			
City	State Zip Code	Transaction ID : SA11AI.8096			
McLean	VA 22101	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia	Physician				
Receipt For:	Aggregate Year-to-Date ▼	1			
Primary General	Aggregate real to Date ₹				
Other (specify) ▼	550.00				
SUBTOTAL of Receipts This Page (ontion	nal)	150.00			
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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) FIRST COLONIES ANESTHES	IA ASSOCIATES LLC POLITICAI	_ ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Or. Mark Vogt  Mailing Address 1149 Colonial Road		Date of Receipt
City McLean	State Zip Code VA 22101	12 31 2013  Transaction ID : SA11AI.8189  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  50.00
Name of Employer  First Colonies Anesthesia  Receipt For:	Occupation Physician  Aggregate Year-to-Date ▼	Payroll deduction
Primary General Other (specify) ▼	600.00	
Full Name (Last, First, Middle Initial)  Dr. Christopher Wahlgren  Mailing Address 1200 Colvin Meadows Lane		Date of Receipt  07
City Great Falls	State Zip Code VA 22066	Transaction ID : SA11AI.7594  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  300.00	
Full Name (Last, First, Middle Initial) Dr. Christopher Wahlgren		Date of Receipt
Mailing Address 1200 Colvin Meadows Lane	7.0	08 23 2013
City Great Falls	State Zip Code VA 22066	Transaction ID : SA11AI.7693  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	150.00
TOTAL This Period (last page this line number	only)	

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	g the name and address of any political committee	
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	IESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Christopher Wahlgren  Mailing Address 1200 Colvin Meadows La	ine	Date of Receipt
City	State Zip Code	09 25 2013
Great Falls	VA 22066	Transaction ID : SA11AI.7789  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial)  3. Dr. Christopher Wahlgren  Mailing Address 1200 Colvin Meadows La	200	Date of Receipt
City	10 25 2013 Transaction ID : SA11Al.7883	
Great Falls	State Zip Code VA 22066	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	50.00	
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial)  Dr. Christopher Wahlgren		Date of Receipt
Mailing Address 1200 Colvin Meadows La	ane	11 25 2013 _
City Great Falls	State Zip Code VA 22066	Transaction ID : SA11AI.7976  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	N)	150.00
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or for commercial purposes, other than using t	he name and address of any political committee t	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Christopher Wahlgren  Mailing Address 1200 Colvin Meadows Lane		Date of Receipt
City Great Falls  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  □ Primary □ General  Other (specify) ▼	State Zip Code VA 22066  C  Occupation Physician  Aggregate Year-to-Date ▼  550.00	Transaction ID: SA11AI.8067  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  3. Dr. Christopher Wahlgren  Mailing Address 1200 Colvin Meadows Lane  City	State Zip Code	Date of Receipt  12 31 2013  Transaction ID: SA11AI.8164
Great Falls  FEC ID number of contributing federal political committee.  Name of Employer	VA 22066  C Occupation	Amount of Each Receipt this Period  50.00  Payroll deduction
First Colonies Anesthesia  Receipt For:  □ Primary □ General  □ Other (specify) ▼	Physician  Aggregate Year-to-Date ▼  600.00	_
Full Name (Last, First, Middle Initial) Dr. Timothy Wex  Mailing Address 11429 Cedar Ridge Drive  City	State Zip Code	Date of Receipt  07 25 2013  Transaction ID: SA11Al.7617
Potomac  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼	VA 20854  C Occupation Physician Aggregate Year-to-Date ▼ 300.00	Amount of Each Receipt this Period  50.00  Payroll deduction
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number	<u> </u>	

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Timothy Wex  Mailing Address 11429 Cedar Ridge Drive		Date of Receipt
City	State Zip Code	08 23 2013 Transaction ID : SA11AI.7718
Potomac	VA 20854	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For:	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial)  Dr. Timothy Wex  Mailing Address 11429 Cedar Ridge Drive		Date of Receipt
	09 25 2013	
City Potomac	State Zip Code VA 20854	Transaction ID : SA11AI.7813  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial)  Dr. Timothy Wex		Date of Receipt
Mailing Address 11429 Cedar Ridge Drive		10 25 2013
City Potomac	State Zip Code VA 20854	Transaction ID : SA11AI.7906  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	450.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number	only)	

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAL	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Timothy Wex  Mailing Address 11429 Cedar Ridge Drive		Date of Receipt
City	State Zip Code	11 25 2013 Transaction ID : SA11AI.8000
Potomac	VA 20854	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For:	Physician	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial)  Dr. Timothy Wex  Mailing Address 11429 Cedar Ridge Drive		Date of Receipt
City	12 24 2013	
Potomac	State Zip Code VA 20854	Transaction ID : SA11AI.8097  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia  Receipt For:	Physician	
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial)  Dr. Timothy Wex		Date of Receipt
Mailing Address 11429 Cedar Ridge Drive		12 31 2013
City Potomac	State Zip Code VA 20854	Transaction ID : SA11AI.8190  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	600.00	
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	150.00
TOTAL This Period (last page this line number	only)	

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or for commercial purposes, other than using th	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. David Wheeler  Mailing Address 7108 Collingwood Court		Date of Receipt
City	State Zip Code	07 25 2013
Elkridge	MD 21075	Transaction ID : SA11AI.7631  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For:	Physician  Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate real-to-bate ▼	
Full Name (Last, First, Middle Initial)  3. Dr. David Wheeler  Mailing Address 7108 Collingwood Court		Date of Receipt
City	08 23 2013	
Elkridge	State Zip Code MD 21075	Transaction ID : SA11AI.7750  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  350.00	
Full Name (Last, First, Middle Initial)  Dr. David Wheeler		Date of Receipt
Mailing Address 7108 Collingwood Court		09 25 2013 _
City Elkridge	State Zip Code MD 21075	Transaction ID : SA11AI.7826  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For:	Physician	
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number	only)	

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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHESI  Full Name (Last, First, Middle Initial) Dr. David Wheeler  Mailing Address 7108 Collingwood Court	IA ASSOCIATES LLC POLITICAI	
Dr. David Wheeler		
Mailing Address 7108 Collingwood Court		Date of Receipt
		10 25 2013
City	State Zip Code	Transaction ID : SA11AI.7919
Elkridge	MD 21075	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	450.00	
Full Name (Last, First, Middle Initial)  Dr. David Wheeler		Date of Receipt
Mailing Address 7108 Collingwood Court		M = M / D = D / Y = Y = Y = Y
City	State Zip Code	11 25 2013 Transaction ID : SA11Al.8013
Elkridge	MD 21075	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial)		Data of Receipt
Mailing Address 7108 Collingwood Court		Date of Receipt
		12 24 2013
City Elkridge	State Zip Code MD 21075	Transaction ID : SA11AI.8110  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary   General	FF0 00	
Other (specify) ▼	550.00	
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or for commercial purposes, other than using t	he name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. David Wheeler  Mailing Address 7108 Collingwood Court		Date of Receipt
	0)	12 31 2013
City Elkridge	State Zip Code MD 21075	Transaction ID : SA11AI.8203  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For:	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  600.00	
Full Name (Last, First, Middle Initial)  3. Dr. Thomas Wherry  Mailing Address 644 W 2nd Street		Date of Receipt
Mailing Address 611 W. 2nd Street	Ctote 7'- O-d-	07 25 2013
City Frederick	State Zip Code MD 21701	Transaction ID : SA11AI.7661  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  300.00	
Full Name (Last, First, Middle Initial)  Dr. Thomas Wherry		Date of Receipt
Mailing Address 611 W. 2nd Street		08 23 _ 2013 _
City Frederick	State Zip Code MD 21701	Transaction ID : SA11AI.7735  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional).  TOTAL This Period (last page this line number	<u>-</u>	150.00
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or for commercial purposes, other than using	g the name and address of any political committee				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	HESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)  Dr. Thomas Wherry  Mailing Address 611 W. 2nd Street		Date of Receipt			
City	State Zip Code	09 25 2013 Transaction ID : SA11AI.7841			
Frederick	MD 21701	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer First Colonies Anesthesia	Occupation  Physician	Payroll deduction			
Receipt For:	Aggregate Year-to-Date ▼				
Primary General  Other (specify) ▼	400.00				
Full Name (Last, First, Middle Initial)  Dr. Thomas Wherry	•	Date of Receipt			
Mailing Address 611 W. 2nd Street		10 25 2013			
City Frederick	·				
FEC ID number of contributing federal political committee.	50.00				
Name of Employer First Colonies Anesthesia	Occupation  Physician	Payroll deduction			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  450.00				
Full Name (Last, First, Middle Initial)  Dr. Thomas Wherry	'	Date of Receipt			
Mailing Address 611 W. 2nd Street		11 252013			
City Frederick	State Zip Code MD 21701	Transaction ID : SA11AI.8028  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia	point For				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00				
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SUBTOTAL of Receipts This Page (optional	al)	150.00			
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or for commercial purposes, other than using	the name and address of any political committee t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHI	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial) Dr. Thomas Wherry  Mailing Address 611 W. 2nd Street		Date of Receipt
City Frederick  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For:  □ Primary □ General □ Other (specify) ▼	State Zip Code MD 21701  C  Occupation Physician  Aggregate Year-to-Date ▼  550.00	Transaction ID : SA11AI.8125  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Thomas Wherry  Mailing Address 611 W. 2nd Street  City Frederick  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify)	State Zip Code MD 21701  C  Occupation Physician  Aggregate Year-to-Date ▼	Date of Receipt  12 31 2013  Transaction ID: SA11Al.8219  Amount of Each Receipt this Period  50.00  Payroll deduction
Full Name (Last, First, Middle Initial)  Dr. Howard Wilpon  Mailing Address 18212 Wickham Road  City Olney  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary General Other (specify)	State Zip Code MD 20832  C  Occupation Physician  Aggregate Year-to-Date ▼  300.00	Date of Receipt  07
SUBTOTAL of Receipts This Page (optional)	) <b>&gt;</b>	150.00
TOTAL This Period (last page this line numb	per only)	

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or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Howard Wilpon  Mailing Address 18212 Wickham Road		Date of Receipt
City	State Zip Code	08 23 2013 Transaction ID : SA11AI.7743
Olney  FEC ID number of contributing federal political committee.	MD 20832	Amount of Each Receipt this Period 50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary  Other (specify)	Aggregate Year-to-Date ▼  350.00	
Full Name (Last, First, Middle Initial)  3. Dr. Howard Wilpon  Mailing Address 18212 Wickham Road		Date of Receipt  09 25 2013
City Olney	State Zip Code MD 20832	Transaction ID : SA11AI.7833  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial)  Dr. Howard Wilpon		Date of Receipt
Mailing Address 18212 Wickham Road		10 25 2013
City Olney	State Zip Code MD 20832	Transaction ID : SA11AI.7926  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number	only)	

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	g the name and address of any political committee				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)  1. Dr. Howard Wilpon  Mailing Address 18212 Wickham Road		Date of Receipt			
City	State Zip Code	11 25 2013 Transaction ID : SA11AI.8020			
Olney FEC ID number of contributing	MD 20832	Amount of Each Receipt this Period  50.00			
federal political committee.  Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia Receipt For:	Physician				
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  500.00				
Full Name (Last, First, Middle Initial)  3. Dr. Howard Wilpon		Date of Receipt			
Mailing Address 18212 Wickham Road  City	State Zip Code	12 24 2013 Transport of the last of the la			
Olney	MD 20832	Transaction ID : SA11AI.8117  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00 Payroll deduction			
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00				
Full Name (Last, First, Middle Initial) C. Dr. Howard Wilpon		Date of Receipt			
Mailing Address 18212 Wickham Road		12 31 2013			
City Olney	State Zip Code MD 20832	Transaction ID : SA11AI.8210  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia  Receipt For:  Primary General  Other (specify) ▼	Physician  Aggregate Year-to-Date ▼  600.00				
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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) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)  1. Dr. Monfold Wolf  Mailing Address 4822 Tilly Dr.		Date of Receipt			
City Sykesville  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For:  Primary General Other (specify) ▼	State Zip Code MD 21784  C  Occupation Physician  Aggregate Year-to-Date ▼  300.00	7 25 2013 Transaction ID : SA11AI.7664 Amount of Each Receipt this Period 50.00 Payroll deduction			
Full Name (Last, First, Middle Initial)  Dr. Monfold Wolf  Mailing Address 4822 Tilly Dr.		Date of Receipt  08 23 2013			
City Sykesville FEC ID number of contributing federal political committee.	State Zip Code MD 21784	Amount of Each Receipt this Period  50.00			
Name of Employer First Colonies Anesthesia  Receipt For:  Primary  General  Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  350.00	Payroll deduction			
Full Name (Last, First, Middle Initial) Dr. Monfold Wolf  Mailing Address 4822 Tilly Dr.  City	State Zip Code	Date of Receipt    M			
Sykesville  FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  □ Primary □ General  Other (specify) ▼	MD 21784  C  Occupation Physician  Aggregate Year-to-Date ▼  400.00	Amount of Each Receipt this Period  50.00  Payroll deduction			
SUBTOTAL of Receipts This Page (optional	l) <b>&gt;</b>	150.00			
TOTAL This Period (last page this line num	ber only)				

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or for commercial purposes, other than using the	e name and address of any political committee to	o solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE				
Full Name (Last, First, Middle Initial)  Dr. Monfold Wolf  Mailing Address 4822 Tilly Dr.		Date of Receipt				
City	State Zip Code MD 21784	10 25 2013  Transaction ID : SA11AI.7931				
Sykesville  FEC ID number of contributing federal political committee.	C 21784	Amount of Each Receipt this Period 50.00				
Name of Employer  First Colonies Anesthesia  Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  450.00	Payroll deduction				
Full Name (Last, First, Middle Initial)  3. Dr. Monfold Wolf  Mailing Address 4822 Tilly Dr.	Date of Receipt					
City Sykesville FEC ID number of contributing federal political committee.	State Zip Code MD 21784	11 25 2013  Transaction ID: SA11AI.8025  Amount of Each Receipt this Period  50.00				
Name of Employer First Colonies Anesthesia  Receipt For:  □ Primary □ General  Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  500.00	Payroll deduction				
Full Name (Last, First, Middle Initial)  Dr. Monfold Wolf  Mailing Address 4822 Tilly Dr.  City  Sykesville	State Zip Code MD 21784	Date of Receipt  12 24 2013  Transaction ID: SA11AI.8122  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.  Name of Employer  First Colonies Anesthesia  Receipt For:  Primary  Other (specify)   General	Occupation Physician  Aggregate Year-to-Date ▼  550.00	50.00 Payroll deduction				
SUBTOTAL of Receipts This Page (optional)		150.00				
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or for commercial purposes, other than using the	he name and address of any political committee to	o solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE				
Full Name (Last, First, Middle Initial)  Dr. Monfold Wolf  Mailing Address 4822 Tilly Dr.		Date of Receipt				
	State 7in Codo	12 31 2013				
City Sykesville	State Zip Code MD 21784	Transaction ID : SA11AI.8216  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia Receipt For:	Physician					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  600.00					
Full Name (Last, First, Middle Initial)  3. You Wu		Date of Receipt				
Mailing Address 910 Dunlavin Ct.	07 25 2013					
City Timonium	State Zip Code MD 21093	Transaction ID : SA11AI.7632				
FEC ID number of contributing federal political committee.	C 21093	Amount of Each Receipt this Period  50.00				
Name of Employer First Colonies Anesthesia	Occupation	Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Physician  Aggregate Year-to-Date ▼  300.00					
Full Name (Last, First, Middle Initial)  . You Wu		Date of Receipt				
Mailing Address 910 Dunlavin Ct.		08 23 2013				
City Timonium	State Zip Code MD 21093	Transaction ID : SA11AI.7749  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia	Physician					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00					
SUBTOTAL of Receipts This Page (optional)	<u> </u>	150.00				
TOTAL This Period (last page this line number	er only)					

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	ng the name and address of any political committee	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTI	HESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  A. You Wu		Date of Receipt
Mailing Address 910 Dunlavin Ct.		09 25 2013
City	State Zip Code	Transaction ID : SA11AI.7827
Timonium	MD 21093	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) <b>B.</b> You Wu	•	Date of Receipt
Mailing Address 910 Dunlavin Ct.	10 25 2013	
City	State Zip Code	Transaction ID : SA11AI.7920
Timonium	MD 21093	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial)  C. You Wu	<u> </u>	Date of Receipt
Mailing Address 910 Dunlavin Ct.		11 25 2013
City Timonium	State Zip Code MD 21093	Transaction ID : SA11AI.8014  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia	Physician	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General  Other (specify) ▼	500.00	
	mal)	150.00

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	g the name and address of any political committee					
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	HESIA ASSOCIATES LLC POLITIC	AL ACTION COMMITTEE				
Full Name (Last, First, Middle Initial) You Wu  Mailing Address 910 Dunlavin Ct.		Date of Receipt  12 24 2013  Transaction ID : SA11Al.8111				
City	State Zip Code					
Timonium	MD 21093	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	50.00				
Name of Employer  First Colonies Anesthesia  Receipt For:	Occupation Physician	Payroll deduction				
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00					
Full Name (Last, First, Middle Initial)  You Wu  Mailing Address are Restarted.	Date of Receipt					
Mailing Address 910 Dunlavin Ct.  City	12 31 2013 Transaction ID : SA11AI.8204					
Timonium  FEC ID number of contributing federal political committee.	MD 21093	Amount of Each Receipt this Period  50.00				
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00					
Full Name (Last, First, Middle Initial)  David Wyler		Date of Receipt				
Mailing Address 6912 Granite Ridge Cou	rt	07 25 _ 2013 _				
City Baltimore	State Zip Code MD 21209	Transaction ID : SA11AI.7663  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia	,					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00					
SUBTOTAL of Receipts This Page (option	al)	150.00				
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	statements may not be sold or used by any persole name and address of any political committee to				
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAL	_ ACTION COMMITTEE			
Full Name (Last, First, Middle Initial)  David Wyler  Mailing Address 6912 Granite Ridge Court		Date of Receipt			
City	State Zip Code	08 23 2013 Transaction ID : SA11AI.7737			
Baltimore	MD 21209	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  350.00				
Full Name (Last, First, Middle Initial)  3. David Wyler		Date of Receipt			
Mailing Address 6912 Granite Ridge Court		09 25 2013			
City	State Zip Code	Transaction ID : SA11AI.7839			
Baltimore	MD 21209	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00				
Full Name (Last, First, Middle Initial)  David Wyler		Date of Receipt			
Mailing Address 6912 Granite Ridge Court		10 25 2013			
City Baltimore	State Zip Code MD 21209	Transaction ID : SA11AI.7932  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia	Physician				
Receipt For: Primary General	Aggregate Year-to-Date ▼				
Other (specify) ▼	450.00				
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	150.00			
TOTAL This Period (last page this line number	only)				

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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHE	SIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE			
Full Name (Last, First, Middle Initial) <b>1.</b> David Wyler		Date of Receipt			
Mailing Address 6912 Granite Ridge Court		11 25 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City	State Zip Code MD 21209	Transaction ID : SA11AI.8026			
Baltimore	MD 21209	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia	Physician				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General  Other (specify) ▼	500.00				
Full Name (Last, First, Middle Initial)  3. David Wyler	'	Date of Receipt			
Mailing Address 6912 Granite Ridge Court	12 24 2013 _				
City	State Zip Code	Transaction ID : SA11AI.8123			
Baltimore	MD 21209	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Payroll deduction				
First Colonies Anesthesia	Physician				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  550.00				
Full Name (Last, First, Middle Initial)  C. David Wyler		Date of Receipt			
Mailing Address 6912 Granite Ridge Court		12 31 2013			
City	State Zip Code	Transaction ID : SA11AI.8217			
Baltimore	MD 21209	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation	Payroll deduction			
First Colonies Anesthesia	Physician				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General  Other (specify) ▼	600.00				
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	150.00			
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or for commercial purposes, other than using	g the name and address of any political committee					
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	IESIA ASSOCIATES LLC POLITIC	AL ACTION COMMITTEE				
Full Name (Last, First, Middle Initial)  1. Dr. Aiqin Yu  Mailing Address 13508 Gumspring Road		Date of Receipt				
		07 25 2013				
City Rockville	State Zip Code MD 20850	Transaction ID : SA11AI.7595  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer  First Colonies Anesthesia  Receipt For:	Occupation Physician	Payroll deduction				
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼  300.00					
Full Name (Last, First, Middle Initial)  3. Dr. Aiqin Yu	•	Date of Receipt				
Mailing Address 13508 Gumspring Road	08 23 2013					
City Rockville	State Zip Code MD 20850	Transaction ID : SA11AI.7694  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	50.00					
Name of Employer First Colonies Anesthesia	Occupation Physician	— Payroll deduction				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  350.00					
Full Name (Last, First, Middle Initial)		Date of Receipt				
Mailing Address 13508 Gumspring Road		09 25 _ 2013 _				
City Rockville	State Zip Code MD 20850	Transaction ID : SA11AI.7790  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50.00				
Name of Employer	Occupation	Payroll deduction				
First Colonies Anesthesia	,					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00					
SUBTOTAL of Receipts This Page (options	ıl)	150.00				
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NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAL	L ACTION COMMITTEE		
Full Name (Last, First, Middle Initial) Dr. Aiqin Yu  Mailing Address 13508 Gumspring Road  City Rockville  FEC ID number of contributing federal political committee.	State Zip Code MD 20850	Date of Receipt  10 25 2013  Transaction ID : SA11AI.7884  Amount of Each Receipt this Period  50.00		
Name of Employer  First Colonies Anesthesia  Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation Physician  Aggregate Year-to-Date ▼  450.00	Payroll deduction		
Full Name (Last, First, Middle Initial)  Dr. Aiqin Yu  Mailing Address 13508 Gumspring Road  City  Rockville  FEC ID number of contributing federal political committee.	State Zip Code MD 20850	Date of Receipt  11 25 2013  Transaction ID : SA11AI.7977  Amount of Each Receipt this Period  50.00		
Name of Employer First Colonies Anesthesia  Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼  500.00	Payroll deduction		
Full Name (Last, First, Middle Initial)  Dr. Aiqin Yu  Mailing Address 13508 Gumspring Road  City Rockville  FEC ID number of contributing federal political committee.  Name of Employer First Colonies Anesthesia Receipt For:  Primary General Other (specify)	State Zip Code MD 20850  C Occupation Physician Aggregate Year-to-Date ▼	Date of Receipt  12 24 2013  Transaction ID: SA11AI.8068  Amount of Each Receipt this Period  50.00  Payroll deduction		
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	150.00		
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or for commercial purposes, other than using	the name and address of any political committee t	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTH	ESIA ASSOCIATES LLC POLITICA	L ACTION COMMITTEE
Full Name (Last, First, Middle Initial)  Dr. Aiqin Yu  Mailing Address 13508 Gumspring Road		Date of Receipt
City	State Zip Code	12 31 2013 Transaction ID : SA11AI.8165
Rockville  FEC ID number of contributing federal political committee.	MD 20850	Amount of Each Receipt this Period  50.00
Name of Employer First Colonies Anesthesia Receipt For:	Occupation Physician	Payroll deduction
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial)  Dr. Jungim Yun  Mailing Address 2057 Thurston Road	Date of Receipt  07 25 2013	
City Frederick	State Zip Code MD 21704	Transaction ID : SA11AI.7645  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Jungim Yun	'	Date of Receipt
Mailing Address 2057 Thurston Road	State 7in Code	08 23 2013
City Frederick	State Zip Code MD 21704	Transaction ID : SA11AI.7763  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional	)	150.00
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or for commercial purposes, other than	using the name and address of any political committee	
NAME OF COMMITTEE (In Full) FIRST COLONIES ANES	THESIA ASSOCIATES LLC POLITICA	AL ACTION COMMITTEE
A. Full Name (Last, First, Middle Initial) Dr. Jungim Yun  Mailing Address 2057 Thurston Road		Date of Receipt
City	State Zip Code	09 25 2013 Transaction ID : SA11AI.7857
Frederick	MD 21704	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
B. Dr. Jungim Yun  Mailing Address 2057 Thurston Road	Date of Receipt	
City Frederick	State Zip Code MD 21704	10 25 2013  Transaction ID : SA11AI.7951  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial)  C. Dr. Jungim Yun		Date of Receipt
Mailing Address 2057 Thurston Road		11 252013
City Frederick	State Zip Code MD 21704	Transaction ID : SA11AI.8042  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Payroll deduction
First Colonies Anesthesia Receipt For:	Physician	_
Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
	number only)	150.00

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

	FOR LINE NUMBER:				PAGE	2	10 OF	:	221	
	(check only one)									
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X 11a 11b				15		16		17		

or for commercial purposes, other than using the	e name and address of any political committee to	solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) FIRST COLONIES ANESTHES	SIA ASSOCIATES LLC POLITICAI	L ACTION COMMITTEE		
Full Name (Last, First, Middle Initial)  Dr. Jungim Yun  Mailing Address 2057 Thurston Road		Date of Receipt		
	State Zip Code	12 24 2013		
City Frederick	State Zip Code MD 21704	Transaction ID : SA11AI.8139  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction		
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼  550.00			
Full Name (Last, First, Middle Initial)  3. Dr. Jungim Yun  Mailing Address 2057 Thurston Road	Date of Receipt  12 31 2013			
City Frederick	State Zip Code MD 21704	Transaction ID : SA11AI.8233		
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  50.00		
Name of Employer First Colonies Anesthesia	Occupation Physician	Payroll deduction		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00			
Full Name (Last, First, Middle Initial)		Date of Receipt		
Mailing Address		M = M / D = D / Y = Y = Y		
City	State Zip Code	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	7		
Name of Employer	Occupation			
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼			
SUBTOTAL of Receipts This Page (optional)		100.00		
TOTAL This Period (last page this line number	only)	31840.00		

S	CHEDULE B (FEC Form 3X)		EOD LINE	NUMBER: PAGE 211 OF 221			
	EMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	INTE INDIVIDENT			
11	LIVIIZED DISDUNSEIVIEN IS	for each category of the	21b				
		Detailed Summary Page	27	28a 28b 28c X 29 30b			
Δr	ny information copied from such Reports and Staten	nents may not be sold or up	sed by any nerso				
	for commercial purposes, other than using the nam						
	NAME OF COMMITTEE (In Full)	- · ·					
$ \rangle$	FIRST COLONIES ANESTHESIA	ASSOCIATES LLC	POLITICAL	ACTION COMMITTEE			
/			. 021110/12				
_	Full Name (Last, First, Middle Initial)						
A.	Anesthesiologist PAC MD			Date of Disbursement			
				M M / D D / Y Y Y Y			
	Mailing Address 18 Pinkney Street			11 20 2013			
	Oth.	7-0-1-					
	,	State Zip Code MD 21401		Transaction ID : SB29.7556			
	Annapolis Purpose of Disbursement	MD 21401					
	Contribution		011	Amount of Each Disbursement this Period			
	Candidate Name						
			Category/ Type	4000.00			
	Office Sought: House Disbursen	nent For:	- 7 10 0				
		Primary General					
	President	Other (specify) ▼					
	State: District:						
	Full Name (Last, First, Middle Initial)						
В.	CHESAPEAKE PAC			Date of Disbursement			
				M = M / D = D / Y = Y = Y			
	Mailing Address 170 OLD ENTERPRISE ROAD			12 18 2013			
	PO BOX 5323						
		State Zip Code		Transaction ID : SB29.7574			
	UPPER MARLORO Purpose of Disbursement	MD 20774					
	Contribution		011	Amount of Each Disbursement this Period			
	Candidate Name			2 2			
			Category/ Type	5000.00			
	Office Sought: House Disbursen	nent For:	.71	,			
		Primary General					
	President	Other (specify) ▼					
	State: District:						
	Full Name (Last, First, Middle Initial)						
C.	Citizens for Adrienne Jones			Date of Disbursement			
				M M / D D / Y Y Y Y Y			
	Mailing Address 17 W. Courtland St.			12 18 2013			
	Suite 210	N.,					
		State Zip Code		Transaction ID : SB29.7573			
	Bel Air Purpose of Disbursement	MD 21014					
	Contributions		011	Amount of Each Dichursomers this Desired			
	Candidate Name			Amount of Each Disbursement this Period			
			Category/ Type	250.00			
	Office Sought: House Disbursen	nent For:	. 7   -				
		Primary General					
	President	Other (specify) ▼					
	State: MD District: 10	·					
Г	<u> </u>		l				
s	SUBTOTAL of Disbursements This Page (optional)			9250.00			
Н	3 (1 5 5)						
+	OTAL This Period (last page this line number only)						

S	CHEDULE B (FEC Form 3X)		EOD LINE	NUMBER: PAGE 212 OF 221			
	EMIZED DISBURSEMENTS	Use separate schedule(s	(check only	THE THOMBETT.			
• •	LIVILED DISDONISLIVILIANS	for each category of the Detailed Summary Page	21b	22 23 24 25 26			
		Detailed Summary Page	27	28a 28b 28c X 29 30b			
	y information copied from such Reports and Staten						
or	for commercial purposes, other than using the name	ne and address of any polit	ical committee to	solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full)						
$ \rangle$	FIRST COLONIES ANESTHESIA	ASSOCIATES LLC	POLITICAL	_ ACTION COMMITTEE			
$\angle$	Full Name (Last, First, Middle Initial)		1				
Α.	Citizens for Brian Feldman			Date of Disbursement			
				M M / D D / Y Y Y Y			
	Mailing Address PO Box 34408			11 19 2013			
	,	State Zip Code MD 20827		Transaction ID : SB29.7552			
	Bethesda Purpose of Disbursement	MD 20827					
	Contribution		011	Amount of Each Disbursement this Period			
	Candidate Name						
			Category/ Type	500.00			
	Office Sought: House Disburser	ment For:					
		Primary General					
	President	Other (specify) ▼					
_	State: District:						
D	Full Name (Last, First, Middle Initial)			Data of Dishurasment			
В.	Citizens for Brian Feldman			Date of Disbursement			
	Mailing Address PO Box 34408			12 17 2013			
	Walling / Radi 655 PO Box 34400			12 17 2010			
	City	State Zip Code		Transaction ID : SB29.7559			
	Bethesda	MD 20827		Transaction ID . 3D25.7335			
	Purpose of Disbursement Contribution		011	Amount of Fook Dishurasment this Davied			
	Candidate Name		011	Amount of Each Disbursement this Period			
	Candidate Name		Category/ Type	1500.00			
	Office Sought: House Disbursen	ment For:	Турс	, , , , , , , , , , , , , , , , , , , ,			
		Primary General					
	President	Other (specify) ▼					
	State: District:						
_	Full Name (Last, First, Middle Initial)						
C.	Citizens for Delores Kelley			Date of Disbursement			
	Matter Address BOD Control			M M / D D / Y Y Y Y Y			
	Mailing Address PO Box 21514			10 31 2013			
	City	State Zip Code					
	Baltimore	MD 21282		Transaction ID: SB29.7545			
	Purpose of Disbursement Contribution						
			011	Amount of Each Disbursement this Period			
	Candidate Name		Category/	750.00			
	Office Sought: House Disburser	ment For:	Туре				
	Senate Dispulser	Primary General					
	President	Other (specify)					
	State: MD District: 10	· · · · · · · · · · · · · · · · · · ·					
Г	1		I				
s	UBTOTAL of Disbursements This Page (optional)			2750.00			
H							
I T	OTAL This Period (last nage this line number only)	)	►				

SCHEDULE B (FEC Form 3X)		EOR LINE	NUMBER: PAGE 213 OF 221				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) (check		check only one)				
	for each category of the Detailed Summary Page	21b	22 23 24 25 26				
	_ stands sammary rago	27	28a 28b 28c X 29 30b				
Any information copied from such Reports and State							
or for commercial purposes, other than using the na	me and address of any polit	ical committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)	ACCOCIATECLIC	DOLITICAL	A CTIONI COMMITTEE				
FIRST COLONIES ANESTHESIA	ASSOCIATES LLC	POLITICAL	L ACTION COMMITTEE				
Full Name (Last, First, Middle Initial)							
A. Citizens for Douglas Peters			Date of Disbursement				
M 25 A 11			M = M / D = D / Y = Y = Y				
Mailing Address 15714 Pointer Ridge Road			12 17 2013				
City	State Zip Code						
Bowie	MD 20716		Transaction ID: SB29.7565				
Purpose of Disbursement Contribution		044					
Candidate Name		011	Amount of Each Disbursement this Period				
Candidate Name		Category/ Type	750.00				
Office Sought: House Disburse	ment For:	.,,,,					
Senate	Primary General						
President	Other (specify) ▼						
State: District:							
Full Name (Last, First, Middle Initial)  B. Committee to Flect Catherine F. F.	), , ede		Date of Disbursement				
B. Committee to Elect Catherine E. F	'ugn						
Mailing Address 819 E. Baltimore St.			12 17 _ 2013 _				
City	State Zip Code MD 21202		Transaction ID : SB29.7563				
Baltimore Purpose of Disbursement	MD 21202						
Contribution		011	Amount of Each Disbursement this Period				
Candidate Name		Category/	250.00				
		Type	250.00				
	ment For:						
Senate President	Primary General Other (specify) ▼						
State: MD District:	Curior (opeciny)						
Full Name (Last, First, Middle Initial)							
C. Committee to Elect Eric Bromwell			Date of Disbursement				
<del></del>			M M / D D / Y Y Y Y				
Mailing Address 1 Minte Drive			12 17 2013				
City	State Zip Code						
Baltimore	MD 21236		Transaction ID: SB29.7564				
Purpose of Disbursement Contribution		Tau'					
Candidate Name		011	Amount of Each Disbursement this Period				
Candidate Name		Category/ Type	250.00				
Office Sought:   House   Disburse	ment For:	1,700					
Senate	Primary General						
President	Other (specify) ▼						
State: MD District:							
OUDTOTAL of Disharana is Till Disharana			1250.00				
SUBTOTAL of Disbursements This Page (optional).		<u> </u>	1255.55				
TOTAL This Period (last page this line number only	·)						

S	CHEDULE B (FEC Form 3X)	FOR LIN			LINE	E NUMBER: PAGE 214 OF 221						
IT	EMIZED DISBURSEMENTS	Use separate schedule		_	ck only one)							
•		for each category of th Detailed Summary Pag			21b		22		23 28b	24		
_				27			28a			28		
	ly information copied from such Reports and Statem for commercial purposes, other than using the name											
	NAME OF COMMITTEE (In Full)	,,,										
	FIRST COLONIES ANESTHESIA	ASSOCIATES LL	C P	OLIT	TCA	LA	ACTIO	) NC	CO	MMI	TTEE	
_	Full Name (Last, First, Middle Initial)					Ι.	D	D: 1				
Α.	Committee to Elect Joan Carter Co	nway				'	Date of	Disbi		_		
	Mailing Address 2831 Hillen St.						11	]	19		2013	
	-	State Zip Code					Trans	action	חוי	: SB29	7549	
		MD 21218					mans	actioi	טו ו	. 0023	., 040	
	Purpose of Disbursement Contribution		lг	011	П	,	Amount	of Ea	ach	Disburs	sement th	is Period
	Candidate Name		٦ ٦	Catego	ory/	ш		-	-	-		
				Type				- 7			10	000.00
	President	nent For: Primary ☐ Genera Other (specify) ▼	ıl									
_	State: MD District: 43											
В.	Full Name (Last, First, Middle Initial)	_				١.	Date of	Diob	ıroo	mont		
υ.	Committee to Elect Ted Sophocleu	IS				'	M = M	וטפוט	D I	_	Y	V V
	Mailing Address 6584 Brentwood Road						10	]	3		2013	
	,	State Zip Code MD 21090					Trans	actio	ı ID	: SB29	.7546	
	Purpose of Disbursement	MD 21090				-						
	Contribution			011		/	Amount	of Ea	ach	Disburs	ement th	is Period
	Candidate Name			Catego Type							1	00.00
		nent For:  Primary Genera  Other (specify)	ıl									
	Full Name (Last, First, Middle Initial)											
C.	Elect John Cardin						Date of	Disbu	ırse	ment		
						-	M = M	/	D I		Y Y	
	Mailing Address 211 St. Paul Place					Ш	10	1 1	3′	1	2013	
	,	State Zip Code					Trans	action	חו	: SB29	7542	
		MD 21202					mans	actioi	טו ו	. 0023	.7542	
	Purpose of Disbursement Contribution		ΗГ	011			A	-4 -		Diala		ia Daviad
	Candidate Name			Catego	ory/		Amount	OT E	acn	Disburs	sement th	000.00
	Office Sought: House Disbursen	nent For:				1 '						
		Primary Genera	ıl									
		Other (specify) ▼										
	State: District:											
s	UBTOTAL of Disbursements This Page (optional)				▶						40	00.00
1	OTAL This Period (last page this line number only)				▶			,				

S	CHEDULE B (FEC Form 3X)	FOR LINE			NUMBER: PAGE 215 OF 221		
	EMIZED DISBURSEMENTS	Use separate schedule(s) (check only			I NOMBER.		
••	LIMILLO DIODONOLIVILINIO		category of the Summary Page	` 21b	22 23 24 25 26		
		Detailed 3	builliary Fage	27	28a 28b 28c X 29 30b		
	ny information copied from such Reports and Statem						
or	for commercial purposes, other than using the name	ne and addre	ess of any politi	cal committee to	solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)						
$ \rangle$	FIRST COLONIES ANESTHESIA	ASSOCI	ATES LLC	POLITICAL	_ ACTION COMMITTEE		
<u></u>	Full Name (Last, First, Middle Initial)						
Α.	Friends of Anthony G. Brown				Date of Disbursement		
					M M / D D / Y Y Y Y		
	Mailing Address 1010 Hull Street				11 19 2013		
	Suite 202	21-1-	Zin Conto				
	City S Baltimore	State MD	Zip Code 21230		Transaction ID : SB29.7551		
	Purpose of Disbursement		21230				
	Contribution			011	Amount of Each Disbursement this Period		
	Candidate Name			Category/	4500.00		
				Type	1500.00		
	Office Sought: House Disbursen						
	Senate President	Primary	General				
	State: MD District:	Other (spec	IIIy) <b>▼</b>				
_	Full Name (Last, First, Middle Initial)						
В.					Date of Disbursement		
	Therias of Glarence Lam				M = M / D = D / Y = Y = Y		
	Mailing Address PO Box 891				12 17 2013		
	,	State	Zip Code		Transaction ID : SB29.7570		
	Columbia Purpose of Disbursement	MD	21044				
	Contribution			011	Amount of Each Disbursement this Period		
	Candidate Name			Category/			
				Type	250.00		
	Office Sought: House Disbursen						
		Primary	General				
	President State: District:	Other (spec	ıfy) <b>▼</b>				
_	Full Name (Last, First, Middle Initial)						
C.	Friends of David Brinkley				Date of Disbursement		
•	Therius of David Britikley				M M / D D / Y Y Y Y		
	Mailing Address PO Box 321				12 17 2013		
		State MD	Zip Code 21774		Transaction ID : SB29.7560		
	Purpose of Disbursement	IVID	21774				
	Contribution			011	Amount of Each Disbursement this Period		
	Candidate Name			Category/			
				Type	250.00		
	Office Sought: House Disbursen			$\neg$			
	Senate	Primary	General				
	State: District:	Other (spec	arry) 🔻				
	Diotriot.						
١,	UBTOTAL of Disbursements This Page (optional)				2000.00		
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+	OTAL This Period (last page this line number only)						

SCHEDULE B (FEC Form 3X)		EOD LINE		FOD LINE	NUMBER: PAGE 216 OF 221			
ITEMIZED DISBURSEMENTS		Use separate schedule(s) (check on		(check only	IL NOMBER.			
		for each category of the Detailed Summary Page		21b	22 23 24 25 26			
		Detailed Suffir	nary Faye	27	28a 28b 28c X 29 30b			
Ar	ny information copied from such Reports and Staten	nents may not be	e sold or used	by any perso	on for the purpose of soliciting contributions			
	for commercial purposes, other than using the nam							
	NAME OF COMMITTEE (In Full)							
$  \rangle$	FIRST COLONIES ANESTHESIA	ASSOCIAT	ES LLC P	OLITICAL	. ACTION COMMITTEE			
$\angle$				·				
٨	Full Name (Last, First, Middle Initial)				Data of Diahurasment			
A.	Friends of Jim Mathias				Date of Disbursement			
	Mailing Address 3546 Figgs Landing Road				12 17 2013			
	5 50 to higgs Editioning House							
	City	State Zip	Code		Transaction ID - SP20 7569			
		MD 218	363		Transaction ID : SB29.7568			
	Purpose of Disbursement Contribution			011	Amount of Fook Dishare would this D			
	Candidate Name			011	Amount of Each Disbursement this Period			
	Candidate Name			Category/ Type	250.00			
	Office Sought: House Disbursen	nent For:		туре				
		Primary	General					
		Other (specify)						
_	State: District:							
	Full Name (Last, First, Middle Initial)							
В.	Friends of Joanne Benson				Date of Disbursement			
	Mailian Adduses				M M / D D / Y Y Y Y Y			
	Mailing Address PO Box 4700				12 17 2013			
	City	State Zip	Code		Towns of the ID ODGS TOG			
	Capitol Heights		791		Transaction ID : SB29.7569			
	Purpose of Disbursement Contribution			1				
				011	Amount of Each Disbursement this Period			
	Candidate Name			Category/	250.00			
	Office Sought:	nent For:		Туре				
		Primary	General					
		Other (specify)						
	State: MD District:	, ,	•					
_	Full Name (Last, First, Middle Initial)							
C.	Friends of Kathy Szeliga				Date of Disbursement			
					M M / D D / Y Y Y Y			
	Mailing Address PO Box 40				08 09 2013			
	City	State Zip	Code					
	•		087		Transaction ID : SB29.7537			
	Purpose of Disbursement							
	Contribution			011	Amount of Each Disbursement this Period			
	Candidate Name	<u> </u>		Category/	1500.00			
	000			Туре	1500.00			
	Office Sought: House Disbursen		Conoral					
		Primary Other (specify)	General					
	State: MD District:	onior (apecity)	▼					
Г	THE STATE OF THE S							
, ا	SUBTOTAL of Disbursements This Page (optional)				2000.00			
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٦ ا	OTAL This Period (last page this line number only)							

S	CHEDULE B (FEC Form 3X)	FOR LINE			NUMBER: PAGE 217 OF 221			
	EMIZED DISBURSEMENTS	Use separate schedule(s) (check o			R LINE NUMBER: PAGE 217 OF 221 eck only one)			
11	EIVIIZED DISDUNSEIVIEN IS	for each cate		21b	22 23 24 25 26			
		Detailed Sun	nmary Page	27	28a 28b 28c X 29 30b			
Δr	y information copied from such Reports and Statem	nents may not	he sold or use	ed by any perso				
	for commercial purposes, other than using the nam							
	NAME OF COMMITTEE (In Full)		·					
$ \rangle$	FIRST COLONIES ANESTHESIA	ASSOCIAT	TESTICT	POLITICAL	ACTION COMMITTEE			
		.55551/1		. 52.710/(2	THE TOTAL CONTINUE FILE			
_	Full Name (Last, First, Middle Initial)							
Α.	Friends of Ken Ulman				Date of Disbursement			
					M M / D D / Y Y Y Y			
	Mailing Address 6030 Daybreak Circle, Suite 150				11 20 2013			
	City	State Zi	p Code					
			1029		Transaction ID : SB29.7557			
	Purpose of Disbursement		.525					
	Contribution			011	Amount of Each Disbursement this Period			
	Candidate Name			Category/				
				Type	4000.00			
	Office Sought: House Disbursen	nent For:						
		Primary	General					
		Other (specify)	▼					
_	State: District:							
P	Full Name (Last, First, Middle Initial)				Data of Diahura			
В.	Friends of Kirill Reznik				Date of Disbursement			
	Mailing Address 18469 Stone Hollow Dr.				12 17 2013			
	18409 Stone Hollow Dr.				12 11 2013			
	City	State Zi	p Code		Transaction ID : CD00 7570			
		MD 2	0874		Transaction ID : SB29.7572			
	Purpose of Disbursement Contribution							
				011	Amount of Each Disbursement this Period			
	Candidate Name	Categor			250.00			
	Office Sought: House Disbursen	nent For:		Туре				
		Primary	General					
		Other (specify)						
	State: MD District: 39	(-500.1)	•					
_	Full Name (Last, First, Middle Initial)							
C.	Friends of Mary-Dulany James				Date of Disbursement			
					M M / D D / Y Y Y Y			
	Mailing Address PO Box 417				11 19 2013			
	-							
	•		ip Code 1078		Transaction ID: SB29.7555			
	Purpose of Disbursement	2 טועו	10/0					
	Contribution			011	Amount of Each Disbursement this Period			
	Candidate Name			Category/				
				Type	1000.00			
	Office Sought: House Disbursen	nent For:			, , , , , , , , , , , , , , , , , , , ,			
		Primary	General					
		Other (specify)	▼					
	State: MD District: 34							
					5250.00			
Ls	UBTOTAL of Disbursements This Page (optional)			······	3230.00			
۱,	OTAL This Period (last nage this line number only)							

#### S 17

S	CHEDULE B (FEC Form 3X)			EOD LINE	FOR LINE NUMBER: PAGE 218 OF 221			
	EMIZED DISBURSEMENTS	Use separate schedule(s)						
••		for each category of the Detailed Summary Page		21b	22 23 24 25 2			
		Detailed	ourninary rage	27	28a 28b 28c X 29 30b			
	y information copied from such Reports and Staten							
or	for commercial purposes, other than using the name	e and addr	ess of any politi	cal committee to	o solicit contributions from such committee.			
$  \rangle$	NAME OF COMMITTEE (In Full)	A C C C C I	IATECLIC	DOLUTION	A CTIONI COMMITTEE			
/	FIRST COLONIES ANESTHESIA	45500	IATES LLC	POLITICAL	L ACTION COMMITTEE			
	Full Name (Last, First, Middle Initial)							
A.	Friends of Pete Hammen				Date of Disbursement			
	M. W. Add				M = M / D = D / Y = Y = Y			
	Mailing Address 188 Main Street Suite 1				11 19 2013			
		State	Zip Code					
	7	MD	21401		Transaction ID: SB29.7554			
	Purpose of Disbursement Contribution							
	Candidate Name			011	Amount of Each Disbursement this Period			
	Candidate Name			Category/ Type	1000.00			
	Office Sought:	nent For:		- 7/0-0				
	Senate	Primary	General					
		Other (spec	cify) 🔻					
_	State: MD District:							
В.	Full Name (Last, First, Middle Initial)  Friends of Roger Manno				Date of Disbursement			
	Therius of Roger Marino				M M / D D / Y Y Y Y			
	Mailing Address 2138 Merrifields Dr.				11 19 2013			
	,	State MD	Zip Code 20906		Transaction ID : SB29.7548			
	Purpose of Disbursement		20300					
	Contribution			011	Amount of Each Disbursement this Period			
	Candidate Name			Category/	1000.00			
	Office Sought:	ant For		Type	1000.00			
		Primary	General					
		Other (spec						
	State: MD District:		·					
Ξ	Full Name (Last, First, Middle Initial)							
C.	Friends of Susan Krebs				Date of Disbursement			
	Mailing Address 5835 Monroe Avenue				11 19 2013			
	Maining / Red 2000 Mornoc Avenue							
	•	State	Zip Code		Transaction ID : SB29.7550			
	Eldersburg Purpose of Disbursement	MD	21784					
	Contribution			011	Amount of Each Disbursement this Period			
	Candidate Name			Category/				
				Type	250.00			
	Office Sought: House Disbursen							
		Primary	General					
	State: District:	Other (spec	city) 🔻					
Г	Side Side Side Side Side Side Side Side							
s	UBTOTAL of Disbursements This Page (optional)				2250.00			
$\vdash$	<u> </u>							
Т	OTAL This Period (last page this line number only)							

#### S 17

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 219 OF 221			
-	Use separate schedule(s)	(check only	NOMBER.		
ITEMIZED DISBURSEMENTS	for each category of the	21b	22 23 24 25 26		
	Detailed Summary Page	27	28a 28b 28c X 29 30b		
Any information copied from such Reports and Stater	nents may not be sold or us	ed by any ners			
or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full)					
FIRST COLONIES ANESTHESIA	ASSOCIATES LLC	<b>POLITICAL</b>	ACTION COMMITTEE		
<u>/</u>					
Full Name (Last, First, Middle Initial)			D (D) .		
A. Supports of Thomas Middleton			Date of Disbursement		
Mailing Address 11 Bladen Street			12 17 2013		
Maining Address 11 Bladen Street			12 17 2010		
City	State Zip Code		Transaction ID : CD20 7567		
Annapolis	MD 21401		Transaction ID: SB29.7567		
Purpose of Disbursement Contribution		044			
Candidate Name		011	Amount of Each Disbursement this Period		
Candidate Name		Category/ Type	1000.00		
Office Sought: House Disburser	ment For:	Туре			
▼ Senate	Primary General				
President	Other (specify) ▼				
State: MD District:					
Full Name (Last, First, Middle Initial)			5		
В.			Date of Disbursement		
Mailing Address			M M / D D / Y Y Y Y		
Walling Address					
City	State Zip Code				
D					
Purpose of Disbursement			Amount of Each Disbursement this Period		
Candidate Name		0.11	Amount of Each Bioducement this Feriod		
		Category/ Type			
Office Sought: House Disburser	nent For:	7.			
Senate	Primary General				
President	Other (specify) ▼				
State: District:					
Full Name (Last, First, Middle Initial)  C.			Date of Disbursement		
<b>.</b>			M M / D D / Y Y Y Y		
Mailing Address					
City	State Zip Code				
Purpose of Disbursement	T				
•			Amount of Each Disbursement this Period		
Candidate Name		Category/	Timouni di Zudi. Dissultani timo i diisa		
		Type			
Office Sought: House Disburser					
Senate   President	Other (specify) —				
State: District:	Other (specify) ▼				
2.5					
SUBTOTAL of Disbursements This Page (optional)			1000.00		
TOTAL This Period (last page this line number only)			29750.00		

#### SCHEDULE H4 (FEC Form 3X)

### DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE	220	OF	221	
FOR L	INE 2	1a OF	FORM	ЗХ

NAME OF COMMITTEE (In Full)

	ST COLONIES ANESTHESIA	4 A3300	SIATES ELO	1 OLITICA					
	Name (Last, First, Middle Initial)		Allocated Activity or Event:						
	arbara Marx Brocato & Asso	ciates			Ad	ministrative	e Fundr	aising E	xempt
ivia	iling Address 18 Pinkney Street				U Vo	ter Drive	Direct	Candidate Si	upport
City		State	Zip Code		Pu	blic Comm	ref to par	ty only) by PA	AC
	nnapolis rpose of Disbursement:	MD	21401		Alloca	ated Activit	y or Event	Year-To-Date	
Lo	bbying expense							12440.21	
	tivity or Event Identifier: dministrative			Category/		M	/ D D	/ Y Y Y	V
А	ummstrative			Type	Date	08	02	2013	
	FEDERAL SHARE	+	NONFEDERAL	SHARE	=		TOTAL AMO	DUNT	
	0.00		, , ,	2500.00				2500.00	
	l Name (Last, First, Middle Initial)	Transactio	n ID : H4.7534			ed Activity	or Event:		
	arbara Marx Brocato & Associates				_ X Ad	lministrative	e Fundr	aising E	xempt
Ma	iling Address 18 Pinkney Street				U Vo	ter Drive	Direct	Candidate Si	upport
City		State	Zip Code		Pu	blic Comm	ref to par	ty only) by PA	AC
	napolis	MD	21401		Alloca	ated Activit	y or Event	Year-To-Date	
	rpose of Disbursement: bbying expense			· · · ·		. ,	, ,	15151.89	
	tivity or Event Identifier: Iministrative			Category/ Type	Date	10	/ 31	/ Y Y Y Y 2013	Y
	FEDERAL SHARE	+	NONFEDERAL	SHARE	=		TOTAL AMO	DUNT	
	FEDERAL SHARE 0.00	+	NONFEDERAL	SHARE 2711.68	] [		TOTAL AMO	2711.68	
	<del> </del>		NONFEDERAL		Allocate	ed Activity	or Event:	2711.68	xempt
Ba	0.00  I Name (Last, First, Middle Initial)		7 7		Allocate	- ,	or Event:	2711.68	
Ma City	0.00  I Name (Last, First, Middle Initial) arbara Marx Brocato & Associates iling Address 18 Pinkney Street	Transactio	on ID : H4.7535  Zip Code		Allocate  Allocate  Vo	ed Activity of ministrative ter Drive	or Event: e Fundr	2711.68 aising	upport
Ma City An	0.00  I Name (Last, First, Middle Initial) arbara Marx Brocato & Associates iling Address 18 Pinkney Street  y inapolis	Transactio	on ID : H4.7535		Allocate  Ad  Vo	ed Activity of ministrative ter Drive blic Comm	or Event:  Fundr  Direct	2711.68  aising E	upport
Ma City An Pur	0.00  I Name (Last, First, Middle Initial) arbara Marx Brocato & Associates illing Address 18 Pinkney Street  y mapolis rpose of Disbursement: bbying expense	Transactio	on ID : H4.7535  Zip Code		Allocate  Ad  Vo	ed Activity of ministrative ter Drive blic Comm	or Event:  Fundr  Direct	2711.68  aising Example Exampl	upport
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City An Pui Lo	0.00  I Name (Last, First, Middle Initial) arbara Marx Brocato & Associates illing Address 18 Pinkney Street  y mapolis rpose of Disbursement: bbying expense tivity or Event Identifier:	Transactio	on ID : H4.7535  Zip Code	2711.68  Category/ Type	Allocate  Add  Vo  Pu  Alloca	ad Activity of ministrative ter Drive blic Commated Activity	or Event:  Fundr  Direct  ref to par  y or Event	aising E: Candidate Si ty only) by PA Year-To-Date 16401.89	upport
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City An Pui Lo	I Name (Last, First, Middle Initial) arbara Marx Brocato & Associates iling Address 18 Pinkney Street  y mapolis rpose of Disbursement: bbying expense tivity or Event Identifier: Iministrative	State MD	Zip Code 21401	Category/ Type	Allocate  Add  Vo  Pu  Alloca	ad Activity of ministrative ter Drive blic Commated Activity	or Event:  Fundr  Direct  (ref to par  y or Event	2711.68  aising Example Exampl	upport
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Ba Ma City An Pul Lo Act Add	I Name (Last, First, Middle Initial) arbara Marx Brocato & Associates iling Address 18 Pinkney Street  y unapolis rpose of Disbursement: bbying expense tivity or Event Identifier: Iministrative  FEDERAL SHARE  0.00  OTAL of Allocated Federal and NonFeder FEDERAL SHARE	State MD	Zip Code 21401 NONFEDERAL	Category/ Type SHARE 1250.00 SHARE 6461.68	Allocate  X Ad  Vo  Pu  Alloca  Date  =	ad Activity of ministrative ter Drive blic Commated Activity	or Event:  Fundr  Direct  (ref to par  y or Event	2711.68  aising E: Candidate Si ty only) by PA Year-To-Date 16401.89  / 2013  DUNT 1250.00	uppor

#### SCHEDULE H4 (FEC Form 3X)

### DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE	22	1 0	F	221	
FOR	LINE	21a	OF	FORM	зх

NAME OF COMMITTEE (In Full)

<u>F</u>	IRST COLONIES ANESTHESIA ASSOCIATES LLC	POLITICA	
A.	Full Name (Last, First, Middle Initial)  Transaction ID: H4.7536		Allocated Activity or Event:
	Barbara Marx Brocato & Associates		Administrative Fundraising Exempt
	Mailing Address 18 Pinkney Street		Voter Drive Direct Candidate Support
	City State Zip Code		Public Comm (ref to party only) by PAC
	Annapolis MD 21401	T	- Allocated Activity or Event Year-To-Date
	Purpose of Disbursement: Lobbying expense		17840.01
	Activity or Event Identifier:	Category/	M = M / D = D / Y = Y = Y
	Administrative	Type	Date 12 18 2013
	FEDERAL SHARE + NONFEDERA	L SHARE	= TOTAL AMOUNT
	0.00	1438.12	1438.12
В.	Full Name (Last, First, Middle Initial)		Allocated Activity or Event:
			Administrative Fundraising Exempt
	Mailing Address		Voter Drive Direct Candidate Support
	City State Zip Code		Public Comm (ref to party only) by PAC
	Purpose of Disbursement:		Allocated Activity or Event Year-To-Date
	Activity or Event Identifier:	Category/ Type	Date
	FEDERAL SHARE + NONFEDERA	L SHARE	= TOTAL AMOUNT
	FEDERAL SHARE + NONFEDERA	L SHARE	= TOTAL AMOUNT
	FEDERAL SHARE + NONFEDERA	L SHARE	
C.	FEDERAL SHARE + NONFEDERAL SHARE	L SHARE	Allocated Activity or Event:
<u></u>		L SHARE	Allocated Activity or Event:
C.	Full Name (Last, First, Middle Initial)	L SHARE	Allocated Activity or Event:  Administrative Fundraising Exempt
C.	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code	L SHARE	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support
<u> </u>	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement:	L SHARE	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC
c.	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code	Category/	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date
<u>с.</u>	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement:  Activity or Event Identifier:	Category/ Type	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  Date
c.	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement:	Category/ Type	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date
<u>c.</u>	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement:  Activity or Event Identifier:	Category/ Type	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  Date
	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement:  Activity or Event Identifier:  FEDERAL SHARE + NONFEDERA	Category/ Type	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  Date
	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement:  Activity or Event Identifier:	Category/ Type	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  Date
	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement:  Activity or Event Identifier:  FEDERAL SHARE + NONFEDERA  JBTOTAL of Allocated Federal and NonFederal Activity This Page	Category/ Type	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  TOTAL AMOUNT  TOTAL AMOUNT
sı	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement:  Activity or Event Identifier:  FEDERAL SHARE + NONFEDERA  JBTOTAL of Allocated Federal and NonFederal Activity This Page FEDERAL SHARE + NONFEDERA  0.00  OTAL This Period (last page for each line only)(Federal share to 21(a)(i) ar	Category/ Type  L SHARE  1438.12  Id NonFederal sh	Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  TOTAL AMOUNT  TOTAL AMOUNT  1438.12
	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement:  Activity or Event Identifier:  FEDERAL SHARE + NONFEDERA  JBTOTAL of Allocated Federal and NonFederal Activity This Page FEDERAL SHARE + NONFEDERAL  0.00	Category/ Type  L SHARE  1438.12  Id NonFederal sh	Allocated Activity or Event:  Administrative Fundraising Exempt Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  TOTAL AMOUNT  TOTAL AMOUNT  1438.12