FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines. 12FE4M5

Fresenius Medical Care North America PAC

ADDRESS (number and street) ▼

801 Pennsylvania Avenue, NW

Suite 255

☐ Check if different than previously reported. (ACC)

Washington | DC | 20004 –

CITY ▲ STATE ▲ ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼** C C00401299

3. IS THIS REPORT ☐ NEW (N) **OR** ☒ AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2)
- ☐ October 15 Quarterly Report (Q3)
- ☐ January 31 Year-End Report (YE)
- ☐ July 31 Mid-Year Report (Non-election Year Only) (MY)
- ☐ Termination Report (TER)

(b) Monthly Report Due On:

☒ Feb 20 (M2)	☐ May 20 (M5)	☐ Aug 20 (M8)	☐ Nov 20 (M11) (Non-Election Year Only)
☐ Mar 20 (M3)	☐ Jun 20 (M6)	☐ Sep 20 (M9)	☐ Dec 20 (M12) (Non-Election Year Only)
☐ Apr 20 (M4)	☐ Jul 20 (M7)	☐ Oct 20 (M10)	☐ Jan 31 (YE)

(c) 12-Day **PRE**-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R) ☐ Convention (12C) ☐ Special (12S)

Election on MM / DD / YYYY in the State of

(d) 30-Day **POST**-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period 01 / 01 / 2015 through 01 / 31 / 2015

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

Type or Print Name of Treasurer Eric Bishop

Signature of Treasurer *Eric Bishop* ***[Electronically Filed]*** Date 12 / 21 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only							

FEC FORM 3X
Rev. 12/2004

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

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

Write or Type Committee Name

Fresenius Medical Care North America PAC

Report Covering the Period: From: 01 / 01 / 2015 To: 01 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2015		93762.04
(b) Cash on Hand at Beginning of Reporting Period	93762.04	
(c) Total Receipts (from Line 19)	15294.82	15294.82
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	109056.86	109056.86
7. Total Disbursements (from Line 31)	58689.90	58689.90
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	50366.96	50366.96
9. Debts and Obligations Owed **TO** the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed **BY** the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

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

DETAILED SUMMARY PAGE
of Receipts

FEC **Form 3X** (Rev. 06/2004)

Write or Type Committee Name

Fresenius Medical Care North America PAC

Report Covering the Period: From: M M 01 / D D 01 / Y Y Y Y 2015 To: M M 01 / D D 31 / Y Y Y Y 2015

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	7196.97	7196.97
(ii) Unitemized	7745.67	7745.67
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	14942.64	14942.64
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ▶	14942.64	14942.64
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	352.18	352.18
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ▶	15294.82	15294.82
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	15294.82	15294.82

DETAILED SUMMARY PAGE
of Disbursements

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

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	189.90	189.90
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	189.90	189.90
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	58500.00	58500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ▶	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	58689.90	58689.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	58689.90	58689.90

DETAILED SUMMARY PAGE
of Disbursements

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

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	14942.64	14942.64
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	14942.64	14942.64
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	189.90	189.90
37. Offsets to Operating Expenditures (from Line 15, page 3)	352.18	352.18
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶	-162.28	-162.28

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: **F3XA**
Transaction ID :

Amendment to correct inaccurate Line 15 and Line 17 totals.

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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

NAME OF COMMITTEE (In Full)
Fresenius Medical Care North America PAC

A. Full Name (Last, First, Middle Initial): Kim Sonnen
Mailing Address: 1875 I St NW, Fl 12
City: Washington State: DC Zip Code: 20006-5409
FEC ID number of contributing federal political committee: C
Name of Employer: Fresenius Medical Care NA
Occupation: SVP Marketing & Managed Care
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 390.00
Date of Receipt: 01 / 30 / 2015
Transaction ID : A456F1B3CB9884457B22
Amount of Each Receipt this Period: 390.00
Payroll Deduction: $390.00/

B. Full Name (Last, First, Middle Initial): Nicholas Brownlee
Mailing Address: 1875 I St NW, Fl 12
City: Washington State: DC Zip Code: 20006-5409
FEC ID number of contributing federal political committee: C
Name of Employer: Fresenius Medical Care NA
Occupation: President SRM
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 576.90
Date of Receipt: 01 / 30 / 2015
Transaction ID : A7FAF086B2C4F4C6ABD4
Amount of Each Receipt this Period: 576.90
Payroll Deduction: $576.90/

C. Full Name (Last, First, Middle Initial): Deborah Harvey
Mailing Address: 100 Galleria Pkwy SE, Ste 500
City: Atlanta State: GA Zip Code: 30339-3165
FEC ID number of contributing federal political committee: C
Name of Employer: Fresenius Medical Care NA
Occupation: Senior Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 450.00
Date of Receipt: 01 / 30 / 2015
Transaction ID : A7E8370F2C4854F00BF5
Amount of Each Receipt this Period: 450.00
Payroll Deduction: $450.00/

SUBTOTAL of Receipts This Page (optional) ▶ 1416.90

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Fresenius Medical Care North America PAC

A. Full Name (Last, First, Middle Initial): Donna McCarthy
Mailing Address: 920 Winter St
City: Waltham | State: MA | Zip Code: 02451-1521
FEC ID number of contributing federal political committee: C
Name of Employer: Fresenius Medical Care NA
Occupation: Division President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 346.14
Date of Receipt: 01 / 30 / 2015
Transaction ID : A533C9FE0CF7142A7B19
Amount of Each Receipt this Period: 346.14
Payroll Deduction: $346.14/

B. Full Name (Last, First, Middle Initial): Lisa Dombro
Mailing Address: 927 Prairie Ave
City: Park Ridge | State: IL | Zip Code: 60068-3937
FEC ID number of contributing federal political committee: C
Name of Employer: Fresenius Medical Care NA
Occupation: Senior Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 576.93
Date of Receipt: 01 / 30 / 2015
Transaction ID : AD15066B1B4A046E5874
Amount of Each Receipt this Period: 576.93
Payroll Deduction: $576.93/

C. Full Name (Last, First, Middle Initial): Brian Silva
Mailing Address: 920 Winter St
City: Waltham | State: MA | Zip Code: 02451-1521
FEC ID number of contributing federal political committee: C
Name of Employer: Fresenius Medical Care NA
Occupation: SVP, Human Resources & Admin
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 576.93
Date of Receipt: 01 / 30 / 2015
Transaction ID : AE16B30D74613479EB6F
Amount of Each Receipt this Period: 576.93
Payroll Deduction: $576.93/

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Fresenius Medical Care North America PAC

A. Full Name (Last, First, Middle Initial): Douglas G. Kott
Mailing Address: 920 Winter St
City: Waltham State: MA Zip Code: 02451-1521
FEC ID number of contributing federal political committee: C
Name of Employer: Fresenius Medical Care NA
Occupation: Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 576.90
Date of Receipt: 01 / 30 / 2015
Transaction ID : A70CD1B30A2754E46954
Amount of Each Receipt this Period: 576.90
Payroll Deduction: $576.90/

B. Full Name (Last, First, Middle Initial): Liam Walsh
Mailing Address: 1875 I St NW Fl 12
City: Washington State: DC Zip Code: 20006-5409
FEC ID number of contributing federal political committee: C
Name of Employer: Fresenius Medical Care NA
Occupation: VP Finance
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 201.00
Date of Receipt: 01 / 30 / 2015
Transaction ID : A11451BEFBCEF48DC815
Amount of Each Receipt this Period: 201.00
Payroll Deduction: $201.00/

C. Full Name (Last, First, Middle Initial): Robert Sepucha
Mailing Address: 920 Winter St
City: Waltham State: MA Zip Code: 02451-1521
FEC ID number of contributing federal political committee: C
Name of Employer: Fresenius Medical Care NA
Occupation: Senior Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 576.93
Date of Receipt: 01 / 30 / 2015
Transaction ID : AF19FACB284E04FA9A25
Amount of Each Receipt this Period: 576.93
Payroll Deduction: $576.93/

SUBTOTAL of Receipts This Page (optional) ▶ 1354.83

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
Fresenius Medical Care North America PAC

A. Full Name (Last, First, Middle Initial): Jeffrey Hymes
Mailing Address: 750 Old Hickory Blvd, Ste 230
City: Brentwood State: TN Zip Code: 37027-4528
FEC ID number of contributing federal political committee: C
Name of Employer: Fresenius Medical Care NA
Occupation: Doctor
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 01 / 30 / 2015
Transaction ID : A71D7FF953931422CA2D
Amount of Each Receipt this Period: 300.00
Payroll Deduction: $300.00/

B. Full Name (Last, First, Middle Initial): Phil Hayden
Mailing Address: 8 King Rd
City: Rockleigh State: NJ Zip Code: 07647-2500
FEC ID number of contributing federal political committee: C
Name of Employer: Fresenius Medical Care NA
Occupation: VP Finance
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2265.24
Date of Receipt: 01 / 30 / 2015
Transaction ID : A35CA7046CD214A4CBD7
Amount of Each Receipt this Period: 2265.24
Payroll Deduction: $2265.24/

C. Full Name (Last, First, Middle Initial): Patrick McCarthy
Mailing Address: 82 Belcher Dr
City: Sudbury State: MA Zip Code: 01776-1247
FEC ID number of contributing federal political committee: C
Name of Employer: Fresenius Medical Care NA
Occupation: SVP Sales & Marketing
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: 01 / 30 / 2015
Transaction ID : A1A836E78C77B44A9A0A
Amount of Each Receipt this Period: 360.00
Payroll Deduction: $360.00/

SUBTOTAL of Receipts This Page (optional) ▶ 2925.24

TOTAL This Period (last page this line number only) ▶ 7196.97

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
Fresenius Medical Care North America PAC

A.
Full Name (Last, First, Middle Initial): Fresenius Medical Care North America
Mailing Address: 920 Winter St
City: Waltham State: MA Zip Code: 02451-1521
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 352.18
Date of Receipt: 01 / 22 / 2015
Transaction ID : A5EDE9428F6F54FBBB7F
Amount of Each Receipt this Period: 189.90
Reimbursement of Bank Fees

B.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼:
Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period:

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼:
Date of Receipt: M M / D D / Y Y Y Y
Amount of Each Receipt this Period:

SUBTOTAL of Receipts This Page (optional) ▶ 189.90

TOTAL This Period (last page this line number only) ▶ 189.90

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
Fresenius Medical Care North America PAC

A.
Full Name (Last, First, Middle Initial): Comerica Bank
Mailing Address: PO Box 75000
City: Detroit State: MI Zip Code: 48275-0001
Purpose of Disbursement: Bank Service Charge
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 01 / D D 05 / Y Y Y Y 2015
Transaction ID : BD7713F46252A475A90D
Amount of Each Disbursement this Period: 189.90

B.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
Amount of Each Disbursement this Period:

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) ▶ 189.90

TOTAL This Period (last page this line number only) ▶ 189.90

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Fresenius Medical Care North America PAC

A. Full Name (Last, First, Middle Initial): National Republican Senatorial Committee
Mailing Address: 425 Second Street, NE
City: Washington State: DC Zip Code: 20002-4914
Purpose of Disbursement: Direct Contribution
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2015 ☐ Primary ☐ General ☒ Other (specify) Other2015
Date of Disbursement: 01 / 20 / 2015
Transaction ID : B8B8197D196664F88A42
Amount of Each Disbursement this Period: 15000.00

B. Full Name (Last, First, Middle Initial): Kaine For Virginia
Mailing Address: 1751 Potomac Greens Drive
City: Alexandria State: VA Zip Code: 22314
Purpose of Disbursement: Direct Contribution
Candidate Name: Sen. Tim M. Kaine
Category/Type:
Office Sought: ☐ House ☒ Senate ☐ President
State: VA District:
Disbursement For: 2018 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 01 / 22 / 2015
Transaction ID : B0732FEA2DE1244CF825
Amount of Each Disbursement this Period: 5000.00

C. Full Name (Last, First, Middle Initial): National Republican Congressional Committee
Mailing Address: 320 First Street, SE
City: Washington State: DC Zip Code: 20003
Purpose of Disbursement: Direct Contribution
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2015 ☐ Primary ☐ General ☒ Other (specify) Other2015
Date of Disbursement: 01 / 20 / 2015
Transaction ID : B92A6F29FF2634609969
Amount of Each Disbursement this Period: 10000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 30000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Fresenius Medical Care North America PAC

A. Full Name (Last, First, Middle Initial): Democratic Senatorial Campaign Cmte
Mailing Address: 120 Maryland Avenue, NE
City: Washington State: DC Zip Code: 20002-5610
Purpose of Disbursement: Direct Contribution
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2015 ☐ Primary ☐ General ☒ Other (specify) ▼ Other2015
Date of Disbursement: 01 / 20 / 2015
Transaction ID : BA52E816D0A964151A2C
Amount of Each Disbursement this Period: 15000.00

B. Full Name (Last, First, Middle Initial): Kind For Congress Committee
Mailing Address: 205 5th Avenue South
City: La Crosse State: WI Zip Code: 54601
Purpose of Disbursement: Direct Contribution
Candidate Name: Rep. Ron J. Kind
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: WI District: 03
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify) ▼
Date of Disbursement: 01 / 20 / 2015
Transaction ID : B95CC4963E47C40EAA6E
Amount of Each Disbursement this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Democratic Congressional Campaign Cmte
Mailing Address: 430 S Capitol St SE
City: Washington State: DC Zip Code: 20003-4024
Purpose of Disbursement: Direct Contribution
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2015 ☐ Primary ☐ General ☒ Other (specify) ▼ Other2015
Date of Disbursement: 01 / 20 / 2015
Transaction ID : B91B3301F622945B7B90
Amount of Each Disbursement this Period: 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 21000.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Fresenius Medical Care North America PAC

A.
Full Name (Last, First, Middle Initial): Blumenthal For Connecticut
Mailing Address: C/O Cacace Tusch & Santagata, 777 Summer St Suite 103
City: Stamford State: CT Zip Code: 06901
Purpose of Disbursement: Direct Contribution
Candidate Name: Sen. Richard Blumenthal
Category/Type:
Office Sought: ☐ House ☒ Senate ☐ President
State: CT District:
Disbursement For: 2016 ☐ Primary ☐ General ☒ Other (specify) Convention2016
Date of Disbursement: M M 01 / D D 12 / Y Y Y Y 2015
Transaction ID : B849B50D019EB4185B67
Amount of Each Disbursement this Period: 2500.00

B.
Full Name (Last, First, Middle Initial): Tuesday Group PAC
Mailing Address: PO Box 11586
City: Washington State: DC Zip Code: 20008
Purpose of Disbursement: Direct Contribution
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: 2015 ☐ Primary ☐ General ☒ Other (specify) Other2015
Date of Disbursement: M M 01 / D D 02 / Y Y Y Y 2015
Transaction ID : B0F9F3CDEB1E74BAB86E
Amount of Each Disbursement this Period: 5000.00

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) ▶ 7500.00

TOTAL This Period (last page this line number only) ▶ 58500.00