07/15/2008 18:38

Image# 28991463999

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

F	ORM 3X	For	Other Thai	n An Authoi	rized Comn	nittee		Office Use Only	
1.	NAME OF COMMITTEE (in fu		FEC MAILING		Example:If ty over the lines				
Ш	Kidney Care Counc	il Political Actio	on Committee						
Ш									
ADE	DRESS (number and	street)	he Atlantic Bui	lding					
	Check if differ than previously reported. (ACC	ent L	50 F Street, N\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	N			DC	20004	1404
2.	FEC IDENTIFICAT	ION NUMBER	₩	CITY	t		STATE	ZIPCC	DDE 🛕
	C00326736	• • • • •		3. IS TH	- X	NEW (N) OR	A)	MENDED A)	
4.	X July 15 Quarterly October 1 Quarterly January 3 Quarterly July 31 M Report(N Year Only	Report(Q1) Report(Q2) 15 Report(Q3) 81 Report(YE) Iid-Year on-election	(d) 30-Da	Election rt for the:	(M3) (M4) Primary (Convention) General	on (12C)	Sep	in the	Special (30S)
5.	Covering Period	0 4		2008	throu		30	2008	
	tify that I have exame or Print Name of T		t and to the be Robert Forema	-	edge and belief	it is true, correct	t and complete.		
Sign	nature of Treasurer	Ele <u>ctronically</u>	/ Filed by Ro	obert Foreman			Date 07	15	2008
NOT	ΓE : Submission of f	alse, erroneous	, or incomplete	information ma	ay subject the p	person signing th	nis Report to the	e penalties of 2 U	.S.C 437g.
	Office Use							FEC FOF (Rev. 12/2)	

FE6AN026

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Kidney Care Council Political Action Committee " D ^UD 0 4 0 1 2008 0.6 3 0 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 7341.12 2008 January 1 (b) Cash on Hand at 20585.72 Begining of Reporting Period 35708.85 52462.15 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 56294.57 59803.27 6(a) and 6(c) for Column B) 47567.87 51076.57 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 8726.70 8726.70 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE OF RECEIPTS

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

Write or Type Committee Name
Kidney Care Council Political Action Committee

Report Covering the Period:

м м 0 4

From:

01

2008

To:

м м 0 6 ^D 3^D 0

2008

	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)	35100.00	51600.00
	(ii) Unitemized	600.00	600.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	35700.00	52200.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	35700.00	52200.00
2.	Transfers From Affiliated/Other Party Committees	0.00	0.00
3.	All Loans Received	0.00	0.00
4. 5.	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
6.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
	to Federal candidates and Other Political Committees	0.00	250.00
7.	Other Federal Receipts (Dividends, Interest, etc.)	8.85	12.15
8.			
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	35708.85	52462.15
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	35708.85	52462.15

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Shared Federal/Non-Federal		
Activity (from Schedule H4) (i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	42.87	51.57
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	42.87	51.57
2. Transfers to Affiliated/Other Party Committees	0.00	0.00
Contributions to Federal Candidates/Committees and Other Political Committees	47500.00	51000.00
4. Independent Expenditure (use Schedule E)	0.00	0.00
5. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6. Loan Repayments Made	0.00	0.00
7. Loans Made	0.00	0.00
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
9. Other Disbursements	25.00	25.00
Federal Election Activity (2 U.S.C 431(20))(a) Shared Federal Election Activity		
(from Schedule H6) (i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	47567.87	51076.57
2. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	47567.87	51076.57

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	35700.00	52200.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	35700.00	52200.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	42.87	51.57
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	42.87	51.57

FE6AN026

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 25 (check only one) X 11a
0	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Kidney Care Council Political Action	Committee		
	Full Name (Last, First, Middle Initial) Rose Bailey			Date of Receipt
	Mailing Address 490 Chadbourne Rd.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11AI.4690
	<u>Fairfield</u>	CA	94534	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Renal Advantage Inc.	Occupatio Regional		individual contribution
	Receipt For:	_ <u> </u>	e Year-to-Date ▼	
	Primary General Other (specify) ▼	1 1	300.00	
_	Full Name (Last, First, Middle Initial) Clay Bittner			Date of Receipt
	Mailing Address 19207 Wyndchase Ci	M M / D D / Y Y Y Y Y Y Y Y 2008		
	City	State	Zip Code	Transaction ID: SA11AI.4691
	<u>Franklin</u>	TN	37067	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		650.00
	Name of Employer Renal Advantage	Occupation VP, Man	n aged Care	individual contribution
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	650.00	
_	Full Name (Last, First, Middle Initial) Sharon Burbage			Date of Receipt
	Mailing Address 115 East Park Drive Suite 300			04 28 2008
	City	State	Zip Code	Transaction ID: SA11AI.4692
	Brentwood	TN	37027	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		650.00
	Name of Employer Renal Advantage Inc.	Occupation VP, Clini	n cal Services	individual contribution
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼	0 0	650.00	
				1600.00

CHEDULE A (FEC Form 3X EMIZED RECEIPTS	(3)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 25 (check only one) X 11a
ny information copied from such Reports an r for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may i the name and addr	not be sold or used by any perso ess of any political committee to	on for the purpose of soliciting contributions
Kidney Care Council Political Action	n Committee		
Full Name (Last, First, Middle Initial) Michael Burney	0.11.000		Date of Receipt
Mailing Address 115 East Park Drive		Zin Code	04 28 2008
City Brentwood	State TN	Zip Code 37027	Transaction ID: SA11AI.4693 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		650.00
Name of Employer Renal Advantage Inc.	Occupation VP, Lab S	ervices	individual contribution
Receipt For: Primary General Other (specify)		/ear-to-Date ▼ 650.00]
Full Name (Last, First, Middle Initial) Lisa M. Chambers			Date of Receipt
Mailing Address 115 East Park Drive	e, Suite 300		0 4 2 8 2 0 0 8
City	State	Zip Code	Transaction ID: SA11AI.4694
Brentwood	TN	37027	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00 individual contribution
Name of Employer Renal Advantage Inc.	Occupation Director of	Clinical Services	Individual contribution
Receipt For:	Aggregate \	rear-to-Date ▼	
Primary General Other (specify) ▼	0 0	300.00]
Full Name (Last, First, Middle Initial) Richard L. Chatfield			Date of Receipt
Mailing Address 1626 Cole Boulevar	d, Suite 100		0 4 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: SA11AI.4688
Lakewood	CO	80401	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		5000.00 individual contribution
Name of Employer Renal Ventures Management, LLC	Occupation President		- Individual contribution
Receipt For: Primary General Other (specify) ▼	Aggregate \	/ear-to-Date ▼ 5000.00	
SUBTOTAL of Receipts This Page (optional			5950.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 25 (check only one) X
A or	ny information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements maname and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Kidney Care Council Political Action Co	ommittee		
	Full Name (Last, First, Middle Initial) Robert M. Collins			Date of Receipt
	Mailing Address 1626 Cole Boulevard, S			04 11 2008
	City	State CO	Zip Code	Transaction ID: SA11AI.4686
	Lakewood FEC ID number of contributing federal political committee.	C	80401	Amount of Each Receipt this Period 4000.00
	Name of Employer Renal Ventures Management, LLC Receipt For:	Occupatio Board Ch Aggregate		individual contribution
	Primary General Other (specify) ▼		4000.00	
	Full Name (Last, First, Middle Initial) John Crawford			Date of Receipt
	Mailing Address 115 East Park Drive Suite 300			M M / D D / Y Y Y Y Y Y Y Y 2008
	City	State	Zip Code	Transaction ID: SA11AI.4696
	Brentwood	TN	37027	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1200.00 individual contribution
	Name of Employer Renal Advantage Inc.	Occupatio Chief Fin	n nancial Officer	individual contribution
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1200.00	
	Full Name (Last, First, Middle Initial) Eric Enderle			Date of Receipt
	Mailing Address 115 East Park Drive Suite 300			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Brentwood	State TN	Zip Code 37027	Transaction ID: SA11AI.4718
	FEC ID number of contributing federal political committee.	C	37027	Amount of Each Receipt this Period 650.00
	Name of Employer Renal Advantage Inc.	Occupatio VP, Deve		individual contribution
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 650.00	
5	SUBTOTAL of Receipts This Page (optional)			5850.00

ITEN	IEDULE A (FEC Form 3X) MIZED RECEIPTS Iformation copied from such Reports and St	atomonte ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 25 (check only one) X
or for	commercial purposes, other than using the ME OF COMMITTEE (In Full) dney Care Council Political Action Co	name and ad	riot be sold of used by any personal dress of any political committee to	o solicit contributions from such committee.
A. <u>Mo</u>	Il Name (Last, First, Middle Initial) onte Frankenfield ailing Address 115 East Park Drive			Date of Receipt 0 4 2 8 2 0 0 8
Cit	Suite 300	State	Zip Code	Transaction ID: SA11AI.4697
	entwood	TN	37027	Amount of Each Receipt this Period
	C ID number of contributing deral political committee.	C		650.00
	me of Employer anal Advantage Inc.	Occupatio VP, Fina	nce	individual contribution
Re	ceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
3. <u>Ge</u>	II Name (Last, First, Middle Initial)			Date of Receipt
IVI2	ailing Address 115 East Park Drive Suite 300			04 28 2008
Cit	•	State	Zip Code	Transaction ID: SA11AI.4698
	centwood C ID number of contributing	TN	37027	Amount of Each Receipt this Period 650.00
fec	deral political committee.	C		
Na Re	me of Employer enal Advantage Inc.	Occupatio VP, Risk	n Management	individual contribution
Re	ceipt For:	_	e Year-to-Date ▼	
	Primary General Other (specify) ▼		650.00]
	II Name (Last, First, Middle Initial) cas Garman			Date of Receipt
Ma	ailing Address 115 East Park Drive, So	uite 300		0 4 2 8 2 0 0 8
Cit	-	State	Zip Code	Transaction ID: SA11AI.4699
<u>Br</u>	entwood	TN	37027	Amount of Each Receipt this Period
	C ID number of contributing deral political committee.	С		1000.00
Re	me of Employer enal Advantage Inc.	Occupatio Board M		individual contribution
Re	ceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1000.00	
SIIB	TOTAL of Receipts This Page (optional)			2300.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 25 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Kidney Care Council Political Action C	name and addre	not be sold or used by any persess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Jerrold Glick Mailing Address 1626 Cole Boulevard, City Lakewood FEC ID number of contributing federal political committee. Name of Employer Renal Ventures Management, LLC Receipt For: Primary General Other (specify)	State CO C Occupation Secretary/	Zip Code 80401 Treasurer rear-to-Date ▼ 1000.00	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Michael P. Glinsky Mailing Address 1626 Cole Boulevard, City Lakewood FEC ID number of contributing federal political committee. Name of Employer Renal Ventures Management, LLC Receipt For: Primary General Other (specify)	State CO C Occupation Board Men	Zip Code 80401 nber ′ear-to-Date ▼ 2000.00	Date of Receipt 0 4 11 2008 Transaction ID: SA11AI.4684 Amount of Each Receipt this Period 2000.00 individual contribution
Full Name (Last, First, Middle Initial) Mark Gray Mailing Address 115 East Park Drive Suite 300 City Brentwood FEC ID number of contributing federal political committee. Name of Employer Renal Advantage Inc. Receipt For: Primary General Other (specify)		Zip Code 37027 edical Services /ear-to-Date ▼ 650.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional))	3650.00

SCHEDULE A (FEC Form 3) FEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 25 (check only one) X
any information copied from such Reports ar r for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may the name and addr	not be sold or used by any person ess of any political committee to	on for the purpose of soliciting contributions
Kidney Care Council Political Action	n Committee		
Full Name (Last, First, Middle Initial) Robert E. Hamilton Mailing Address 1626 Cole Boulevan	.1.0.1100		Date of Receipt
Mailing Address 1626 Cole Boulevan	State	Zip Code	04 11 2008
<u>Lakewood</u>	CO	80401	Transaction ID: SA11AI.4682 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		2000.00
Name of Employer Renal Ventures Management, LLC Receipt For: Primary General Other (specify)	Occupation Board Mer Aggregate	mber Year-to-Date ▼ 2000.00	individual contribution
Full Name (Last, First, Middle Initial) Helen Hutteri Mailing Address 115 East Park Drive	e, Suite 300		Date of Receipt
City	State	Zip Code	0 4 2 8 2 0 0 8 Transaction ID: SA11AI.4702
Brentwood	TN	37027	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer Renal Advantage Inc.	Occupation Regional (Quality Administrator	individual contribution
Receipt For: Primary General Other (specify)	Aggregate \	Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Sarrah Johnson			Date of Receipt
Mailing Address 115 East Park Drive	e, Suite 300		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Brentwood	State TN	Zip Code 37027	Transaction ID: SA11AI.4725 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	31021	300.00
Name of Employer Renal Advantage Inc.	Occupation Regional I	Director	individual contribution
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optiona	1)		2600.00

	TEMIZED RECEIPTS Any information copied from such Reports and S	tatomonte ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 25 (check only one) X
	NAME OF COMMITTEE (In Full) Kidney Care Council Political Action C	name and ad	dress of any political committee to	o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Michael Klein Mailing Address 115 East Park Drive Suite 300			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11AI.4704
	Brentwood	TN	37027	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1800.00
	Name of Employer Renal Advantage Inc.	Occupatio Chief Ex	n ecutive Officer	individual contribution
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1800.00]
В.	Full Name (Last, First, Middle Initial) Karl Kokko			Date of Receipt
	Mailing Address 115 East Park Drive Suite 300			04 28 2008
	City Brentwood	State TN	Zip Code 37027	Transaction ID: SA11AI.4705
	FEC ID number of contributing federal political committee.	C	31021	Amount of Each Receipt this Period 1200.00
	Name of Employer Renal Advantage Inc.	Occupatio Chief Info	n ormation Officer	individual contribution
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1200.00]
_ c.	Full Name (Last, First, Middle Initial) D. Scott Mackesy			Date of Receipt
	Mailing Address 3320 Park Avenue, Sui	ite 2500		05 02 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.4719
	New York	NY	10022	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Renal Advantage Inc.	Occupatio Director		individual contribution
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
:	SUBTOTAL of Receipts This Page (optional)			4000.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 25 (check only one) X 11a 11b 11c 12 13 14 15 16
or for	commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\ \	AME OF COMMITTEE (In Full) idney Care Council Political Action C	Committee		
	ull Name (Last, First, Middle Initial) aniel T. May			Date of Receipt
М	ailing Address 1626 Cole Boulevard,	Suite 100		0 4
	ity akewood	State CO	Zip Code 80401	Transaction ID: SA11AI.4676
FI	EC ID number of contributing deral political committee.	C	80401	Amount of Each Receipt this Period 1000.00
<u>L</u> l	ame of Employer enal Ventures Management, LC	Occupatio CFO	n	individual contribution
R	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1000.00	
	ull Name (Last, First, Middle Initial) aura T. McCann			Date of Receipt
М	ailing Address 115 East Park Drive, S	0 4 2 8 2 0 0 8		
	ity	State	Zip Code	Transaction ID: SA11AI.4706
	rentwood	TN	37027	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		300.00
N R	ame of Employer enal Advantage, Inc.	Occupation Regional	n Quality Administrator	individual contribution
R	eceipt For:	Aggregate	e Year-to-Date 🔻	
	Primary ☐ General Other (specify) ▼		300.00	
	ull Name (Last, First, Middle Initial) eline McGill			Date of Receipt
M	ailing Address 115 East Park Drive, S	Suite 300		04 28 2008
	ity	State	Zip Code	Transaction ID: SA11AI.4708
	rentwood	TN	37027	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		300.00
N R	ame of Employer enal Advantage	Occupation Regional		individual contribution
R	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 300.00	
	BTOTAL of Receipts This Page (optional)	l		1600.00

ITEMIZED REC	FEC Form 3X) EIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 25 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purpos NAME OF COMMIT	ses, other than using the nar FEE (In Full)	ne and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
Kidney Care Cour	ncil Political Action Com	mittee	
Full Name (Last, Firs	t, Middle Initial)		Date of Receipt
•	5 East Park Drive uite 300		0 4 2 8 2 0 0 8
City		State Zip Code	Transaction ID: SA11AI.4709
<u>Nashville</u>		TN 37027	Amount of Each Receipt this Period
FEC ID number of co federal political comm		C	650.00
Name of Employer Renal Advantage Inc		Occupation VP, Human Resources	individual contribution
Receipt For:	General	Aggregate Year-to-Date ▼	
Other (specify)		650.00	
Full Name (Last, Firs Kenneth Melkus	t, Middle Initial)		Date of Receipt
Mailing Address 1(2 Woodmont Boulevard	I	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
City		State Zip Code	Transaction ID: SA11AI.4710
<u>Nashville</u>		TN 37205	Amount of Each Receipt this Period
FEC ID number of co federal political comm		C	1000.00
Name of Employer Renal Advantage Inc		Occupation Director	individual contribution
Receipt For:		Aggregate Year-to-Date ▼	
Other (specify)	General ▼	1000.00	
Full Name (Last, Firs Angela Newman	t, Middle Initial)		Date of Receipt
Mailing Address 12	50 Highway 70		0 4 2 8 2 0 0 8
City		State Zip Code	Transaction ID: SA11AI.4711
Kingston Springs		TN 37082	Amount of Each Receipt this Period
FEC ID number of co federal political comm		C	650.00
Name of Employer Renal Advantage		Occupation VP, Supply Chain	individual contribution
Receipt For:		Aggregate Year-to-Date ▼	
Other (specify)	General ▼	650.00	
			2300.00

CHEDULE A (FEC Form 3X EMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 25 (check only one) X 11a
ny information copied from such Reports an	d Statements may the name and add	not be sold or used by any persolress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Kidney Care Council Political Action	n Committee		
Full Name (Last, First, Middle Initial) Vito Orlando			Date of Receipt
Mailing Address 115 East Park Drive			04 28 2008
City Brentwood	State TN	Zip Code 37027	Transaction ID: SA11AI.4712 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer Renal Advantage Inc.	Occupation Regional		individual contribution
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Randall Overton			Date of Receipt
Mailing Address 115 East Park Drive	e, Suite 300		0 4 2 8 2 0 0 8
City	State	Zip Code	Transaction ID: SA11AI.4713
Brentwood	TN	37027	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00 individual contribution
Name of Employer Renal Advantage Inc.	Occupation Director,	n Special Projects	Individual contribution
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		300.00]
Full Name (Last, First, Middle Initial) Thomas F. Parker, III	I		Date of Receipt
Mailing Address 1626 Cole Boulevar	d, Suite 100		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
City	State	Zip Code	Transaction ID: SA11AI.4678
Lakewood FEC ID number of contributing	СО	80401	Amount of Each Receipt this Period
federal political committee.	C		1000.00 individual contribution
Name of Employer Renal Ventures Management, LLC	- ' '	dical Officer	- Individual contribution
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional	<u> </u>		1600.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 25 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) Kidney Care Council Political Action	the name and add	r not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial)			
. Jon Sundock Mailing Address 3500 Grayswood Av	renue.		Date of Receipt 0 4 2 8 2 0 0 8
City <u>Nashville</u>	State TN	Zip Code 37215	Transaction ID: SA11AI.4715 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1200.00
Name of Employer Renal Advantage	Occupation Chief Leg	n gal Counsel	individual contribution
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1200.00	
Full Name (Last, First, Middle Initial) Jim Tarwater, Jr. Mailing Address 115 East Park Drive	 		Date of Receipt
Suite 300 City	State	Zip Code	0 4 2 8 2 0 0 8 Transaction ID: SA11AI.4716
Brentwood	TN	37027	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		650.00
Name of Employer Renal Advantage Inc.	Occupation VP, Inform	n mation Systems	individual contribution
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) Kimberly F. Thompson			Date of Receipt
Mailing Address 115 East Park Drive	, Suite 300		05 / 19 / 2008
City	State	Zip Code	Transaction ID: SA11Al.4723
Brentwood FEC ID number of contributing federal political committee.	C	37027	Amount of Each Receipt this Period 300.00
Name of Employer Renal Advantage, Inc.	Occupation Regional	n Quality Administrator	individual contribution
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional))		2150.00
TOTAL This Period (last page this line numb	per only)		

A.

PAGE 17/25 FOR LINE NUMBER: SCHEDULE A (FEC Form 3X) Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 1 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) Kidney Care Council Political Action Committee Full Name (Last, First, Middle Initial) Dean Weiland Date of Receipt Mailing Address 115 East Park Drive 0 5 02 2008 Suite 300 City State Zip Code Transaction ID: SA11AI.4720 **Brentwood** ΤN 37027 Amount of Each Receipt this Period FEC ID number of contributing 1200.00 C federal political committee. individual contribution Name of Employer Renal Advantage Inc. Occupation Chief Operating Officer Receipt For: Aggregate Year-to-Date General Primary 1200.00 Other (specify) Full Name (Last, First, Middle Initial) В. Karen Wiseman Date of Receipt Mailing Address 115 East Park Drive, Suite 300 0.4 28 2008 City State Zip Code Transaction ID: SA11AI.4717 **Brentwood** TN 37027 Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. individual contribution Name of Employer Renal Advantage Inc. Occupation Dir. of Policy and Reg. Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General

SUBTOTAL of Receipts This Page (optional)	•	1500.00
TOTAL This Period (last page this line number only)	•	35100.00

300.00

Other (specify)

		Use separate schedule(s	3))K LINE ieck only							18 / 2	
П 	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b 27	22 28a	X	23 28b		24 28c		25 29	20
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full) Kidney Care Council Political Action Com	e and address of any politic											
\mathbb{L}													
	Full Name (Last, First, Middle Initial) ALEXANDER FOR SENATE 2008 INC Mailing Address 228 S WASHINGTON S	TDEET QUITE 115				Trans Date		sburs				1 0 0 8	Y
	City ALEXANDRIA	State Zip Code VA 22314				Amou	int o	Each	n Disk	ourse	-	this P	-
	Purpose of Disbursement political contribution						_				20	00.00)
	Candidate Name LAMAR ALEXANDER			ateg Typ									
	Office Sought: House Disburse X Senate President State: TN District: 00	ement For: 2008 Primary X General Other (specify)	•										
	Full Name (Last, First, Middle Initial) BERKLEY FOR CONGRESS					Trans	of D	sburs	emer		475	0	V
	Mailing Address 3069 Conquista Court					0 ^M 5	М	D	1 4	/ L	ž	0 ŏ 8	Y
	City Las Vegas	State Zip Code NV 89121				Amou	int o	Each	n Disk	ourse	-	this P	
	Purpose of Disbursement political contribution			•			0			•	10	00.00)
	Candidate Name SHELLEY BERKLEY			ateg Typ	-								
	Office Sought: X House Senate President State: NV District: 01	ement For: 2008 Primary X General Other (specify)	•										
	Full Name (Last, First, Middle Initial) CHRIS CANNON FOR CONGRESS INC					Trans Date		sburs			476	6	
	Mailing Address 310 SOUTH MAIN SUIT	∃ 1420				0 6	М	D	1 1	/ Y	ž	0 ŏ 8	Y
	City SALT LAKE CITY	State Zip Code UT 84101				Amou	int o	Each	n Disk	ourse	ment	this P	eriod
	Purpose of Disbursement political contribution										10	00.00)
	Candidate Name CHRISTOPHER B HON. CANNON			ateg Typ	-								
	Office Sought: X House Senate President State: UT District: 03	ement For: 2008 Primary X General Other (specify)	1										

Any Ir or for NA	nformation copied for commercial purpose	rom such Reports a	ΓS		ategory of the summary Page			heck on 21b	22	X	23	☐ 24		25	□ 26
or for NA	commercial purpos							27	28a		28b	280	-	29	30
Ki															
	didney date dout	TEE (In Full) ncil Political Acti	on Comm	ittee											
	ull Name (Last, Firs COLLINS FOR SI	,							Date	of Di	sburs	SB20			
M	lailing Address	PO BOX 1096							o ^M 6	6 M /	^D 1	7 /	ž	0 0 8	Y
	ity BANGOR			state ИЕ	Zip Code 04402				Amo	unt of	Each	Disburs	emen	t this P	eriod
	urpose of Disburse olitical contribution	ment				Γ					_		20	00.00	
	andidate Name SUSAN M COLLI	NS					ateo Typ	gory/ oe							
		House C Senate President		nent For: Primary Other (spec	2008 X General sify) ▼										
Fı	tate: ME Di ull Name (Last, Firs DEMINT FOR SE	,	TEE INC							saction	-	SB20	3.475	8	
M	failing Address	PO BOX 12425							0 6	M /	DC	5 /	Ý Ž	0 ŏ 8	Y
	ity OLUMBIA			state SC	Zip Code 29211				Amo	unt of	Each	Disburs	emen	t this P	eriod
	urpose of Disburse olitical contribution	ment				Γ					•		10	00.00	
	andidate Name AMES W DEMIN	NT					ateç Typ	gory/ oe							
	Office Sought:	President		nent For: Primary Other (spec	2010 General										
Fu	tate: SC Di ull Name (Last, Firs OONNA CHRISTI	. ,	GN						Date	of Di	sburs	SB20	3.477	8	
M	failing Address	PO Box 5197							o ^M 6	S M /	^D 1	9 /	ž	0 ŏ 8	Y
	ity St. Croix			state /I	Zip Code 00823				Amo	unt of	Each	Disburs	emen	t this P	eriod
	urpose of Disburse olitical contribution	ment					•				-		20	00.00	0
	andidate Name ONNA M CHRIS	STENSEN					ateo Typ	gory/ oe							
		House Senate President		nent For: Primary Other (spec	2008 X General sify) ▼										
	STOTAL of Disburs	istrict: 00	(ention -1)					•					50	00.00)

A.

В.

C.

SCHEDULE B (FEC Form 3X)	Use separ	rate schedule(s)		FOR LIN	-	R:			PA	GE	20 /	25	
ITEMIZED DISBURSEMENTS		ategory of the cummary Page		(check o 21b 27	22 28a	Х	23 28b	F	24 28c		25 29		26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name												S	
NAME OF COMMITTEE (In Full)													
Kidney Care Council Political Action Comm	nittee												
Full Name (Last, First, Middle Initial) ENZI FOR US SENATE					Date	of D	isburs	en				V	
Mailing Address PO BOX 2775					0 5	М	´) -	ון '	2	οŏ	3 '	
•	State WY	Zip Code 82414			Amou	int o	f Each	n C	Disburse	men	t this	Perio	d
Purpose of Disbursement political contribution			Г	·						10	0.00	0	
Candidate Name MICHAEL B ENZI				egory/ ype									
Office Sought: House Disburse X Senate President	ment For: Primary Other (spec	2008 X General cify) ▼											
State: WY District: 00	` '	<i>37</i> , ▼											
Full Name (Last, First, Middle Initial) FRIENDS OF DICK DURBIN COMMITTEE	<u> </u>						isburs				5 0 0 8	o Y	
Mailing Address PO BOX 1949					0 0			1 (. 0 0	2	
•	State IL	Zip Code 62705			Amou	int o	f Each	n C	Disburse				d
Purpose of Disbursement political contribution					L.					50	0.00	0	
Candidate Name				egory/ ype									
Office Sought: House Disburse X Senate President	ment For: Primary Other (spec	2008 X General sify) ▼											
State: IL District: 00													
Full Name (Last, First, Middle Initial) GRASSLEY COMMITTEE INC							i on ID isburs		SB23. nent	476	4		
Mailing Address PO BOX 1000					0 ^M 6	М	/ D	1 (5 /	Ž	οŏ	3 ^Y	
•	State IA	Zip Code 50304			Amou	int o	f Each	n C	Disburse	men	t this	Perio	d
Purpose of Disbursement political contribution			Г		L.					50	0.00	0	
Candidate Name CHARLES E GRASSLEY				egory/ ype									
	ment For: Primary Other (spec	2010 General											
											00.0		$\overline{}$
SUBTOTAL of Disbursements This Page (optional) .				 >	-	•	-			110	0.00	Ų	=
TOTAL This Period (last page this line number only)				 . •									

	B (FEC FOIIII 3	·		arate schedule(s)			check on	E NUMBE	. 1 1.		L.	PAGE	,_	20
ITEMIZED DI	SBURSEMEN	ΓS		category of the Summary Page			21b 27	22 28a	X	23 28b	24 28		25 29	
or for commercial pu	ed from such Reports a rposes, other than usin MITTEE (In Full) Council Political Acti	g the name	and addre											5
Full Name (Last, HAWKEYE PA Mailing Address	First, Middle Initial) AC, THE PO Box 7255							Date		sburse	SB2 ement		37 2 0 Ŏ 8	B Y
City Des Moines Purpose of Disbipolitical contribut			State A	Zip Code 50309		_		Amou	ınt ol	f Each	Disbur		nt this F	
Candidate Name HAWKEYE PA Office Sought:			ment For: Primary Other (spe	General ecify) ▼		Ty	gory/ pe							
•	First, Middle Initial) Y FOR CONGRESS PO Box 42	6						1		sburse	SB2 ement		51 2 0 ŏ 8	B Y
	OVAN OGSBURY	,	State AZ	Zip Code 85252		ate;	gory/	Amou	int of	f Each	Disbur		nt this F	
	X House Senate President District: 05 First, Middle Initial) SENATE COMMIT		nent For: Primary Other (spe	2008 X General ecify) ▼						on ID:	SB2	3.474	<u> </u>	
Mailing Address	PO BOX 1496								М		9 /	YZ	ó o š	B Y
City LOUISVILLE Purpose of Disbrical contribut Candidate Name	ion		State 〈 Y	Zip Code 40201	C	ate	gory/	Amou	int of	f Each	Disbur		nt this F	-
MITCH MCCC Office Sought: State: KY	House X Senate President District: 00		ment For: Primary Other (spe	2008 X General ecify)		Туј		-						
								-						

TEMIZED DISBURSEMENTS Use separate schedules to each category of the Detailed Summary Page 21b 22 23 24 25 26 25 25 27 20 27 28 28 28 28 28 28 28	/ 25
r for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee Full Name (Last, First, Middle Initial) NATIONAL REPUBLICAN SENATORIAL COMMITTEE Mailing Address	
NAME OF COMMITTEE (In Full) Kidney Care Council Political Action Committee Full Name (Last, First, Middle Initial) NATIONAL REPUBLICAN SENATORIAL COMMITTEE Mailing Address 425 SECOND STREET NE City WASHINGTON DC 20002 Purpose of Disbursement political contribution Cardidate Name Office Sought: House President State: District: Full Name (Last, First, Middle Initial) ORRINPAC City State Zip Code President Other (specify) ▼ Type Transaction ID: SB23.4734 Amount of Each Disbursement thi Category' Type Transaction ID: SB23.4754 Date of Disbursement Office Sought: House Disbursement District: Full Name (Last, First, Middle Initial) ORRINPAC City State Zip Code SALT LAKE CITY UT 84101 Purpose of Disbursement political contribution Cardidate Name ORRIN G HATCH Office Sought: House Disbursement For: 2008 X Senate Primary X General District: O0 Full Name (Last, First, Middle Initial) PAT ROBERTS FOR U S SENATE INC Mailing Address PO BOX 433 City State Zip Code SCHORL State Zip Code Category' Type Other (specify) ▼ Transaction ID: SB23.4737 Date of Disbursement Other (specify) ▼ Transaction ID: SB23.4737 Date of Disbursement Other (specify) ▼ Transaction ID: SB23.4737 Date of Disbursement Other (specify) ▼ Transaction ID: SB23.4737 Date of Disbursement Other (specify) ▼ Transaction ID: SB23.4737 Date of Disbursement Other (specify) ▼ Transaction ID: SB23.4737 Date of Disbursement Other (specify) ▼ Transaction ID: SB23.4737 Date of Disbursement Other (specify) ▼ Transaction ID: SB23.4737 Date of Disbursement Other (specify) ▼ Transaction ID: SB23.4737 Date of Disbursement Other (specify) ▼ Transaction ID: SB23.4737 Date of Disbursement Other (specify) ▼ Transaction ID: SB23.4737 Date of Disbursement Other (specify) ▼ Transaction ID: SB23.4737 Date of Disbursement Other (specify) ▼ Transaction ID: SB23.4737 Date of Disbursement Other (specify) ▼ Transaction ID: SB23.4737 Date of Disbursement Other (specify) ▼ Transaction ID: SB23.4737 Date of Disbursement Other (specify	
Full Name (Last, First, Middle Initial) NATIONAL REPUBLICAN SENATORIAL COMMITTEE Mailing Address 425 SECOND STREET NE City	
Mailing Address 425 SECOND STREET NE City WASHINGTON DC 20002 Purpose of Disbursement political contribution Candidate Name Office Sought: Full Name (Last, First, Middle Initial) Purpose of Disbursement political contribution Candidate Name Disbursement For: State President State Shart Sha	
City WASHINGTON DC Z0002 Purpose of Disbursement political contribution Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Other (specify) ▼ City State Zip Code SALT LAKE CITY UT 84101 Purpose of Disbursement political contribution Candidate Name ORRING HATCH Office Sought: House Primary General Other (specify) ▼ Candidate Name ORRING HATCH Office Sought: House Primary General Other (specify) ▼ City Senate Primary General Other (specify) ▼ Disbursement For: 2008	
WASHINGTON Purpose of Disbursement political contribution Candidate Name Office Sought: House Senate Primary General President Other (specify) ▼ Full Name (Last, First, Middle Initial) ORRINPAC Mailing Address 175 S. WEST TEMPLE SUITE 650 City SALT LAKE CITY State Zip Code UT 84101 Purpose of Disbursement political contribution Candidate Name ORRIN G HATCH Office Sought: House Primary General Primary General Other (specify) ▼ Transaction ID: SB23.4754 Date of Disbursement Disbursement Disbursement For: 2008 William (Last, First, Middle Initial) Category/ Type Office Sought: House Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) PAT ROBERTS FOR U S SENATE INC Mailing Address PO BOX 433 City Senate President KS 67530 Purpose of Disbursement Disbursement por: 2008 REAT BEND KS 67530 Purpose of Disbursement Disbursement por: 2008 City State Zip Code KS 67530 Purpose of Disbursement	8
Transaction ID: SB23.4754 Date of Disbursement State: District: Full Name (Last, First, Middle Initial) ORRINPAC Mailing Address 175 S. WEST TEMPLE SUITE 650 City Salte Zip Code SALT LAKE CITY UT 84101 Purpose of Disbursement political contribution Candidate Name ORRIN G HATCH Office Sought: House Primary General Other (specify) ▼ State: Zip Code SALT LAKE CITY UT 84101 Purpose of Disbursement political contribution Candidate Name Other (specify) ▼ Category/ Type Transaction ID: SB23.4754 Date of Disbursement this SB23.4737 Date of Disbursement this SB23.	s Perio
Office Sought: House Senate Primary General Other (specify) ▼ State: District: Other (specify) ▼ Mailing Address 175 S. WEST TEMPLE SUITE 650 City State Zip Code SATULAKE CITY UT 84101 Purpose of Disbursement political contribution Candidate Name ORRIN G HATCH Office Sought: House Primary General Other (specify) ▼ State: UT District: 00 Full Name (Last, First, Middle Initial) PAT ROBERTS FOR U S SENATE INC Mailing Address PO BOX 433 City Gradidate Name Orbital State Senate Primary General Other (specify) ▼ Category/ Type Transaction ID: SB23.4754 Date of Disbursement thing SB23.4754 Date of Disbursement Inc. Transaction ID: SB23.4754 Date of Disbursement Inc. Amount of Each Disbursement thing SB23.4737 Date of Disbursement Inc. Category/ Type Office Sought: House Sample State Sup Code (Sample Sample	.00
Office Sought: House Senate President President President State: District: President Pres	
Full Name (Last, First, Middle Initial) ORRINPAC Mailing Address 175 S. WEST TEMPLE SUITE 650 City SALT LAKE CITY Purpose of Disbursement Office Sought: Value of Disbursement Value of Disbursement For: Value of Disbursement Value of Disbursement For: Value of Disbursement Value of Disbursement For: Value of Disbursement this Value of Disbursement	
ORRINPAC Mailing Address 175 S. WEST TEMPLE SUITE 650 City State Zip Code SALT LAKE CITY UT 84101 Purpose of Disbursement political contribution Candidate Name ORRIN G HATCH Office Sought: House Primary X General Other (specify) ▼ State: UT District: 00 Full Name (Last, First, Middle Initial) PAT ROBERTS FOR U S SENATE INC Mailing Address PO BOX 433 City State Zip Code G7530 Purpose of Disbursement political contribution Candidate Name PO BOX 433 City State Zip Code G7530 Purpose of Disbursement political contribution Candidate Name PAT ROBERTS Office Sought: House NS Enate Primary X General Category/ Type Amount of Each Disbursement thing Part Part Part Part Part Part Part Part	
City SALT LAKE CITY Purpose of Disbursement political contribution Candidate Name ORRIN G HATCH Office Sought: House X Senate Primary X General Other (specify) ▼ Full Name (Last, First, Middle Initial) PAT ROBERTS FOR U S SENATE INC Mailing Address PO BOX 433 City State Zip Code KS 67530 City GREAT BEND KS 67530 Purpose of Disbursement political contribution Candidate Name PAT ROBERTS Office Sought: House X Senate X Sen	/ · · · · ·
SÁLT LAKE CITY Purpose of Disbursement political contribution Candidate Name ORRIN G HATCH Office Sought: House President State: UT District: 00 Full Name (Last, First, Middle Initial) PAT ROBERTS FOR U S SENATE INC Mailing Address PO BOX 433 City GREAT BEND Condidate Name PAT ROBERTS Category/ Type Amount of Each Disbursement thi Category/ Type Office Sought: House N Senate Disbursement For: Category/ Type Disbursement For: Category/ Type Office Sought: House N Senate Disbursement For: Category/ Type Category/ Type	8
political contribution Candidate Name ORRIN G HATCH Office Sought: House	s Perio
Candidate Name ORRIN G HATCH Office Sought: House	.00
Office Sought: House X Senate Primary X General Other (specify) ▼ State: UT District: 00 Full Name (Last, First, Middle Initial) PAT ROBERTS FOR U S SENATE INC Mailing Address PO BOX 433 City State Zip Code GREAT BEND KS 67530 Purpose of Disbursement political contribution Candidate Name PAT ROBERTS Office Sought: House X Senate Primary X General Disbursement For: 2008 X Senate Primary X General	
Full Name (Last, First, Middle Initial) PAT ROBERTS FOR U S SENATE INC Mailing Address PO BOX 433 City State Zip Code GREAT BEND KS 67530 Purpose of Disbursement political contribution Candidate Name PAT ROBERTS Office Sought: House X Senate Primary X General Transaction ID: SB23.4737 Date of Disbursement M M M / P 1 D / Y 2 0 0 Amount of Each Disbursement this Category/ Type	
PAT ROBERTS FOR U S SENATE INC Mailing Address PO BOX 433 City State Zip Code KS 67530 Purpose of Disbursement political contribution Candidate Name PAT ROBERTS Office Sought: House X Senate Disbursement For: 2008 X Senate Primary X General Date of Disbursement Amount of Each Disbursement thing the political contribution to th	
City State Zip Code GREAT BEND KS 67530 Purpose of Disbursement political contribution Candidate Name PAT ROBERTS Office Sought: House X Senate Disbursement For: 2008 X Senate Primary X General Amount of Each Disbursement thi Category/ Type	/ ° V
GREAT BEND KS 67530 Purpose of Disbursement political contribution Candidate Name PAT ROBERTS Office Sought: House X Senate Primary X General	8
Purpose of Disbursement political contribution Candidate Name PAT ROBERTS Office Sought: House X Senate Disbursement For: 2008 X General	s Perio
Candidate Name PAT ROBERTS Office Sought: House X Senate Disbursement For: 2008 X General Category/ Type	.00
Office Sought: House Disbursement For: 2008 X Senate Primary X General	
1 TOOLOGUIL Ottlot (Opoolit) ▼	
State: KS District: 00	

	CHEDULE B (FEC Form 3X	' Use sep	arate schedule(s)	_	NUMBER: PAGE 23 / 25
ITE	EMIZED DISBURSEMENTS	for each	category of the Summary Page	(check onl	y one)
	Information copied from such Reports and			d by any person	for the purpose of soliciting contributions
L	or commercial purposes, other than using to NAME OF COMMITTEE (In Full)	ne name and addre	ess of any politica	i committee to so	blicit contributions from such committee
· \	Kidney Care Council Political Action	Committee			
	Full Name (Last, First, Middle Initial) SENATE MAJORITY FUND				Transaction ID: SB23.4755 Date of Disbursement
	Mailing Address P.O. Box 32025				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Phoenix	State AZ	Zip Code 85064		Amount of Each Disbursement this Period
	Purpose of Disbursement political contribution				1000.00
	Candidate Name SENATE MAJORITY FUND	Nich and Francisco		Category/ Type	
	Senate President	Disbursement For: Primary Other (sp	General ecify) ▼		
	State: District: Full Name (Last, First, Middle Initial)				Transaction ID: SB23,4792
	STEPHANIE TUBBS JONES FOR L	JS CONGRESS			Date of Disbursement
	Mailing Address 3729 SILSBY RD				04
	City UNIVERSITY HEIGHTS	State OH	Zip Code 44118		Amount of Each Disbursement this Period
	Purpose of Disbursement political contribution				2500.00
	Candidate Name			Category/ Type	
,	Office Sought: X House Senate President	Disbursement For: Primary Other (sp	2008 X General		
	State: OH District: 11	(op			
	Full Name (Last, First, Middle Initial) STEPHANIE TUBBS JONES FOR L	JS CONGRESS			Transaction ID: SB23.4794 Date of Disbursement
	Mailing Address 3729 SILSBY RD				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City UNIVERSITY HEIGHTS	State OH	Zip Code 44118		Amount of Each Disbursement this Period
	Purpose of Disbursement political contribution				1000.00
	O Palata Niana			Category/ Type	
	Candidate Name				4
		Disbursement For: Primary Other (spe	2008 X General ecify) ▼		
	Office Sought: X House Senate	Primary	X General		

В.

President

District: 08

.90// 20001 10 1022			
SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMB	ER: PAGE 24 / 25
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only one) 21b 22 27 28a	X 23 24 25 26 28b 28c 29 30b
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)	<u> </u>		
/ Kidney Care Council Political Action Comr	nittee		
Full Name (Last, First, Middle Initial) TEAM SUNUNU		Date	saction ID: SB23.4747 of Disbursement
Mailing Address PO BOX 500		0 ^M 5	M / D D D / Y Y O O 8
City RYE	State Zip Code NH 03870	Amo	unt of Each Disbursement this Period
Purpose of Disbursement political contribution			5000.00
Candidate Name JOHN E SUNUNU		Category/ Type	
Office Sought: House Disburse X Senate President State: NH District: 00	ement For: 2008 Primary X General Other (specify)		
Full Name (Last, First, Middle Initial) VAN HOLLEN FOR CONGRESS		Date	saction ID: SB23.4772 of Disbursement
Mailing Address 10537 St. Paul Street		o ^M 6	5 M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Kensington	State Zip Code MD 20895	Amo	unt of Each Disbursement this Period
Purpose of Disbursement political contribution	Γ		5000.00
Candidate Name CHRIS VAN HOLLEN		Category/ Type	
Office Sought: X House Disburse Senate	ement For: 2008 Primary X General		

SUBTOTAL of Disbursements This Page (optional)	•	10000.00
TOTAL This Period (last page this line number only)	•	47500.00

Other (specify)

State: MD

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS		Lie e consuste cohodule (a)	FOR LINE	NUMBER: PAGE 25 / 25		
		Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	y one) 22		
	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					
\rangle	NAME OF COMMITTEE (In Full) Kidney Care Council Political Action Co	mmittee				
	Full Name (Last, First, Middle Initial) Iowa Ethics and Campaign Disclosure Mailing Address 510 East 12th, Suite			Transaction ID: SB29.4785 Date of Disbursement		
	City Des Moines Purpose of Disbursement	State Zip Code IA 50319		Amount of Each Disbursement this Period 25.00		
	late filing fee Candidate Name		Category/			
	Office Sought: House Disb Senate President State: District:	ursement For: Primary General Other (specify) ▼	1 1 1 1 1			

SUBTOTAL of Disbursements This Page (optional)		25.00
TOTAL This Period (last page this line number only)		25.00