

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines AMERICAN SURGICAL HOSPITAL ASSOCIATION POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 600 S. Cliff Ave. Suite 106 Sioux Falls SD 57104 5355 Check if different than previously reported. (ACC) X

2. FEC IDENTIFICATION NUMBER C00394163 3. IS THIS REPORT X NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post-Election Report for the: General, Runoff, Special

5. Covering Period 11 28 2006 through 12 31 2006

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 Douglas Johnson Signature of Treasurer Electronically Filed by Douglas Johnson Date 01 31 2007

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
AMERICAN SURGICAL HOSPITAL ASSOCIATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
1	1

D	D
2	8

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		69676.77
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	23684.77									
(c) Total Receipts (from Line 19)	3000.00	54048.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	26684.77	123724.77								
7. Total Disbursements (from Line 31)	13000.00	110040.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	13684.77	13684.77								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

AMERICAN SURGICAL HOSPITAL ASSOCIATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
1	1

D	D
2	8

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	6

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	3000.00	52296.00
(i) Itemized (use Schedule A)	0.00	1752.00
(ii) Unitemized	3000.00	54048.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)	3000.00	54048.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	3000.00	54048.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	3000.00	54048.00

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	40.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	40.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	13000.00	110000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	13000.00	110040.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	13000.00	110040.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	3000.00	54048.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3000.00	54048.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	40.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	40.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 8
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
AMERICAN SURGICAL HOSPITAL ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Thomas V. Bertuccini		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 1 / 2 0 0 6
Mailing Address 216 Kings Road		Transaction ID: SA11A1.4616
City Lafayette	State LA	Zip Code 70503
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Lafayette Surg. Specialty Hosp	Occupation Neurosurgeon	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Jon E. Browne		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 1 / 2 0 0 6
Mailing Address 11416 High Drive		Transaction ID: SA11A1.4617
City Leawood	State KS	Zip Code 66211
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Orthopaedic Sports Med. Clinic	Occupation Orthopedic Surgeon	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Robert F. Tarp		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 7 / 2 0 0 6
Mailing Address 401 North College Road, Suite 6		Transaction ID: SA11A1.4618
City Lafayette	State LA	Zip Code 70506
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Lafayette Surg. Specialty Hosp	Occupation Surgeon	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	3000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICAN SURGICAL HOSPITAL ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. FRIENDS OF DICK DURBIN COMMITTEE		Transaction ID: SB23.4601 Date of Disbursement
Mailing Address PO BOX 1949		<input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/>
City SPRINGFIELD	State IL	Zip Code 62705
Purpose of Disbursement Contribution		<input type="text" value="1000.00"/>
Candidate Name RICHARD J DURBIN		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District: 00	

Full Name (Last, First, Middle Initial) B. KAGEN 4 CONGRESS		Transaction ID: SB23.4604 Date of Disbursement
Mailing Address 100 WEST LAWRENCE STREET		<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/>
City APPLETON	State WI	Zip Code 54911
Purpose of Disbursement Contribution: 2006 General Debt		<input type="text" value="1000.00"/>
Candidate Name STEVEN LESLIE KAGEN		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WI	District: 08	

Full Name (Last, First, Middle Initial) C. NATIONAL LEADERSHIP PAC		Transaction ID: SB23.4606 Date of Disbursement
Mailing Address PO Box 5577		<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/>
City New York	State NY	Zip Code 10027
Purpose of Disbursement Contribution		<input type="text" value="5000.00"/>
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="7000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 8 / 8

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

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NAME OF COMMITTEE (In Full)

AMERICAN SURGICAL HOSPITAL ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. PERLMUTTER FOR CONGRESS

Mailing Address 3440 Youngfield St #264

City Wheat Ridge State CO Zip Code 80033

Purpose of Disbursement
Contribution: 2006 Primary Debt

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: CO District: 07

Transaction ID: SB23.4609

Date of Disbursement

12 / 06 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. SEARCHLIGHT LEADERSHIP FUND

Mailing Address 422 C Street NE Lower level
Lower level

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

Other

Transaction ID: SB23.4611

Date of Disbursement

12 / 18 / 2006

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

13000.00