



RECEIVED
FEC MAIL CENTER

2007 DEC 11 AM 11: 53

5746 Union Mill Road
Suite 160
Clifton, VA 20124
703.830.9192

FEC# C00431924

December 6, 2007

Sue Lang Panoke, FEC Analyst
Federal Election Commission
999 E. Street N.W.
Washington, DC 20463

Reference: Amended FEC Reports for Kidney Care Partners PAC for Mid-Year Report (July 31, 2007)

Please accept the following amended FEC filing reports for the Mid-Year Report from Kidney Care Partners Political Action Committee (KCP PAC).

Upon quality checking the report, there was a discrepancy in the reporting of the individual contribution from Eli Tomar (Page 5 of 7 – Schedule A). The corrected version accurately shows Mr. Tomar's contribution as \$50.00 and not \$2500 as originally reported. In addition, subtotals of that individual page have been corrected.

If you have any questions, please do not hesitate to contact me.

Sincerely,

A handwritten signature in cursive script that reads "Susan R. Murdock".

Susan R. Murdock
KCP PAC Assistant Treasurer and Administrator

27039573366

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS
For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER
2007 DEC 11 AM 11:53

Office Use Only

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

ADDRESS (number and street) **5746 Union Mill Road**
Suite 160
Check if different than previously reported. (ACC) **Clifton VA 20124**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C00431924

3. IS THIS REPORT NEW (N) OR AMENDED (A) **December 3, 07**

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 [] / [] / [] in the State of []

(d) 30-Day POST-Election Report for the:

General (30G) Runoff (30R) Special (30S)

Election on [] / [] / [] in the State of []

5. Covering Period **04 01 2007** through **06 30 2007**

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 **Susan R. Murdock**

Signature of Treasurer **Susan R. Murdock** Date **12 03 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.

Office Use Only

FEC FORM 3X
Rev. 12/2004

27039573367

12/11

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Kidney Care Partners Political Action Committee

Report Covering the Period:

From:

04 ' 01 ' 2007

To:

06 ' 30 ' 2007

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <i>2007</i>		0
(b) Cash on Hand at Beginning of Reporting Period.....	<i>2,745.00</i>	
(c) Total Receipts (from Line 19).....	<i>23,000.50</i>	<i>29,120.50</i>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<i>25,745.50</i>	<i>29,120.50</i>
7. Total Disbursements (from Line 31).....	<i>7,792.00</i>	<i>11,167.00</i>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<i>17,953.50</i>	<i>17,953.50</i>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<i>0</i>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<i>0</i>	

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

27039573368

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Kidney Care Partners Political Action Committee

Report Covering the Period: From:

04 01 2007

To:

06 30 2007

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).....

22,000.50

23,120.50

(ii) Unitemized

0

0

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

22,000.50

23,120.50

(b) Political Party Committees

0

0

(c) Other Political Committees (such as PACs).....

1,000.00

6,000.00

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

23,000.50

29,120.50

12. Transfers From Affiliated/Other Party Committees.....

0

0

13. All Loans Received

0

0

14. Loan Repayments Received.....

0

0

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

0

0

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

0

0

17. Other Federal Receipts (Dividends, Interest, etc.).....

0

0

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

0

0

(b) Levin Funds (from Schedule H5).....

0

0

(c) Total Transfers (add 18(a) and 18(b))..

0

0

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

23,000.50

29,120.50

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

23,000.50

29,120.50

27039573369

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
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0	0
(ii) Non-Federal Share	0	0
(b) Other Federal Operating Expenditures	0	60.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0	60.00
22. Transfers to Affiliated/Other Party Committees	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees	7,792.00	11,107.00
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0	0
26. Loan Repayments Made	0	0
27. Loans Made	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0	0
29. Other Disbursements	0	0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	7,792.00	11,167.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	7,792.00	11,167.00

27039573370

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)	23,000.50	29,120.50
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	23,000.50	29,120.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0	60.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0	60.00

27039573371

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 1 OF 7	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Kidney Care Partners Political Action Committee

A. Full Name (Last, First, Middle Initial)
Hartwell, Lois

Mailing Address
1311 N. Maryland Avenue

City **Glendale** State **CA** Zip Code **94010**

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50.00

Date of Receipt
04 ' 13 ' 2007

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Lumwatt, LeAnne

Mailing Address
310 Ascot Road

City **Hillsborough** State **CA** Zip Code **94010**

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

Name of Employer Occupation
Davita Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100.00

Date of Receipt
04 ' 13 ' 2007

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
JACKSON, Joyce

Mailing Address
6585 N.E. Windermere Road

City **Seattle** State **WA** Zip Code **98105**

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

Name of Employer Occupation
Northwest Kidney Ctrs. President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1,000.00

Date of Receipt
04 ' 23 ' 2007

Amount of Each Receipt this Period
1,000.00

SUBTOTAL of Receipts This Page (optional).....▶ **1,150.00**

TOTAL This Period (last page this line number only).....▶ **1,150.00**

27039573372

**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)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

PAGE 2 OF 7

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 Partners Political Action Committee

A. Full Name (Last, First, Middle Initial)
Butler, John

Mailing Address
85 Mosher Lane

City **Marlborough** State **MA** Zip Code **01752**

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

Name of Employer **Genzyme** Occupation **President**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
05 / 14 / 2007

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Burton, Lorraine

Mailing Address
6110 Executive Blvd. Suite 1010

City **Rockville** State **MD** Zip Code **20852**

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

Name of Employer **American Kidney Fund** Occupation **President**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1.00.00

Date of Receipt
05 / 14 / 2007

Amount of Each Receipt this Period
1.00.00

C. Full Name (Last, First, Middle Initial)
Chianchiano, Dolph

Mailing Address
152 East 94th Street, Apt 6F

City **New York** State **NY** Zip Code **10128**

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

Name of Employer **National Kidney Fund** Occupation **Director**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1.00.00

Date of Receipt
05 / 30 / 2007

Amount of Each Receipt this Period
1.00.00

SUBTOTAL of Receipts This Page (optional).....▶ **700.00**

TOTAL This Period (last page this line number only).....▶ **1,850.06**

27039573373

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

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

FOR LINE NUMBER: PAGE **3** OF **7**
(check only one)
 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)
Kidney Care Partners Political Action Committee

Full Name (Last, First, Middle Initial)
A. Schmidt, John

Mailing Address
917 Prince Street

City **Alexandria** State **VA** Zip Code **22314**

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

Name of Employer **Schmidt Public Affairs** Occupation **President**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
06/05/2007

Amount of Each Receipt this Period
600.00

Full Name (Last, First, Middle Initial)
B. Tuten, Todd

Mailing Address
2550 M. Street NW

City **Washington** State **DC** Zip Code **20037**

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

Name of Employer **Patton Boggs** Occupation **Attorney**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
06/05/2007

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
c. Keegan, Linda

Mailing Address
1238 Pinecrist Circle

City **Silver Spring, MD** State **MD** Zip Code **20910**

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

Name of Employer **LDK & Associates** Occupation **President**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1,000.00**

Date of Receipt
06/08/2007

Amount of Each Receipt this Period
1,000.00

SUBTOTAL of Receipts This Page (optional).....▶ **2,100.00**

TOTAL This Period (last page this line number only).....▶ **3,950.00**

27039573374

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 4 OF 7	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Kidney Care Partners Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jones, Ed

Mailing Address
110 Hogan Lane

City *Ambler* State *PA* Zip Code *19002*

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

Name of Employer _____ Occupation *Nephrologist*

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date
500.00

Date of Receipt
06 '08' 2007

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Wick, Gail

Mailing Address
520 New Wellington Circle

City *Atlanta* State *GA* Zip Code *30327*

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

Name of Employer *Self-employed* Occupation *Nurse consultant*

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date
500.00

Date of Receipt
06 '08' 2007

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Maddock, Payne

Mailing Address
102 Grant Avenue

City *Takoma Park* State *MD* Zip Code *20912*

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

Name of Employer *National Kidney Foundation* Occupation *Government Affairs*

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date

Date of Receipt
06 '08' 2007

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶ *1,250.00*

TOTAL This Period (last page this line number only) ▶ *5,200.00*

27039573375

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE <u>5</u> OF <u>7</u>	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Kidney Care Partners Political Action Committee

A. Full Name (Last, First, Middle Initial)
McAllister, Charlie

Mailing Address
1001 Keene Road South

City Clearwater State FL Zip Code 33756-4633

FEC ID number of contributing federal political committee, C

Name of Employer DaVita Occupation Chief Medical Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2,500.50

Date of Receipt
06 ' 19 ' 2007

Amount of Each Receipt this Period
2,500.50

B. Full Name (Last, First, Middle Initial)
Tomatz, Eli

Mailing Address
2550 M. Street NW

City Washington State DC Zip Code 20037

FEC ID number of contributing federal political committee, C

Name of Employer Patton Boggs Occupation Associate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50.00

Date of Receipt
06 ' 19 ' 2007

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Zimmerman, Troy

Mailing Address
13021 Slater Road

City Lovettsville State VA Zip Code 20180

FEC ID number of contributing federal political committee, C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
06 ' 08 ' 2007

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	<u>2,800.50</u>
TOTAL This Period (last page this line number only).....▶	<u>8,000.50</u>

27039573376

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 7	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
				<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Kidney Care Partners Political Action Committee

Full Name (Last, First, Middle Initial) A. Hakim Ray		Date of Receipt 06' 13' 2007
Mailing Address 1119 Harpeth Road		Amount of Each Receipt this Period 1,000.00
City Franklin	State Zip Code TN 37069	
FEC ID number of contributing federal political committee C		
Name of Employer FMC	Occupation Dialysis Provider	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1,000.00	

Full Name (Last, First, Middle Initial) B. Berger, Eric		Date of Receipt 06' 13' 2007
Mailing Address 1155 15th St. N.W. # 1100		Amount of Each Receipt this Period 250.00
City Washington	State Zip Code DC 20005	
FEC ID number of contributing federal political committee C		
Name of Employer Davita	Occupation Government Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Thiry, Kent		Date of Receipt 06' 05' 2007
Mailing Address 618 Mountain Home Road		Amount of Each Receipt this Period 5,000.00
City Woodside	State Zip Code CA 94062	
FEC ID number of contributing federal political committee C		
Name of Employer Davita	Occupation Chairman / CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5,000.00	

SUBTOTAL of Receipts This Page (optional).....▶	6,250.00
TOTAL This Period (last page this line number only).....▶	14,250.50

27039573377

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

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

FOR LINE NUMBER: PAGE 7 OF 7
(check only one)
 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)
Kidney Care Partners Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mello, Joe

Mailing Address
54944 Southern Hills

City La Quinta State CA Zip Code 92253

FEC ID number of contributing federal political committee, C

Name of Employer Davita Occupation Chief Operating Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date 5,000.00

Date of Receipt
06 ' 05 ' 2007

Amount of Each Receipt this Period
5,000.00

B. Full Name (Last, First, Middle Initial)
Kansas Dialysis Services

Mailing Address
634 S.W. Mulvane # 3000

City Topoka State KS Zip Code 66606

FEC ID number of contributing federal political committee, C

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date 2,500.00

Date of Receipt
06 ' 19 ' 2007

Amount of Each Receipt this Period
2,500.00

Receipt being refunded
7/18/07 due to entity
being an unregistered party.

C. Full Name (Last, First, Middle Initial)
Lester, Kathy

Mailing Address
2315 Highland Avenue

City Falls Church State VA Zip Code 22046

FEC ID number of contributing federal political committee, C

Name of Employer Patton Boggs Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date 250.00

Date of Receipt
06 ' 08 ' 2007

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶ 7,750.00

TOTAL This Period (last page this line number only).....▶ 22,000.50

27039573378

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE	OF
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Kidney Care Partners Political Action Committee

A. Full Name (Last, First, Middle Initial)
Renal Physicians Association

Mailing Address
1700 Rockville Pike, Suite 200

City *Rockville* State *VA* Zip Code *20852-1631*

FEC ID number of contributing federal political committee, *C00409391*

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1,000.00

Date of Receipt
05/30/2007

Amount of Each Receipt this Period
1,000.00

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 _____

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 _____

Amount of Each Receipt this Period _____

SUBTOTAL of Receipts This Page (optional)..... ▶ *1,000.00*

TOTAL This Period (last page this line number only)..... ▶ *1,000.00*

27039573379

**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

PAGE 1 OF 2

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 Partners Political Action Committee

A. Mila's Catering

Full Name (Last, First, Middle Initial)

Mailing Address: **1720 Lanier Place NW**

City: **Washington** State: **Dc** Zip Code: **20009**

Purpose of Disbursement: **In-kind contribution**

Candidate Name: **Senator Ken Salazar**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **CO** District:

Date of Disbursement: **05/30/2007**

Amount of Each Disbursement this Period: **792.00**

Category/Type: **011**

B. Salazar for Senate

Full Name (Last, First, Middle Initial)

Mailing Address: **P.O. Box 600**

City: **Denver** State: **CO** Zip Code: **80201**

Purpose of Disbursement: **Political Contribution**

Candidate Name: **Senator Ken Salazar**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **CO** District:

Date of Disbursement: **05/30/2007**

Amount of Each Disbursement this Period: **1,000.00**

Category/Type: **011**

C. Friends of Max Baucus

Full Name (Last, First, Middle Initial)

Mailing Address: **P.O. Box 586**

City: **Helena** State: **MT** Zip Code: **59624**

Purpose of Disbursement: **Political Contribution**

Candidate Name: **Senator Max Baucus**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **MT** District:

Date of Disbursement: **06/13/2007**

Amount of Each Disbursement this Period: **2,000.00**

Category/Type: **011**

SUBTOTAL of Disbursements This Page (optional) ▶ **3,792.00**

TOTAL This Period (last page this line number only) ▶ **3,792.00**

27039573380

**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 2 OF 2

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

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

NAME OF COMMITTEE (In Full)

Kidney Care Partners Political Action Committee

Full Name (Last, First, Middle Initial)

A. *Tim Johnson for South Dakota*

Date of Disbursement

06 / 13 / 2007

Mailing Address

P.O. Box 1859

City

Sioux Falls

State

SD

Zip Code

57101

Purpose of Disbursement

political contribution

011

Amount of Each Disbursement this Period

2,000.00

Candidate Name

Senator Tim Johnson

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: *SD*

District:

Full Name (Last, First, Middle Initial)

B. *Earl Pomeroy for Congress*

Date of Disbursement

06 / 25 / 2007

Mailing Address

P.O. Box 9336

City

Fargo

State

ND

Zip Code

58106

Purpose of Disbursement

political contribution

011

Amount of Each Disbursement this Period

2,000.00

Candidate Name

Representative Earl Pomeroy

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State: *ND*

District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

Disbursement For:

State: District:

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....▶

4,000.00

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

7,792.00

27039573381

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)
12/6/07

USPS Priority Mail Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

SL 12/11/07
PREPARER DATE PREPARED

27039573382