

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

UNIVERSAL HEALTH SERVICES EMPLOYEES' GOOD GOVERNMENT FUND

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		197965.69
(b) Cash on Hand at Beginning of Reporting Period.....	179176.63	
(c) Total Receipts (from Line 19)	5987.10	8842.40
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	185163.73	206808.09
7. Total Disbursements (from Line 31).....	8141.32	29785.68
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	177022.41	177022.41
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

UNIVERSAL HEALTH SERVICES EMPLOYEES' GOOD GOVERNMENT FUND

Report Covering the Period: From: / / To: / /

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).....	5126.94	5657.76
(ii) Unitemized	860.16	3184.64
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5987.10	8842.40
(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)	5987.10	8842.40
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 Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	5987.10	8842.40
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	5987.10	8842.40

DETAILED SUMMARY PAGE

of Disbursements

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II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	41.32	185.68
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	41.32	185.68
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5100.00	26600.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	3000.00	3000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	8141.32	29785.68
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8100.00	29600.00

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)	5987.10	8842.40
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5987.10	8842.40
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
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	0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 9
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
UNIVERSAL HEALTH SERVICES EMPLOYEES' GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)
A. Mark Crawford

Mailing Address 5972 AXIS DRIVE

City Sparks State NV Zip Code 89436

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

Name of Employer UHS of DE Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 19 / 2015

Transaction ID : SA11AI.12662

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. Alan B Miller

Mailing Address 57 Crosby Brown Road

City Gladwyne State PA Zip Code 19035

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

Name of Employer UHS of DE Occupation Chairman and CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 19 / 2015

Transaction ID : SA11AI.12633

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
C. Gene Winters

Mailing Address PO Box 748

City Bushland State TX Zip Code 79102

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

Name of Employer UHS of Delaware Inc Occupation CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **307.76**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 19 / 2015

Transaction ID : SA11AI.12645

Amount of Each Receipt this Period
76.94

SUBTOTAL of Receipts This Page (optional).....▶	5126.94
TOTAL This Period (last page this line number only).....▶	5126.94

**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)

UNIVERSAL HEALTH SERVICES EMPLOYEES' GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. FOR CONGRESS KEN CALVERT

Mailing Address PO Box 20123

City State Zip Code
Riverside CA 92516

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: CA District: 44

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	17	/	2015

Transaction ID : SB23.12667

Amount of Each Disbursement this Period

2600.00

Full Name (Last, First, Middle Initial)

B. MAJORITY COMMITTEE PAC--MC PAC

Mailing Address P.O. BOX 10134

City State Zip Code
BAKERSFIELD CA 93389

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	24	/	2015

Transaction ID : SB23.12675

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

5100.00

5100.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UNIVERSAL HEALTH SERVICES EMPLOYEES' GOOD GOVERNMENT FUND

Full Name (Last, First, Middle Initial)

A. Matt Hudson Campaign

Mailing Address 617 Pine Ridge Road
#350

City Naples State FL Zip Code 34119

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 20 / 2015

Transaction ID : SB29.12673

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. People in Need of Government Accountability

Mailing Address 95 Merrick Way
Suite 250

City Coral Gables State FL Zip Code 33134

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 20 / 2015

Transaction ID : SB29.12679

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Treasure Coast Alliance

Mailing Address 5730 Corporate Way
#214

City West Palm Beach State FL Zip Code 33407

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 20 / 2015

Transaction ID : SB29.12677

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

3000.00

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

UNIVERSAL HEALTH SERVICES EMPLOYEES' GOOD GOVERNMENT FUND

Form A: Wells Fargo Bank. Transaction ID: H4.12666. Allocated Activity: Administrative. Date: 02/11/2015. Amounts: FEDERAL SHARE 0.00, NONFEDERAL SHARE 41.32, TOTAL AMOUNT 41.32.

Form B: Empty fields for Name, Address, City, State, Zip Code, Purpose of Disbursement, and Activity or Event Identifier.

Form C: Empty fields for Name, Address, City, State, Zip Code, Purpose of Disbursement, and Activity or Event Identifier.

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

Summary table for Subtotal: FEDERAL SHARE 0.00, NONFEDERAL SHARE 41.32, TOTAL AMOUNT 41.32.

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

Summary table for Total: FEDERAL SHARE 0.00, NONFEDERAL SHARE 41.32, TOTAL AMOUNT 41.32.