

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

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

12FE4M5

American Hospital Association PAC

ADDRESS (number and street)

800 Tenth Street, NW

Two CityCenter, Suite 400

☐ Check if different than previously reported. (ACC)

Washington

DC

20001-4956

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00106146

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☒ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

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

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

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 Ms. Melinda Hatton

Signature of Treasurer

Ms. Melinda Hatton

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American Hospital Association PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y 06 / 01 / 2014 To: M M / D D / Y Y Y Y Y 06 / 30 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2014		3126501.95
(b) Cash on Hand at Beginning of Reporting Period.....	2602045.26	
(c) Total Receipts (from Line 19)	214910.03	1048085.98
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	2816955.29	4174587.93
7. Total Disbursements (from Line 31)	102246.54	1459879.18
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2714708.75	2714708.75
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

American Hospital Association PAC

Report Covering the Period:

From:

 M M / D D / Y Y Y Y
 06 / 01 / 2014

To:

 M M / D D / Y Y Y Y
 06 / 30 / 2014
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).....

100007.89

411081.53

(ii) Unitemized

44679.16

134985.15

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

144687.05

546066.68

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

5000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

144687.05

551066.68

12. Transfers From Affiliated/Other

Party Committees.....

70000.00

495500.00

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.).....

222.98

1519.30

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))..... ▶

214910.03

1048085.98

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)..... ▶

214910.03

1048085.98

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	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	246.54	2674.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	246.54	2674.87
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	101500.00	533800.00
24. Independent Expenditures (use Schedule E)	0.00	921904.31
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	500.00	1500.00
(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)).....	500.00	1500.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	102246.54	1459879.18
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	102246.54	1459879.18

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)	144687.05	551066.68
34. Total Contribution Refunds (from Line 28(d))	500.00	1500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	144187.05	549566.68
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	246.54	2674.87
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	246.54	2674.87

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)

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Dr. Rashid Baddoura MD

Mailing Address 120 Heights Road

City

Ridgewood

State

NJ

Zip Code

07450-2412

FEC ID number of contributing
federal political committee.

C

Name of Employer

Valley Health System

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

06 / 30 / 2014

Transaction ID : 15088631

Amount of Each Receipt this Period

325.00

Full Name (Last, First, Middle Initial)

B. Mr. Stephen O Hyde FACHE

Mailing Address 5602 SW Lee Boulevard

City

Lawton

State

OK

Zip Code

73505-9635

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southwestern Medical Center

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

06 / 02 / 2014

Transaction ID : 21803764

Amount of Each Receipt this Period

375.00

Full Name (Last, First, Middle Initial)

C. Mr. Jeffrey D Nowlin

Mailing Address 1923 South Utica Avenue

City

Tulsa

State

OK

Zip Code

74104-6520

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. John Medical Center

Occupation

President and Chief Operating Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 02 / 2014

Transaction ID : 21803770

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

950.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Timothy Young

Mailing Address 1923 South Utica Avenue

City

Tulsa

State

OK

Zip Code

74104-6502

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. John Medical Center

Occupation

Administrator

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 02 / 2014

Transaction ID : 21805798

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. Jeffrey S Drop

Mailing Address 4816 Amber Valley Parkway

City

Fargo

State

ND

Zip Code

58104-8404

FEC ID number of contributing
federal political committee.

C

Name of Employer

Catholic Health Initiatives

Occupation

SVP Division Executive

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

330.00

Date of Receipt

06 / 03 / 2014

Transaction ID : 21806172

Amount of Each Receipt this Period

330.00

Full Name (Last, First, Middle Initial)

c. Mr. Stephen M. Ahnen

Mailing Address 125 Airport Road

City

Concord

State

NH

Zip Code

03301-7300

FEC ID number of contributing
federal political committee.

C

Name of Employer

New Hampshire Hospital Association

Occupation

President and CEO

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.50

Date of Receipt

06 / 02 / 2014

Transaction ID : 21806179

Amount of Each Receipt this Period

45.50

SUBTOTAL of Receipts This Page (optional)..... ►

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

625.50

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Sara J Criger

Mailing Address 4050 Coon Rapids Boulevard

City State Zip Code
 Coon Rapids MN 55433-2522

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mercy Hospital

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
 06 / 03 / 2014

Transaction ID : 21806182

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Barbara Brown Ph.D.

Mailing Address 11 Countryside Lane

City State Zip Code
 Richmond VA 23229-7928

FEC ID number of contributing
federal political committee.

C

Name of Employer

Virginia Hospital & Healthcare Associa

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY
 06 / 04 / 2014

Transaction ID : 21806187

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Ms. Elizabeth Long

Mailing Address 7723 Stuart Hall Road

City State Zip Code
 Richmond VA 23229-6615

FEC ID number of contributing
federal political committee.

C

Name of Employer

Virginia Hospital & Healthcare Associa

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY
 06 / 04 / 2014

Transaction ID : 21806188

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

800.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Katharine M. Webb

Mailing Address 14 Bridgeway Road

City

Richmond

State

VA

Zip Code

23226-3302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Virginia Hospital & Healthcare Associa

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY
06 / 04 / 2014

Transaction ID : 21806189

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Ms. Phillis Oeters

Mailing Address 6855 Red Road, Suite 600

City

Miami

State

FL

Zip Code

33143-3632

FEC ID number of contributing
federal political committee.

C

Name of Employer

Baptist Health South Florida

Occupation

Corporate Vice President Government an

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
06 / 04 / 2014

Transaction ID : 21806207

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. George Foyo

Mailing Address 6855 Red Road, Suite 600

City

Coral Gables

State

FL

Zip Code

33143-3632

FEC ID number of contributing
federal political committee.

C

Name of Employer

Baptist Health South Florida

Occupation

Exec VP & Chief Admin Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
06 / 04 / 2014

Transaction ID : 21806208

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

1700.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Mark T Faulkner

Mailing Address 1000 West Moreno Street

City

Pensacola

State

FL

Zip Code

32501-2316

FEC ID number of contributing
federal political committee.

C

Name of Employer

Baptist Health Care Corporation

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 04 / 2014

Transaction ID : 21806210

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Allen S Weiss MD

Mailing Address 1221 Gulf Shore Blvd N
Apt 2

City

Naples

State

FL

Zip Code

34102-4922

FEC ID number of contributing
federal political committee.

C

Name of Employer

NCH Downtown Naples Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

06 / 04 / 2014

Transaction ID : 21806211

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

c. Ms. Angie L Metcalf

Mailing Address P O Box 9010

City

Stuart

State

FL

Zip Code

34995-9010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Martin Health System

Occupation

Vice President and Chief Human Resourc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 04 / 2014

Transaction ID : 21806214

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

1500.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. John A Kolosky

Mailing Address 12902 Magnolia Drive

City

Tampa

State

FL

Zip Code

33612-9497

FEC ID number of contributing
federal political committee.

C

Name of Employer

H. Lee Moffitt Cancer Center and Resea

Occupation

Executive Vice President and Chief Ope

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

06 / 04 / 2014

Transaction ID : 21806219

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Mr. Mark E Robitaille

Mailing Address P O Box 9010

City

Stuart

State

FL

Zip Code

34995-9010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Martin Health System

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

06 / 04 / 2014

Transaction ID : 21806222

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Ms. Sandra C Podley

Mailing Address 101 Civic Center Lane

City

Lake Havasu City

State

AZ

Zip Code

86403-5607

FEC ID number of contributing
federal political committee.

C

Name of Employer

Presbyterian Hospital

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

06 / 05 / 2014

Transaction ID : 21806232

Amount of Each Receipt this Period

375.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

2375.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. John T Porter

Mailing Address 3900 West Avera Drive, Suite 301

City

Sioux Falls

State

SD

Zip Code

57108-5721

FEC ID number of contributing
federal political committee.

C

Name of Employer

Avera Health

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 02 / 2014

Transaction ID : 21806233

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. John T Porter

Mailing Address 3900 West Avera Drive, Suite 301

City

Sioux Falls

State

SD

Zip Code

57108-5721

FEC ID number of contributing
federal political committee.

C

Name of Employer

Avera Health

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

06 / 02 / 2014

Transaction ID : 21806234

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Mr. John T Porter

Mailing Address 3900 West Avera Drive, Suite 301

City

Sioux Falls

State

SD

Zip Code

57108-5721

FEC ID number of contributing
federal political committee.

C

Name of Employer

Avera Health

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

06 / 02 / 2014

Transaction ID : 21806235

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

1200.00

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Helene M Burns MSN, RN, N

Mailing Address 2 Westbury Drive

City State Zip Code
 Berlin NJ 08009-9682

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Kennedy Health System

Occupation
 Chief Nursing Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.50

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 06 / 2014

Transaction ID : 21806871

Amount of Each Receipt this Period

227.50

Full Name (Last, First, Middle Initial)

B. Mr. Joseph P Coyle

Mailing Address 46 Cypress Lane

City State Zip Code
 West Creek NJ 08092-2839

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Meridian Health

Occupation
 President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 06 / 2014

Transaction ID : 21806877

Amount of Each Receipt this Period

650.00

Full Name (Last, First, Middle Initial)

C. Mr. Douglas A Duchak

Mailing Address 2 Witte Place

City State Zip Code
 Mahwah NJ 07430-3157

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Englewood Hospital and Medical Center

Occupation
 Trustee

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 06 / 2014

Transaction ID : 21806881

Amount of Each Receipt this Period

325.00

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

1202.50

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Raymond F Fredericks

Mailing Address 302 Brooklyn Boulevard

City

State

Zip Code

Sea Girt

NJ

08750-2001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

JFK Health System

President and CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

06 / 06 / 2014

Transaction ID : 21806885

Amount of Each Receipt this Period

1300.00

Full Name (Last, First, Middle Initial)

B. Mr. Michael Guerriero

Mailing Address 760 Alexander Road

City

State

Zip Code

Princeton

NJ

08540-6305

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

New Jersey Hospital Association

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.75

Date of Receipt

06 / 06 / 2014

Transaction ID : 21806887

Amount of Each Receipt this Period

33.15

Full Name (Last, First, Middle Initial)

C. Mr. Leslie D Hirsch FACHE

Mailing Address 28 MacKenzie Lane North

City

State

Zip Code

Denville

NJ

07834-2954

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Saint Clare's Health System

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

422.50

Date of Receipt

06 / 06 / 2014

Transaction ID : 21806889

Amount of Each Receipt this Period

130.00

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1463.15

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Sean J. Hopkins

Mailing Address 6180 Lower Mountain Road

City State Zip Code
 New Hope PA 18938-5760

FEC ID number of contributing
federal political committee.

C

Name of Employer
 New Jersey Hospital Association

Occupation
 Sr. VP., Health Economics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.20

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 06 / 2014

Transaction ID : 21806890

Amount of Each Receipt this Period

33.04

Full Name (Last, First, Middle Initial)

B. Ms. Sarah Lechner

Mailing Address 760 Alexander Road

City State Zip Code
 Princeton NJ 08540-6305

FEC ID number of contributing
federal political committee.

C

Name of Employer
 New Jersey Hospital Association

Occupation
 General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 06 / 2014

Transaction ID : 21806895

Amount of Each Receipt this Period

39.00

Full Name (Last, First, Middle Initial)

C. Mr. John Slotman

Mailing Address 760 Alexander Road

City State Zip Code
 Princeton NJ 08540-6305

FEC ID number of contributing
federal political committee.

C

Name of Employer
 New Jersey Hospital Association

Occupation
 VP, GME and Teaching Hospital Issues

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 06 / 2014

Transaction ID : 21806903

Amount of Each Receipt this Period

46.80

SUBTOTAL of Receipts This Page (optional)..... ►

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

118.84

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Edward Kelly

Mailing Address 14 Prospect Street

City
Milford

State
MA

Zip Code
01757-3090

FEC ID number of contributing
federal political committee.

C

Name of Employer

Milford Regional Medical Center

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

06 / 06 / 2014

Transaction ID : 21806913

Amount of Each Receipt this Period

375.00

Full Name (Last, First, Middle Initial)

B. Dr. Margot Hartmann MD, PhD

Mailing Address 57 Prospect Street

City
Nantucket

State
MA

Zip Code
02554-4345

FEC ID number of contributing
federal political committee.

C

Name of Employer

Nantucket Cottage Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

06 / 06 / 2014

Transaction ID : 21806915

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

C. Mr. Steven F Bradley

Mailing Address 759 Chestnut Street

City
Springfield

State
MA

Zip Code
01199-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Baystate Medical Center

Occupation

Vice President Government Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

06 / 06 / 2014

Transaction ID : 21806919

Amount of Each Receipt this Period

262.50

SUBTOTAL of Receipts This Page (optional)..... ►

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

862.50

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Spiros Hatiras FACHE

Mailing Address 109 Madison Ave

City

Holyoke

State

MA

Zip Code

01040-2042

FEC ID number of contributing
federal political committee.

C

Name of Employer

Holyoke Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.50

Date of Receipt

06 / 06 / 2014

Transaction ID : 21806920

Amount of Each Receipt this Period

562.50

Full Name (Last, First, Middle Initial)

B. Mr. Patrick R Wardell

Mailing Address 25 Carver Street

City

Cambridge

State

MA

Zip Code

02138-1969

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cambridge Health Alliance

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

06 / 06 / 2014

Transaction ID : 21806921

Amount of Each Receipt this Period

800.00

Full Name (Last, First, Middle Initial)

C. Mr. John A. Lodico

Mailing Address 12 Davis Street

City

Belmont

State

MA

Zip Code

02478-5030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Massachusetts Hospital Association

Occupation

Director, Publications

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

06 / 06 / 2014

Transaction ID : 21806922

Amount of Each Receipt this Period

262.50

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1625.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Joe Wilkins Jr.

Mailing Address 82414 Puccini Dr

City State Zip Code
 Indio CA 92203-3848

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Joseph Hospital

Occupation

Trustee

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
 06 / 09 / 2014

Transaction ID : 21810356

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. Mr. Matthew Gross

Mailing Address 1721 New State Road

City State Zip Code
 Norwalk OH 44857-9168

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fisher-Titus Medical Center

Occupation

Board Vice Chairman

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
 06 / 09 / 2014

Transaction ID : 21810432

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Dr. David Hyman DDS

Mailing Address 130 East Main Street

City State Zip Code
 Meriden CT 06450-5604

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hartford Healthcare

Occupation

Board Chair

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
 06 / 09 / 2014

Transaction ID : 21810435

Amount of Each Receipt this Period

350.00

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

1050.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Lorna Strayer

Mailing Address 700 Ewing Road

City

Bainbridge

State

OH

Zip Code

45612-9476

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fisher-Titus Medical Center

Occupation

Senior Vice President Administration a

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY
06 / 09 / 2014

Transaction ID : 21810460

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. Dr. Kenneth Anderson MD

Mailing Address 4000 Kresge Way

City

Louisville

State

KY

Zip Code

40207-4605

FEC ID number of contributing
federal political committee.

C

Name of Employer

Baptist Health Louisville

Occupation

Vice President and Chief Medical Offic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
06 / 09 / 2014

Transaction ID : 21811904

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Mr. Kevin S Wardell

Mailing Address P O Box 35070

City

Louisville

State

KY

Zip Code

40232-5070

FEC ID number of contributing
federal political committee.

C

Name of Employer

Norton Hospital

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

MM / DD / YYYY
06 / 09 / 2014

Transaction ID : 21811906

Amount of Each Receipt this Period

375.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

1025.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Kevin Halter

Mailing Address 105 Stoneybrook

City State Zip Code
 Ashland KY 41101-2159

FEC ID number of contributing federal political committee.

C

Name of Employer

Our Lady of Bellefonte Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 09 / 2014

Transaction ID : 21811908

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Ms. Connie Smith

Mailing Address 456 Burnley Road

City State Zip Code
 Scottsville KY 42164-6355

FEC ID number of contributing federal political committee.

C

Name of Employer

Medical Center at Scottsville

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 09 / 2014

Transaction ID : 21811910

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Ms. Jane Wheatley

Mailing Address 1700 Old Lebanon Road

City State Zip Code
 Campbellsville KY 42718-9662

FEC ID number of contributing federal political committee.

C

Name of Employer

Taylor Regional Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 09 / 2014

Transaction ID : 21811912

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

1500.00

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

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Gale N Walker

Mailing Address 401 West Glynn Drive

City

Parkston

State

SD

Zip Code

57366-9605

FEC ID number of contributing
federal political committee.

C

Name of Employer

Avera St. Benedict Health Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 09 / 2014

Transaction ID : 21813003

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. Fred Slunecka

Mailing Address 7200 S Burleigh Cir

City

Sioux Falls

State

SD

Zip Code

57108-5721

FEC ID number of contributing
federal political committee.

C

Name of Employer

Avera Health

Occupation

Chief Operating Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

06 / 09 / 2014

Transaction ID : 21813005

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. Herb B. Kuhn

Mailing Address 5310 Saddlebrooke Lane

City

Lohman

State

MO

Zip Code

65053-9353

FEC ID number of contributing
federal political committee.

C

Name of Employer

Missouri Hospital Association

Occupation

President and CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 04 / 2014

Transaction ID : 21813027

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

625.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Daniel R. Landon

Mailing Address 1811 Forest Park Court

City State Zip Code
 Jefferson City MO 65109-9782

FEC ID number of contributing
federal political committee.

C

Name of Employer

Missouri Hospital Association

Occupation

Sr. Vice President, Governmental Relat

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 04 / 2014

Transaction ID : 21813028

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

B. Ms. Anna M Adams

Mailing Address 2600 Abbotts Glen Drive

City State Zip Code
 Acworth GA 30101-3417

FEC ID number of contributing
federal political committee.

C

Name of Employer

Georgia Hospital Association

Occupation

Government Relations Coordinator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1033.00

Date of Receipt

06 / 09 / 2014

Transaction ID : 21813035

Amount of Each Receipt this Period

1.00

Full Name (Last, First, Middle Initial)

c. Mr. Donald R Avery FACHE

Mailing Address P O Box 1408

City State Zip Code
 Dublin GA 31040-1408

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fairview Park Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 09 / 2014

Transaction ID : 21813036

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

376.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Jean Aycock

Mailing Address 143 Lakecrest Drive. NE

City State Zip Code
Milledgeville GA 31061-9093

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oconee Regional Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 09 / 2014

Transaction ID : 21813037

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. Kevin Bierschenk

Mailing Address 201 North Lakes Drive

City State Zip Code
Eastman GA 31023-9309

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dodge County Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 09 / 2014

Transaction ID : 21813038

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. James Crissey

Mailing Address 215 Emerald Lake Drive

City State Zip Code
Fayetteville GA 30215-7704

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southern Regional Medical Center

Occupation

VP Facilities

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 09 / 2014

Transaction ID : 21813041

Amount of Each Receipt this Period

250.00

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1000.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. James R Davis

Mailing Address 7 Rockbrook Road

City

Augusta

State

GA

Zip Code

30909-3760

FEC ID number of contributing
federal political committee.

C

Name of Employer

University Health Care System

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
06 / 09 / 2014

Transaction ID : 21813042

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Mr. Alan Kent

Mailing Address 583 Limestone Street

City

Mount Vernon

State

GA

Zip Code

30445-3044

FEC ID number of contributing
federal political committee.

C

Name of Employer

Meadows Regional Medical Center

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
06 / 09 / 2014

Transaction ID : 21813051

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. Donald McKenna

Mailing Address 1310 Longwood Park

City

Statham

State

GA

Zip Code

30666-3632

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Mary's Health Care System

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
06 / 09 / 2014

Transaction ID : 21813054

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

1750.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Norma Jean Morgan

Mailing Address 1935 Clyo-Kildare Rd

City State Zip Code
 Clyo GA 31303-2814

FEC ID number of contributing
federal political committee.

C

Name of Employer

Effingham Hospital

Occupation

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 09 / 2014

Transaction ID : 21813055

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Ms. Marie Knedler RN, FACHE

Mailing Address 17683 Lochland Ridge

City State Zip Code
 Council Bluffs IA 51503-4493

FEC ID number of contributing
federal political committee.

C

Name of Employer

Alegent Creighton Health Bergan Mercy

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

562.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 06 / 2014

Transaction ID : 21813715

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Greg E. Boattenhamer

Mailing Address 100 East Grand Avenue
 Suite 100

City State Zip Code
 Des Moines IA 50309-1829

FEC ID number of contributing
federal political committee.

C

Name of Employer

Iowa Hospital Association

Occupation

Sr. Vice President, Government Relatio

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 06 / 2014

Transaction ID : 21813717

Amount of Each Receipt this Period

650.00

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

1400.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Steve Slessor

Mailing Address 1825 Logan Avenue

City

Waterloo

State

IA

Zip Code

50703-1916

FEC ID number of contributing
federal political committee.

C

Name of Employer

Buchanan County Health Center

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 06 / 2014

Transaction ID : 21813719

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Ms Donna J Vandehaar , R.N.

Mailing Address 610 10th Street

City

Perry

State

IA

Zip Code

50220-2221

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dallas County Hospital

Occupation

Chief Clinical Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

06 / 06 / 2014

Transaction ID : 21813720

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Mr. Matt Wille

Mailing Address 610 10th Street

City

Perry

State

IA

Zip Code

50220-2221

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dallas County Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 06 / 2014

Transaction ID : 21813721

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

850.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Steven P Baumert

Mailing Address P O Box 2C

City

Council Bluffs

State

IA

Zip Code

51502-3002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Methodist Jennie Edmundson Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 06 / 2014

Transaction ID : 21816723

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Ms. Clisby L. Hall

Mailing Address T-3320 Medical Center North
1161 - 21st Avenue South

City

Nashville

State

TN

Zip Code

37232-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Vanderbilt Healthcare

Occupation

Vice Chancellor of Health Affairs Offi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

06 / 11 / 2014

Transaction ID : 21816791

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Ms. Rebecca Hultberg

Mailing Address 1049 West Fifth Avenue Suite 100

City

Anchorage

State

AK

Zip Code

99501-1965

FEC ID number of contributing
federal political committee.

C

Name of Employer

Alaska State Hospital and Nursing Home

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 13 / 2014

Transaction ID : 21820684

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

1350.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Brian A Gragnolati FACHE

Mailing Address 8199 Bayside Drive

City

Pasadena

State

MD

Zip Code

21122-5701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Johns Hopkins Health System

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 06 / 2014

Transaction ID : 21822434

Amount of Each Receipt this Period

510.00

Full Name (Last, First, Middle Initial)

B. Dr. Richard Katz M.D.

Mailing Address 4 Woodland Court

City

Lutherville

State

MD

Zip Code

21093-1512

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mt. Washington Pediatric Hospital

Occupation

Chief Medical Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 06 / 2014

Transaction ID : 21822438

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. Thomas Bres

Mailing Address P O Box 30480

City

Lansing

State

MI

Zip Code

48909-7980

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sparrow Hospital

Occupation

Vice President and Chief Information O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 04 / 2014

Transaction ID : 21822726

Amount of Each Receipt this Period

262.50

SUBTOTAL of Receipts This Page (optional)..... ►

1022.50

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Georgia R Fojtasek

Mailing Address 205 North East Avenue

City

Jackson

State

MI

Zip Code

49201-1753

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allegiance Health

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY
06 / 04 / 2014

Transaction ID : 21822805

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. Mrs. Kathleen Harrelson

Mailing Address 6181 Karabrook Court

City

Kalamazoo

State

MI

Zip Code

49009-8961

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bronson Healthcare Group, Inc.

Occupation

Vice President of Nursing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.50

Date of Receipt

MM / DD / YYYY
06 / 04 / 2014

Transaction ID : 21822814

Amount of Each Receipt this Period

227.50

Full Name (Last, First, Middle Initial)

C. Mr. Frank J Sardone

Mailing Address 601 John Street

City

Kalamazoo

State

MI

Zip Code

49007-5341

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bronson Methodist Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY
06 / 04 / 2014

Transaction ID : 21822830

Amount of Each Receipt this Period

350.00

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927.50

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Jack Weiner

Mailing Address 44405 Woodward Avenue

City

Pontiac

State

MI

Zip Code

48341-5023

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Joseph Mercy Oakland

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

06 / 04 / 2014

Transaction ID : 21822835

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. Ms. Darcy Ellison

Mailing Address 7311 E. Chestnut

City

Evansville

State

IN

Zip Code

47715-3456

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Mary's Medical Center of Evansvill

Occupation

Sr. VP Clinical Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 12 / 2014

Transaction ID : 21824334

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

c. Dr. Robert C Keen PhD, FACHE

Mailing Address 4539 E.500 N.

City

Greenfield

State

IN

Zip Code

46140-9572

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hancock Regional Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 12 / 2014

Transaction ID : 21824335

Amount of Each Receipt this Period

125.00

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975.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Jonathan Nalli

Mailing Address 3453 Compania Drive

City

Valparaiso

State

IN

Zip Code

46385-9806

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Vincent Health

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 12 / 2014

Transaction ID : 21824341

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. Raymond W Snowden

Mailing Address 1920 Hillbrook Drive

City

Jasper

State

IN

Zip Code

47546-8455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Memorial Hospital and Health Care Cent

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 12 / 2014

Transaction ID : 21824349

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. Brian Tabor

Mailing Address 10762 Forest Lake Court

City

Indianapolis

State

IN

Zip Code

46278-9610

FEC ID number of contributing
federal political committee.

C

Name of Employer

Indiana Hospital Association

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

06 / 12 / 2014

Transaction ID : 21824351

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

1250.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Thomas J VanOsdol

Mailing Address 13772 Wyandotte Place

City State Zip Code
Fishers IN 46038-4500

FEC ID number of contributing
federal political committee.

C

Name of Employer
St. Vincent Anderson Regional Hospital

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
06 / 12 / 2014

Transaction ID : 21824353

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. Steven J West

Mailing Address 314 E. Hickory Grove

City State Zip Code
Hartford City IN 47348-1011

FEC ID number of contributing
federal political committee.

C

Name of Employer
Indiana University Health Blackford Ho

Occupation
Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
06 / 12 / 2014

Transaction ID : 21824355

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. James J. Ferriter Jr.

Mailing Address 4 Laurel Hill Court

City State Zip Code
Bourne MA 02532-8331

FEC ID number of contributing
federal political committee.

C

Name of Employer
Martha's Vineyard Hospital

Occupation
Director, Physician Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

MM / DD / YYYY
06 / 13 / 2014

Transaction ID : 21824471

Amount of Each Receipt this Period

262.50

SUBTOTAL of Receipts This Page (optional)..... ►

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

1012.50

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Michael K Lauf MBA

Mailing Address 88 Lewis Bay Road

City

Hyannis

State

MA

Zip Code

02601-5210

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cape Cod Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

06 / 13 / 2014

Transaction ID : 21824472

Amount of Each Receipt this Period

1125.00

Full Name (Last, First, Middle Initial)

B. Mr. Winfield Brown

Mailing Address 49 Village View Road

City

Westford

State

MA

Zip Code

01886-2359

FEC ID number of contributing
federal political committee.

C

Name of Employer

Heywood Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1012.50

Date of Receipt

06 / 13 / 2014

Transaction ID : 21824474

Amount of Each Receipt this Period

262.50

Full Name (Last, First, Middle Initial)

C. Mr. William Doherty

Mailing Address 42 Canterbury Street

City

Andover

State

MA

Zip Code

01810-2803

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hallmark Health System

Occupation

Chief Medical Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

06 / 13 / 2014

Transaction ID : 21824477

Amount of Each Receipt this Period

375.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

1762.50

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Robert C Garrett FACHE

Mailing Address 21 Eagle Nest Road

City

Morristown

State

NJ

Zip Code

07960-6430

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack University Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1625.00

Date of Receipt

06 / 13 / 2014

Transaction ID : 21824525

Amount of Each Receipt this Period

1625.00

Full Name (Last, First, Middle Initial)

B. Mr. Michael Guerriero

Mailing Address 760 Alexander Road

City

Princeton

State

NJ

Zip Code

08540-6305

FEC ID number of contributing
federal political committee.

C

Name of Employer

New Jersey Hospital Association

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.25

Date of Receipt

06 / 13 / 2014

Transaction ID : 21824527

Amount of Each Receipt this Period

6.50

Full Name (Last, First, Middle Initial)

C. Mr. Sean J. Hopkins

Mailing Address 6180 Lower Mountain Road

City

New Hope

State

PA

Zip Code

18938-5760

FEC ID number of contributing
federal political committee.

C

Name of Employer

New Jersey Hospital Association

Occupation

Sr. VP., Health Economics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.70

Date of Receipt

06 / 13 / 2014

Transaction ID : 21824529

Amount of Each Receipt this Period

6.50

SUBTOTAL of Receipts This Page (optional)..... ►

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

1638.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Sarah Lechner

Mailing Address 760 Alexander Road

City
Princeton

State
NJ

Zip Code
08540-6305

FEC ID number of contributing
federal political committee.

C

Name of Employer

New Jersey Hospital Association

Occupation

General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.50

Date of Receipt

06 / 13 / 2014

Transaction ID : 21824534

Amount of Each Receipt this Period

6.50

Full Name (Last, First, Middle Initial)

B. Mr. John Slotman

Mailing Address 760 Alexander Road

City
Princeton

State
NJ

Zip Code
08540-6305

FEC ID number of contributing
federal political committee.

C

Name of Employer

New Jersey Hospital Association

Occupation

VP, GME and Teaching Hospital Issues

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.50

Date of Receipt

06 / 13 / 2014

Transaction ID : 21824542

Amount of Each Receipt this Period

6.50

Full Name (Last, First, Middle Initial)

C. Mr. Michael L Fordyce

Mailing Address 3425 South Clarkson Street

City
Englewood

State
CO

Zip Code
80113-2811

FEC ID number of contributing
federal political committee.

C

Name of Employer

Craig Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 16 / 2014

Transaction ID : 21824558

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

513.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. David Hamm

Mailing Address 200 Exempla Circle

City

Lafayette

State

CO

Zip Code

80026-3370

FEC ID number of contributing
federal political committee.

C

Name of Employer

Exempla Good Samaritan Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 16 / 2014

Transaction ID : 21824559

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. Gary Campbell

Mailing Address 188 Inverness Drive West #500

City

Englewood

State

CO

Zip Code

80112-5204

FEC ID number of contributing
federal political committee.

C

Name of Employer

Centura Health

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 16 / 2014

Transaction ID : 21824562

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. George E Hayes FACHE

Mailing Address 2500 Rocky Mountain Avenue

City

Loveland

State

CO

Zip Code

80538-9004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Memorial Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 16 / 2014

Transaction ID : 21824578

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

1000.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Pamela A. Nicholson

Mailing Address 5570 DTC Parkway

City

Greenwood Village

State

CO

Zip Code

80111-3043

FEC ID number of contributing
federal political committee.

C

Name of Employer

Centura Health

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 16 / 2014

Transaction ID : 21824580

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. Scott Kelly

Mailing Address 675 S Oregon St

City

Jacksonville

State

OR

Zip Code

97530-9792

FEC ID number of contributing
federal political committee.

C

Name of Employer

Asante Health System

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 10 / 2014

Transaction ID : 21824592

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Dennis E Burke

Mailing Address 610 NW 11th Street

City

Hermiston

State

OR

Zip Code

97838-6601

FEC ID number of contributing
federal political committee.

C

Name of Employer

Good Shepherd Health Care System

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 10 / 2014

Transaction ID : 21824593

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

1250.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Jeanine Gentry

Mailing Address 470 NE 'A' Street

City

Madras

State

OR

Zip Code

97741-1844

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Charles Madras

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

06 / 10 / 2014

Transaction ID : 21824594

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. Mr. Andrew S Davidson

Mailing Address 4000 Kruse Way Place, Suite 2-100

City

Lake Oswego

State

OR

Zip Code

97035-2543

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oregon Association of Hospitals and He

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

06 / 10 / 2014

Transaction ID : 21824595

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Ms. Andrea Easton

Mailing Address 258 Evergreen Road
 #4

City

Lake Oswego

State

OR

Zip Code

97034-3145

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oregon Association of Hospitals & Heal

Occupation

Director of Advocacy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

06 / 10 / 2014

Transaction ID : 21824596

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

2350.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Andy Van Pelt

Mailing Address 4000 Kruse Way Place
Building 2, Suite 100

City Lake Oswego State OR Zip Code 97035-5545

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oregon Association of Hospitals & Heal

Occupation

Director of Communications

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

06 / 10 / 2014

Transaction ID : 21824603

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Ms. Katie Harris

Mailing Address 9729 SW Landau Place

City Tigard State OR Zip Code 97223-1015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oregon Association of Hospitals & Heal

Occupation

Associate Director of Program Manageme

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 10 / 2014

Transaction ID : 21824605

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Ms Kennedy Soileau

Mailing Address 4000 Kruse Way Place
Building 2, Suite 100

City Lake Oswego State OR Zip Code 97035-5545

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oregon Association of Hospitals & Heal

Occupation

Director of Communications

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 10 / 2014

Transaction ID : 21824606

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

1750.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Peggy Allen

Mailing Address 18839 Roundtree

City

Oregon City

State

OR

Zip Code

97045-3920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oregon Association of Hospitals & Heal

Occupation

Director of Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

06 / 10 / 2014

Transaction ID : 21824607

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Ms. Robin Moody

Mailing Address 8553 SW 8th Ave

City

Portland

State

OR

Zip Code

97219-4577

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oregon Association of Hospitals & Heal

Occupation

Director of Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

06 / 10 / 2014

Transaction ID : 21824609

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Mr. Duke Anderson

Mailing Address PO Box 53

City

Hillsdale

State

MI

Zip Code

49242-0053

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hillsdale Community Health Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

06 / 12 / 2014

Transaction ID : 21826298

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)..... ►

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2350.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Brian M Connolly

Mailing Address One Parklane Boulevard, Suite 1000

City State Zip Code
Dearborn MI 48126-4241

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oakwood Healthcare, Inc.

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

06 / 12 / 2014

Transaction ID : 21826302

Amount of Each Receipt this Period

525.00

Full Name (Last, First, Middle Initial)

B. Mr. John L. Jones Jr.

Mailing Address 1814 Hazel Avenue

City State Zip Code
Kalamazoo MI 49008-2844

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bronson Healthcare Group, Inc.

Occupation

Senior Vice President /COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

06 / 12 / 2014

Transaction ID : 21826362

Amount of Each Receipt this Period

262.50

Full Name (Last, First, Middle Initial)

C. Dr. Scott Larson MD

Mailing Address 1531 Academy Street

City State Zip Code
Kalamazoo MI 49006-4400

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bronson Healthcare Group, Inc.

Occupation

Senior Vice President Medical Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

06 / 12 / 2014

Transaction ID : 21826364

Amount of Each Receipt this Period

262.50

SUBTOTAL of Receipts This Page (optional)..... ►

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

1050.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Bill Manns

Mailing Address 245 Lee Baker

City State Zip Code
Southfield MI 48075-6805

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mercy Health Saint Mary's

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 12 / 2014

Transaction ID : 21826367

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. Mr. Robert G Riney

Mailing Address One Ford Place

City State Zip Code
Detroit MI 48202-3450

FEC ID number of contributing
federal political committee.

C

Name of Employer
Henry Ford Health System

Occupation
President and Chief Operating Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 12 / 2014

Transaction ID : 21826372

Amount of Each Receipt this Period

700.00

Full Name (Last, First, Middle Initial)

C. Ms. Nancy M Schlichting

Mailing Address One Ford Place

City State Zip Code
Detroit MI 48202-3450

FEC ID number of contributing
federal political committee.

C

Name of Employer
Henry Ford Health System

Occupation
Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 12 / 2014

Transaction ID : 21826375

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

1400.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Roger Spoelman

Mailing Address 1500 East Sherman Boulevard

City

Muskegon

State

MI

Zip Code

49444-1849

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mercy Health, Hackley Campus

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

06 / 12 / 2014

Transaction ID : 21826376

Amount of Each Receipt this Period

525.00

Full Name (Last, First, Middle Initial)

B. Mr. Sam R. Watson

Mailing Address 1240 E. Mill Street

City

Hastings

State

MI

Zip Code

49058-9185

FEC ID number of contributing
federal political committee.

C

Name of Employer

Michigan Health & Hospital Association

Occupation

Associate Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

06 / 12 / 2014

Transaction ID : 21826381

Amount of Each Receipt this Period

525.00

Full Name (Last, First, Middle Initial)

C. Mr. Mike Way

Mailing Address 7049 Turkey Glen Trail

City

Kalamazoo

State

MI

Zip Code

49009-7031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bronson Healthcare Group, Inc.

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

06 / 12 / 2014

Transaction ID : 21826382

Amount of Each Receipt this Period

262.50

SUBTOTAL of Receipts This Page (optional)..... ►

1312.50

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

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. B. Bradford Billings

Mailing Address 2829 Cheswick Rd.

City
Quincy

State
IL

Zip Code
62301-6380

FEC ID number of contributing
federal political committee.

C

Name of Employer

Blessing Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 16 / 2014

Transaction ID : 21827311

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. Douglas J. Brooks

Mailing Address 2429 Harlem Boulevard

City
Rockford

State
IL

Zip Code
61103-4113

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rockford Memorial Hospital

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 16 / 2014

Transaction ID : 21827312

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Ms. Helen M. Brooks

Mailing Address 2400 North Rockton Avenue

City
Rockford

State
IL

Zip Code
61103-3655

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rockford Memorial Hospital

Occupation

Corporate Director, Communications

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 16 / 2014

Transaction ID : 21827313

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

1000.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Danny Chun

Mailing Address 303 North Oak Park Avenue

City State Zip Code
 Oak Park IL 60302-2189

FEC ID number of contributing
federal political committee.

C

Name of Employer

Illinois Hospital Association

Occupation

VP, Corporate Communications & Marketi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

MM / DD / YYYY
 06 / 16 / 2014

Transaction ID : 21827314

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

B. Mr. Kevin R. England

Mailing Address 1800 Grist Mill Drive

City State Zip Code
 Springfield IL 62711-8113

FEC ID number of contributing
federal political committee.

C

Name of Employer

Memorial Health System

Occupation

Vice President, Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
 06 / 16 / 2014

Transaction ID : 21827330

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Ms. Anna N Evans JD

Mailing Address 701 North First Street

City State Zip Code
 Springfield IL 62781-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Memorial Health System

Occupation

General Counsel and Vice President Int

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
 06 / 16 / 2014

Transaction ID : 21827331

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

1250.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Robert W Kay

Mailing Address 166 Maple Grove

City

Springfield

State

IL

Zip Code

62712-9567

FEC ID number of contributing
federal political committee.

C

Name of Employer

Memorial Health System

Occupation

Senior Vice President and Chief Financ

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

262.50

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 16 / 2014

Transaction ID : 21827334

Amount of Each Receipt this Period

262.50

Full Name (Last, First, Middle Initial)

B. Mr. Richard E. Kempe

Mailing Address 506 Donegal

City

Quincy

State

IL

Zip Code

62305-0910

FEC ID number of contributing
federal political committee.

C

Name of Employer

Blessing Hospital

Occupation

Vice President

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 16 / 2014

Transaction ID : 21827335

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. Scott Kiriakos

Mailing Address 701 North First Street

City

Springfield

State

IL

Zip Code

62781-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Memorial Health System

Occupation

Vice President Clinical Integration

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 16 / 2014

Transaction ID : 21827336

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

762.50

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

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. David Fox

Mailing Address 3815 Highland Avenue

City

Downers Grove

State

IL

Zip Code

60515-1500

FEC ID number of contributing
federal political committee.

C

Name of Employer

Advocate Good Samaritan Hospital

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

06 / 16 / 2014

Transaction ID : 21827337

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

B. Dr. James C Leonard MD

Mailing Address 611 West Park Street

City

Urbana

State

IL

Zip Code

61801-2500

FEC ID number of contributing
federal political committee.

C

Name of Employer

Carle Foundation Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

06 / 16 / 2014

Transaction ID : 21827361

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

C. Mr. Patrick M Magoon

Mailing Address 2300 Children's Plaza

City

Chicago

State

IL

Zip Code

60614-3394

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ann & Robert H. Lurie Children's Hospi

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

06 / 16 / 2014

Transaction ID : 21827362

Amount of Each Receipt this Period

3000.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

4500.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Mark R Neaman

Mailing Address 1301 Central Street

City

Evanston

State

IL

Zip Code

60201-1613

FEC ID number of contributing
federal political committee.

C

Name of Employer

NorthShore University HealthSystem

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 16 / 2014

Transaction ID : 21828258

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Dr. Nancy M Newby RN, PhD, F

Mailing Address 705 South Grand Avenue

City

Nashville

State

IL

Zip Code

62263-1534

FEC ID number of contributing
federal political committee.

C

Name of Employer

Washington County Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 16 / 2014

Transaction ID : 21828260

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Dr. Michael R Perry MD

Mailing Address 1045 West Stephenson Street

City

Freeport

State

IL

Zip Code

61032-4864

FEC ID number of contributing
federal political committee.

C

Name of Employer

FHN Memorial Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 16 / 2014

Transaction ID : 21828262

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

1300.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Douglas L Rahn DBA

Mailing Address 701 North First Street

City

Springfield

State

IL

Zip Code

62781-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Memorial Health System

Occupation

Executive Vice President and Chief Ope

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 16 / 2014

Transaction ID : 21828264

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. Bryan D Hehemann

Mailing Address 25 Hunter Woods Dr

City

Oxford

State

OH

Zip Code

45056-9040

FEC ID number of contributing
federal political committee.

C

Name of Employer

McCullough-Hyde Memorial Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21828679

Amount of Each Receipt this Period

450.00

Full Name (Last, First, Middle Initial)

c. Ms. Barbara J. Pasztor RN, BSN, M

Mailing Address 1900 South Main Street

City

Findlay

State

OH

Zip Code

45840-1214

FEC ID number of contributing
federal political committee.

C

Name of Employer

Blanchard Valley Health System

Occupation

Vice President Patient Care Services a

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21828680

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

950.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Dr. James Burke MD

Mailing Address 3621 Wells Fargo Avenue

City

Scottsdale

State

AZ

Zip Code

85251-5607

FEC ID number of contributing
federal political committee.

C

Name of Employer

Scottsdale Healthcare

Occupation

Senior Vice President Medical Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 24 / 2014

Transaction ID : 21829525

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Ms. Lorna Strayer

Mailing Address 700 Ewing Road

City

Bainbridge

State

OH

Zip Code

45612-9476

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fisher-Titus Medical Center

Occupation

Senior Vice President Administration a

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831023

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Mr Rick Cicero

Mailing Address 7946 Deborah Court

City

Mentor

State

OH

Zip Code

44060-7320

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lake Health

Occupation

Vice President Business Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831028

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

550.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Steve Karns

Mailing Address 6379 Ledge Lake Ct.

City State Zip Code
Painesville OH 44077-9749

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lake Health

Occupation

Senior Vice President Admin Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 18 / 2014

Transaction ID : 21831029

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. Michael Kittoe

Mailing Address 1429 Oakwood Tr

City State Zip Code
Painesville OH 44077-7616

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lake Health

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 18 / 2014

Transaction ID : 21831032

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Ms. Cynthia Moore-Hardy FACHE

Mailing Address 7590 Auburn Road

City State Zip Code
Painesville OH 44077-9176

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lake Health

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 18 / 2014

Transaction ID : 21831033

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

1000.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Mary Ogrinc

Mailing Address 1980 E. 221st Street

City

Euclid

State

OH

Zip Code

44117-2102

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lake Health

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831034

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. Gary J Robinson

Mailing Address 10 East Washington Street

City

Painesville

State

OH

Zip Code

44077-3460

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lake Health

Occupation

Vice President Government and Communit

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831035

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Ms. Joyceanne Taylor

Mailing Address 9125 Taylor-May Rd.

City

Chagrin Falls

State

OH

Zip Code

44023-1641

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lake Health

Occupation

Chief Quality Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831036

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

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750.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Wayne G Deschambeau

Mailing Address 835 Sweitzer Street

City

Greenville

State

OH

Zip Code

45331-1007

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wayne Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831162

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Thomas Tulisiak MD, FAAFP

Mailing Address 3737 Clay Mountain

City

Medina

State

OH

Zip Code

44256-8739

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medina Hospital

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831196

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. Scott Cantley

Mailing Address 205 Foxhaven Dr

City

Vincent

State

OH

Zip Code

45784-5039

FEC ID number of contributing
federal political committee.

C

Name of Employer

Marietta Memorial Hospital

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831197

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

1000.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Ross A Matlack FACHE

Mailing Address 272 Benedict Avenue

City

Norwalk

State

OH

Zip Code

44857-2374

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fisher-Titus Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831201

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. Fred M Manchur

Mailing Address 3965 Southern Boulevard

City

Dayton

State

OH

Zip Code

45429-1229

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kettering Health Network

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831202

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

C. Mr. Terry M Burns

Mailing Address 2820 Woodview Dr
 #3

City

Beavercreek

State

OH

Zip Code

45431-7730

FEC ID number of contributing
federal political committee.

C

Name of Employer

Greene Memorial Hospital

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831213

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

2250.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Dr. Roy G Chew PhD

Mailing Address 3535 Southern Boulevard

City

Kettering

State

OH

Zip Code

45429-1221

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kettering Health Network

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831214

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. George Lewis

Mailing Address 3965 Southern Blvd

City

Kettering

State

OH

Zip Code

45429-1229

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kettering Health Network

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831215

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Richard Haas FACHE

Mailing Address 405 Grand Avenue

City

Dayton

State

OH

Zip Code

45405-4720

FEC ID number of contributing
federal political committee.

C

Name of Employer

Grandview Medical Center

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831216

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

1500.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Peter J King

Mailing Address 405 Grand Avenue

City

Dayton

State

OH

Zip Code

45405-4720

FEC ID number of contributing
federal political committee.

C

Name of Employer

Grandview Medical Center

Occupation

Vice President Finance and Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831217

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. Ron D Connovich

Mailing Address 5406 Utica Rd

City

Waynesville

State

OH

Zip Code

45068-9365

FEC ID number of contributing
federal political committee.

C

Name of Employer

Greene Memorial Hospital

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831218

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr Timothy Ko

Mailing Address 265 Reed Rd

Apt. L

City

Dayton

State

OH

Zip Code

45440-4526

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kettering Health Network

Occupation

Vice President, Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831226

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

1500.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Jarrod McNaughton

Mailing Address 4985 Walnut Walk

City

Kettering

State

OH

Zip Code

45429-1935

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kettering Health Network

Occupation

Vice President, Mission & Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831227

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. Steven Chavez

Mailing Address 4761 Mad River RD

City

Kettering

State

OH

Zip Code

45429-2120

FEC ID number of contributing
federal political committee.

C

Name of Employer

Greene Memorial Hospital

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831228

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Ms. Teresa M Day

Mailing Address 4533 Southern Blvd

City

Kettering

State

OH

Zip Code

45429-1118

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kettering Health Network

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831229

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

1500.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Mark T. Smith JD, CPA

Mailing Address 540 Old Harbor Ct

City

Dayton

State

OH

Zip Code

45458-2878

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fort Hamilton Hospital

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831230

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. Shannan Ritchie

Mailing Address 14519 Detroit Avenue

City

Lakewood

State

OH

Zip Code

44107-4316

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lakewood Hospital

Occupation

Chief Operating Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831231

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. Donald Malone MD

Mailing Address 337 W. Edinburgh Dr

City

Highland Heights

State

OH

Zip Code

44143-3808

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lutheran Hospital

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831238

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

1000.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Mandy C Goble

Mailing Address 205 Palmer Avenue

City

Bellefontaine

State

OH

Zip Code

43311-2298

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mary Rutan Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831244

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. Clifton Patten

Mailing Address 2381 Shelterwood Dr.

City

Kettering

State

OH

Zip Code

45409-1915

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kettering Health Network

Occupation

VP Finance and Decision Support

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831254

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Michael D Connelly

Mailing Address 615 Elsinore Place

City

Cincinnati

State

OH

Zip Code

45202-1459

FEC ID number of contributing
federal political committee.

C

Name of Employer

Catholic Health Partners

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831271

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

1000.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. James E. May

Mailing Address 731 Elm Ave.

City

Terrace Park

State

OH

Zip Code

45174-1203

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mercy Health Partners - Southwest Ohio

Occupation

President & Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831372

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. Sky Gettys

Mailing Address 401 North Ewing Street

City

Lancaster

State

OH

Zip Code

43130-3372

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fairfield Medical Center

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831474

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Thomas E Cecconi

Mailing Address 1320 Mercy Drive NW

City

Canton

State

OH

Zip Code

44708-2614

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mercy Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831488

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

1250.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Amy Andres

Mailing Address 6086 Flora Villa Dr.

City State Zip Code
 Worthington OH 43085-3353

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ohio Hospital Association

Occupation

Senior Vice President, Quality & Data

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831492

Amount of Each Receipt this Period

650.00

Full Name (Last, First, Middle Initial)

B. Ms. Berna Bell

Mailing Address 3216 Whitehead Rd.

City State Zip Code
 Columbus OH 43204-1856

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ohio Hospital Association

Occupation

Director, Fiscal Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831493

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Mr. Randall D Oostra FACHE

Mailing Address 1801 Richards Road

City State Zip Code
 Toledo OH 43607-1037

FEC ID number of contributing
federal political committee.

C

Name of Employer

ProMedica Health System

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 18 / 2014

Transaction ID : 21831495

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

1150.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Dr. Kevin C Webb PhD

Mailing Address 2142 North Cove Boulevard

City State Zip Code
Toledo OH 43606-3895

FEC ID number of contributing
federal political committee.

C

Name of Employer
ProMedica Toledo Hospital

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
06 / 18 / 2014

Transaction ID : 21831504

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. John S Prout

Mailing Address 619 Oak Street

City State Zip Code
Cincinnati OH 45206-1613

FEC ID number of contributing
federal political committee.

C

Name of Employer
TriHealth

Occupation
President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
06 / 18 / 2014

Transaction ID : 21831511

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Tim Colburn

Mailing Address 600 North Pickaway Street

City State Zip Code
Circleville OH 43113-1447

FEC ID number of contributing
federal political committee.

C

Name of Employer
Berger Health System

Occupation
President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

MM / DD / YYYY
06 / 18 / 2014

Transaction ID : 21831515

Amount of Each Receipt this Period

550.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

1550.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr Douglas Vang

Mailing Address 502 Harwood Dr.

City

Fargo

State

ND

Zip Code

58104-6276

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sanford Medical Center Fargo

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

06 / 23 / 2014

Transaction ID : 21831558

Amount of Each Receipt this Period

330.00

Full Name (Last, First, Middle Initial)

B. Mr. Stephen M. Ahnen

Mailing Address 125 Airport Road

City

Concord

State

NH

Zip Code

03301-7300

FEC ID number of contributing
federal political committee.

C

Name of Employer

New Hampshire Hospital Association

Occupation

President and CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

546.00

Date of Receipt

06 / 23 / 2014

Transaction ID : 21831636

Amount of Each Receipt this Period

45.50

Full Name (Last, First, Middle Initial)

C. Ms. Paula Minnehan

Mailing Address 283 Gallopiny Hill Road

City

Hopkinton

State

NH

Zip Code

03229-3402

FEC ID number of contributing
federal political committee.

C

Name of Employer

New Hampshire Hospital Association

Occupation

V.P., Finance and Rural Hospitals

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.40

Date of Receipt

06 / 23 / 2014

Transaction ID : 21831637

Amount of Each Receipt this Period

16.70

SUBTOTAL of Receipts This Page (optional)..... ►

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

392.20

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Charlie Shields

Mailing Address 47 SE Erin Court

City

Saint Joseph

State

MO

Zip Code

64507-7984

FEC ID number of contributing
federal political committee.

C

Name of Employer

Truman Medical Center-Lakewood

Occupation

Chief Operating Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 17 / 2014

Transaction ID : 21831722

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Ms. Robin Damschroder

Mailing Address 2297 Trillium Woods Drive

City

Ann Arbor

State

MI

Zip Code

48105-9355

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Joseph Mercy Hospital Ann Arbor

Occupation

Hospital Administration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

06 / 19 / 2014

Transaction ID : 21831823

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Ms. Tina Weatherwax Grant

Mailing Address 2654 Loon lane

City

Okemos

State

MI

Zip Code

48864-3350

FEC ID number of contributing
federal political committee.

C

Name of Employer

Trinity Health

Occupation

VP, Public Policy and State Advocacy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

06 / 19 / 2014

Transaction ID : 21831902

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

950.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Randall D Oostra FACHE

Mailing Address 1801 Richards Road

City

Toledo

State

OH

Zip Code

43607-1037

FEC ID number of contributing
federal political committee.

C

Name of Employer

ProMedica Health System

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

06 / 19 / 2014

Transaction ID : 21831914

Amount of Each Receipt this Period

175.00

Full Name (Last, First, Middle Initial)

B. Mr. Christopher Palazzolo

Mailing Address 3260 Charwood Dr.

City

Rochester Hills

State

MI

Zip Code

48306-3614

FEC ID number of contributing
federal political committee.

C

Name of Employer

Genesys Health System

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

06 / 19 / 2014

Transaction ID : 21831922

Amount of Each Receipt this Period

262.50

Full Name (Last, First, Middle Initial)

c. Dr. Brian D. Schroeder MD

Mailing Address 1160 S Iva Rd

City

Hemlock

State

MI

Zip Code

48626-8762

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sparrow Health System

Occupation

Senior Vice President and Chief Medical Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

06 / 19 / 2014

Transaction ID : 21831928

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

787.50

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Marijo Snyder

Mailing Address 1731 Breezy Point Lake

City State Zip Code
 Kalamazoo MI 49009-8017

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Bronson Healthcare Group, Inc.

Occupation
 Vice President, System Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
 06 / 19 / 2014

Transaction ID : 21831931

Amount of Each Receipt this Period

210.00

Full Name (Last, First, Middle Initial)

B. Mr. David A Spivey

Mailing Address 36475 West Five Mile Road

City State Zip Code
 Livonia MI 48154-1988

FEC ID number of contributing
federal political committee.

C

Name of Employer
 St. Mary Mercy Hospital

Occupation
 President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

M M / D D / Y Y Y Y
 06 / 19 / 2014

Transaction ID : 21831932

Amount of Each Receipt this Period

262.50

Full Name (Last, First, Middle Initial)

C. Mr. Kim Price

Mailing Address 1720 Central Avenue East

City State Zip Code
 Hampton IA 50441-1869

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Franklin General Hospital

Occupation
 Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 06 / 23 / 2014

Transaction ID : 21831938

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

722.50

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Gary Botine

Mailing Address 3201 Foxley Drive

City

Ames

State

IA

Zip Code

50010-1109

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mary Greeley Medical Center

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
06 / 23 / 2014

Transaction ID : 21831939

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Ms. Michelle Niemann

Mailing Address P O Box 3026

City

Cedar Rapids

State

IA

Zip Code

52406-3026

FEC ID number of contributing
federal political committee.

C

Name of Employer

UnityPoint Health - St. Luke's Hospita

Occupation

Vice President Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
06 / 23 / 2014

Transaction ID : 21831941

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Ms. Mary Ann Osborn RN, MA

Mailing Address 1026 A Avenue

City

Cedar Rapids

State

IA

Zip Code

52402-5036

FEC ID number of contributing
federal political committee.

C

Name of Employer

UnityPoint Health - St. Luke's Hospita

Occupation

Vice President, Chief Clinical Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

MM / DD / YYYY
06 / 23 / 2014

Transaction ID : 21831949

Amount of Each Receipt this Period

375.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

875.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Donna Hubbell

Mailing Address 933 E Pierce St
#2C

City State Zip Code
Council Bluffs IA 51503-4626

FEC ID number of contributing
federal political committee.

C

Name of Employer
Methodist Jennie Edmundson Hospital

Occupation
Vice President Quality & Patient Safet

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
06 / 23 / 2014

Transaction ID : 21831955

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Ms. Rebecca Anthony

Mailing Address 100 East Grand Avenue
Suite 100

City State Zip Code
Des Moines IA 50309-1800

FEC ID number of contributing
federal political committee.

C

Name of Employer
Iowa Hospital Association

Occupation
Vice President, Education

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.26

Date of Receipt

MM / DD / YYYY
06 / 23 / 2014

Transaction ID : 21831956

Amount of Each Receipt this Period

35.71

Full Name (Last, First, Middle Initial)

C. Ms. Laura Malone

Mailing Address 100 East Grand Avenue
Suite 100

City State Zip Code
Des Moines IA 50309-1817

FEC ID number of contributing
federal political committee.

C

Name of Employer
Iowa Hospital Association

Occupation
Director of Nursing & Clinical Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.26

Date of Receipt

MM / DD / YYYY
06 / 23 / 2014

Transaction ID : 21831961

Amount of Each Receipt this Period

35.71

SUBTOTAL of Receipts This Page (optional)..... ►

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

321.42

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Perry J. Meyer

Mailing Address 1920 SE Olson Drive

City

Waukee

State

IA

Zip Code

50263-8180

FEC ID number of contributing
federal political committee.

C

Name of Employer

Iowa Hospital Association

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.26

Date of Receipt

06 / 23 / 2014

Transaction ID : 21831962

Amount of Each Receipt this Period

35.71

Full Name (Last, First, Middle Initial)

B. Mr. Arthur John Spies II

Mailing Address 100 E. Grand Ave. Suite 100

City

Des Moines

State

IA

Zip Code

50309-1800

FEC ID number of contributing
federal political committee.

C

Name of Employer

Iowa Hospital Association

Occupation

Senior Vice President, Membership Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.26

Date of Receipt

06 / 23 / 2014

Transaction ID : 21831964

Amount of Each Receipt this Period

35.71

Full Name (Last, First, Middle Initial)

C. Mr. Dennis A. White

Mailing Address 100 East Graham Avenue
Suite 100

City

Des Moines

State

IA

Zip Code

50309-1835

FEC ID number of contributing
federal political committee.

C

Name of Employer

Iowa Hospital Association

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.26

Date of Receipt

06 / 23 / 2014

Transaction ID : 21831968

Amount of Each Receipt this Period

35.71

SUBTOTAL of Receipts This Page (optional)..... ►

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

107.13

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Suzanne Borgos

Mailing Address 21 Quaker Street

City

Chesterfield

State

NJ

Zip Code

08515-9725

FEC ID number of contributing
federal political committee.

C

Name of Employer

Capital Health

Occupation

Vice President, Planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.50

Date of Receipt

MM / DD / YYYY
06 / 27 / 2014

Transaction ID : 21832014

Amount of Each Receipt this Period

292.50

Full Name (Last, First, Middle Initial)

B. Mr. Nathan Bosk

Mailing Address 8 Averstone Road

City

Holland

State

PA

Zip Code

18966-2676

FEC ID number of contributing
federal political committee.

C

Name of Employer

Capital Health

Occupation

Vice President, Ambulatory Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.50

Date of Receipt

MM / DD / YYYY
06 / 27 / 2014

Transaction ID : 21832015

Amount of Each Receipt this Period

292.50

Full Name (Last, First, Middle Initial)

C. Mr. J. Scott Clemmensen

Mailing Address 140 Chilton Road

City

Langhorne

State

PA

Zip Code

19047-8115

FEC ID number of contributing
federal political committee.

C

Name of Employer

Capital Health

Occupation

Vice President Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.50

Date of Receipt

MM / DD / YYYY
06 / 27 / 2014

Transaction ID : 21832019

Amount of Each Receipt this Period

292.50

SUBTOTAL of Receipts This Page (optional)..... ►

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

877.50

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Gregory D'Adamo

Mailing Address 33 Brookwood Road

City

Mount Laurel

State

NJ

Zip Code

08054-4714

FEC ID number of contributing
federal political committee.

C

Name of Employer

Capital Health

Occupation

Vice President, Support Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.50

Date of Receipt

MM / DD / YYYY
06 / 27 / 2014

Transaction ID : 21832021

Amount of Each Receipt this Period

292.50

Full Name (Last, First, Middle Initial)

B. Mr. Larry DiSanto

Mailing Address 46 Oakmont Road

City

Lakewood

State

NJ

Zip Code

08701-5764

FEC ID number of contributing
federal political committee.

C

Name of Employer

Capital Health

Occupation

Executive Vice President and Chief Ope

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

MM / DD / YYYY
06 / 27 / 2014

Transaction ID : 21832024

Amount of Each Receipt this Period

325.00

Full Name (Last, First, Middle Initial)

C. Dr. Dennis J Dooley MD

Mailing Address 63 Dogwood Lane

City

Newtown

State

PA

Zip Code

18940-9653

FEC ID number of contributing
federal political committee.

C

Name of Employer

Capital Health

Occupation

Vice President Planning and Developmen

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.50

Date of Receipt

MM / DD / YYYY
06 / 27 / 2014

Transaction ID : 21832026

Amount of Each Receipt this Period

292.50

SUBTOTAL of Receipts This Page (optional)..... ►

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

910.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Shane Fleming

Mailing Address 5 Canterbury Court

City
Columbus

State
NJ

Zip Code
08022-2007

FEC ID number of contributing
federal political committee.

C

Name of Employer

Capital Health

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.50

Date of Receipt

06 / 27 / 2014

Transaction ID : 21832029

Amount of Each Receipt this Period

292.50

Full Name (Last, First, Middle Initial)

B. Mr. Warren Geller

Mailing Address 12 Lois Avenue

City
Demarest

State
NJ

Zip Code
07627-2220

FEC ID number of contributing
federal political committee.

C

Name of Employer

Englewood Hospital and Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.50

Date of Receipt

06 / 27 / 2014

Transaction ID : 21832031

Amount of Each Receipt this Period

227.50

Full Name (Last, First, Middle Initial)

C. Ms. Robin Goldfischer ESQ

Mailing Address 370 Lydecker Street

City
Englewood

State
NJ

Zip Code
07631-1914

FEC ID number of contributing
federal political committee.

C

Name of Employer

Valley Health System

Occupation

Vice President and General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

06 / 27 / 2014

Transaction ID : 21832032

Amount of Each Receipt this Period

325.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

845.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Eugene Grochala

Mailing Address 3 Barto Way

City

Robbinsville

State

NJ

Zip Code

08691-2421

FEC ID number of contributing
federal political committee.

C

Name of Employer

Capital Health

Occupation

Vice President Information Systems

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.50

Date of Receipt

06 / 27 / 2014

Transaction ID : 21832034

Amount of Each Receipt this Period

292.50

Full Name (Last, First, Middle Initial)

B. Mr. Michael Guerriero

Mailing Address 760 Alexander Road

City

Princeton

State

NJ

Zip Code

08540-6305

FEC ID number of contributing
federal political committee.

C

Name of Employer

New Jersey Hospital Association

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.75

Date of Receipt

06 / 27 / 2014

Transaction ID : 21832035

Amount of Each Receipt this Period

6.50

Full Name (Last, First, Middle Initial)

C. Mr. Sean J. Hopkins

Mailing Address 6180 Lower Mountain Road

City

New Hope

State

PA

Zip Code

18938-5760

FEC ID number of contributing
federal political committee.

C

Name of Employer

New Jersey Hospital Association

Occupation

Sr. VP., Health Economics

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.20

Date of Receipt

06 / 27 / 2014

Transaction ID : 21832036

Amount of Each Receipt this Period

6.50

SUBTOTAL of Receipts This Page (optional)..... ►

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

305.50

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Eileen Horton

Mailing Address 633 Dutch Neck Road

City

East Windsor

State

NJ

Zip Code

08520-1103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Capital Health

Occupation

Vice President, Patient Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.50

Date of Receipt

06 / 27 / 2014

Transaction ID : 21832037

Amount of Each Receipt this Period

292.50

Full Name (Last, First, Middle Initial)

B. Ms. Sarah Lechner

Mailing Address 760 Alexander Road

City

Princeton

State

NJ

Zip Code

08540-6305

FEC ID number of contributing
federal political committee.

C

Name of Employer

New Jersey Hospital Association

Occupation

General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.00

Date of Receipt

06 / 27 / 2014

Transaction ID : 21832043

Amount of Each Receipt this Period

6.50

Full Name (Last, First, Middle Initial)

c. Dr. Al Maghazehe PhD, FACHE

Mailing Address 314 Stoney Ford Road

City

Holland

State

PA

Zip Code

18966-2510

FEC ID number of contributing
federal political committee.

C

Name of Employer

Capital Health

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1422.20

Date of Receipt

06 / 27 / 2014

Transaction ID : 21832044

Amount of Each Receipt this Period

1422.20

SUBTOTAL of Receipts This Page (optional)..... ►

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

1721.20

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Audrey Meyers FACHE

Mailing Address 251 Highland Avenue

City

Ridgewood

State

NJ

Zip Code

07450-2726

FEC ID number of contributing
federal political committee.

C

Name of Employer

Valley Health System

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 27 / 2014

Transaction ID : 21832047

Amount of Each Receipt this Period

1300.00

Full Name (Last, First, Middle Initial)

B. Mr. Stephen Miller

Mailing Address 1677 Whitehouse Road

City

Ambler

State

PA

Zip Code

19002-3126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Capital Health

Occupation

Chief Compliance and Privacy Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.50

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 27 / 2014

Transaction ID : 21832048

Amount of Each Receipt this Period

292.50

Full Name (Last, First, Middle Initial)

C. Dr. Robert Remstein DO

Mailing Address 197 Anselm Road

City

Richboro

State

PA

Zip Code

18954-2032

FEC ID number of contributing
federal political committee.

C

Name of Employer

Capital Health

Occupation

Vice President Medical Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.50

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 27 / 2014

Transaction ID : 21832051

Amount of Each Receipt this Period

292.50

SUBTOTAL of Receipts This Page (optional)..... ►

1885.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. John Slotman

Mailing Address 760 Alexander Road

City

Princeton

State

NJ

Zip Code

08540-6305

FEC ID number of contributing
federal political committee.

C

Name of Employer

New Jersey Hospital Association

Occupation

VP, GME and Teaching Hospital Issues

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

06 / 27 / 2014

Transaction ID : 21832054

Amount of Each Receipt this Period

6.50

Full Name (Last, First, Middle Initial)

B. Dr. Joseph A Trunfio PhD

Mailing Address 10 Eagle Rock Drive

City

Boonton Township

State

NJ

Zip Code

07005-9520

FEC ID number of contributing
federal political committee.

C

Name of Employer

Atlantic Health System

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

06 / 27 / 2014

Transaction ID : 21832058

Amount of Each Receipt this Period

1300.00

Full Name (Last, First, Middle Initial)

C. Ms. Arlene Walsh

Mailing Address 10 Stratton Drive

City

Hamilton

State

NJ

Zip Code

08690-2414

FEC ID number of contributing
federal political committee.

C

Name of Employer

Capital Health

Occupation

Director Maternal and Child Health

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.50

Date of Receipt

06 / 27 / 2014

Transaction ID : 21832059

Amount of Each Receipt this Period

292.50

SUBTOTAL of Receipts This Page (optional)..... ►

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1599.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. David E Phelps

Mailing Address 725 North Street

City

Pittsfield

State

MA

Zip Code

01201-4124

FEC ID number of contributing
federal political committee.

C

Name of Employer

Berkshire Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

06 / 24 / 2014

Transaction ID : 21832075

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

B. Mr. Bruce Bertrand

Mailing Address 1 Stephanie Ann Lane

City

Sterling

State

MA

Zip Code

01564-2839

FEC ID number of contributing
federal political committee.

C

Name of Employer

Heywood Hospital

Occupation

V.P., Medical Affairs, Chief Medical O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

06 / 24 / 2014

Transaction ID : 21832076

Amount of Each Receipt this Period

262.50

Full Name (Last, First, Middle Initial)

C. Mr. Alan G. MacDonald

Mailing Address 92 Bacon Street

City

Winchester

State

MA

Zip Code

01890-2638

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hallmark Health System

Occupation

EVP, Strategy & External Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

06 / 24 / 2014

Transaction ID : 21832077

Amount of Each Receipt this Period

375.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

1387.50

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Alan J. Macdonald

Mailing Address 55 Fogg Road

City

South Weymouth

State

MA

Zip Code

02190-2432

FEC ID number of contributing
federal political committee.

C

Name of Employer

South Shore Hospital

Occupation

Director/Public Policy and Funding

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.50

Date of Receipt

06 / 24 / 2014

Transaction ID : 21832080

Amount of Each Receipt this Period

262.50

Full Name (Last, First, Middle Initial)

B. Ms. Rebecca Hultberg

Mailing Address 1049 West Fifth Avenue Suite 100

City

Anchorage

State

AK

Zip Code

99501-1965

FEC ID number of contributing
federal political committee.

C

Name of Employer

Alaska State Hospital and Nursing Home

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

06 / 26 / 2014

Transaction ID : 21832087

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Ms. Janelle Reilly

Mailing Address 200 South Wacker Drive

City

Chicago

State

IL

Zip Code

60606-5829

FEC ID number of contributing
federal political committee.

C

Name of Employer

Presence Health

Occupation

Chief Operating Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 24 / 2014

Transaction ID : 21832097

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

1012.50

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

Use separate schedule(s)
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(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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Dr. Stephanie Wolf-Rosenblum MD

Mailing Address P O Box 2014

City

Nashua

State

NH

Zip Code

03061-2014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southern New Hampshire Medical Center

Occupation

Chief Medical Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2014

Transaction ID : 21832099

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. Ms. Mary KrinkieMailing Address 2550 University Avenue W.
Suite 350-S

City

Saint Paul

State

MN

Zip Code

55114-1052

FEC ID number of contributing
federal political committee.

C

Name of Employer

Minnesota Hospital Association

Occupation

Vice President, Government Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2014

Transaction ID : 21832106

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Mr. Clinton J Christianson FACHE

Mailing Address 1 St Joseph's Drive

City

Centerville

State

IA

Zip Code

52544-9017

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mercy Medical Center-Centerville

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2014

Transaction ID : 21832117

Amount of Each Receipt this Period

375.00

SUBTOTAL of Receipts This Page (optional)..... ►

1225.00

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Theodore E Townsend FACHE

Mailing Address 1795 Highway 64 East

City

Anamosa

State

IA

Zip Code

52205-2112

FEC ID number of contributing
federal political committee.

C

Name of Employer

UnityPoint Health - St. Luke's Hospita

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

06 / 26 / 2014

Transaction ID : 21832119

Amount of Each Receipt this Period

625.00

Full Name (Last, First, Middle Initial)

B. Mr. James M Hayes

Mailing Address 1518 Mulberry Avenue

City

Muscatine

State

IA

Zip Code

52761-3433

FEC ID number of contributing
federal political committee.

C

Name of Employer

UnityPoint Health - Trinity Muscatine

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 26 / 2014

Transaction ID : 21832120

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr Jim Lehman

Mailing Address 3090 Lundy Ln

City

Bettendorf

State

IA

Zip Code

52722-3975

FEC ID number of contributing
federal political committee.

C

Name of Employer

Genesis Medical Center-Davenport

Occupation

Vice President, Quality

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 26 / 2014

Transaction ID : 21832121

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

1125.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Chad R. Austin

Mailing Address 6518 SW 26th Court

City

Topeka

State

KS

Zip Code

66614-4305

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kansas Hospital Association

Occupation

Sr. Vice President, Government Relatio

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.60

Date of Receipt

06 / 25 / 2014

Transaction ID : 21832678

Amount of Each Receipt this Period

57.69

Full Name (Last, First, Middle Initial)

B. Mr. John R Broberg FACHE

Mailing Address 1020 Parkshire Cir

City

Manhattan

State

KS

Zip Code

66503-2475

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mercy Regional Health Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 25 / 2014

Transaction ID : 21832684

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

c. Dr. David Kapaska DO

Mailing Address P O Box 5045

City

Sioux Falls

State

SD

Zip Code

57117-5045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Avera McKennan Hospital and University

Occupation

Regional President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

125.00

Date of Receipt

06 / 26 / 2014

Transaction ID : 21833667

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

682.69

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Bill Nelson

Mailing Address 200 North Elm Street

City

Onamia

State

MN

Zip Code

56359-7901

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mille Lacs Health System

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 26 / 2014

Transaction ID : 21833671

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. Todd Forkel

Mailing Address 305 South State Street

City

Aberdeen

State

SD

Zip Code

57401-4527

FEC ID number of contributing
federal political committee.

C

Name of Employer

Avera St. Luke's Hospital

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 26 / 2014

Transaction ID : 21834260

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. Joe Sluka Jr.

Mailing Address 5030 Autumn Place

City

Rapid City

State

SD

Zip Code

57702-9275

FEC ID number of contributing
federal political committee.

C

Name of Employer

Regional Health

Occupation

Chief Administrative Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 26 / 2014

Transaction ID : 21834693

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

750.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Steve Goetsch

Mailing Address 2320 Sienna Circle

City

State

Zip Code

Tea

SD

57064-2334

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Sanford Health

Director

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 26 / 2014

Transaction ID : 21834696

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mr. Eric C Hilmo

Mailing Address 3909 S Spencer Blvd.

City

State

Zip Code

Sioux Falls

SD

57103-4702

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Sanford Canton-Inwood Medical Center

Chief Executive Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 26 / 2014

Transaction ID : 21834697

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Dr. David Kapaska DO

Mailing Address P O Box 5045

City

State

Zip Code

Sioux Falls

SD

57117-5045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Avera McKennan Hospital and University

Regional President

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

06 / 26 / 2014

Transaction ID : 21834698

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

750.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Larry W Veitz

Mailing Address 1440 North Main Street

City

Spearfish

State

SD

Zip Code

57783-1505

FEC ID number of contributing
federal political committee.

C

Name of Employer

Spearfish Regional Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
06 / 26 / 2014

Transaction ID : 21834704

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. Michael Scott

Mailing Address 7335 East Orchard Road
Suite 100

City

Greenwood Village

State

CO

Zip Code

80111-2582

FEC ID number of contributing
federal political committee.

C

Name of Employer

Colorado Hospital Association

Occupation

Vice President, Shared Services

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
06 / 26 / 2014

Transaction ID : 21834708

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr. James E Shmerling

Mailing Address 13123 East 16th Avenue

City

Aurora

State

CO

Zip Code

80045-7106

FEC ID number of contributing
federal political committee.

C

Name of Employer

Children's Hospital Colorado

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
06 / 26 / 2014

Transaction ID : 21834710

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

1250.00

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

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Michael Slubowski

Mailing Address 2420 West 26th Avenue, Suite 100-D

City State Zip Code
Denver CO 80211-5302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Exempla Healthcare, Inc.

Occupation
Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 26 / 2014

Transaction ID : 21834711

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. Robert Quist

Mailing Address 410 Benedicta Avenue

City State Zip Code
Trinidad CO 81082-2005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mt. San Rafael Hospital

Occupation
Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 26 / 2014

Transaction ID : 21834719

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Ms. Doris Kirchner

Mailing Address 181 W. Meadow Drive

City State Zip Code
Vail CO 81657-5242

FEC ID number of contributing
federal political committee.

C

Name of Employer
Vail Valley Medical Center

Occupation
Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 26 / 2014

Transaction ID : 21834720

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

1250.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. John R Hicks

Mailing Address 1600 Prairie Center Parkway

City State Zip Code
 Brighton CO 80601-4006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Platte Valley Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 26 / 2014

Transaction ID : 21834722

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Ms. Monika Wilkins

Mailing Address P O Box 248

City State Zip Code
 Hugo CO 80821-0248

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lincoln Community Hospital and Nursing

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 26 / 2014

Transaction ID : 21834726

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Mr Richard D'Ambrosio

Mailing Address 1400 E. Boulder St

City State Zip Code
 Colorado Springs CO 80909-5533

FEC ID number of contributing
federal political committee.

C

Name of Employer

Memorial Hospital

Occupation

Associate General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 26 / 2014

Transaction ID : 21834728

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

750.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Gary L Brewer

Mailing Address 1906 Blake Avenue

City

Glenwood Springs

State

CO

Zip Code

81601-4227

FEC ID number of contributing
federal political committee.

C

Name of Employer

Valley View Hospital

Occupation

Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 26 / 2014

Transaction ID : 21834730

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mr. Thomas Gessel FACHE

Mailing Address 1850 Bluegrass Avenue

City

Louisville

State

KY

Zip Code

40215-1199

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mercy Regional Medical Center

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 26 / 2014

Transaction ID : 21834731

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Ms. Meghan Allen

Mailing Address 4824 Leland Street

City

Chevy Chase

State

MD

Zip Code

20815-6207

FEC ID number of contributing
federal political committee.

C

Name of Employer

Maryland Hospital Association

Occupation

Vice President, Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

06 / 20 / 2014

Transaction ID : 21889379

Amount of Each Receipt this Period

255.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

1005.00

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Douglas R Ekeren

Mailing Address 501 Summit Avenue

City

Yankton

State

SD

Zip Code

57078-3899

FEC ID number of contributing
federal political committee.

C

Name of Employer

Avera Sacred Heart Hospital

Occupation

Vice President Planning and Developmen

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 09 / 2014

Transaction ID : 21889403

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Ms. Rebecca Hultberg

Mailing Address 1049 West Fifth Avenue Suite 100

City

Anchorage

State

AK

Zip Code

99501-1965

FEC ID number of contributing
federal political committee.

C

Name of Employer

Alaska State Hospital and Nursing Home

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 26 / 2014

Transaction ID : 21890401

Amount of Each Receipt this Period

0.00

[MEMO ITEM]

Refund(s) on Schedule B Totaling \$500.00 This changes the YTD Total to \$500.00

Full Name (Last, First, Middle Initial)

C. Mr. Richard Koss

Mailing Address 116 Hearthstone Drive

City

Berlin

State

NJ

Zip Code

08009-9550

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kennedy Health System

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

06 / 30 / 2014

Transaction ID : 5661613

Amount of Each Receipt this Period

325.00

SUBTOTAL of Receipts This Page (optional)..... ►

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575.00

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Peter Diestel

Mailing Address 279 Brookside Avenue

City

Allendale

State

NJ

Zip Code

07401-1848

FEC ID number of contributing
federal political committee.

C

Name of Employer

Valley Hospital

Occupation

Senior Vice President and Chief Operat

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.50

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : 7148860

Amount of Each Receipt this Period

227.50

Full Name (Last, First, Middle Initial)

B. Ms. Melinda Reid HattonMailing Address 325 Seventh Street, NW
Suite 700

City

Washington

State

DC

Zip Code

20004-2818

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Senior Vice President & General Course

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.11

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : PR1045726231167

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Mr. David Schulke

Mailing Address 155 N. Wacker Dr.

City

Chicago

State

IL

Zip Code

60606-1709

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

VP Research Programs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.11

Date of Receipt

 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014

Transaction ID : PR1057462131167

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

381.38

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

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

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

FOR LINE NUMBER:
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Dale A Kirby

Mailing Address P O Box 331

City State Zip Code
 Colusa CA 95932-0331

FEC ID number of contributing
federal political committee.

C

Name of Employer
 American Hospital Association-Chicago

Occupation
 Regional Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.11

Date of Receipt

06 / 30 / 2014

Transaction ID : PR1125892331167

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Mr. Jack A. Mackay

Mailing Address One North Franklin

City State Zip Code
 Chicago IL 60606-3436

FEC ID number of contributing
federal political committee.

C

Name of Employer
 American Hospital Association-Chicago

Occupation
 Vice President & CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

06 / 30 / 2014

Transaction ID : PR1347703631167

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Mr. Mark Colucci

Mailing Address 1061 N Penny Ln

City State Zip Code
 Palatine IL 60067-1821

FEC ID number of contributing
federal political committee.

C

Name of Employer
 American Hospital Association-Chicago

Occupation
 National Director Sponsorship and Unde

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

06 / 30 / 2014

Transaction ID : PR1475133731167

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

153.90

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

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

FOR LINE NUMBER: PAGE 91 OF 134

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Erik Rasmussen

Mailing Address 325 Seventh Street, NW
Suite 700

City State Zip Code
Washington DC 20004-2801

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Senior Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 30 2014

Transaction ID : PR1819487931167

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Ms. Shari Dexter

Mailing Address 325 Seventh Street, NW
Suite 700

City State Zip Code
Washington DC 20004-2801

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Director, Political Action

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 30 2014

Transaction ID : PR1878189831167

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Ms. Evelyn Knolle

Mailing Address 325 Seventh Street, NW

City State Zip Code
Washington DC 20004-2802

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Senior Associate Director, Policy -TR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 30 2014

Transaction ID : PR1913190731167

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

153.90

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

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

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

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(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Janet Henderson

Mailing Address 155 North Wacker Drive

City

Chicago

State

IL

Zip Code

60606-1709

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Director, Member Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	1	4		

Transaction ID : PR1937843131167

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Ms. Diane Jones

Mailing Address 325 Seventh Street, NW
Suite 700

City

Washington

State

DC

Zip Code

20004-2801

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Sr Assoc Dir Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	1	4		

Transaction ID : PR1943461531167

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Mr. Jeff Goldman

Mailing Address 325 Seventh Street, NW
Suite 700

City

Washington

State

DC

Zip Code

20004-2801

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Vice President of Coverage

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	1	4		

Transaction ID : PR1978358631167

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

115.44

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

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

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Linda Fishman

Mailing Address 325 Seventh Street, NW
Suite 700

City Washington State DC Zip Code 20004-2818

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Senior Vice President, Public Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.11

Date of Receipt

06 / 30 / 2014

Transaction ID : PR327629131167

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Mr. Michael P. McCue

Mailing Address 122 N. Greenwood Avenue

City Park Ridge State IL Zip Code 60068-3227

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.11

Date of Receipt

06 / 30 / 2014

Transaction ID : PR327771631167

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Ms. Suzanne R. Sonik

Mailing Address One North Franklin

City Chicago State IL Zip Code 60606-3436

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Director, Long-Term Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

06 / 30 / 2014

Transaction ID : PR32777231167

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

192.36

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Debra J. Stock

Mailing Address 1022 S. Harvey Avenue

City

Oak Park

State

IL

Zip Code

60304-2132

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Vice President, Member Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.11

Date of Receipt

06 / 30 / 2014

Transaction ID : PR32777831167

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Mr. Neil Jesuele

Mailing Address 155 N Wacker Dr

City

Chicago

State

IL

Zip Code

60606-1709

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

06 / 30 / 2014

Transaction ID : PR327801731167

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Ms. Pamela Austin Thompson RN, MSN

Mailing Address 325 Seventh Street, NW
Suite 700

City

Washington

State

DC

Zip Code

20004-2818

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Chief Executive Officer, AONE & Sr. Vi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.11

Date of Receipt

06 / 30 / 2014

Transaction ID : PR327812031167

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

192.36

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Joan H. Lewis

Mailing Address 6034 North 22nd Street

City

Arlington

State

VA

Zip Code

22205-3408

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Regional Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

06 / 30 / 2014

Transaction ID : PR327831731167

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Ms. Ellen A. Pryga

Mailing Address 2401 Calvert Street, NW
Apt. 1008

City

Washington

State

DC

Zip Code

20008-2614

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Director, Policy Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

06 / 30 / 2014

Transaction ID : PR327851931167

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Mr. Mark Seklecki

Mailing Address 325 Seventh Street, NW
Suite 700

City

Washington

State

DC

Zip Code

20004-2818

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Vice President, Political Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.11

Date of Receipt

06 / 30 / 2014

Transaction ID : PR327858031167

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

153.90

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

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. John F. Barry

Mailing Address One North Franklin

City State Zip Code
Millis MA 60606-3436

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Hospital Association-Chicago

Occupation
Regional Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.11

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2014

Transaction ID : PR327877831167

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Mr. George F. Bergstrom

Mailing Address 130 North Garland Court
#3002

City State Zip Code
Chicago IL 60602-4750

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Hospital Association-Chicago

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.11

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2014

Transaction ID : PR327895731167

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Mr. Thomas J. Bonner FACHE

Mailing Address P.O. Box 679010

City State Zip Code
Austin TX 78767-9010

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Hospital Association-Chicago

Occupation
Regional Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 30 2014

Transaction ID : PR327983731167

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

253.88

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Richard J. Umbdenstock

Mailing Address 325 Seventh Street, NW
 Suite 700

City State Zip Code
 Washington DC 20004-2818

FEC ID number of contributing
 federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 06 30 2014

Transaction ID : PR328132831167

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Ms. Barbara Lorschbach

Mailing Address 204 7th Ave

City State Zip Code
 La Grange IL 60525-6406

FEC ID number of contributing
 federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Sr. Vice President, Member Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 06 30 2014

Transaction ID : PR328136931167

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Ms. Donna J. Melkonian

Mailing Address 5545 North Wayne

City State Zip Code
 Chicago IL 60640-1318

FEC ID number of contributing
 federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 06 30 2014

Transaction ID : PR328223831167

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

230.82

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

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Ron O. Purcell

Mailing Address 1093 N. Faldo Way

City
EagleState
IDZip Code
83616-5369FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Regional Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : PR328241431167

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Mr. Richard J. Pollack

Mailing Address 3475 North Venice Street

City
ArlingtonState
VAZip Code
22207-4446FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : PR328260931167

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Ms. Carolyn Forcina

Mailing Address 200 Clover Hill Court

City
YardleyState
PAZip Code
19067-5736FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Regional Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : PR328511831167

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

230.82

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

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Alicia N. Mitchell

Mailing Address 1501 N. Harrison Street

City

Arlington

State

VA

Zip Code

22205-2726

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Senior Vice President, Communications

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.11

Date of Receipt

06 / 30 / 2014

Transaction ID : PR328512031167

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Mr. George Arges

Mailing Address One North Franklin St.

City

Chicago

State

IL

Zip Code

60606-4425

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Senior Director, Health Data Managemen

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

06 / 30 / 2014

Transaction ID : PR328641131167

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Mr. Anthony S Burke

Mailing Address 155 N Wacker Dr

City

Chicago

State

IL

Zip Code

60606-1709

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.11

Date of Receipt

06 / 30 / 2014

Transaction ID : PR328913331167

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

192.36

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Rebecca Chickey

Mailing Address One North Franklin Street

City State Zip Code
Chicago IL 60606-4425

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Hospital Association-Chicago

Occupation
SPSA Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : PR329013431167

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Dr. John R. Combes

Mailing Address One North Franklin

City State Zip Code
Chicago IL 60606-3436

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Hospital Association-Chicago

Occupation
President & Chief Operating Officer, C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.11

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : PR329071331167

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Ms. Robyn L. Bash

Mailing Address 325 Seventh Street, NW
Suite 700

City State Zip Code
Washington DC 20004-2818

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Hospital Association-Washingt

Occupation
Executive Director, Federal Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : PR329084431167

Amount of Each Receipt this Period

97.28

P/R Deduction (\$48.64 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

212.70

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

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. W. Thomas Deweese

Mailing Address 500 Interstate Boulevard South

City

Nashville

State

TN

Zip Code

37210-4634

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

AHA Regional Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.11

Date of Receipt

06 / 30 / 2014

Transaction ID : PR329215731167

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Ms. Patricia Meersman

Mailing Address One North Franklin

City

Chicago

State

IL

Zip Code

60606-3436

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Senior Director Member Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

06 / 30 / 2014

Transaction ID : PR330343331167

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Mr. Thomas Misfeldt

Mailing Address One North Franklin

City

Chicago

State

IL

Zip Code

60606-3436

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Associate Regional Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.11

Date of Receipt

06 / 30 / 2014

Transaction ID : PR330411631167

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

192.36

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

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Paul N. Muraca

Mailing Address 4960 138th Circle West

City

Apple Valley

State

MN

Zip Code

55124-9229

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Regional Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.11

Date of Receipt

06 / 30 / 2014

Transaction ID : PR330475431167

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Mr. Gene O'Dell

Mailing Address One North Franklin

City

Chicago

State

IL

Zip Code

60606-3436

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Vice President, Strategic Planning

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

06 / 30 / 2014

Transaction ID : PR330547731167

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Ms. Eileen O'Keefe

Mailing Address 172 Atteridge

City

Lake Forest

State

IL

Zip Code

60045-1715

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Vice President, Constituency Section

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.11

Date of Receipt

06 / 30 / 2014

Transaction ID : PR330549231167

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

192.36

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 103 OF 134
(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
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mr. Anthony Spohn

Mailing Address 3219 N. Oriole

City

Chicago

State

IL

Zip Code

60634-3232

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Chicago

Occupation

Executive Director, Associate Membersh

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6				3	0			2	0	1	4	

Transaction ID : PR331098331167

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Ms. Debi H. Tucker Esq.

Mailing Address 1101 N. Kentucky Street

City

Arlington

State

VA

Zip Code

22205-3515

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Director, State Issues Forum

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.12

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6				3	0			2	0	1	4	

Transaction ID : PR331278831167

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Ms. Darlene S. Vanderbush

Mailing Address 26 West Glendale Ave.

City

Alexandria

State

VA

Zip Code

22301-2402

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Vice President, Operations - APP

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.11

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6				3	0			2	0	1	4	

Transaction ID : PR331304231167

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

153.90

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

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

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Megan Cundari

Mailing Address 325 Seventh Street, NW
Suite 700

City State Zip Code
Washington DC 20004-2818

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Senior Associate Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.11

Date of Receipt

06 / 30 / 2014

Transaction ID : PR518031931167

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Ms. Laura M. Werner

Mailing Address 325 Seventh Street, NW
Suite 700

City State Zip Code
Washington DC 20004-2818

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Associate Director, Political Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

06 / 30 / 2014

Transaction ID : PR560101531167

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C. Mr. Carlos Jackson

Mailing Address 325 Seventh Street, NW

City State Zip Code
Washington DC 20004-2802

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Associate Director, Federal Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

06 / 30 / 2014

Transaction ID : PR566280931167

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ►

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

153.90

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

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

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Ashley B. Thompson

Mailing Address 606 S. Royal St.

City

Alexandria

State

VA

Zip Code

22314-4142

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Director, Policy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.11

Date of Receipt

06 / 30 / 2014

Transaction ID : PR766023731167

Amount of Each Receipt this Period

76.94

P/R Deduction (\$38.47 Bi-Weekly)

Full Name (Last, First, Middle Initial)

B. Ms. Lisa Kidder Hrobsky

Mailing Address 325 Seventh Street, NW
Suite 700

City

Washington

State

DC

Zip Code

20004-2818

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Hospital Association-Washingt

Occupation

Vice President, Legislative Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.12

Date of Receipt

06 / 30 / 2014

Transaction ID : PR876637231167

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

Full Name (Last, First, Middle Initial)

C.

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)..... ►

115.42

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

100007.89

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

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

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Hospital and Healthsystem Assoc. of PA (F)

Mailing Address Post Office Box 8600

City State Zip Code
Harrisburg PA 17105-8600

FEC ID number of contributing
federal political committee.

C C00128082

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50000.00

Date of Receipt

06 / 04 / 2014

Transaction ID : 21806155

Amount of Each Receipt this Period

20000.00

Full Name (Last, First, Middle Initial)

B. California Healthcare Association PAC - Federal

Mailing Address 1215 K Street
Suite 800

City State Zip Code
Sacramento CA 95814

FEC ID number of contributing
federal political committee.

C C00237495

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200000.00

Date of Receipt

06 / 10 / 2014

Transaction ID : 21813708

Amount of Each Receipt this Period

50000.00

Full Name (Last, First, Middle Initial)

C.

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)..... ►

70000.00

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

70000.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. TD Bank

Mailing Address 901 Seventh Street, NW

City
Washington

State Zip Code
DC 20001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1519.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2014

Transaction ID : 21856704

Amount of Each Receipt this Period

222.98

Interest Earned

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

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

222.98

222.98

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address Ste. 001

City Chicago State IL Zip Code 60679

Purpose of Disbursement
Merchant Fees

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 05 / 2014
Transaction ID : 21856701

Amount of Each Disbursement this Period

16.25

Merchant Fees

Full Name (Last, First, Middle Initial)

B. PaymentechMailing Address 14221 Dallas Parkway
Building Two

City Dallas State TX Zip Code 75254

Purpose of Disbursement
Merchant Fees

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 04 / 2014
Transaction ID : 21856702

Amount of Each Disbursement this Period

28.50

Merchant Fees

Full Name (Last, First, Middle Initial)

C. Newtek Merchant Solutions

Mailing Address 744 N 4th Street

City Milwaukee State WI Zip Code 53203

Purpose of Disbursement
Merchant Fees

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 02 / 2014
Transaction ID : 21856703

Amount of Each Disbursement this Period

175.07

Merchant Fees

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

219.82

219.82

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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 Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Friends Of Farr

Mailing Address PO Box 122

City	State	Zip Code
Monterey	CA	93942

Purpose of Disbursement
Contribution

Candidate Name

Rep. Sam Farr

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: CA District: 20

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		02		2014

Transaction ID : 21802818

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Citizens For Cochran

Mailing Address PO Box 7183

City	State	Zip Code
Tupelo	MS	38802

Purpose of Disbursement
Contribution

Candidate Name

Sen. Thad Cochran

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

State: MS District:

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		02		2014

Transaction ID : 21802819

Amount of Each Disbursement this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

C. Citizens For Cochran

Mailing Address PO Box 7183

City	State	Zip Code
Tupelo	MS	38802

Purpose of Disbursement
Contribution

Candidate Name

Sen. Thad Cochran

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

State: MS District:

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		02		2014

Transaction ID : 21802821

Amount of Each Disbursement this Period

1500.00

Contribution

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

3000.00

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**SCHEDULE B (FEC Form 3X)
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(check only one)

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<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 Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Friends Of Jim Clyburn

Mailing Address Post Office Box 12567

City	State	Zip Code
Columbia	SC	29211

Purpose of Disbursement
Contribution

Candidate Name

Rep. James E. Clyburn

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: SC District: 06

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		02		2014

Transaction ID : 21802823

Amount of Each Disbursement this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Nunnelee For CongressMailing Address 438 East Main St
PO Box 7092

City	State	Zip Code
Tupelo	MS	38802

Purpose of Disbursement
Void of 04/14 Check

Candidate Name

Rep. Alan Nunnelee

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: MS District: 01

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		05		2014

Transaction ID : 21805913

Amount of Each Disbursement this Period

-1000.00

Void of 04/14 Check

Full Name (Last, First, Middle Initial)

C. Alexander For Senate 2014 Inc

Mailing Address 228 S Washington Street Suite 115

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement
Contribution

Candidate Name

Sen. Lamar Alexander

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

State: TN District:

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : 21813085

Amount of Each Disbursement this Period

1000.00

Contribution

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

2500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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(check only one)

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<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 Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Friends Of Kelly Ayotte

Mailing Address PO Box 937

City	State	Zip Code
Manchester	NH	03105

Purpose of Disbursement
2016 Contribution

Candidate Name

Sen. Kelly AyotteOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: NH District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : 21813087

Amount of Each Disbursement this Period

1000.00

2016 Contribution

Full Name (Last, First, Middle Initial)

B. Team Graham

Mailing Address PO Box 1801

City	State	Zip Code
Columbia	SC	29202

Purpose of Disbursement
Contribution

Candidate Name

Sen. Lindsey O. GrahamOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: SC District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : 21813088

Amount of Each Disbursement this Period

1500.00

Contribution

Full Name (Last, First, Middle Initial)

C. Pat Roberts For U.S. Senate Inc

Mailing Address PO Box 433

City	State	Zip Code
Great Bend	KS	67530

Purpose of Disbursement
Contribution

Candidate Name

Sen. Pat RobertsOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: KS District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : 21813089

Amount of Each Disbursement this Period

1000.00

Contribution

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

3500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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(check only one)

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<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 Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Tim Scott For Senate

Mailing Address 1405 Ashley River Road

City	State	Zip Code
Charleston	SC	29407

Purpose of Disbursement
Contribution

Candidate Name

Sen. Tim Scott

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: SC District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : 21813090

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Friends Of Sessions Senate Committee Inc

Mailing Address P O Box 4278

City	State	Zip Code
Montgomery	AL	36103

Purpose of Disbursement
Contribution

Candidate Name

Sen. Jeff Sessions

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: AL District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : 21813091

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Friends Of John Delaney

Mailing Address PO Box 70835

City	State	Zip Code
Bethesda	MD	20813

Purpose of Disbursement
Contribution

Candidate Name

Rep. John Delaney

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: MD District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : 21813092

Amount of Each Disbursement this Period

1000.00

Contribution

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

3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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 Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Olson For Congress Committee

Mailing Address PO Box 16381

City	State	Zip Code
Sugar Land	TX	77496

Purpose of Disbursement
Contribution

Candidate Name

Rep. Pete OlsonOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District: 22

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	04	/	2014

Transaction ID : 21813158

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Scott Rigell For CongressMailing Address 915 First Colonial Road
Suite 100

City	State	Zip Code
Virginia Beach	VA	23454

Purpose of Disbursement
Contribution

Candidate Name

Rep. Scott E. RigellOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: VA District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	04	/	2014

Transaction ID : 21813159

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Citizens For Rush

Mailing Address P. O. Box 7292

City	State	Zip Code
Chicago	IL	60680

Purpose of Disbursement
Contribution

Candidate Name

Rep. Bobby Lee RushOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	04	/	2014

Transaction ID : 21813160

Amount of Each Disbursement this Period

1500.00

Contribution

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

3500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Votetipton.com

Mailing Address PO Box 1582

City	State	Zip Code
Cortez	CO	81321

Purpose of Disbursement
Contribution

Candidate Name

Rep. Scott R. TiptonOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: CO District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : 21813226

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Promoting our Republican Team PAC

Mailing Address 8331 Little Harbor Drive

City	State	Zip Code
Cincinnati	OH	45244

Purpose of Disbursement
2014 Contribution

Candidate Name

Promoting our Republican Team PACOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : 21813227

Amount of Each Disbursement this Period

5000.00

2014 Contribution

Full Name (Last, First, Middle Initial)

C. Mike Thompson For Congress

Mailing Address 5429 Madison Avenue

City	State	Zip Code
Sacramento	CA	95841

Purpose of Disbursement
Contribution

Candidate Name

Rep. Mike ThompsonOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : 21813228

Amount of Each Disbursement this Period

500.00

Contribution

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

6500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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(check only one)

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<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
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Friends Of Corrine Brown

Mailing Address PO Box 40087

City	State	Zip Code
Jacksonville	FL	32203

Purpose of Disbursement
Contribution

Candidate Name

Rep. Corrine BrownOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : 21813229

Amount of Each Disbursement this Period

4000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Crenshaw For Congress CampaignMailing Address 7235 Bonneval Road
Suite 210

City	State	Zip Code
Jacksonville	FL	32256

Purpose of Disbursement
Contribution

Candidate Name

Rep. Ander CrenshawOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : 21813230

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mario Diaz-Balart For CongressMailing Address 8770 Sw 72nd Street
420

City	State	Zip Code
Miami	FL	33173

Purpose of Disbursement
Contribution

Candidate Name

Rep. Mario Diaz-BalartOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 25

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : 21813231

Amount of Each Disbursement this Period

4000.00

Contribution

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

10000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<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
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Committee To Elect Alan Grayson

Mailing Address PO Box 533616

City	State	Zip Code
Orlando	FL	32853

Purpose of Disbursement
Contribution

Candidate Name

Rep. Alan Mark Grayson

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: FL District: 09

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : 21813233

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Hastings For Congress

Mailing Address P.O. Box 100277

City	State	Zip Code
Ft. Lauderdale	FL	33310

Purpose of Disbursement
Contribution

Candidate Name

Rep. Alcee L. Hastings

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: FL District: 20

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : 21813234

Amount of Each Disbursement this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

C. Ros-Lehtinen For Congress

Mailing Address PO Box 522784

City	State	Zip Code
Miami	FL	33152

Purpose of Disbursement
Contribution

Candidate Name

Rep. Ileana Ros-Lehtinen

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: FL District: 27

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : 21813236

Amount of Each Disbursement this Period

2000.00

Contribution

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

6500.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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(check only one)

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<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
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NAME OF COMMITTEE (In Full)

American Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Frederica S. Wilson For CongressMailing Address 19821 Nw 2nd Avenue
Box 354

City Miami Gardens State FL Zip Code 33169

Purpose of Disbursement
Contribution

Candidate Name

Rep. Frederica S. WilsonOffice Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 24

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : 21813239

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

B. McConnell Senate Committee '14

Mailing Address PO Box 1496

City Louisville State KY Zip Code 40201

Purpose of Disbursement
Contribution

Candidate Name

Sen. Mitch McConnellOffice Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2014 ☐ Primary ☒ General
☐ Other (specify) ▼

State: KY District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : 21813241

Amount of Each Disbursement this Period

1500.00

Contribution

Full Name (Last, First, Middle Initial)

C. Walberg For Congress

Mailing Address PO Box 1362

City Jackson State MI Zip Code 49204

Purpose of Disbursement
Contribution

Candidate Name

Rep. Tim WalbergOffice Sought: ☒ House ☐ Senate ☐ President
Disbursement For: 2014 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

Transaction ID : 21813242

Amount of Each Disbursement this Period

1000.00

Contribution

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

4500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<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 Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Citizens For Cochran

Mailing Address PO Box 7183

City Tupelo	State MS	Zip Code 38802
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Purpose of Disbursement
Contribution

Candidate Name

Sen. Thad CochranOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼
Runoff2014

State: MS

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2014

Transaction ID : 21813248

Amount of Each Disbursement this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Joe Wilson For Congress Committee

Mailing Address PO Box 2145

City West Columbia	State SC	Zip Code 29171
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Purpose of Disbursement
Contribution

Candidate Name

Rep. Joe WilsonOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: SC

District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2014

Transaction ID : 21813250

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

C. CAFO PAC (Concerned Americans for Freedom)

Mailing Address 3321 Avenue I - Suite 6

City Scottsbluff	State NE	Zip Code 69361
---------------------	-------------	-------------------

Purpose of Disbursement
2014 Contribution

Candidate Name

CAFO PAC (Concerned Americans for Freedom)Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		06		2014

Transaction ID : 21813251

Amount of Each Disbursement this Period

500.00

2014 Contribution

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

7500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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<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 Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Pioneer PACMailing Address 499 South Capitol Street, SW
Suite 408

City Washington State DC Zip Code 20003

Purpose of Disbursement
2014 Contribution

Candidate Name

Pioneer PACOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		06		2014

Transaction ID : 21813252

Amount of Each Disbursement this Period

1000.00

2014 Contribution

Full Name (Last, First, Middle Initial)

B. Enyart For Congress

Mailing Address PO Box 308

City Belleville State IL Zip Code 62222

Purpose of Disbursement
Contribution

Candidate Name

Rep. William EnyartOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		06		2014

Transaction ID : 21813253

Amount of Each Disbursement this Period

1500.00

Contribution

Full Name (Last, First, Middle Initial)

C. Ted Deutch For Congress Committee

Mailing Address 1050 17th St, Nw, Ste 590

City Washington State DC Zip Code 20036

Purpose of Disbursement
Contribution

Candidate Name

Rep. Ted DeutchOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 21

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		09		2014

Transaction ID : 21813254

Amount of Each Disbursement this Period

2000.00

Contribution

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

4500.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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 Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Mark Pryor For U.S. Senate

Mailing Address PO Box 2720

City	State	Zip Code
Little Rock	AR	72203

Purpose of Disbursement
Contribution

011

Candidate Name

Sen. Mark L. PryorCategory/
Type

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: AR District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		13		2014

Transaction ID : 21820877

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Michael Burgess For Congress

Mailing Address PO Box 2334

City	State	Zip Code
Denton	TX	76202

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Michael C. Burgess M.D.Category/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: TX District: 26

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		13		2014

Transaction ID : 21820880

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Friends Of Lois Capps

Mailing Address P.O. Box 23940

City	State	Zip Code
Santa Barbara	CA	93121

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Lois CappsCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: CA District: 24

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		13		2014

Transaction ID : 21820882

Amount of Each Disbursement this Period

1000.00

Contribution

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

3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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<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 Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. John Carney For Congress

Mailing Address PO Box 2162

City
WilmingtonState
DEZip Code
19899Purpose of Disbursement
Contribution

Candidate Name

Rep. John C. Carney Jr.Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: DE District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		13		2014

Transaction ID : 21820884

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Guthrie For Congress

Mailing Address PO Box 9639

City
Bowling GreenState
KYZip Code
42102Purpose of Disbursement
Contribution

Candidate Name

Rep. S. Brett GuthrieOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: KY District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		13		2014

Transaction ID : 21820886

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Levin For Congress

Mailing Address PO Box 37

City
RosevilleState
MIZip Code
48066Purpose of Disbursement
Contribution

Candidate Name

Rep. Sandy M. LevinOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		13		2014

Transaction ID : 21820889

Amount of Each Disbursement this Period

1000.00

Contribution

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

3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<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 Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. People For Ben

Mailing Address PO Box 31129

City	State	Zip Code
Santa Fe	NM	87594

Purpose of Disbursement
Contribution

Candidate Name

Rep. Ben Ray Lujan Jr.

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: NM District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		13		2014

Transaction ID : 21820892

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Pat Meehan For Congress

Mailing Address 50 S. Providence Road

City	State	Zip Code
Media	PA	19063

Purpose of Disbursement
Contribution

Candidate Name

Rep. Patrick L. Meehan

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: PA District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		13		2014

Transaction ID : 21820893

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Jim Renacci For Congress

Mailing Address 150 Smokerise Drive

City	State	Zip Code
Wadsworth	OH	44281

Purpose of Disbursement
Contribution

Candidate Name

Rep. James B. Renacci

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: OH District: 16

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		13		2014

Transaction ID : 21820894

Amount of Each Disbursement this Period

1000.00

Contribution

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

4000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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(check only one)

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<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 Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ann Wagner For Congress

Mailing Address PO Box 50

City	State	Zip Code
Ballwin	MO	63022

Purpose of Disbursement
Contribution

Candidate Name

Rep. Ann WagnerOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: MO District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		13		2014

Transaction ID : 21820896

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Majority Committee PAC

Mailing Address PO Box 10134

City	State	Zip Code
Bakersfield	CA	93389

Purpose of Disbursement
2014 Contribution

Candidate Name

Majority Committee PACOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		13		2014

Transaction ID : 21821008

Amount of Each Disbursement this Period

4000.00

2014 Contribution

Full Name (Last, First, Middle Initial)

C. HellerHighWater PAC

Mailing Address PO Box 371907

City	State	Zip Code
Las Vegas	NV	89137

Purpose of Disbursement
2014 Contribution

Candidate Name

HellerHighWater PACOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		13		2014

Transaction ID : 21821009

Amount of Each Disbursement this Period

2500.00

2014 Contribution

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

7500.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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(check only one)

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<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 Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Friends Of Dick Durbin

Mailing Address PO Box 1949

City
SpringfieldState
ILZip Code
62705Purpose of Disbursement
Contribution

011

Candidate Name

Sen. Richard J. DurbinCategory/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: IL

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		13		2014

Transaction ID : 21821010

Amount of Each Disbursement this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Randy Hultgren For Congress

Mailing Address PO Box 717

City
St CharlesState
ILZip Code
60174Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Randy HultgrenCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		13		2014

Transaction ID : 21821011

Amount of Each Disbursement this Period

4000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Guthrie For Congress

Mailing Address PO Box 9639

City
Bowling GreenState
KYZip Code
42102Purpose of Disbursement
Contribution

011

Candidate Name

Rep. S. Brett GuthrieCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: KY

District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		13		2014

Transaction ID : 21821012

Amount of Each Disbursement this Period

1000.00

Contribution

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

10000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<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 Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Cleaver For Congress

Mailing Address 4801 Main Street, Suite 1000

City	State	Zip Code
Kansas City	MO	64112

Purpose of Disbursement
Contribution

011

Candidate Name

Rep. Emanuel Cleaver IICategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: MO District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		13		2014

Transaction ID : 21821013

Amount of Each Disbursement this Period

1500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Montanans For Tester

Mailing Address PO Box 1135

City	State	Zip Code
Helena	MT	59624

Purpose of Disbursement
2018 Contribution

011

Candidate Name

Sen. Jon TesterCategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2018
☒ Primary ☐ General
☐ Other (specify) ▼

State: MT District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		13		2014

Transaction ID : 21821015

Amount of Each Disbursement this Period

1000.00

2018 Contribution

Full Name (Last, First, Middle Initial)

C. Oklahomans For Clark Jolley

Mailing Address PO Box 2082

City	State	Zip Code
Oklahoma City	OK	73101

Purpose of Disbursement
Contribution

011

Candidate Name

Joseph A JolleyCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: OK District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		13		2014

Transaction ID : 21821016

Amount of Each Disbursement this Period

2500.00

Contribution

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

5000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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(check only one)

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<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 Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Jim Tracy For Congress

Mailing Address PO Box 332490

City	State	Zip Code
Murfreesboro	TN	37133

Purpose of Disbursement
Contribution

Candidate Name

Jim TracyOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		13		2014

Transaction ID : 21821017

Amount of Each Disbursement this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Friends For Chris Stewart, Inc.

Mailing Address 10 West Broadway, Suite 500

City	State	Zip Code
Salt Lake City	UT	84101

Purpose of Disbursement
Contribution

Candidate Name

Rep. Chris StewartOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: UT District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		13		2014

Transaction ID : 21821018

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Rangel For Congress

Mailing Address P.O. Box 5577

City	State	Zip Code
New York	NY	10027

Purpose of Disbursement
Contribution

Candidate Name

Rep. Charles B. RangelOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		18		2014

Transaction ID : 21826460

Amount of Each Disbursement this Period

2000.00

Contribution

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

5500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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 Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Beatty For Congress

Mailing Address PO Box 172

City	State	Zip Code
Columbus	OH	43216

Purpose of Disbursement
Contribution

Candidate Name

Rep. Joyce BeattyOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		19		2014

Transaction ID : 21827288

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Friends Of Erik PaulsenMailing Address P.O. Box 44369
250 Prairie Center Drive

City	State	Zip Code
Eden Prairie	MN	55344

Purpose of Disbursement
Contribution

Candidate Name

Rep. Erik P. PaulsenOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		19		2014

Transaction ID : 21827294

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Price For Congress

Mailing Address P.O. Box 425

City	State	Zip Code
Roswell	GA	30077

Purpose of Disbursement
Contribution

Candidate Name

Rep. Thomas Edmunds Price M.D.Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: GA District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		19		2014

Transaction ID : 21827295

Amount of Each Disbursement this Period

1000.00

Contribution

SUBTOTAL of Disbursements This Page (optional).....▶**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 PageFOR LINE NUMBER:
(check only one)

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<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 Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Daniel Webster For Congress

Mailing Address 3400 Old Winter Garden Road

City Orlando	State FL	Zip Code 32805
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Purpose of Disbursement
Contribution

Candidate Name

Rep. Daniel WebsterOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: FL District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		19		2014

Transaction ID : 21827296

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. AMERIPAC: The Fund for a Greater AmericaMailing Address 700 Thirteenth Street, NW
Suite 600

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

Purpose of Disbursement
2014 Contribution

Candidate Name

AMERIPAC: The Fund for a Greater AmericaOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		19		2014

Transaction ID : 21827297

Amount of Each Disbursement this Period

1000.00

2014 Contribution

Full Name (Last, First, Middle Initial)

C. Committee for the Preservation of Capitalism (CPC)

Mailing Address P.O. Box 65314

City Washington	State DC	Zip Code 22036
--------------------	-------------	-------------------

Purpose of Disbursement
2014 Contribution

Candidate Name

Committee for the Preservation of Capitalism (CPC)Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		19		2014

Transaction ID : 21827301

Amount of Each Disbursement this Period

1000.00

2014 Contribution

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

3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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 Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Families For James Lankford

Mailing Address PO Box 1639

City	State	Zip Code
Bethany	OK	73008

Purpose of Disbursement
Contribution

Candidate Name

Rep. James Paul LankfordOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: OK District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		20		2014

Transaction ID : 21827302

Amount of Each Disbursement this Period

4000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Friends Of Mary Landrieu, Inc.Mailing Address 700 13th Street, NW
Suite 600

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement
Contribution

Candidate Name

Sen. Mary L. LandrieuOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: LA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		25		2014

Transaction ID : 21832110

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Friends Of Cheri Bustos

Mailing Address P.O. Box 77

City	State	Zip Code
East Moline	IL	61244

Purpose of Disbursement
Contribution

Candidate Name

Rep. Cheri BustosOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 17

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		25		2014

Transaction ID : 21832111

Amount of Each Disbursement this Period

1000.00

Contribution

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

6000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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<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 Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. DelBene For Congress

Mailing Address PO Box 487

City	State	Zip Code
Bothell	WA	98041

Purpose of Disbursement
Contribution

Candidate Name

Rep. Suzan DelBeneOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: WA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		25		2014

Transaction ID : 21832112

Amount of Each Disbursement this Period

1500.00

Contribution

Full Name (Last, First, Middle Initial)

B. Nolan For Congress Volunteer Committee

Mailing Address PO Box 1041

City	State	Zip Code
Brainerd	MN	56401

Purpose of Disbursement
Contribution

Candidate Name

Rep. Richard Michael NolanOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		25		2014

Transaction ID : 21832113

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mike Bishop For Congress

Mailing Address PO Box 1148

City	State	Zip Code
Brighton	MI	48116

Purpose of Disbursement
Contribution

Candidate Name

Michael BishopOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		25		2014

Transaction ID : 21832128

Amount of Each Disbursement this Period

1000.00

Contribution

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

3500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<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 Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Moolenaar For Congress

Mailing Address 5915 Eastman Avenue Suite 100

City Midland	State MI	Zip Code 48640
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Purpose of Disbursement
Contribution

Candidate Name

John MoolenaarOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		25		2014

Transaction ID : 21832129

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Fund For The Majority, The

Mailing Address 1212 S. Victory Blvd.

City Burbank	State CA	Zip Code 91502
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Purpose of Disbursement
Void of 04/14 Check

Candidate Name

Fund For The Majority, TheOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : 21856658

Amount of Each Disbursement this Period

-1000.00

Void of 04/14 Check

Full Name (Last, First, Middle Initial)

C. Hoosiers First PACMailing Address 215 South St. Joseph Street
Suite 600

City South Bend	State IN	Zip Code 46601
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Purpose of Disbursement
Void of 05/14 Check

Candidate Name

Hoosiers First PACOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : 21856660

Amount of Each Disbursement this Period

-1000.00

Void of 05/14 Check

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

-1000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<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 Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. ROYB - Rely on Your Beliefs FundMailing Address 1300 Pennsylvania Avenue, NW
Suite 700

City Washington State DC Zip Code 20004

Purpose of Disbursement
Void of 05/14 Check

Candidate Name

ROYB - Rely on Your Beliefs FundOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : 21856661

Amount of Each Disbursement this Period

-1000.00

Void of 05/14 Check

Full Name (Last, First, Middle Initial)

B. Cartwright For Congress

Mailing Address PO Box 1805

City Plains State PA Zip Code 18705

Purpose of Disbursement
Void of 03/14 check

Candidate Name

Rep. Matthew A. CartwrightOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 17

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : 21860565

Amount of Each Disbursement this Period

-2000.00

Void of 03/14 check

Full Name (Last, First, Middle Initial)

C. Terri Sewell For Congress

Mailing Address P.O. Box 1964

City Birmingham State AL Zip Code 35201

Purpose of Disbursement
Void of 07/13 Check

Candidate Name

Rep. Terri A. SewellOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: AL District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2014

Transaction ID : 21866413

Amount of Each Disbursement this Period

-1000.00

Void of 07/13 Check

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

-4000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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<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 Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Perlmutter For CongressMailing Address 3440 Youngfield Street
#264

City Wheat Ridge State CO Zip Code 80033

Purpose of Disbursement
Void of 03/14 Check

Candidate Name

Rep. Edwin PerlmutterOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2014
☒ Primary ☐ General
☐ Other (specify) ▼

State: CO District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2014

Transaction ID : 21866414

Amount of Each Disbursement this Period

-1000.00

Void of 03/14 Check

Full Name (Last, First, Middle Initial)

B. Friends Of Schumer

Mailing Address 192 Lexington Avenue Suite 1001

City New York State NY Zip Code 10016

Purpose of Disbursement
Void of 10/13 Check

Candidate Name

Sen. Charles E. SchumerOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2014

Transaction ID : 21873980

Amount of Each Disbursement this Period

-1000.00

Void of 10/13 Check

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

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)..... ►

-2000.00

101500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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 checked="" 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 Hospital Association PAC

Full Name (Last, First, Middle Initial)

A. Ms. Rebecca Hultberg

Mailing Address 1049 West Fifth Avenue Suite 100

City	State	Zip Code
Anchorage	AK	99501-1965

Purpose of Disbursement
Refund of 06/13/2014 Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2014

Transaction ID : 21832095

Amount of Each Disbursement this Period

500.00

Refund of 06/13/2014 Contribution

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

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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C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

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).....▶

500.00

500.00
