

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

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

FOR LINE NUMBER: PAGE 28 / 39
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
PHYSICIAN HOSPITALS OF AMERICA POLITICAL ACTION COMMITTEE

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

Mailing Address 9301 North Central Expressway
Suite 360

City State Zip Code
Dallas TX 75231

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

Name of Employer Occupation
Cirrus Health CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
10 / 08 / 2008

Transaction ID: SA11AI.6072

Amount of Each Receipt this Period
500.00

Contribution

B. Full Name (Last, First, Middle Initial)
Three Gables Surgery Center

Mailing Address 5897 County Road
#107

City State Zip Code
Proctorville OH 45669

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
10 / 14 / 2008

Transaction ID: SA11AI.6077

Amount of Each Receipt this Period
5000.00

Partnership Contribution/
See Attribution Below

C. Full Name (Last, First, Middle Initial)
Luis Bolano

Mailing Address 3560 Woodville Dr

City State Zip Code
Huntington WV 25701

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

Name of Employer Occupation
Three Gables Surgery Center Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 443.50

Date of Receipt
MM / DD / YYYY
10 / 14 / 2008

Transaction ID: SA11AI.6077.0

Amount of Each Receipt this Period
443.50

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) ► 5500.00

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