

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 24
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
FEDERATION OF AMERICAN HOSPITALS PAC

Full Name (Last, First, Middle Initial) A. Larry Cash		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 3 / 2 0 0 6	
Mailing Address 1111 Vaughn Crest Drive		Transaction ID: 16556463	
City State Zip Code Franklin TN 37069	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Community Health Systems, Inc	Occupation EVP & Chief Financial Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Wayne T Smith		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 3 / 2 0 0 6	
Mailing Address 4 Peach Blossom Square		Transaction ID: 16556464	
City State Zip Code Nashville TN 37205	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Community Health Systems, Inc	Occupation Chairman, President & CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. Jeffrey G. Micklos		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address 3130 Tennyson St., N.W.		Transaction ID: PR113432968155	
City State Zip Code Washington DC 20015	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C			
Name of Employer FAH	Occupation General Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00		
		P/R Deduction (\$20.00 Semi-Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	1340.00
TOTAL This Period (last page this line number only) ▶	