

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

FEDERATION OF AMERICAN HOSPITALS PAC

ADDRESS (number and street)

801 PENNSYLVANIA AVENUE

SUITE 245

Check if different than previously reported. (ACC)

WASHINGTON

DC

20004

2804

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00002261

3. IS THIS REPORT

NEW (N) OR

X

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 Quarterly 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)

X

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

05

01

2005

through

05

31

2005

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

Sylvia Ulrich

Signature of Treasurer

Electronically Filed by Sylvia Ulrich

Date

07

14

2005

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. 02/2003)

**SUMMARY PAGE**

**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
 FEDERATION OF AMERICAN HOSPITALS PAC

Report Covering the Period: From: <sup>H</sup>05 <sup>: :</sup>01 <sup>Y ( Y )</sup>2005 To: <sup>H</sup>05 <sup>: :</sup>31 <sup>Y ( Y )</sup>2005

	<b>COLUMN A</b> This Period	<b>COLUMN B</b> Calendar Year-to-Date
6. (a) Cash on Hand January 1 <sup>Y ( Y )</sup> 2005		15428.57
(b) Cash on Hand at Beginning of Reporting Period .....	12227.93	
(c) Total Receipts (from Line 19) .....	78097.34	151860.41
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	90325.27	167288.98
<hr/>		
7. Total Disbursements (from Line 31) .....	44554.94	121518.65
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	45770.33	45770.33
<hr/>		
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. 02/2003)

Page 3

Write or Type Committee Name

FEDERATION OF AMERICAN HOSPITALS PAC

Report Covering the Period: From: <sup>M</sup>05 <sup>D</sup>01 <sup>Y</sup>2005 To: <sup>M</sup>05 <sup>D</sup>31 <sup>Y</sup>2005

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) .....	64827.34	114222.02
(ii) Unitemized .....	8270.00	11784.68
(iii) TOTAL (add Lines 11(a)(i) and (ii)) .....	73097.34	126006.70
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	5000.00	25650.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	78097.34	151656.70
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	203.71
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 Transfer (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)) .....	78097.34	151860.41
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	78097.34	151860.41

**DETAILED SUMMARY PAGE**

of Disbursements

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	0.00	168.06
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	168.06
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	44500.00	121160.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	0.00
29. Other Disbursements.....	54.94	190.59
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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 ActMty (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))..	44554.94	121518.65
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 31).....	44554.94	121518.65

**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) .....	78097.34	151656.70
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	78097.34	151656.70
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	168.06
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	168.06

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

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

FOR LINE NUMBER: PAGE 6 / 38

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

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

Full Name (Last, First, Middle Initial) <b>A. William F Carpenter, III</b>		Date of Receipt M / D / Y 05 / 03 / 2005
Mailing Address 4005 Newman Place		Transaction ID: 6071722
City Nashville	State TN	Zip Code 37204
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 3000.00
Name of Employer LifePoint Hospitals, Inc	Occupation SVP, General Counsel & Secretary	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) <b>B. Kenneth C Donahay</b>		Date of Receipt M / D / Y 05 / 03 / 2005
Mailing Address 5101 Country Club Drive		Transaction ID: 6071723
City Brentwood	State TN	Zip Code 37027
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer LifePoint Hospitals, Inc	Occupation Chairman & CEO	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. Michael J Ciotta</b>		Date of Receipt M / D / Y 05 / 03 / 2005
Mailing Address 20 Wymstone		Transaction ID: 6071749
City Nashville	State TN	Zip Code 37215
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer LifePoint Hospitals, Inc	Occupation Chief Financial Officer	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts TN's Page (optional) .....	<b>9000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 7 / 38

(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Diane Kiddy</b>		Date of Receipt M / D / Y 05 / 03 / 2005
Mailing Address 340B Warden Drive		Transaction ID: 6071854
City Philadelphia	State PA	Zip Code 19129
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Universal Health Services, Inc	Occupation Director of Government Affairs	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Robert S Handler</b>		Date of Receipt M / D / Y 05 / 03 / 2005
Mailing Address 11122 W. Ricks Circle		Transaction ID: 6071882
City Dallas	State TX	Zip Code 75229
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Tenet Healthcare Corpora- tion	Occupation VP Clinical Quality & CMO	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Leonard Freshof</b>		Date of Receipt M / D / Y 05 / 03 / 2005
Mailing Address 991D 171st Avenue, S.E.		Transaction ID: 6071887
City Renton	State WA	Zip Code 98059
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 350.00
Name of Employer Auburn Regional Medical Center	Occupation CEO	Aggregate Year-to-Date ▼ 350.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>850.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 8 / 38

(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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FEDERATION OF AMERICAN HOSPITALS PAC

Full Name (Last, First, Middle Initial) <b>A. Ernie Spangur</b>		Date of Receipt M / D / Y 05 / 03 / 2005
Mailing Address 1083 8th Street, #2		Transaction ID: 6071908
City San Pedro	State CA	Zip Code 90731
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Universal Health Services, Inc	Occupation Director, Business Services	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Alfredo Ontiveros, Jr.</b>		Date of Receipt M / D / Y 05 / 05 / 2005
Mailing Address 890 Rio Road		Transaction ID: 6072962
City Eagle Pass	State TX	Zip Code 78852
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 350.00
Name of Employer Ft. Duncan Medical Center	Occupation CEO/Managing Director	Aggregate Year-to-Date ▼ 350.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Laurence L Herrod</b>		Date of Receipt M / D / Y 05 / 10 / 2005
Mailing Address 252 Woodlawn Road		Transaction ID: 6088107
City Wrightstown	State PA	Zip Code 18940
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Universal Health Services, Inc	Occupation Healthcare Administrator	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary      General Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>850.00</b>
<b>TOTAL</b> 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

FOR LINE NUMBER: PAGE 9 / 38  
(check only one)  
 11a     11b     11c     12  
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NAME OF COMMITTEE (In Full)  
FEDERATION OF AMERICAN HOSPITALS PAC

Full Name (Last, First, Middle Initial) <b>A. Michael Marquez</b>		Date of Receipt M / D / Y 05 / 10 / 2005
Mailing Address 10204 Stone Briar Court		Transaction ID: 6088132
City Las Vegas	State NV	Zip Code 89144-4311
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Universal Health Services, Inc	Occupation Vice President	Aggregate Year-to-Date ▼ 1000.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Robert M Zurad</b>		Date of Receipt M / D / Y 05 / 10 / 2005
Mailing Address 2245 Warner Road		Transaction ID: 6088133
City Lansdale	State PA	Zip Code 19354
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Universal Health Services, Inc	Occupation Director of Tax	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. John P Christen</b>		Date of Receipt M / D / Y 05 / 10 / 2005
Mailing Address 4097 Howell Road		Transaction ID: 6088858
City Malvern	State PA	Zip Code 19355
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Universal Health Services, Inc	Occupation AVP Hospital Finance	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary      General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1750.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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FOR LINE NUMBER: PAGE 10 / 38  
(check only one)  
 11a    11b    11c    12  
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NAME OF COMMITTEE (In Full)  
FEDERATION OF AMERICAN HOSPITALS PAC

Full Name (Last, First, Middle Initial) <b>A. Trevor Fetter</b>		Date of Receipt M / D / Y 05 / 10 / 2005
Mailing Address 3821 Beverly Drive		Transaction ID: 6089427
City Highland Park	State TX	Zip Code 75205
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer Tenet Healthcare Corporation	Occupation President and CEO	Aggregate Year-to-Date ▼ 5000.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Reynold J Jennings</b>		Date of Receipt M / D / Y 05 / 12 / 2005
Mailing Address 972 Acworth Due West Road		Transaction ID: 6097623
City Kennesaw	State GA	Zip Code 30152
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 3000.00
Name of Employer Tenet Healthcare Corporation	Occupation Chief Operating Officer	Aggregate Year-to-Date ▼ 3000.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Jayna Chambers</b>		Date of Receipt M / D / Y 05 / 13 / 2005
Mailing Address 1256 Kensington Rd		Transaction ID: 6102262
City McLean	State VA	Zip Code 22101
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 30.00
Name of Employer FAH	Occupation Lobbyist	Aggregate Year-to-Date ▼ 270.00
Receipt For: Primary      General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>8030.00</b>
TOTAL This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
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FOR LINE NUMBER: PAGE 11 / 38  
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 11a    11b    11c    12  
 13    14    15    16    17

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

Full Name (Last, First, Middle Initial) <b>A. Chip Kahn</b>		Date of Receipt M / D / Y 05 / 13 / 2005
Mailing Address 4545 N Glebe Road		Transaction ID: 6102263
City Arlington	State VA	Zip Code 22207
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 41.67
Name of Employer FAH	Occupation President & CEO	Aggregate Year-to-Date ▼ 375.03
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Bonnie Maneypenry</b>		Date of Receipt M / D / Y 05 / 13 / 2005
Mailing Address 14128 Burlingame Road		Transaction ID: 6102265
City Little Rock	State AR	Zip Code 72211
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer FAH	Occupation SVP Administrative Services	Aggregate Year-to-Date ▼ 225.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Douglas D Matrana</b>		Date of Receipt M / D / Y 05 / 13 / 2005
Mailing Address 3105 Collie Lane		Transaction ID: 6102268
City Falls Church	State VA	Zip Code 22044
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 42.00
Name of Employer FAH	Occupation Controller	Aggregate Year-to-Date ▼ 378.00
Receipt For: Primary      General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) .....	<b>108.67</b>
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

FOR LINE NUMBER: PAGE 12 / 38

(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)  
FEDERATION OF AMERICAN HOSPITALS PAC

Full Name (Last, First, Middle Initial) <b>A. Margaret S Cleary</b>		Date of Receipt M / D / Y 05 / 13 / 2005	
Mailing Address 8548 Aston Circle		Transaction ID: 6102259	
City Sparks	State NV	Zip Code 89436-6434	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Northern Nevada Medical Center	Occupation CEO	Aggregate Year-to-Date ▼ 500.00	
Receipt For: Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) <b>B. Richard C Wright</b>		Date of Receipt M / D / Y 05 / 13 / 2005	
Mailing Address 108 East Carolina Avenue		Transaction ID: 6103856	
City Summerville	State SC	Zip Code 29483	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Universal Health Services, Inc	Occupation Vice President	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) <b>C. Allene J Lankwert</b>		Date of Receipt M / D / Y 05 / 13 / 2005	
Mailing Address 5753 Park Central Avenue		Transaction ID: 6524804	
City Norcross	State GA	Zip Code 30062	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Universal Health Services, Inc	Occupation Director Physician Recruitment	Aggregate Year-to-Date ▼ 250.00	
Receipt For: Primary General Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ..... ► **1750.00**

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 38

(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Karen Sullivan</b>		Date of Receipt M / D / Y 05 / 17 / 2005
Mailing Address 540 Pugh Road		Transaction ID: 6524607
City Wayne	State PA	Zip Code 19087
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Universal Health Services, Inc	Occupation Director of Financial Analysis	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Timothy O Coffey</b>		Date of Receipt M / D / Y 05 / 17 / 2005
Mailing Address 564 Facis Street		Transaction ID: 6524609
City Metairie	State LA	Zip Code 70005-2908
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Chalmers Medical Center	Occupation Chief Operating Officer	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. Alan B Miller</b>		Date of Receipt M / D / Y 05 / 17 / 2005
Mailing Address 57 Crosby Brown Road		Transaction ID: 6524629
City Gladwyne	State PA	Zip Code 19035
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer Universal Health Services, Inc	Occupation Chairman & President	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	5550.00
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 14 / 38

(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)  
FEDERATION OF AMERICAN HOSPITALS PAC

Full Name (Last, First, Middle Initial) <b>A. Howard F Bazzore</b>		Date of Receipt M / D / Y 05 / 17 / 2005
Mailing Address 225 Walke Avenue, SE		Transaction ID: 6524631
City Aiken	State SC	Zip Code 29801
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Aiken Regional Medical Center	Occupation Hospital CFO	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. R Parker Sherill</b>		Date of Receipt M / D / Y 05 / 20 / 2005
Mailing Address 713 Vail Court		Transaction ID: 6524634
City Nashville	State TN	Zip Code 37215
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer HCA, Inc.	Occupation Consultant	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. R Warren Terry</b>		Date of Receipt M / D / Y 05 / 20 / 2005
Mailing Address 1934 Old Hickory Blvd		Transaction ID: 6524635
City Brentwood	State TN	Zip Code 37027
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer HCA, Inc.	Occupation Consultant	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary      General Other (specify) ▼		

SUBTOTAL of Receipts TN's Page (optional) .....	▶	<b>1250.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 15 / 38  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

Full Name (Last, First, Middle Initial) <b>A. Donna S Shields</b>		Date of Receipt M / D / Y Y Y Y 05 / 20 / 2005
Mailing Address 362B Park Blvd		Transaction ID: 6524636
City Chalmette	State LA	Zip Code 70043
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Chalmette Medical Center	Occupation Chief Nurse Executive	Aggregate Year-to-Date ▼ 300.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Craig R Dorn</b>		Date of Receipt M / D / Y Y Y Y 05 / 20 / 2005
Mailing Address 8614 Foggy Mountain Drive		Transaction ID: 6524637
City Austin	State TX	Zip Code 78736-3369
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Universal Health Services, Inc	Occupation Director of Development	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. A. Bruce Moore, Jr.</b>		Date of Receipt M / D / Y Y Y Y 05 / 24 / 2005
Mailing Address 2105 Golf Club Lane		Transaction ID: 6524686
City Nashville	State TN	Zip Code 37215
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer HCA, Inc.	Occupation COO & SVP Outpatient Services	Aggregate Year-to-Date ▼ 5000.00
Receipt For: Primary      General Other (specify) ▼		

SUBTOTAL of Receipts TN's Page (optional) .....	▶	<b>3050.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 16 / 38  
(check only one)  
 11a     11b     11c     12  
           13        14        15        16        17

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

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

Full Name (Last, First, Middle Initial) <b>A. Gerald S Christine</b>		Date of Receipt M / D / Y 05 / 24 / 2005
Mailing Address P.O. Box 20935		Transaction ID: 6524661
City Bradenton	State FL	Zip Code 34204
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Manatee Memorial Hospital	Occupation Hospital CFO	
Receipt For: Primary          General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Roy Orr</b>		Date of Receipt M / D / Y 05 / 24 / 2005
Mailing Address 210 3rd St. West Unit 4201		Transaction ID: 6524664
City Bradenton	State FL	Zip Code 34205-8829
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Manatee Memorial Hospital	Occupation Administrator	
Receipt For: Primary          General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Brian T Flynn</b>		Date of Receipt M / D / Y 05 / 24 / 2005
Mailing Address 22906 73rd Avenue East		Transaction ID: 6524667
City Bradenton	State FL	Zip Code 34202
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Manatee Memorial Hospital	Occupation Hospital CEO	
Receipt For: Primary          General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1000.00</b>
TOTAL This Period (last page this line number only) .....	▶	



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

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

FOR LINE NUMBER: PAGE 17 / 38  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial) <b>A. John A Lansky</b>		Date of Receipt M / D / Y Y Y Y 05 / 24 / 2005
Mailing Address 5624 David Drive		Transaction ID: 6524669
City State Zip Code Kenner LA 70065	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Charmelle Medical Center	Occupation Regional Director of Managed Care	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Carlo A Di Florio</b>		Date of Receipt M / D / Y Y Y Y 05 / 24 / 2005
Mailing Address 871D Tierra Lago Cove		Transaction ID: 6524671
City State Zip Code Lake Worth FL 33467	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Wellington Regional Hospital	Occupation Chief Nurse Executive	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Matlyn B Tavernier</b>		Date of Receipt M / D / Y Y Y Y 05 / 24 / 2005
Mailing Address 9437 Park Bluff Terrace		Transaction ID: 6524673
City State Zip Code Chesterfield VA 23838	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer HCA, Inc.	Occupation President-Outpatient Services Group	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>3000.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 18 / 38

(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)  
FEDERATION OF AMERICAN HOSPITALS PAC

Full Name (Last, First, Middle Initial) <b>A. Samuel J Coulter</b>		Date of Receipt M / D / Y 05 / 24 / 2005
Mailing Address 953B Butler Drive		Transaction ID: 6524677
City Brentwood	State TN	Zip Code 37027
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer HCA, Inc.	Occupation Vice President	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. William M Kimbrough</b>		Date of Receipt M / D / Y 05 / 24 / 2005
Mailing Address 852D Edinburgh Drive		Transaction ID: 6524681
City Nashville	State TN	Zip Code 37221
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer HCA, Inc.	Occupation VP Investor Relations	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Jana J Davis</b>		Date of Receipt M / D / Y 05 / 24 / 2005
Mailing Address 215B Golf Club Lane		Transaction ID: 6524683
City Nashville	State TN	Zip Code 37215
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer HCA, Inc.	Occupation VP Communications	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary      General Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts TN's Page (optional) .....	<b>1500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:        PAGE 10 / 38  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial) <b>A. Alan Cape</b>		Date of Receipt M / D / Y Y Y Y 05 / 24 / 2005
Mailing Address 908 Cadillac Avenue		Transaction ID: 6524687
City Nashville	State TN	Zip Code 37204
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer HCA, Inc.	Occupation VP Internal Audit	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Danny J Hails</b>		Date of Receipt M / D / Y Y Y Y 05 / 24 / 2005
Mailing Address 1234 Carl Seyfert Memorial Drive		Transaction ID: 6524682
City Brentwood	State TN	Zip Code 37027
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer HCA, Inc.	Occupation VP Internal Audit	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mark J Eddy</b>		Date of Receipt M / D / Y Y Y Y 05 / 24 / 2005
Mailing Address 413 Benton Lane		Transaction ID: 6524687
City Franklin	State TN	Zip Code 37067
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer HCA, Inc.	Occupation VP Internal Audit	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary      General Other (specify) ▼		

SUBTOTAL of Receipts TN's Page (optional) .....	▶	<b>1500.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:        PAGE 20 / 38  
(check only one)  
 11a     11b     11c     12  
           13       14       15       16       17

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

Full Name (Last, First, Middle Initial) <b>A. Anestesia Huiner</b>		Date of Receipt M / D / Y Y Y Y 05 / 24 / 2005
Mailing Address 814 E. Alamar Avenue		Transaction ID: 6524698
City	State	Zip Code
Santa Barbara	CA	93105
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>400.00</b>
Name of Employer Tenet Healthcare Corporation	Occupation Vice President	Aggregate Year-to-Date ▼ <b>400.00</b>
Receipt For: Primary          General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Sam Jenkins, Jr.</b>		Date of Receipt M / D / Y Y Y Y 05 / 24 / 2005
Mailing Address 203 Sheffield Place		Transaction ID: 6524700
City	State	Zip Code
Nashville	TN	37215
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2500.00</b>
Name of Employer HCA, Inc.	Occupation Group CFO	Aggregate Year-to-Date ▼ <b>2500.00</b>
Receipt For: Primary          General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mc Campbell</b>		Date of Receipt M / D / Y Y Y Y 05 / 24 / 2005
Mailing Address 1307 Chickering Road		Transaction ID: 6524705
City	State	Zip Code
Nashville	TN	37215
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2500.00</b>
Name of Employer HCA, Inc.	Occupation Senior Vice President	Aggregate Year-to-Date ▼ <b>2500.00</b>
Receipt For: Primary          General Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts TN's Page (optional) .....	<b>5400.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 21 / 38

(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)  
FEDERATION OF AMERICAN HOSPITALS PAC

Full Name (Last, First, Middle Initial) <b>A. Howard K. Patterson</b>		Date of Receipt M / D / Y 05 / 26 / 2005
Mailing Address 9335 Carol Court		Transaction ID: 6560553
City Brentwood	State TN	Zip Code 37027
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer HCA, Inc.	Occupation VP Real Estate	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Robert Halinski</b>		Date of Receipt M / D / Y 05 / 26 / 2005
Mailing Address 101 Hedgerow Way		Transaction ID: 6560554
City Lansdale	State PA	Zip Code 19446
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Universal Health Services, Inc.	Occupation Director of Reimbursement	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Jeffrey A. Dorsey</b>		Date of Receipt M / D / Y 05 / 26 / 2005
Mailing Address 677B E. Dorado Place		Transaction ID: 6560558
City Greenwood Village	State CO	Zip Code 80111
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1500.00
Name of Employer HCA, Inc.	Occupation Division President	Aggregate Year-to-Date ▼ 1500.00
Receipt For: Primary      General Other (specify) ▼		

SUBTOTAL of Receipts TN's Page (optional) .....	▶	<b>2250.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:        PAGE 22 / 38  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial) <b>A. Juan Valerino</b>		Date of Receipt M / D / Y 05 / 26 / 2005
Mailing Address 513 Sandpiper Circle		Transaction ID: 6560644
City <b>Nashville</b>	State <b>TN</b>	Zip Code <b>37221</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>HCA, Inc.</b>	Occupation <b>VP Managed Care</b>	Aggregate Year-to-Date ▼ <b>500.00</b>
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Gerald Glatzer</b>		Date of Receipt M / D / Y 05 / 26 / 2005
Mailing Address 5112 Heathrow Blvd		Transaction ID: 6561400
City <b>Brentwood</b>	State <b>TN</b>	Zip Code <b>37027</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>HCA, Inc.</b>	Occupation <b>VP-Government Programs</b>	Aggregate Year-to-Date ▼ <b>500.00</b>
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Frank M Houser</b>		Date of Receipt M / D / Y 05 / 26 / 2005
Mailing Address 834 N. Curtiswood Lane		Transaction ID: 6561401
City <b>Nashville</b>	State <b>TN</b>	Zip Code <b>37204</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2500.00</b>
Name of Employer <b>HCA, Inc.</b>	Occupation <b>Medical Director</b>	Aggregate Year-to-Date ▼ <b>2500.00</b>
Receipt For: Primary      General Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts TN's Page (optional) .....	<b>3500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 23 / 38  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

Full Name (Last, First, Middle Initial) <b>A. Michael A Reese</b>		Date of Receipt M / D / Y 05 / 26 / 2005
Mailing Address 4800 Taft		Transaction ID: 6561402
City Metairie	State LA	Zip Code 70002
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer HCA, Inc.	Occupation Division CFO	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Jayna Chambers</b>		Date of Receipt M / D / Y 05 / 31 / 2005
Mailing Address 1256 Kensington Rd		Transaction ID: 6565575
City McLean	State VA	Zip Code 22101
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 30.00
Name of Employer FAH	Occupation Lobbyist	Aggregate Year-to-Date ▼ 300.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Chip Kahn</b>		Date of Receipt M / D / Y 05 / 31 / 2005
Mailing Address 4545 N Glebe Road		Transaction ID: 6565576
City Arlington	State VA	Zip Code 22207
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 416.67
Name of Employer FAH	Occupation President & CEO	Aggregate Year-to-Date ▼ 416.70
Receipt For: Primary      General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) .....	<b>571.67</b>
TOTAL This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 24 / 38  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

Full Name (Last, First, Middle Initial) <b>A. Bonnie Moneyenny</b>		Date of Receipt M / D / Y 05 / 31 / 2005
Mailing Address 141 28 Burlingame Road		Transaction ID: 6565578
City Little Rock	State AR	Zip Code 72211
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer FAH	Occupation SVP Administrative Services	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Douglas D Mairns</b>		Date of Receipt M / D / Y 05 / 31 / 2005
Mailing Address 3105 Collie Lane		Transaction ID: 6565579
City Falls Church	State VA	Zip Code 22044
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 42.00
Name of Employer FAH	Occupation Controller	Aggregate Year-to-Date ▼ 420.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Jim Fitzgerald</b>		Date of Receipt M / D / Y 05 / 31 / 2005
Mailing Address 28 Bosley Oaks		Transaction ID: 6565581
City Nashville	State TN	Zip Code 37205
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2500.00
Name of Employer HCA, Inc.	Occupation SVP, Supply Chain	Aggregate Year-to-Date ▼ 2500.00
Receipt For: Primary      General Other (specify) ▼		

SUBTOTAL of Receipts TN's Page (optional) .....	▶	<b>2567.00</b>
TOTAL This Period (last page this line number only) .....	▶	



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

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

FOR LINE NUMBER: PAGE 25 / 38  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial) <b>A. William D Poteet, III</b>		Date of Receipt M / D / Y Y Y Y 05 / 31 / 2005
Mailing Address 4013 Inwood Road		Transaction ID: 6565582
City	State	Zip Code
FtWorth	TX	76109-2604
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1500.00
Name of Employer HCA, Inc.	Occupation President-North Texas Division	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) <b>B. M L Legarde, III</b>		Date of Receipt M / D / Y Y Y Y 05 / 31 / 2005
Mailing Address One Rosa Park Place		Transaction ID: 6565583
City	State	Zip Code
New Orleans	LA	70115
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1500.00
Name of Employer HCA, Inc.	Occupation President-Delta Division	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) <b>C. William P Rutledge</b>		Date of Receipt M / D / Y Y Y Y 05 / 31 / 2005
Mailing Address 9156 Saddlebow Drive		Transaction ID: 6565584
City	State	Zip Code
Brentwood	TN	37027
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1500.00
Name of Employer HCA, Inc.	Occupation Hospital Management	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

SUBTOTAL of Receipts This Page (optional) .....	<b>4500.00</b>
TOTAL This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 26 / 38

(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)  
FEDERATION OF AMERICAN HOSPITALS PAC

Full Name (Last, First, Middle Initial) <b>A. Bryan R Rogers</b>		Date of Receipt M / D / Y 05 / 31 / 2005	
Mailing Address 138D4 Outlook		Transaction ID: 6565585	
City Overland Park	State KS	Zip Code 66223	Amount of Each Receipt this Period 1500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer HCA, Inc.	Occupation President-Midwest Division	Aggregate Year-to-Date ▼ 1500.00	
Receipt For: Primary      General Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Jill Fairter</b>		Date of Receipt M / D / Y 05 / 31 / 2005	
Mailing Address 5224 Ravens Glen		Transaction ID: 6565586	
City Nashville	State TN	Zip Code 37211	Amount of Each Receipt this Period 600.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer HCA, Inc.	Occupation VP-Quality Standards	Aggregate Year-to-Date ▼ 600.00	
Receipt For: Primary      General Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Thomas C Gemley</b>		Date of Receipt M / D / Y 05 / 31 / 2005	
Mailing Address 231D Hampton Avenue		Transaction ID: 6565587	
City Nashville	State TN	Zip Code 37215	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer HCA, Inc.	Occupation Hospital Management	Aggregate Year-to-Date ▼ 500.00	
Receipt For: Primary      General Other (specify) ▼			

SUBTOTAL of Receipts TN's Page (optional) .....	<b>2600.00</b>
TOTAL This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 27 / 38

(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)  
FEDERATION OF AMERICAN HOSPITALS PAC

Full Name (Last, First, Middle Initial) <b>A. James D'Hinton</b>		Date of Receipt M / D / Y 05 / 31 / 2005
Mailing Address 9181 Hunterboro Drive		Transaction ID: 6565588
City Brentwood	State TN	Zip Code 37027
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer HCA, Inc.	Occupation VP-Risk & Insurance	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Greg D'Argonne</b>		Date of Receipt M / D / Y 05 / 31 / 2005
Mailing Address 28 Lark Bunting Lane		Transaction ID: 6565589
City Littleton	State CO	Zip Code 80127-5778
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer HCA, Inc.	Occupation Division CFO	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Donald Street, Jr.</b>		Date of Receipt M / D / Y 05 / 31 / 2005
Mailing Address 7913 Saddle Ridge Trace		Transaction ID: 6565590
City Nashville	State TN	Zip Code 37221
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer HCA, Inc.	Occupation Chief Accounting Officer	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary      General Other (specify) ▼		

SUBTOTAL of Receipts TN's Page (optional) .....	▶	<b>1500.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:        PAGE 28 / 38  
(check only one)  
 11a     11b     11c     12  
           13       14       15       16       17

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

Full Name (Last, First, Middle Initial) <b>A. Steven E Clifton</b>		Date of Receipt M / D / Y 05 / 31 / 2005
Mailing Address 510 Locke Court		Transaction ID: 6565596
City Brentwood	State TN	Zip Code 37027
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer HCA, Inc.	Occupation VP-Legal Operations	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Jane D Englebright</b>		Date of Receipt M / D / Y 05 / 31 / 2005
Mailing Address 241 Gillette Drive		Transaction ID: 6565597
City Franklin	State TN	Zip Code 37069-4115
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer HCA, Inc.	Occupation Hospital Management	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Sandra J Metzler</b>		Date of Receipt M / D / Y 05 / 31 / 2005
Mailing Address 6573 Rolling Fork Drive		Transaction ID: 6565600
City Nashville	State TN	Zip Code 37205
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer HCA, Inc.	Occupation Vice President	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary      General Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts TN's Page (optional) .....	<b>1500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:        PAGE 28 / 38  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial) <b>A. Roger S Hendy</b>		Date of Receipt M / D / Y 05 / 31 / 2005
Mailing Address 819 Post Oak Circle		Transaction ID: 6565601
City Brentwood	State TN	Zip Code 37027-5188
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer HCA, Inc.	Occupation Hospital Management	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Susan N Postal</b>		Date of Receipt M / D / Y 05 / 31 / 2005
Mailing Address 514B Brittany Drive		Transaction ID: 6565685
City Old Hickory	State TN	Zip Code 37138
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer HCA, Inc.	Occupation VP-Health Info Mgt Services	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Ronald L Grubbs, Jr.</b>		Date of Receipt M / D / Y 05 / 31 / 2005
Mailing Address 302B 23rd Avenue South		Transaction ID: 6565823
City Nashville	State TN	Zip Code 37215
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer HCA, Inc.	Occupation VP-Chief Tax Officer	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary      General Other (specify) ▼		

SUBTOTAL of Receipts TN's Page (optional) .....	▶	<b>1250.00</b>
TOTAL This Period (last page this line number only) .....	▶	<b>64827.34</b>

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

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

FOR LINE NUMBER: PAGE 30 / 38

(check only one)

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

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

Full Name (Last, First, Middle Initial) A. LifePoint Hospitals, Inc. Good Government Fund		Date of Receipt M / D / Y 05 / 13 / 2005
Mailing Address 103 Powell Court Suite 200		Transaction ID: 6103845
City Brentwood	State TN	Zip Code 37027
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	5000.00
TOTAL This Period (last page this line number only) .....	▶	5000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 31 / 38

<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)  
FEDERATION OF AMERICAN HOSPITALS PAC

Full Name (Last, First, Middle Initial)  
A. Congressman Joe Barton Committee, The

Mailing Address P.O. Box 1444

City Ennis State TX Zip Code 75120

Purpose of Disbursement

Candidate Name  
Rep. Joe L. Barton

Office Sought:  House  
Senate  
President  
State: TX District 6

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 6524777  
Date of Disbursement

05 / 03 / 2005

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)  
B. Mary Bono Committee

Mailing Address P.O. Box 3370

City Palm Springs State CA Zip Code 02263

Purpose of Disbursement

Candidate Name  
Rep. Mary Bono

Office Sought:  House  
Senate  
President  
State: CA District 45

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 6524775  
Date of Disbursement

05 / 03 / 2005

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)  
C. Congressional Majority Committee

Mailing Address PO Box 746

City Bakersfield State CA Zip Code 93302

Purpose of Disbursement

Political Contribution  
Candidate Name

Office Sought: House  
Senate  
President  
State: District

Disbursement For:  
Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 6524773  
Date of Disbursement

05 / 03 / 2005

Amount of Each Disbursement this Period

5000.00

Political Contribution

SUBTOTAL of Disbursements This Page (optional) ▶

11500.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 32 / 38

<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)  
FEDERATION OF AMERICAN HOSPITALS PAC

Full Name (Last, First, Middle Initial)  
A. Mike Pence Committee

Mailing Address P. O. Box 408

City Anderson State IN Zip Code 46015

Purpose of Disbursement

Candidate Name  
Rep. Michael Pence

Office Sought:  House  
 Senate  
 President

State: IN District 6

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 6524776  
Date of Disbursement

05 / 03 / 2005

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)  
B. Friends Of Max Baucus

Mailing Address PO Box 586

City Helena State MT Zip Code 59624

Purpose of Disbursement

Candidate Name  
Sen. Max Baucus

Office Sought:  House  
 Senate  
 President

State: MT District 1

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 6524774  
Date of Disbursement

05 / 03 / 2005

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)  
C. Blue Dog PAC

Mailing Address 238 Massachusetts Avenue NE  
Suite 508

City Washington State DC Zip Code 20002

Purpose of Disbursement

Political Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District

Disbursement For:  
Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 6088058  
Date of Disbursement

05 / 10 / 2005

Amount of Each Disbursement this Period

5000.00

Political Contribution

SUBTOTAL of Disbursements This Page (optional) ▶

11000.00

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



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 33 / 38

<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)  
FEDERATION OF AMERICAN HOSPITALS PAC

Full Name (Last, First, Middle Initial)  
A. Walden For Congress Inc

Mailing Address PO Box 1091

City Hood River State OR Zip Code 97031

Purpose of Disbursement

Candidate Name  
Rep. Greg Walden

Office Sought:  House  
Senate  
President  
State: OR District 2

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 6524798  
Date of Disbursement

05 / 12 / 2005

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)  
B. Friends Of Mark Foley

Mailing Address 1316 Lake Victoria Dr

City Lake Worth State FL Zip Code 33461

Purpose of Disbursement

Candidate Name  
Rep. Mark Foley

Office Sought:  House  
Senate  
President  
State: FL District 16

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 6524782  
Date of Disbursement

05 / 12 / 2005

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)  
C. Friends Of Clay Shaw

Mailing Address P.O. Box 2188

City Fort Lauderdale State FL Zip Code 33303

Purpose of Disbursement

Candidate Name  
Rep. E. Shaw, Jr.

Office Sought:  House  
Senate  
President  
State: FL District 22

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 6524781  
Date of Disbursement

05 / 12 / 2005

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 34 / 38

<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)  
FEDERATION OF AMERICAN HOSPITALS PAC

Full Name (Last, First, Middle Initial)  
A. Joe Wilson For Congress Committee

Mailing Address Post Office Box 2145

City State Zip Code  
West Columbia SC 29171

Purpose of Disbursement

Candidate Name  
Rep. Joe Wilson

Office Sought:  House  
Senate  
President  
State: SC District: 2

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 6524795  
Date of Disbursement

05 / 12 / 2005

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)  
B. Tim Murphy For Congress

Mailing Address 128 North Columbus Street

City State Zip Code  
Alexandria VA 22314

Purpose of Disbursement

Candidate Name  
Rep. Tim Murphy

Office Sought:  House  
Senate  
President  
State: PA District: 18

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 6524797  
Date of Disbursement

05 / 12 / 2005

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)  
C. IRL PAC

Mailing Address P.O. Box 10480

City State Zip Code  
Burke VA 22009

Purpose of Disbursement

Political Contribution  
Candidate Name

Office Sought: House  
Senate  
President  
State: District

Disbursement For:  
Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 6524784  
Date of Disbursement

05 / 12 / 2005

Amount of Each Disbursement this Period

1000.00

Political Contribution

SUBTOTAL of Disbursements This Page (optional) ▶

3500.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 35 / 38

<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)  
FEDERATION OF AMERICAN HOSPITALS PAC

Full Name (Last, First, Middle Initial)  
A. People For English

Mailing Address PO Box 1940

City Erie State PA Zip Code 16507

Purpose of Disbursement

Candidate Name  
Rep. Phil English

Office Sought:  House  
Senate  
President  
State: PA District 3

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 6524796  
Date of Disbursement

05 / 12 / 2005

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)  
B. Bill Thomas Campaign Committee

Mailing Address PO Box 395

City Bakersfield State CA Zip Code 93302

Purpose of Disbursement

Candidate Name  
Rep. William Thomas

Office Sought:  House  
Senate  
President  
State: CA District 22

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 6524776  
Date of Disbursement

05 / 12 / 2005

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)  
C. Carper For Senate

Mailing Address 428 C Street NE

City Washington State DC Zip Code 20002

Purpose of Disbursement

Candidate Name  
Sen. Thomas Carper

Office Sought: House  
 Senate  
President  
State: DE District 2

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 6524806  
Date of Disbursement

05 / 24 / 2005

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

5500.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 36 / 38

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

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

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

Full Name (Last, First, Middle Initial)  
A. Earl Pomeroy For Congress

Mailing Address P.O. Box 746

City Bismarck State ND Zip Code 58502

Purpose of Disbursement

Candidate Name  
Rep. Earl Pomeroy

Office Sought:  House  
 Senate  
 President

State: ND District 1

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 6524808  
Date of Disbursement

05 / 24 / 2005

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)  
B. Chafee For Senate

Mailing Address PO Box 7329

City Warwick State RI Zip Code 02887

Purpose of Disbursement

Candidate Name  
Sen. Lincoln Chafee

Office Sought:  House  
 Senate  
 President

State: RI District 2

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 6524807  
Date of Disbursement

05 / 24 / 2005

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)  
C. LEEPAC (Leadership Encouraging Excellence PAC)

Mailing Address 4451 Brookfield Corporate Drive  
Suite 200

City Chantilly State VA Zip Code 20151

Purpose of Disbursement

Political Contribution

Candidate Name

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

State: District

Disbursement For:  
Primary General  
Other (specify) ▼

Transaction ID: 6560583  
Date of Disbursement

05 / 26 / 2005

Amount of Each Disbursement this Period

5000.00

Political Contribution

SUBTOTAL of Disbursements This Page (optional) ▶

7000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)  
FEDERATION OF AMERICAN HOSPITALS PAC

Full Name (Last, First, Middle Initial)  
A. Friends Of Zach Wamp

Mailing Address P.O. Box 24804

City Chattanooga State TN Zip Code 37422

Purpose of Disbursement

Candidate Name  
Rep. Zach Wamp

Office Sought:  House  
Senate  
President  
State: TN District 3

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 6580582  
Date of Disbursement

05 / 26 / 2005

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)  
B. Buckeye PAC

Mailing Address 1331 H Street NW  
12th Floor

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Political Contribution

Candidate Name

Office Sought: House  
Senate  
President  
State: District

Disbursement For:  
Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 6580580  
Date of Disbursement

05 / 26 / 2005

Amount of Each Disbursement this Period

1000.00

Political Contribution

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

44500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 38 / 38

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

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

Full Name (Last, First, Middle Initial)

A. Wachovia Bank

Mailing Address 801 Pennsylvania Ave, NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought:	House	Disbursement For:	Primary	General
	Senate		Other (specify) ▼	
	President			
State:	District			

001  
Category/  
Type

Transaction ID: 6613971

Date of Disbursement

05 / 31 / 2005

Amount of Each Disbursement this Period

54.94

Bank Fees

SUBTOTAL of Disbursements This Page (optional) ▶ 54.94

TOTAL This Period (last page this line number only) ▶ 54.94