

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

FEDERATION OF AMERICAN HOSPITALS PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>	<input type="text" value="21731.24"/>	<input type="text" value="21731.24"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="51846.70"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="107871.25"/>	<input type="text" value="181925.56"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="159717.95"/>	<input type="text" value="203656.80"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="80960.56"/>	<input type="text" value="125237.63"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="78757.39"/>	<input type="text" value="78419.17"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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)

Write or Type Committee Name

FEDERATION OF AMERICAN HOSPITALS PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	101526.44	148754.86
(ii) Unitemized	0.00	1528.78
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	101526.44	150283.64
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	30000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	106526.44	180283.64
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.).....	1344.81	1641.92
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))..... ▶	107871.25	181925.56
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	107871.25	181925.56

DETAILED SUMMARY PAGE
of Disbursements

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	1460.56	2237.63
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1460.56	2237.63
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	79500.00	123000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	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)) ..	80960.56	125237.63
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	80960.56	125237.63

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)	106526.44	180283.64
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	106526.44	180283.64
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1460.56	2237.63
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1460.56	2237.63

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

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

FOR LINE NUMBER: PAGE 6 OF 48
(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)
A. Ms. Janet Gilmore

Mailing Address 3410 Marlborough Ave.

City State Zip Code
Nashville TN 37212-3202

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

Name of Employer Occupation
HCA, Inc. VP of HR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2013
Transaction ID : 51603264

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Ms. Sandra L. Morgan

Mailing Address 105 Clarendon Ave.

City State Zip Code
Nashville TN 37205-3301

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

Name of Employer Occupation
HCA, Inc. VP, Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2013
Transaction ID : 51603265

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. R Warren Tardy

Mailing Address 1934 Old Hickory Blvd

City State Zip Code
Brentwood TN 37027-4012

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

Name of Employer Occupation
HCA, Inc. healthcare

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2013
Transaction ID : 51603266

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**

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

FOR LINE NUMBER: PAGE 7 OF 48
(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)
A. Mr. Ken Roth

Mailing Address 131 Blue Ridge Drive

City Hendersonville State TN Zip Code 37075-2666

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

Name of Employer HCA, Inc. Occupation AVP - Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2013
Transaction ID : 51603267

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Mark J Eddy

Mailing Address 413 Benton Lane

City Franklin State TN Zip Code 37067

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

Name of Employer HCA, Inc. Occupation VP Internal Audit

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2013
Transaction ID : 51603268

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Mr. John Crothers

Mailing Address 9404 Chesapeake Drive

City Brentwood State TN Zip Code 37027-7483

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

Name of Employer HCA, Inc. Occupation VP Corp. Accounting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2013
Transaction ID : 51603269

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

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

FOR LINE NUMBER: PAGE 8 OF 48
(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

A. Mr. Gregg Stanley
 Full Name (Last, First, Middle Initial)
 Mailing Address 849 Abington Way
 City State Zip Code
 Franklin TN 37069-7161
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HCA, Inc. VP-Rehab Services
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2013
Transaction ID : 51603270
 Amount of Each Receipt this Period
 500.00

B. R. Milton Johnson
 Full Name (Last, First, Middle Initial)
 Mailing Address 5012 Hill Place Drive
 City State Zip Code
 Nashville TN 37205-2705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HCA, Inc. President and CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2013
Transaction ID : 51603271
 Amount of Each Receipt this Period
 5000.00

C. Mr. Joe A. Sowell III
 Full Name (Last, First, Middle Initial)
 Mailing Address 2501 Belmont Blvd.
 City State Zip Code
 Nashville TN 37212-5505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HCA, Inc. SVP of Development
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2013
Transaction ID : 51603272
 Amount of Each Receipt this Period
 2500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 8000.00
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)	PAGE 9 OF 48
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. David G Anderson
 Full Name (Last, First, Middle Initial)
 Mailing Address 1057 Vaughn Crest Drive
 City Franklin State TN Zip Code 37069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HCA, Inc. Occupation SVP Finance & Treasurer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 03 / 2013
Transaction ID : 51603273
 Amount of Each Receipt this Period 2500.00

B. Matthew Edman
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Lealand Court
 City Nashville State TN Zip Code 37204-4006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HCA, Inc. Occupation AVP- Internal Audit
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 03 / 2013
Transaction ID : 51603274
 Amount of Each Receipt this Period 250.00

C. Michael P Joyce
 Full Name (Last, First, Middle Initial)
 Mailing Address 2562 Millstone Plantation Road
 City Tallahassee State FL Zip Code 32312-3892
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HCA North Florida Division Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 06 / 03 / 2013
Transaction ID : 51603275
 Amount of Each Receipt this Period 1500.00

SUBTOTAL of Receipts This Page (optional).....▶	4250.00
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:	PAGE 10 OF 48
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Gregory W Beasley		Date of Receipt MM / DD / YYYY 06 / 03 / 2013 Transaction ID : 51603276
Mailing Address 6314 Northwood Road		Amount of Each Receipt this Period 1500.00
City Dallas	State TX	Zip Code 75225-2823
FEC ID number of contributing federal political committee. C		
Name of Employer HCA, Inc.	Occupation Healthcare Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) B. Greg D'Argonne		Date of Receipt MM / DD / YYYY 06 / 03 / 2013 Transaction ID : 51603277
Mailing Address 28 Lark Bunting Lane		Amount of Each Receipt this Period 500.00
City Littleton	State CO	Zip Code 80127-5778
FEC ID number of contributing federal political committee. C		
Name of Employer HCA, Inc.	Occupation CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Mr. Paul M. Connelly		Date of Receipt MM / DD / YYYY 06 / 03 / 2013 Transaction ID : 51603278
Mailing Address 848 Lakemont Drive		Amount of Each Receipt this Period 250.00
City Nashville	State TN	Zip Code 37220-2124
FEC ID number of contributing federal political committee. C		
Name of Employer HCA, Inc.	Occupation VP/ CISO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	2250.00
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: PAGE 11 OF 48
(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)
A. Jayne Chambers

Mailing Address 1256 Kensington Rd

City State Zip Code
McLean VA 22101-2920

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

Name of Employer Occupation
FAH Senior Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
880.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2013
Transaction ID : 51603330

Amount of Each Receipt this Period
80.00

Full Name (Last, First, Middle Initial)
B. Jeffrey E. Cohen

Mailing Address 4927 15th Street, North

City State Zip Code
Arlington VA 22205-2616

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

Name of Employer Occupation
FAH Lobbyist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
462.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2013
Transaction ID : 51603331

Amount of Each Receipt this Period
42.00

Full Name (Last, First, Middle Initial)
C. Charles N. Kahn III

Mailing Address 4545 N Glebe Road

City State Zip Code
Arlington VA 22207-4848

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

Name of Employer Occupation
FAH President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
458.37

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2013
Transaction ID : 51603332

Amount of Each Receipt this Period
41.67

SUBTOTAL of Receipts This Page (optional)..... ▶ 163.67

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)	PAGE 12 OF 48
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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. Jeffrey G. Micklos

Mailing Address 3130 Tennyson St., N.W.

City Washington State DC Zip Code 20015

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

Name of Employer FAH Occupation General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **605.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 03 / 2013

Transaction ID : 51603333

Amount of Each Receipt this Period
55.00

Full Name (Last, First, Middle Initial)
B. Bonnie Money Penny

Mailing Address 14128 Burlingame Road

City Little Rock State AR Zip Code 72211

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

Name of Employer FAH Occupation SVP Administrative Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **385.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 03 / 2013

Transaction ID : 51603334

Amount of Each Receipt this Period
35.00

Full Name (Last, First, Middle Initial)
C. Mr. Steve Speil

Mailing Address 1948 Rockingham Street

City McLean State VA Zip Code 22101-4922

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

Name of Employer FAH Occupation Chief Financial Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **930.05**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
06 / 03 / 2013

Transaction ID : 51603335

Amount of Each Receipt this Period
84.55

SUBTOTAL of Receipts This Page (optional).....▶	174.55
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: PAGE 13 OF 48
(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)
A. Mr. Mitch Tibbitts

Mailing Address 1017 Whisperwood Cove

City State Zip Code
Kaysville UT 84037-2835

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

Name of Employer Occupation
HCA Mountain Division Division CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 04 / 2013
Transaction ID : 51603356

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Mr. Bob Marchesini

Mailing Address 1809 Legacy Cove Lane

City State Zip Code
Brentwood TN 37027-3826

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

Name of Employer Occupation
HCA, Inc. VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 04 / 2013
Transaction ID : 51603357

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Mr. David Hughes

Mailing Address 9220 Foxboro Drive

City State Zip Code
Brentwood TN 37027-6123

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

Name of Employer Occupation
HCA, Inc. AVP, Enterprise Risk Mgmt.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 04 / 2013
Transaction ID : 51603358

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 48
	<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

A. John D Cleeton Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 1527 Gordon Petty Dr.

City State Zip Code
Brentwood TN 37027-7336

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

Name of Employer Occupation
HCA, Inc. AVP-Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
06 / 04 / 2013
Transaction ID : 51603359

Amount of Each Receipt this Period
250.00

B. Trevor Fetter
Full Name (Last, First, Middle Initial)

Mailing Address 3821 Beverly Drive

City State Zip Code
Highland Park TX 75205

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

Name of Employer Occupation
Tenet Healthcare Corporation President and CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
06 / 04 / 2013
Transaction ID : 51603360

Amount of Each Receipt this Period
5000.00

C. Ms. Norma Zeringue
Full Name (Last, First, Middle Initial)

Mailing Address 5757 Southwestern Blvd.

City State Zip Code
Dallas TX 75209-3437

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

Name of Employer Occupation
Conifer Revenue Cycle SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
06 / 04 / 2013
Transaction ID : 51604222

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 5750.00

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: PAGE 15 OF 48
(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)
A. Mr. Thomas G. Morris

Mailing Address 1672 Highfield Lane

City State Zip Code
Brentwood TN 37027-3318

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

Name of Employer Occupation
HCA, Inc. AVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
06 / 04 / 2013
Transaction ID : 51604223

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Ms. Nancy G. Meadows

Mailing Address 400 Augusta

City State Zip Code
Boerne TX 78006-6120

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

Name of Employer Occupation
Methodist Healthcare System CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
06 / 04 / 2013
Transaction ID : 51604224

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Mr. Peter Marmorstein

Mailing Address 640 Ponce De Leon Blvd.

City State Zip Code
Belleair FL 33756-1086

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

Name of Employer Occupation
HCA, Inc. Division President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
06 / 04 / 2013
Transaction ID : 51604225

Amount of Each Receipt this Period
1500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2250.00

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: PAGE 16 OF 48
(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)
A. Michael A Marks

Mailing Address 6115 Hillsboro Pike

City Nashville State TN Zip Code 37215-5005

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

Name of Employer HCA, Inc. Occupation Chief Financial Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2013
Transaction ID : 51604226

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
B. Sharon Schweinhart

Mailing Address 430 Prestwick CT

City Nashville State TN Zip Code 37205-5016

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

Name of Employer HCA, Inc. Occupation Managing Counsel

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 / 04 / 2013
Transaction ID : 51604227

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Mr. Rodney V. Bennett

Mailing Address 5720 Traceside Drive

City Nashville State TN Zip Code 37221-4016

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

Name of Employer HCA, Inc. Occupation AVP

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 / 04 / 2013
Transaction ID : 51604228

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3250.00

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)	PAGE 17 OF 48
	<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

A. Mr. Steven N. Squires
Full Name (Last, First, Middle Initial)

Mailing Address 125 S. Buteo Woods Lane

City Las Vegas State NV Zip Code 89144-4352

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

Name of Employer HCA, Inc. Occupation Far West Division CFO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 04 / 2013
Transaction ID : 51604229

Amount of Each Receipt this Period 500.00

B. Thomas Beck
Full Name (Last, First, Middle Initial)

Mailing Address 31 Northumberland

City Nashville State TN Zip Code 37215-4123

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

Name of Employer VP, Labor Relations Occupation VP, Labor Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 04 / 2013
Transaction ID : 51604230

Amount of Each Receipt this Period 1000.00

C. Mr. Doug Downey
Full Name (Last, First, Middle Initial)

Mailing Address 100 Qualls Court

City Springfield State TN Zip Code 37172-4702

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

Name of Employer HCA, Inc. Occupation AVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 04 / 2013
Transaction ID : 51604231

Amount of Each Receipt this Period 250.00

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 48
	<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

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

A. Ravi Chari
Full Name (Last, First, Middle Initial)

Mailing Address 1209 Canterbury Drive

City Nashville State TN Zip Code 37205-4409

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

Name of Employer HCA, Inc. Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2013
Transaction ID : 51622073

Amount of Each Receipt this Period
 500.00

B. Mr. Michael Houston
Full Name (Last, First, Middle Initial)

Mailing Address 11340 NW 77th Place

City Parkland State FL Zip Code 33076

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

Name of Employer HCA East Florida Division Occupation CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2013
Transaction ID : 51622074

Amount of Each Receipt this Period
 500.00

C. Vic Campbell
Full Name (Last, First, Middle Initial)

Mailing Address 1307 Chickering Road

City Nashville State TN Zip Code 37215-4521

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

Name of Employer HCA, Inc. Occupation Senior Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2013
Transaction ID : 51622075

Amount of Each Receipt this Period
 5000.00

SUBTOTAL of Receipts This Page (optional).....▶	6000.00
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)	PAGE 19 OF 48
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Mr. David D. Dill
 Full Name (Last, First, Middle Initial)
 Mailing Address 605 Westview Ave
 City Nashville State TN Zip Code 37205-3825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LifePoint Hospitals, Inc Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2013
Transaction ID : 51622076
 Amount of Each Receipt this Period
 5000.00

B. Mr. Leif Murphy
 Full Name (Last, First, Middle Initial)
 Mailing Address 4909 Maymano Circle
 City Nashville State TN Zip Code 37205-2708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LifePoint Hospitals, Inc Occupation Executive Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2013
Transaction ID : 51622077
 Amount of Each Receipt this Period
 4000.00

C. Mr. Jeffrey Sherman
 Full Name (Last, First, Middle Initial)
 Mailing Address 6043 Robin Hill Road
 City Nashville State TN Zip Code 37205-3227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LifePoint Hospitals, Inc Occupation Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2013
Transaction ID : 51622078
 Amount of Each Receipt this Period
 5000.00

SUBTOTAL of Receipts This Page (optional).....▶	14000.00
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)	PAGE 20 OF 48
	<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

A. Mr. Paul D. Gilbert
Full Name (Last, First, Middle Initial)

Mailing Address 715 Cantrell Ave

City Nashville State TN Zip Code 37215-1022

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

Name of Employer LifePoint Hospitals, Inc Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 06 / 2013
Transaction ID : 51622079

Amount of Each Receipt this Period
1000.00

B. Mr. John P. Bumpus
Full Name (Last, First, Middle Initial)

Mailing Address 6118 Paddock Place

City Brentwood State TN Zip Code 37027-4939

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

Name of Employer LifePoint Hospitals, Inc Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 06 / 2013
Transaction ID : 51622080

Amount of Each Receipt this Period
1000.00

C. William F Carpenter III
Full Name (Last, First, Middle Initial)

Mailing Address 4005 Newman Place

City Nashville State TN Zip Code 37204

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

Name of Employer LifePoint Hospitals, Inc Occupation Chairman, President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 06 / 2013
Transaction ID : 51622081

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 7000.00

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)	PAGE 21 OF 48
	<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. David K. Morgan Jr.

Mailing Address 5208 Shaw Court

City State Zip Code
Brentwood TN 37027-3021

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

Name of Employer Occupation
HCA, Inc. AVP Contracting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 10 / 2013
Transaction ID : 51767643

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Donald W Stinnett

Mailing Address 2520 Waterstone Drive

City State Zip Code
Franklin TN 37069

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

Name of Employer Occupation
HCA, Inc. SVP Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 10 / 2013
Transaction ID : 51767644

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
C. Eric Ward

Mailing Address 9634 Millford Court

City State Zip Code
Brentwood TN 37027-8475

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

Name of Employer Occupation
HCA, Inc. CEO-Business Performance Group

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 10 / 2013
Transaction ID : 51767645

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3250.00

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)	PAGE 22 OF 48
	<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. Mr. David L. Dye

Mailing Address 3006 Golden Eagle Dr. E.

City State Zip Code
Tallahassee FL 32312-4003

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

Name of Employer Occupation
HCA, Inc. Division Chief Financial Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 10 / 2013
Transaction ID : 51767646

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Ms. Kathleen M. Whalen

Mailing Address 2909 Westmoreland Drive

City State Zip Code
Nashville TN 37212-4716

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

Name of Employer Occupation
HCA, Inc. Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 10 / 2013
Transaction ID : 51767647

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
c. MS. Maye Kathryn Stevinson

Mailing Address 4118 Elder Place

City State Zip Code
Nashville TN 37215-1732

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

Name of Employer Occupation
HCA, Inc. VP HR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 11 / 2013
Transaction ID : 51767660

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**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 48
	<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

A. Mr. Robert Bird
Full Name (Last, First, Middle Initial)

Mailing Address 1209 Mt. Vernon Lane

City Mount Juliet State TN Zip Code 37122-2849

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

Name of Employer HCA, Inc. Occupation AVP, MEM

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 / 11 / 2013
Transaction ID : 51767661

Amount of Each Receipt this Period
 250.00

B. Mr. Richard M. Bracken
Full Name (Last, First, Middle Initial)

Mailing Address 920 Tyne Blvd.

City Nashville State TN Zip Code 37220

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

Name of Employer HCA, Inc. Occupation President & Chief Operating Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 11 / 2013
Transaction ID : 51767662

Amount of Each Receipt this Period
 5000.00

C. John W. Hanshaw
Full Name (Last, First, Middle Initial)

Mailing Address 1607 Princenton Ave

City Salt Lake City State UT Zip Code 84105-1737

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

Name of Employer HCA, Inc. Occupation Healthcare Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 11 / 2013
Transaction ID : 51767663

Amount of Each Receipt this Period
 1500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 6750.00

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)	PAGE 24 OF 48
	<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

A. Mr. Paul Diaz
Full Name (Last, First, Middle Initial)

Mailing Address 204 Loganberry Court

City Louisville State KY Zip Code 40207-5713

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

Name of Employer Kindred Healthcare Inc Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2013
Transaction ID : 51767664

Amount of Each Receipt this Period
 5000.00

B. Mr. Jerry Rooker
Full Name (Last, First, Middle Initial)

Mailing Address 338 Gillette Drive

City Franklin State TN Zip Code 37069-4193

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

Name of Employer HCA, Inc. Occupation HCA- Physician Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2013
Transaction ID : 51767665

Amount of Each Receipt this Period
 250.00

C. William M Kimbrough
Full Name (Last, First, Middle Initial)

Mailing Address 6520 Edinburgh Drive

City Nashville State TN Zip Code 37221-3700

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

Name of Employer HCA, Inc. Occupation VP Investor Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2013
Transaction ID : 51767666

Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional).....▶	5750.00
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: PAGE 25 OF 48
(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

A. Stephen E Corbeil
 Full Name (Last, First, Middle Initial)
 Mailing Address 1509 Kimberleigh CT
 City Franklin State TN Zip Code 37069-7226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HCA, Inc. Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 11 / 2013
Transaction ID : 51767667
 Amount of Each Receipt this Period
 1500.00

B. Mr. Alan R. Yuspeh
 Full Name (Last, First, Middle Initial)
 Mailing Address 126 Third Avenue North
 City Franklin State TN Zip Code 37064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HCA, Inc. Occupation SVP and Chief Ethics and Compliance Of
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 11 / 2013
Transaction ID : 51767668
 Amount of Each Receipt this Period
 2500.00

C. Michael O'Boyle
 Full Name (Last, First, Middle Initial)
 Mailing Address 1412 Richland Woods Lane
 City Brentwood State TN Zip Code 37027-4136
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HCA, Inc. Occupation President and CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 11 / 2013
Transaction ID : 51767669
 Amount of Each Receipt this Period
 3000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 7000.00
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)	PAGE 26 OF 48
	<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. Charles J Hall

Mailing Address 2658 Millstone Plantation Road

City Tallahassee	State FL	Zip Code 32312
---------------------	-------------	-------------------

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

Name of Employer HCA, Inc.	Occupation Division President
-------------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		19		2013

Transaction ID : 51829624

Amount of Each Receipt this Period
3000.00

Full Name (Last, First, Middle Initial)
B. Lisa Meister

Mailing Address 1511 Paris Ave

City Nashville	State TN	Zip Code 37212-5930
-------------------	-------------	------------------------

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

Name of Employer HCA, Inc.	Occupation AVP- Claims
-------------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		19		2013

Transaction ID : 51829625

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Mr. Thomas Hinton

Mailing Address 1002 Nealcrest Circle

City Spring Hill	State TN	Zip Code 37174-2689
---------------------	-------------	------------------------

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

Name of Employer HCA, Inc.	Occupation AVP Computer Operations
-------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		19		2013

Transaction ID : 51829626

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	3500.00
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)	PAGE 27 OF 48
	<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

A. Mr. Darrel M. Mogilles
 Full Name (Last, First, Middle Initial)
 Mailing Address 1655 Brentwood Pointe
 City Franklin State TN Zip Code 37067-4605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HCA, Inc. Occupation AVP
 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 / 19 / 2013
Transaction ID : 51829627
 Amount of Each Receipt this Period
 250.00

B. Michael Sarrett
 Full Name (Last, First, Middle Initial)
 Mailing Address 812 Lynn Street
 City Goodlettsville State TN Zip Code 37072-3560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HCA, Inc. Occupation AVP
 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 / 19 / 2013
Transaction ID : 51829628
 Amount of Each Receipt this Period
 250.00

C. Ms. Sylvia Jean Young
 Full Name (Last, First, Middle Initial)
 Mailing Address 5851 S. Colorado Blvd
 City Greenwood Village State CO Zip Code 80121-1903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HCA, Inc. Occupation Division President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 19 / 2013
Transaction ID : 51829629
 Amount of Each Receipt this Period
 1500.00

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
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:	PAGE 28 OF 48
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. Karen H. Thompson

Mailing Address 3100 Kingsmill Court

City State Zip Code
Franklin TN 37064-4276

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

Name of Employer Occupation
HCA, Inc. AVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 19 / 2013
Transaction ID : 51829630

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Mr. Daniel C. Schunk

Mailing Address 1701 Wilson Pk

City State Zip Code
Brentwood TN 37027

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

Name of Employer Occupation
HCA, Inc. VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 24 / 2013
Transaction ID : 51829631

Amount of Each Receipt this Period
350.00

Full Name (Last, First, Middle Initial)
C. Richard Shallcross

Mailing Address 1809 Paxe Gaven

City State Zip Code
Franklin TN 37069

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

Name of Employer Occupation
HCA, Inc. CFO-Western Group

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1750.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 24 / 2013
Transaction ID : 51829632

Amount of Each Receipt this Period
1750.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2350.00

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: PAGE 29 OF 48
(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

A. Mr. John M. Steele
 Full Name (Last, First, Middle Initial)
 Mailing Address 524 Excalibur Ct
 City State Zip Code
 Franklin TN 37067-6498
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HCA, Inc. Senior Vice President, Human Resources
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 24 / 2013
Transaction ID : 51829633
 Amount of Each Receipt this Period
 2500.00

B. Ms. Susan Goodwin
 Full Name (Last, First, Middle Initial)
 Mailing Address 4933 Tulip Grove Lane
 City State Zip Code
 Hermitage TN 37076-4418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HCA, Inc. AVP
 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 / 24 / 2013
Transaction ID : 51829634
 Amount of Each Receipt this Period
 250.00

C. Jonathan H Ray
 Full Name (Last, First, Middle Initial)
 Mailing Address 6002 Belle Rive Drive
 City State Zip Code
 Brentwood TN 37027-5718
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HCA, Inc. Controller
 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 / 24 / 2013
Transaction ID : 51829635
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00
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: PAGE 30 OF 48
(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)
A. Will Morran

Mailing Address 1208 Nichol Lane

City Nashville	State TN	Zip Code 37205-4420
-------------------	-------------	------------------------

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

Name of Employer HCA, Inc.	Occupation VP- Development
-------------------------------	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	24	/	2013

Transaction ID : 51829636

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Terry Bridges

Mailing Address 1215 Deanna Court

City Franklin	State TN	Zip Code 37067-8601
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FEC ID number of contributing federal political committee. **C**

Name of Employer HCA, Inc.	Occupation Healthcare Executive
-------------------------------	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	24	/	2013

Transaction ID : 51829637

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. John M Paul

Mailing Address 5465 Camelot Road

City Brentwood	State TN	Zip Code 37027-4117
-------------------	-------------	------------------------

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

Name of Employer HCA, Inc.	Occupation Chief Financial Officer
-------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	24	/	2013

Transaction ID : 51829638

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**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 48
	<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. A. Bruce Moore Jr.		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 25 / 2013 Transaction ID : 51971314
Mailing Address 2105 Golf Club Lane		Amount of Each Receipt this Period 3000.00
City Nashville	State TN	Zip Code 37215-1223
FEC ID number of contributing federal political committee. C		
Name of Employer HCA, Inc.	Occupation President OSG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) B. Ann G Hatcher		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 25 / 2013 Transaction ID : 51971315
Mailing Address 724 Darden Place		Amount of Each Receipt this Period 500.00
City Nashville	State TN	Zip Code 37205-2612
FEC ID number of contributing federal political committee. C		
Name of Employer HCA, Inc.	Occupation VP Human Resources	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Jana J Davis		Date of Receipt M M M / D D D / Y Y Y Y Y Y 06 / 25 / 2013 Transaction ID : 51971316
Mailing Address 412 Jackson Blvd		Amount of Each Receipt this Period 2500.00
City Nashville	State TN	Zip Code 37205-3426
FEC ID number of contributing federal political committee. C		
Name of Employer HCA, Inc.	Occupation SVP Corp. Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional).....▶	6000.00
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)	PAGE 32 OF 48
	<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

A. Jayne Chambers
Full Name (Last, First, Middle Initial)
Mailing Address 1256 Kensington Rd
City McLean State VA Zip Code 22101-2920
FEC ID number of contributing federal political committee. **C**
Name of Employer FAH Occupation Senior Vice President
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **960.00**

Date of Receipt **06 / 25 / 2013**
Transaction ID : 51971318
Amount of Each Receipt this Period **80.00**

B. Jeffrey E. Cohen
Full Name (Last, First, Middle Initial)
Mailing Address 4927 15th Street, North
City Arlington State VA Zip Code 22205-2616
FEC ID number of contributing federal political committee. **C**
Name of Employer FAH Occupation Lobbyist
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **504.00**

Date of Receipt **06 / 25 / 2013**
Transaction ID : 51971319
Amount of Each Receipt this Period **42.00**

C. Charles N. Kahn III
Full Name (Last, First, Middle Initial)
Mailing Address 4545 N Glebe Road
City Arlington State VA Zip Code 22207-4848
FEC ID number of contributing federal political committee. **C**
Name of Employer FAH Occupation President
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.04**

Date of Receipt **06 / 25 / 2013**
Transaction ID : 51971320
Amount of Each Receipt this Period **41.67**

SUBTOTAL of Receipts This Page (optional)..... **163.67**
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)	PAGE 33 OF 48
	<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. Jeffrey G. Micklos

Mailing Address 3130 Tennyson St., N.W.

City Washington State DC Zip Code 20015

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

Name of Employer FAH Occupation General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **660.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 25 / 2013

Transaction ID : 51971321

Amount of Each Receipt this Period
55.00

Full Name (Last, First, Middle Initial)
B. Mr. Steve Speil

Mailing Address 1948 Rockingham Street

City McLean State VA Zip Code 22101-4922

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

Name of Employer FAH Occupation Chief Financial Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1014.60**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 25 / 2013

Transaction ID : 51971322

Amount of Each Receipt this Period
84.55

Full Name (Last, First, Middle Initial)
C. Bonnie Moneypenny

Mailing Address 14128 Burlingame Road

City Little Rock State AR Zip Code 72211

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

Name of Employer FAH Occupation SVP Administrative Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 25 / 2013

Transaction ID : 51971323

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional).....▶	174.55
TOTAL This Period (last page this line number only).....▶	101526.44

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

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

FOR LINE NUMBER: PAGE 34 OF 48
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

A. LifePoint Hospitals, Inc. Good Government Fund

Full Name (Last, First, Middle Initial)
Mailing Address 103 Powell Court
Suite 200

City Brentwood State TN Zip Code 37027

FEC ID number of contributing federal political committee. **C** C00347955

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 06 / 2013

Transaction ID : 51622082

Amount of Each Receipt this Period
5000.00

2013 Pac to PAC

B.

Full Name (Last, First, Middle Initial)

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

C.

Full Name (Last, First, Middle Initial)

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).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 OF 48
(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)
A. Wachovia Bank

Mailing Address 801 Pennsylvania Ave, NW

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1344.81

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 11 / 2013
Transaction ID : 51767672

Amount of Each Receipt this Period
1344.81

Bank Fee Reimbursement

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).....▶	1344.81
TOTAL This Period (last page this line number only).....▶	1344.81

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" 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 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. Wachovia Bank

Mailing Address 801 Pennsylvania Ave, NW

City Washington State DC Zip Code 20004

Purpose of Disbursement
Bank Fees

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 52173327

Amount of Each Disbursement this Period

Bank Fees

Full Name (Last, First, Middle Initial)

B. Wachovia Bank

Mailing Address 801 Pennsylvania Ave, NW

City Washington State DC Zip Code 20004

Purpose of Disbursement
Bank Fees

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 52173328

Amount of Each Disbursement this Period

Bank Fees

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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)

<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. Pallone For Congress

Mailing Address PO Box 3176

City State Zip Code
Long Branch NJ 07740

Purpose of Disbursement

011

Candidate Name
Rep. Frank Pallone Jr.

Category/
Type

Office Sought: House
 Senate
 President
State: NJ District: 06

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	1	3

Transaction ID : 51607037

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Alexander for Senate

Mailing Address 1130 8th Avenue South

City State Zip Code
Nashville TN 37203

Purpose of Disbursement

011

Candidate Name
Lamar Alexander

Category/
Type

Office Sought: House
 Senate
 President
State: TN District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	1	3

Transaction ID : 51607039

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Friends Of Mary Landrieu Inc

Mailing Address 607 14th Street Nw Suite 800
Suite 1434

City State Zip Code
Washington DC 20005

Purpose of Disbursement

011

Candidate Name
Sen. Mary L. Landrieu

Category/
Type

Office Sought: House
 Senate
 President
State: LA District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	1	3

Transaction ID : 51607041

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

1	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Mike Thompson For Congress

Mailing Address 5429 Madison Avenue

City Sacramento State CA Zip Code 95841

Purpose of Disbursement

011

Candidate Name

Rep. Michael Thompson

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CA District: 01

Date of Disbursement

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

Transaction ID : 51759161

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street, S.E.

City Washington State DC Zip Code 20003

Purpose of Disbursement

011

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : 51759169

Amount of Each Disbursement this Period

5	0	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Marc Veasey Congressional Campaign Committee

Mailing Address PO Box 50084

City Fort Worth State TX Zip Code 76105

Purpose of Disbursement

011

Candidate Name

Rep. Marc Veasey

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TX District: 33

Date of Disbursement

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

Transaction ID : 51759170

Amount of Each Disbursement this Period

2	0	0	.	0	0
---	---	---	---	---	---

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

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

9	5	0	0	.	0	0
---	---	---	---	---	---	---

2	5	0	0	.	0	0
---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Ron Barber For Congress

Mailing Address PO Box 57715

City Tucson State AZ Zip Code 85732

Purpose of Disbursement

011

Candidate Name

Rep. Ron Barber

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: AZ District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	3

Transaction ID : 51830812

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Friends Of John Barrow

Mailing Address PO Box 8166

City Savannah State GA Zip Code 31412

Purpose of Disbursement

011

Candidate Name

Rep. John Barrow

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: GA District: 12

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	3

Transaction ID : 51830814

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Bera For Congress

Mailing Address Post Office Box 582496

City Elk Grove State CA Zip Code 95758

Purpose of Disbursement

011

Candidate Name

Rep. Ami Bera MD

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CA District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	3

Transaction ID : 51830817

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

7	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Friends Of Pete Gallego

Mailing Address PO Box 1781

City San Antonio State TX Zip Code 78296

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Pete Gallego

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TX District: 23

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	3

Transaction ID : 51830819

Amount of Each Disbursement this Period

2	5	0	0	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Patrick Murphy For Congress

Mailing Address P.O. Box 868

City Levittown State PA Zip Code 19058

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Patrick J. Murphy

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: PA District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	3

Transaction ID : 51830822

Amount of Each Disbursement this Period

2	5	0	0	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Patrick Murphy For Congress

Mailing Address P.O. Box 868

City Levittown State PA Zip Code 19058

Purpose of Disbursement
Void - Patrick Murphy For Congress

011

Category/
Type

Candidate Name

Rep. Patrick J. Murphy

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: PA District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	3

Transaction ID : 51831142

Amount of Each Disbursement this Period

-	2	5	0	0	0
---	---	---	---	---	---

Void - Patrick Murphy For Congress

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

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

2	5	0	0	0	0
---	---	---	---	---	---

-	2	5	0	0	0
---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Friends Of Patrick Murphy

Mailing Address 4521 Pga Blvd. #412

City State Zip Code
Palm Beach Gardens FL 33418

Purpose of Disbursement

011
Category/
Type

Candidate Name

Rep. Patrick Murphy

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: FL District: 18

Date of Disbursement

/ /

Transaction ID : 51831143

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Tom Reed For Congress

Mailing Address PO Box 450

City State Zip Code
Victor NY 14564

Purpose of Disbursement

011
Category/
Type

Candidate Name

Rep. Tom Reed

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NY District: 23

Date of Disbursement

/ /

Transaction ID : 51964360

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Levin For Congress

Mailing Address PO Box 37

City State Zip Code
Roseville MI 48066

Purpose of Disbursement

011
Category/
Type

Candidate Name

Rep. Sander M. Levin

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MI District: 12

Date of Disbursement

/ /

Transaction ID : 51971288

Amount of Each Disbursement this Period

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

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)

<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. Searchlight Leadership Fund

Mailing Address 422 C street, NE
Lower Level

City Washington State DC Zip Code 20002

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2013

Transaction ID : 51971498

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Doggett For Us Congress

Mailing Address PO Box 5843

City Austin State TX Zip Code 78763

Purpose of Disbursement

Candidate Name

Rep. Lloyd Doggett

Office Sought: House Senate President
State: TX District: 25

Disbursement For: 2014 Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2013

Transaction ID : 51971502

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Udall For Us All

Mailing Address PO Box 25766

City Albuquerque State NM Zip Code 87125

Purpose of Disbursement

Candidate Name

Sen. Tom Udall

Office Sought: House Senate President
State: NM District:

Disbursement For: 2014 Primary General Other (specify) ▼

011
Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2013

Transaction ID : 51971507

Amount of Each Disbursement this Period

1000.00

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

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

5500.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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. Lindsey Graham For Senate

Mailing Address PO Box 1155

City Seneca State SC Zip Code 29679

Purpose of Disbursement

011

Candidate Name

Sen. Lindsey Graham

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: SC District:

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2013

Transaction ID : 51971514

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Dr. Raul Ruiz For Congress

Mailing Address PO Box 6116

City La Quinta State CA Zip Code 92248

Purpose of Disbursement

011

Candidate Name

Rep. Raul Ruiz MD

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CA District: 36

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2013

Transaction ID : 51971517

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Matheson For Congress

Mailing Address P.O. Box 521048
Suite A

City Salt Lake City State UT Zip Code 84152

Purpose of Disbursement

011

Candidate Name

Rep. James D. Matheson

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: UT District: 02

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2013

Transaction ID : 51971524

Amount of Each Disbursement this Period

2500.00

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

4500.00

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)

<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. Welch For Congress

Mailing Address PO Box 1682

City Burlington State VT Zip Code 05402

Purpose of Disbursement

011

Candidate Name

Rep. Peter Welch

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: VT District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	1	3

Transaction ID : 51971532

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Becerra For Congress

Mailing Address P.O. Box 261060

City Los Angeles State CA Zip Code 90026

Purpose of Disbursement

011

Candidate Name

Rep. Xavier Becerra

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CA District: 31

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	1	3

Transaction ID : 51971535

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Scott Peters For Congress

Mailing Address PO Box 70980

City Washington State DC Zip Code 20024

Purpose of Disbursement

011

Candidate Name

Rep. Scott Peters

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CA District: 52

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	1	3

Transaction ID : 51971538

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

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

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

4	5	0	0	0	0	0	0	0	0

1	0	0	0	0	0	0	0	0	0

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Duffy For Congress

Mailing Address PO Box 186

City Ashland State WI Zip Code 54806

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Sean Duffy

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: WI District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	1	3

Transaction ID : 51971541

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Mark Pryor For Us Senate

Mailing Address PO Box 2720

City Little Rock State AR Zip Code 72203

Purpose of Disbursement

011

Category/
Type

Candidate Name

Sen. Mark L. Pryor

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: AR District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	1	3

Transaction ID : 51971545

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Friends Of Jeanne Shaheen

Mailing Address PO Box 1510

City Manchester State NH Zip Code 03105

Purpose of Disbursement

011

Category/
Type

Candidate Name

Jeanne Shaheen

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NH District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	1	3

Transaction ID : 51971550

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

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

4	5	0	0	0	0	0	0	0	0

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

4	5	0	0	0	0	0	0	0	0

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. HellerHigh Water PAC

Mailing Address P.O. Box 370672

City Las Vegas State NV Zip Code 89137

Purpose of Disbursement

011

Candidate Name

HellerHigh Water PAC

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2013

Transaction ID : 51971556

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Devin Nunes Campaign Committee

Mailing Address PO Box 6545

City Visalia State CA Zip Code 93290

Purpose of Disbursement

011

Candidate Name

Rep. Devin G. Nunes

Category/
Type

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify) ▼

State: CA District: 21

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2013

Transaction ID : 51971558

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. John Lewis For Congress

Mailing Address PO Box 2323
Suite 5300

City Atlanta State GA Zip Code 30301

Purpose of Disbursement

011

Candidate Name

Rep. John Lewis

Category/
Type

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify) ▼

State: GA District: 05

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2013

Transaction ID : 51971560

Amount of Each Disbursement this Period

1000.00

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

5000.00

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)

<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. Friends Of Jeanne Shaheen

Mailing Address PO Box 1510

City Manchester State NH Zip Code 03105

Purpose of Disbursement

011

Candidate Name

Jeanne Shaheen

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NH District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	1	3

Transaction ID : 51971562

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. New Democrat Coalition PAC

Mailing Address 607 14th Street, N.W.
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	1	3

Transaction ID : 51971563

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Hoyer For Congress

Mailing Address 607 14th Street, Nw
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement

011

Candidate Name

Rep. Steny H. Hoyer

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MD District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	1	3

Transaction ID : 51971830

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

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

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

7	0	0	0	0	0	0	0	0	0

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. AMERIPAC: THE FUND FOR A GREATER AMERICA

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2013

Mailing Address 499 S. Capitol Street, SW
#414

City Washington State DC Zip Code 20003

Transaction ID : 51971848

Purpose of Disbursement

011
Category/ Type

Amount of Each Disbursement this Period

5000.00

Candidate Name

AMERIPAC: THE FUND FOR A GREATER AMERICA

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. OrrinPAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2013

Mailing Address P.O. Box 1480

City Washington State DC Zip Code 20013-1480

Transaction ID : 51971863

Purpose of Disbursement

011
Category/ Type

Amount of Each Disbursement this Period

2500.00

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Duffy For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2013

Mailing Address PO Box 186

City Ashland State WI Zip Code 54806

Transaction ID : 51972024

Purpose of Disbursement
Void - Duffy For Congress

011
Category/ Type

Amount of Each Disbursement this Period

-1000.00

Candidate Name

Mr. Sean Duffy

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: WI District: 07

Void - Duffy For Congress

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

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

6500.00

79500.00
