05/12/2010 17:53

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### **FEC** FORM 3X

Office

Use

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### REPORT OF RECEIPTS **AND DISBURSE**

FURM3X I	AND DISBURSEMENTS For Other Than An Authorized Committee	
	USE FEC MAILING LABEL OR TYPE OR PRINT Sover the lines	Office Use Only
American Hospital Association	n PAC	
ADDRESS (number and street)	325 Seventh Street, NW	
Check if different than previously reported. (ACC)	Suite 700  Washington	DC 20004 -
2. FEC IDENTIFICATION NUM	BER ♥ CITY ▲ ST	TATE▲ ZIPCODE ▲
C00106146	3. IS THIS REPORT (N) OR	X AMENDED (A)
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:  April 15 Quarterly Report(Q1 July 15 Quarterly Report(Q2 October 15 Quarterly Report(Q3 January 31 Quarterly Report(YE July 31 Mid-Year Report(Non-election Year Only) (MY)  Termination Report (TER)	(c) 12-Day Primary (12P) PRE-Election Report for the: Convention (12C)  Election on	Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  Dec 20 (M12) (Non-Election Year Only)  Oct 20 (M10)  X Jan 31 (YE)  General (12G)  Runoff (12R)  Special (12G)  in the State of  Runoff (30R)  Special (30S)  in the State of
5. Covering Period 12  I certify that I have examined this R  Type or Print Name of Treasurer	eport and to the best of my knowledge and belief it is true, correct an  Ms. Melinda Hatton	3 1 2 0 0 9 and complete.
	ically Filed by Ms. Melinda Hatton Dat	ne 05 12 2010
NOTE : Submission of false, erron	eous, or incomplete information may subject the person signing this I	Report to the penalties of 2 U.S.C 437g.

**FEC FORM 3X** 

(Rev. 12/2004)

FE6AN026

## **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

2/194

Write or Type Committee Name American Hospital Association PAC

FEC Form 3X (Rev. 02/2003)

D " D 12 0 1 2009 12 31 2009 From: Report Covering the Period: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2009° 1339674.06 January 1 (b) Cash on Hand at 2014391.68 Begining of Reporting Period ..... 280116.30 1917534.53 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 2294507.98 3257208.59 6(a) and 6(c) for Column B) ..... 103660.80 1066361.41 Total Disbursements (from Line 31) ..... Cash on Hand at Close of Reporting Period 2190847.18 2190847.18 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) .....

X 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) 3 / 194

Write or Type Committee Name
American Hospital Association PAC

Report Covering the Period:

From: M M 1 2

01

2009

то.

м м 1 2 D D 31

<sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> 2009

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) From:  a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	142545.45	875269.05
	(ii) Unitemized	83428.09	407907.02
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	225973.54	1283176.07
	b) Political Party Committees	0.00	0.00
	c) Other Political Committees (such as PACs) d) Total Contributions (add Lines	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	225973.54	1283176.07
	ransfers From Affiliated/Other Party Committees	53865.00	609075.00
3. <i>P</i>	All Loans Received	0.00	0.00
	oan Repayments Received  Offsets To Operating Expenditures	0.00	0.00
Ì	Refunds, Rebates, etc.) Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
to	o Federal candidates and Other Political Committees	0.00	22000.00
	Other Federal Receipts Dividends, Interest, etc.)	277.76	3283.46
	Fransfers from Non-Federal and Levin Funds		
(;	a) Non-Federal Account (from Schedule H3)	0.00	0.00
(1	b) Levin Funds (from Schedule H5)	0.00	0.00
(0	c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
	otal Receipts (add Lines 11(d), 2, 13, 14, 15, 16, 17, and 18(c))	280116.30	1917534.53
	otal Federal Receipts subtract Line 18(c) from Line 19)	280116.30	1917534.53

### **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 194

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures:  (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	410.80	6302.22
	Expenditures(c) Total Operating Expenditures	410.00	0002.22
	(add 21(a)(i), (a)(ii) and (b))	410.80	6302.22
22.	Transfers to Affiliated/Other Party	0.00	0.00
23.	Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	103250.00	1056241.69
24.	Independent Expenditure	0.00	0.00
25.	(use Schedule E)  Coordinated Expenditures Made by Party	0.00	0.00
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
17	Lagra Mada	0.00	0.00
	Loans Made Refunds of Contributions To:	0.00	0.00
	(a) Individuals/Persons Other Than Political Committees	0.00	900.00
	(b) Political Party Committees	0.00	0.00
	(b) Political Party Committees (c) Other Political Committees	0.00	0.00
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds	0.00	900.00
	(add Lines 28(a), (b), and (c))	0.00	00.00
9.	Other Disbursements	0.00	2917.50
30.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share		
	(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	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31.	Total Disbursements (add Lines 21(c), 22,	100000 00	1000001.11
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	103660.80	1066361.41
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	103660.80	1066361.41

### **DETAILED SUMMARY PAGE**

of Disbursements

	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)	225973.54	1283176.07
34.	Total Contribution Refunds (from Line 28(d))	0.00	900.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	225973.54	1282276.07
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	410.80	6302.22
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	410.80	6302.22

FE6AN026

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  American Hospital Association PAC	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mary Franco Mailing Address 684 Valley Rd  City New Canaan  FEC ID number of contributing federal political committee.  Name of Employer Norwalk Hospital  Receipt For: Primary General	State Zip Code CT 06840-3335  C  Occupation VP Public Affairs  Aggregate Year-to-Date ▼	Date of Receipt    M M
Other (specify) ▼  Full Name (Last, First, Middle Initial) Mr Daniel J DeBarba  Mailing Address 56 Franklin Street	250.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Waterbury  FEC ID number of contributing federal political committee.  Name of Employer Saint Mary's Hospital	State Zip Code CT 06706-1238  C  Occupation Vice President and Chief Financial Off	Transaction ID: 17745011  Amount of Each Receipt this Period  250.00
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial) Mr. Geoffrey F Cole Mailing Address 34 Maple Street City	State Zip Code	Date of Receipt    M M
Norwalk  FEC ID number of contributing federal political committee.	CT 06850-3815	Amount of Each Receipt this Period  500.00
Name of Employer Norwalk Hospital	Occupation President and Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional	l) <b>&gt;</b>	1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS  Any information copied from such Reports and	for each category of the Detailed Summary Page	FOR LINE NUMBER:
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  American Hospital Association PAC	he name and address of any political committee to s	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Gregg B. Everett  Mailing Address 109 Ocala Drive		Date of Receipt
		12 02 2009
City Montgomery	State Zip Code AL 36117-6964	Transaction ID: 17751351
FEC ID number of contributing federal political committee.	AL 36117-6964	Amount of Each Receipt this Period  1000.00
Name of Employer Alabama Hospital Associat- ion	Occupation Sr. Vice President & General Counsel	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr. J. Frazer Rolen, Jr.		Date of Receipt
Mailing Address 2204 Lakeshore Driv Suite 230	ve	12 02 7 2009
City	State Zip Code	Transaction ID: 17751352
Birmingham  FEC ID number of contributing federal political committee.	AL 35209-6729	Amount of Each Receipt this Period  1000.00
Name of Employer Alabama Hospital Associat- ion	Occupation Sr. VP & Director, Federal Advocacy	_
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Ms. Danne J. Howard		Date of Receipt
Mailing Address 1812 Woodmere Loc	рр	12 02 7 2009
City	State Zip Code	Transaction ID: 17751353
Montgomery	AL 36117-5004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Alabama Hospital Associat- ion	Occupation VP, State Government Relations	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	2500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any person ename and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Ms. Jane Knight  Mailing Address 1612 Salisbury Place  City  Montgomery  FEC ID number of contributing federal political committee.  Name of Employer Alabama Hospital Association  Receipt For:  Primary General  Other (specify)	State Zip Code AL 36117-2562  C  Occupation Vice President, Member Relations  Aggregate Year-to-Date   500.00	Date of Receipt  M M M / D D / Y Y Y Y Y  1 2 0 0 9  Transaction ID: 17751354  Amount of Each Receipt this Period  500.00
Full Name (Last, First, Middle Initial) Mr. Don Hogan Mailing Address 199 Wesobulga Stree  City Lineville  FEC ID number of contributing federal political committee.  Name of Employer		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Clay County Hospital  Receipt For: Primary General Other (specify)	Pharmacy Director  Aggregate Year-to-Date ▼  500.00	]
Ms. A. Elizabeth Anderson  Mailing Address 6600 Apple Cross Driv		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  Mobile  FEC ID number of contributing federal political committee.	State         Zip Code           AL         36695-2900	Transaction ID: 17751373  Amount of Each Receipt this Period  550.00
Name of Employer University of South Alaba- ma Children's Receipt For: Primary General Other (specify)	Occupation Administrator  Aggregate Year-to-Date   550.00	
SUBTOTAL of Receipts This Page (optional)		1300.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may not be sold or used by any person g the name and address of any political committee to s	for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  American Hospital Association PA	AC .	
Full Name (Last, First, Middle Initial)  Mrs. Jennie R Rhinehart		Date of Receipt
Mailing Address 805 Friendship Ro	State Zip Code	1 2 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Tallassee	AL 36078-1234	Transaction ID: 17751374  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer Community Hospital	Occupation Administrator and Chief Executive Offi	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial)  Ms. Rosemary Blackmon		Date of Receipt
Mailing Address 547 Le Grand Plac	De Company of the Com	12 02 2009
City	State Zip Code	Transaction ID: 17751375
Montgomery	AL 36106-1825	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Alabama Hospital Associat- ion	Occupation Vice President of Public Relations	]
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. R. Thomas Cooper, III		Date of Receipt
Mailing Address 404 Paddock Lane	)	12 02 2009
City	State Zip Code	Transaction ID: 17751376
Montgomery	AL 36109-4625	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Alabama Hospital Associat- ion	Occupation Chief Financial Officer	]
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
SUBTOTAL of Receipts This Page (option	nal)	1300.00
	mber only)	

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
0	or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
Α.	Full Name (Last, First, Middle Initial) Mr. Dean A Griffin		Date of Receipt
	Mailing Address P O Box 2239	State 7in Code	1 2 0 2 2 0 0 9 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2
	City Decatur	State Zip Code AL 35609-2239	Transaction ID: 17751377  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	375.00
	Name of Employer Decatur General Hospital	Occupation Chief Executive Officer	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	
— В.	Full Name (Last, First, Middle Initial) Mr. Douglas A Duchak		Date of Receipt
	Mailing Address 350 Engle Street		12 04 2009
	City	State Zip Code	Transaction ID: 17753494
	Englewood	NJ 07631-1808	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Englewood Hospital and Me- dical Center	Occupation President and Chief Executive Office	<u>r</u>
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	]
_ C.	Full Name (Last, First, Middle Initial) Mr. Robert P Wise, , FACHE		Date of Receipt
	Mailing Address 2100 Wescott Drive		12 04 YYYYY 12009
	City	State Zip Code	Transaction ID: 17753503
	Flemington  FEC ID number of contributing federal political committee.	NJ 08822-4603	Amount of Each Receipt this Period 500.00
	Name of Employer Hunterdon Medical Center	Occupation President and Chief Executive Office	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00	
	SUBTOTAL of Receipts This Page (optional) .		1375.00
H	TOTAL This Period (last page this line number	•	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 194 (check only one)    X
\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	tatements ma name and ad	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
<u>/</u>	Full Name (Last, First, Middle Initial) Ms Patricia G Ball  Mailing Address 2800 North Dallas Park Suite 200  City Plano  FEC ID number of contributing federal political committee.  Name of Employer LHP Hospital Group	State TX  C Occupation SVP of S	Strategic Dev & Public Affairs	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
3.	Full Name (Last, First, Middle Initial) Mr. Steven A. Godfrey  Mailing Address Post Office Box 100			Date of Receipt  1 2 0 3 2 0 0 9
	City	State CT	Zip Code	Transaction ID: 17754304
	New Britain  FEC ID number of contributing federal political committee.	C	06050-4000	Amount of Each Receipt this Period  350.00
	Name of Employer Central Connecticut Health Alliance Receipt For:  Primary  General  Other (specify) ▼		er Relations/ Gov Affairs e Year-to-Date ▼ 350.00	
- ;.	Full Name (Last, First, Middle Initial) Mr. Jeffrey M Fried, , FACHE			Date of Receipt
	Mailing Address 424 Savannah Road			12 03 2009
	City	State	Zip Code	Transaction ID: 17754306
	Lewes	DE	19958-1462	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Beebe Medical Center		t and Chief Executive Office	r
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			1850.00
	TOTAL This Period (last page this line number)	only)		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persog the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
American Hospital Association PA	nC .	
Full Name (Last, First, Middle Initial)  Mr. Charles Anderson  Mailing Address 1501 S. Virginia A	W0	Date of Receipt
City	State Zip Code	1 2 0 4 2 0 0 9 Transaction ID: 17754323
Atoka	OK 74525-3298	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer St. John Medical Center	Occupation Hospital Administrator	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Richard Boone		Date of Receipt
Mailing Address 1923 South Utica	Avenue	12 04 2009
City	State Zip Code	Transaction ID: 17754325
Tulsa	OK 74104-5445	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. John Medical Center	Occupation Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Dewey Davis		Date of Receipt
Mailing Address 1923 South Utica	Avenue	12 04 2009
City	State Zip Code	Transaction ID: 17754326
<u>Tulsa</u>	OK 74104-6502	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. John Medical Center	Occupation Vice President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option	nal)	750.00
	mber only)	

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) American Hospital Association PAC  Full Name (Last, First, Middle Initial) Ms. Shely Dunham Mailing Address P O Box 489  City Oksene OK 73763-0489  FEC ID number of contributing federal political committee.  Name of Employer Oksene Municipal Hospital  Sister M Therese Contributing (ederal political committee)  City State Zip Code OK 73763-0489  Full Name (Last, First, Middle Initial) Sister M Therese Contributing (ederal political committee)  City State Zip Code OK 74159-0753  Full Name (Last, First, Middle Initial) Sister M Therese Contributing (ederal political committee)  City State Zip Code Tulsa OK 74159-0753  FEC ID number of contributing (ederal political committee)  City Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Mr. C. Bruco Lawrence Mailing Address 3300 NW Expressway  City State Zip Code OK 73112-4481  FEC ID number of contributing (ederal political committee)  City State Zip Code OK 73112-4481  FEC ID number of contributing (ederal political committee)  Cocupation President  Aggregate Year-to-Date ▼  Transaction ID: 17754332  Amount of Each Receipt this Period  Transaction ID: 17754332  Amount of Each Receipt this Period  FEC ID number of contributing (ederal political committee)  City State Zip Code OK 73112-4481  FEC ID number of contributing (ederal political committee)  City State Zip Code OK 73112-4481  FEC ID number of contributing (ederal political committee)  Cocupation President and Chief Operating Officer Receipt For:  Aggregate Year-to-Date ▼  Occupation President and Chief Operating Officer  Receipt For:  Other (specify) ▼  Aggregate Year-to-Date ▼  Transaction ID: 17754332  Amount of Each Receipt this Period  FEC ID number of contributing (ederal political committee)  City State Zip Code  Transaction ID: 17754332  Amount of Each Receipt this Period  FEC ID number of contributing (ederal pol	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS  Any information copied from such Reports and	for each category of the Detailed Summary Page	X         11a         11b         11c         12           13         14         15         16         1
Amount of Each Receipt    State	or for commercial purposes, other than using t	he name and address of any political committee to s	solicit contributions from such committee.
City Okeene OK 73753-0489  FEC ID number of contributing federal political committee.  C C Amount of Each Receipt this Period  C C Amount of Each Receipt this Period  C C C C C C C C C C C C C C C C C C C	Ms. Shelly Dunham		†
Okeene OK 73763-0489  Amount of Each Receipt this Period  FEC ID number of contributing toderal political committee.  Name of Employer Okeene Municipal Hospital  Full Name (Last, First, Middle Initial) Sister M Therese Contschalk  Mailing Address P O Box 4753  City State Zip Code Tulsa OK 74159-0753  FEC ID number of contributing tederal political committee.  Name of Employer Marian Health System  Fecipl For: Primary General Other (specify) ▼  State Zip Code Transaction ID: 17754330  Amount of Each Receipt this Period  Transaction ID: 17754330  Amount of Each Receipt this Period  FEC ID number of contributing tederal political committee.  C Coccupation President  Fecipl For: Other (specify) ▼  State Zip Code Other (specify) ▼  Date of Receipt  Transaction ID: 17754330  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17754330  Amount of Each Receipt this Period  Transaction ID: 17754330  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17754332  Aggregate Year-to-Date ▼  Transaction ID: 17754332  Aggregate Year-to-Date ▼  Transaction ID: 17754332  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17754332  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17754332  Amount of Each Receipt this Period  Transaction ID: 17754332  Amount of Each Receipt this Period  Transaction ID: 17754332  Amount of Each Receipt this Period  Transaction ID: 17754332  Amount of Each Receipt this Period  Transaction ID: 17754332  Amount of Each Receipt Transaction ID: 177543	Mailing Address P O Box 489		
FEC ID number of contributing federal political committee.    Name of Employer Aggregate Year-to-Date ▼	-	·	
Name of Employer Okeene Municipal Hospital  Receipt For: Primary General Other (specify) ▼  Name (Last, First, Middle Initial) Sister M Therese Gotschalk Mailing Address P O Box 4753  City State Zip Code OK 74159-0753  FEU ID number of contributing federal political committee  Name of Employer Marian Health System  Receipt For: Primary General Other (specify) ▼  Coccupation President  Receipt For: Primary General Other (specify) ▼  State Zip Code OK 74159-0753  FEU ID number of contributing federal political committee  Aggregate Year-to-Date ▼  State Sip Code Other (specify) ▼  Date of Receipt Transaction ID: 17754330  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17754330  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17754330  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17754332  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17754332  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Coccupation President and Chief Operating Officer Receipt For: Primary General Other (specify) ▼  Coccupation President and Chief Operating Officer Receipt For: Primary General Other (specify) ▼  Coccupation President and Chief Operating Officer Receipt For: Primary General Other (specify) ▼		OK 73763-0489	Amount of Each Receipt this Period
Receipt For:		C	42.00
Primary   General   Cast, First, Middle Initial)   Sister M Therese Gottschalk   Mailing Address P O Box 4753   Date of Receipt   12		·	
Sister M Therese Gottschalk  Mailing Address P O Box 4753  City State Zip Code	Primary General		
City State Zip Code Transaction ID: 17754330  Tulsa OK 74159-0753  FEC ID number of contributing federal political committee.  Name of Employer Marian Health System  Receipt For: Primary General Other (specify) ▼  City State Zip Code Transaction ID: 17754330  Amount of Each Receipt this Period  Tocupation President  Aggregate Year-to-Date ▼  12 0 4 2 0 0 9  Transaction ID: 17754332  Date of Receipt  M M M M D 0 0 1 2 0 0 9  Transaction ID: 17754332  Date of Receipt  M M M M M D 0 0 1 2 0 0 9  Transaction ID: 17754332  Amount of Each Receipt this Period  City State Zip Code OK 73112-4481  FEC ID number of contributing federal political committee.  Name of Employer Integris Baptist Medical Center  Receipt For: Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Cocupation President and Chief Operating Officer  Aggregate Year-to-Date ▼  102 04 2 0 0 9  Transaction ID: 17754332  Amount of Each Receipt this Period  500.00	,		Date of Receipt
Tulsa OK 74159-0753  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer Marian Health System  Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial) Mr. C. Bruce Lawrence  Mailing Address 3300 NW Expressway  City State Zip Code OK 73112-4481  FEC ID number of contributing federal political committee.  Name of Employer Integris Baptist Medical Center Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Occupation President and Chief Operating Officer Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  1002 0000			M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer Marian Health System  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial)  Mr. C. Bruce Lawrence  Mailing Address 3300 NW Expressway  City State Zip Code OK 73112-4481  FEC ID number of contributing federal political committee.  Name of Employer Integris Baptist Medical Center.  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Amount of Each Receipt this Period  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼	City	State Zip Code	Transaction ID: 17754330
Name of Employer Marian Health System  Receipt For:  Primary General Other (specify) ▼  City Oklahoma City  FEC ID number of contributing federal political committee.  Name of Employer Integris Baptist Medical Center Receipt For:  Other (specify) ▼  City Other (specify) ▼  City Oklahoma City  FEC ID number of contributing federal political committee.  Name of Employer Integris Baptist Medical Center Receipt For:  Primary General Other (specify) ▼  Occupation President and Chief Operating Officer Aggregate Year-to-Date ▼  State Zip Code OK 73112-4481  C  C  C  C  State Zip Code OK 73112-4481  FEC ID number of contributing federal political committee.  Occupation President and Chief Operating Officer Aggregate Year-to-Date ▼  Other (specify) ▼  Aggregate Year-to-Date ▼  State Zip Code OK 73112-4481  FEC ID number of contributing federal political committee.  State Zip Code OK 73112-4481  FEC ID number of contributing federal political committee.  Occupation President and Chief Operating Officer Aggregate Year-to-Date ▼  State Zip Code OK 73112-4481  FEC ID number of contributing federal political committee.  State Zip Code OK 73112-4481  FEC ID number of contributing federal political committee.  State Zip Code OK 73112-4481  FEC ID number of contributing federal political committee.  State Zip Code OK 73112-4481  FEC ID number of contributing federal political committee.  State Zip Code OK 73112-4481  FEC ID number of contributing federal political committee.  State Zip Code OK 73112-4481  FEC ID number of contributing federal political committee.  State Zip Code OK 73112-4481  FEC ID number of contributing federal political committee.  State Zip Code OK 73112-4481  FEC ID number of contributing federal political committee.  State Zip Code OK 73112-4481  FEC ID number of contributing federal political committee.	Tulsa	OK 74159-0753	Amount of Each Receipt this Period
Receipt For:    Primary   General   Sound   S		C	500.00
Primary General Other (specify) ▼ 500.00  Full Name (Last, First, Middle Initial) Mr. C. Bruce Lawrence  Mailing Address 3300 NW Expressway  City State Zip Code OK 73112-4481  City Oklahoma City OK 73112-4481  FEC ID number of contributing federal political committee.  Name of Employer Integris Baptist Medical Center Receipt For:  Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	Name of Employer Marian Health System	· · ·	-
Mr. C. Bruce Lawrence  Mailing Address 3300 NW Expressway  City State Zip Code Oklahoma City OK 73112-4481  FEC ID number of contributing federal political committee.  Name of Employer Integris Baptist Medical Center Receipt For: Primary General Other (specify) ▼  Date of Receipt  Transaction ID: 17754332  Amount of Each Receipt this Period  Transaction ID: 17754332  Amount of Each Receipt this Period  500.00	Primary General		
City  State Zip Code Oklahoma City  FEC ID number of contributing federal political committee.  Name of Employer Integris Baptist Medical Center Receipt For: Primary General Other (specify) ▼  State Zip Code OK 73112-4481  Amount of Each Receipt this Period  500.00  C  State Zip Code Transaction ID: 17754332  Amount of Each Receipt this Period  500.00	,		Date of Receipt
Oklahoma City  FEC ID number of contributing federal political committee.  Name of Employer Integris Baptist Medical Center  Receipt For:  Primary General Other (specify) ▼  OK 73112-4481  Amount of Each Receipt this Period  500.00  Cupation President and Chief Operating Officer  Aggregate Year-to-Date ▼  1042.00	Mailing Address 3300 NW Expresswa	ay	
FEC ID number of contributing federal political committee.  Name of Employer Integris Baptist Medical Center Receipt For:  Primary General Other (specify) ▼  Cocupation President and Chief Operating Officer  Aggregate Year-to-Date ▼  500.00	-	•	Transaction ID: 17754332
Social federal political committee.  Name of Employer Integris Baptist Medical Center Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  1042 00	Oklahoma City	OK 73112-4481	Amount of Each Receipt this Period
Integris Baptist Medical Center  Receipt For:  Primary  Other (specify) ▼  President and Chief Operating Officer  Aggregate Year-to-Date ▼  500.00		C	500.00
Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  500.00	Integris Baptist Medical	· ·	
Other (specify) ▼ 500.00	Receipt For:	Aggregate Year-to-Date ▼	
CURTOTAL of Descints This Dans (antique)	_	500.00	
	SURTOTAL of Pagainte This Paga (antional)		1042.00

ies, other than using the name TEE (In Full) I Association PAC  it, Middle Initial) it 20 West Iowa Avenue  Sociation PAC  Characteristics of the name	nts may not be sold or used by any person and address of any political committee to sold address of addre	Date of Receipt    M M M
I Association PAC  it, Middle Initial)  it 20 West Iowa Avenue  Sociation PAC  So	cupation ief Executive Officer gregate Year-to-Date  502.50	Transaction ID: 17754334  Amount of Each Receipt this Period  2.50
or 20 West Iowa Avenue  Solutributing littee.  Oc Ch  General	cupation ief Executive Officer gregate Year-to-Date  502.50	Transaction ID: 17754334  Amount of Each Receipt this Period  2.50
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General Ag	ief Executive Officer gregate Year-to-Date ▼  502.50	
General ▼	502.50	
▼		
i, Middle Initial)		
		Date of Receipt
00 East Frank Phillips Blv	d	12 04 2009
	tate Zip Code	Transaction ID: 17754348
	OK 74006-2411	Amount of Each Receipt this Period
ntributing ittee.		250.00
Con	cupation esident and Chief Executive Officer	
	gregate Year-to-Date ▼	
General ▼	250.00	
i, Middle Initial)		Date of Receipt
2 North Monroe Street		12 03 YYYYY 12009
	tate Zip Code	Transaction ID: 17754688
	N 47993-1049	Amount of Each Receipt this Period
ntributing ittee.		250.00
ort	·	1
		1
	250.00	
General Ag		1
00	Ag General Ag	Administrator  Aggregate Year-to-Date ▼  General

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 194 (check only one)    X   11a
ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	tatements may not be sold or used by any pename and address of any political committee	erson for the purpose of soliciting contributions
·		
Full Name (Last, First, Middle Initial) Mr. R. Mark Ellison		Date of Receipt
Mailing Address 3040 Reflection Ct.		12 03 2009
City	State Zip Code	Transaction ID: 17754703
Greenwood	IN 46143-6618	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. Vincent Indianapolis Hospital	Occupation Controller	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Gene Perry	<u> </u>	Date of Receipt
Mailing Address P O Box 499		12 03 YYYYY 12009
City	State Zip Code	Transaction ID: 17754758
<u>Paoli</u>	IN 47454-0499	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Bloomington Hospital of Orange County	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Brad Smith	<u> </u>	Date of Receipt
Mailing Address P O Box 608		1 2 0 3 2 0 0 9
City	State Zip Code	Transaction ID: 17754772
Rushville	IN 46173-0608	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	175.00
Name of Employer Rush Memorial Hospital	Occupation President and Chief Executive Offi	icer
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	•
SUBTOTAL of Receipts This Page (optional)		675.00

An		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 11
	y information copied from such Reports and S for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Sally Nan Barber		Date of Receipt
	Mailing Address P O Box 800809		12 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 17754802
	Charlottesville	VA 22908-0809	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	200.00
	Name of Employer University of Virginia Me- dical Center	Occupation Special Advisor for State & Federal Re	
	Receipt For:	Aggregate Year-to-Date ▼	1
	Primary General Other (specify) ▼	350.00	
	Full Name (Last, First, Middle Initial) Mr Mark Benininghoff	1	Date of Receipt
	Mailing Address 209 S Braddock St		12 03 7 2009
	City	State Zip Code	Transaction ID: 17754805
	Winchester	VA 22601-4042	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Name of Employer Valley Health System	Occupation COO	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	
	Full Name (Last, First, Middle Initial) Mr. Carl Biggs		Date of Receipt
	Mailing Address 2225 Aryness Drive		12 / 03 / 2009
	City	State Zip Code	Transaction ID: 17754806
	Vienna	VA 22181-3047	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Name of Employer Inova Health System	Occupation Trustee	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	350.00	
g	UBTOTAL of Receipts This Page (optional) .		900.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 194 (check only one)    X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American Hospital Association PAG	the name and add	not be sold or used by any persong     dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr W. Scott Burnett Mailing Address 512 Binford St			Date of Receipt  1 2 0 3 2 0 0 9
City South Hill  FEC ID number of contributing federal political committee.	State VA	Zip Code 23970-1510	Transaction ID: 17755332  Amount of Each Receipt this Period  350.00
Name of Employer Community Memorial Health- center Receipt For:  Primary General Other (specify) ▼	Occupatio Presiden Aggregate		
Full Name (Last, First, Middle Initial) Mr. George W Dawson Mailing Address 1920 Atherholt Roa	d		Date of Receipt  1 2 0 3 2 0 0 9
City	State	Zip Code	Transaction ID: 17759361
Lynchburg	VA	24501-1104	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer Centra Health	Occupatio Presiden	n t and Chief Executive Office	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Eileen Dohmann	•		Date of Receipt
Mailing Address 6508 Flowerdew Hu	undred Ct.		12 03 2009
City	State	Zip Code	Transaction ID: 17762688
Centreville  FEC ID number of contributing federal political committee.	C	20120-3755	Amount of Each Receipt this Period  350.00
Name of Employer Mary Washington Hospital	Occupatio Vice Pres	n sident, Nursing	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional	(h		1050.00
TOTAL This Period (last page this line num	ber only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Mr Ronald Ewald  Mailing Address 3300 Gallows Road  City  Falls Church  FEC ID number of contributing federal political committee.  Name of Employer Inova Fairfax Hospital  Receipt For:  Primary General  Other (specify)	State Zip Code VA 22042-3300  C  Occupation Chief Financial Officer  Aggregate Year-to-Date  350.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr John Gaul Mailing Address 8013 River Falls Dr  City Potomac FEC ID number of contributing federal political committee.  Name of Employer Inova Health System	State Zip Code MD 20854-3849  C Occupation General Counsel	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For:  Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial)  Ms Maria Hopper  Mailing Address 206 Duke St	Aggregate Year-to-Date ▼  350.00	Date of Receipt
Mailing Address 206 Duke St  City  Alexandria  FEC ID number of contributing federal political committee.  Name of Employer Inova Health System	State Zip Code VA 22314-3806  C Occupation	Transaction ID: 17770644  Amount of Each Receipt this Period  350.00
Receipt For: Primary Other (specify)	Trustee  Aggregate Year-to-Date ▼  350.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	1050.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 19/194   (check only one)
Any information copied from such Reports at or for commercial purposes, other than using	nd Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions a solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PA	<u> </u>	aroso or ary pointed sommittee to	
Full Name (Last, First, Middle Initial) Mr Timothy Jennins			Date of Receipt
Mailing Address 4715 White Owl Cr	resent		1 2 0 3 2 0 0 9
City Chesapeake	State VA	Zip Code 23321-1250	Transaction ID: 17770645  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200211200	150.00
Name of Employer Sentara Healthcare	Occupation Vice Pres	n sident Pharmacy	
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Donna Littlepage			Date of Receipt
Mailing Address PO Box 25			12 03 2009
City	State	Zip Code	Transaction ID: 17786259
Roanoke	VA	24002-0025	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer Carilion Clinic	Occupation Vice Pres	n sident, Finance	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Donald E. Lorton			Date of Receipt
Mailing Address 1141 Windy Hill Ro	oad		1 2 0 3 2 0 0 9
City	State	Zip Code	Transaction ID: 17788020
Goodview  FEC ID number of contributing federal political committee.	C	24095-2909	Amount of Each Receipt this Period  350.00
Name of Employer Carilion Clinic	Occupation Vice Pres		
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional			850.00

SCHEDULE A (FEC FO	rm 3X)  Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 194 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
Any information copied from such R or for commercial purposes, other the NAME OF COMMITTEE (In Full American Hospital Association)		son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Ini Mr Dennis Means, MD Mailing Address 2071 Peakla  City Christiansburg  FEC ID number of contributing federal political committee.		Date of Receipt  1 2 0 3 2 0 0 9  Transaction ID: 17788025  Amount of Each Receipt this Period  350.00
Name of Employer Carilion Clinic  Receipt For:  Primary General Other (specify) ▼	Occupation Vice President, Medical Affairs  Aggregate Year-to-Date ▼  350.00	
Full Name (Last, First, Middle Ini Mr Mark Merrill  Mailing Address PO Box 213	,	Date of Receipt    M
Winchester  FEC ID number of contributing federal political committee.  Name of Employer	VA 22604-1338  C Occupation	Amount of Each Receipt this Period  350.00
Receipt For: Primary General Other (specify)	President & CEO  Aggregate Year-to-Date ▼  350.00	
Full Name (Last, First, Middle Ini Dr. Edward G Murphy, , M.D. Mailing Address P O Box 13	,	Date of Receipt  1 2
City Roanoke FEC ID number of contributing	State Zip Code VA 24033-3367	Transaction ID: 17789476  Amount of Each Receipt this Period  350.00
federal political committee.  Name of Employer Carilion Medical Center	Occupation President and Chief Executive Office	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  350.00	
SUBTOTAL of Receipts This Page	(optional)	1050.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 194 (check only one)  X 11a 11b 11c 12  13 14 15 16
Any information copied from such Reports ar or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  American Hospital Association PAG	nd Statements may not be sold or used by any person the name and address of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Mark Pierce, MD  Mailing Address 1856 Zion Church F	Rd	Date of Receipt  1 2 0 3 2 0 0 9
City Maurertown	State Zip Code VA 22644-2808	Transaction ID: 17790470  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Warren Memorial Hospital	Occupation Trustee	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Kylanne Silverstone Mailing Address 10620 Belfast Place		Date of Receipt
		12 03 2009
City	State Zip Code	Transaction ID: 17790917
Potomac  FEC ID number of contributing federal political committee.	MD 20854-1704	Amount of Each Receipt this Period 350.00
Name of Employer Inova Health System	Occupation Vice President	7
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Hugh Thornhill	<b>-</b>	Date of Receipt
Mailing Address 2715 Rosalind Aver	nue, SW	12 03 7 9 9
City	State Zip Code	Transaction ID: 17790921
Roanoke FEC ID number of contributing federal political committee.	VA 24014-2329	Amount of Each Receipt this Period  350.00
Name of Employer Carilion Clinic	Occupation Vice President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
	١)	1050.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS  Any information copied from such Benorts and	for each category of the Detailed Summary Page	
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	ne name and address of any political commit	tee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Mr. Roderick Williams  Mailing Address 19434 Valleybrook Li	ane	Date of Receipt  1 2 0 3 2 2 0 0 9
City	State Zip Code	Transaction ID: 17792823
Leesburg  FEC ID number of contributing federal political committee.	VA 20175-8988	Amount of Each Receipt this Period 350.00
Name of Employer Inova Health System  Receipt For:  Primary  General  Other (specify) ▼	Occupation VP/ Community Relations  Aggregate Year-to-Date   350.00	
Full Name (Last, First, Middle Initial)  Ms. Claire Murray  Mailing Address 1501 Twelfth Ave.		Date of Receipt  1 2 0 5 2 0 0 9
City  Watervliet  FEC ID number of contributing federal political committee.	State Zip Code NY 12189-2402  C	Transaction ID: 17795096  Amount of Each Receipt this Period  10.00
Name of Employer New York Organization Nur- se Executives Receipt For:  Primary General Other (specify) ▼	Occupation Executive Director  Aggregate Year-to-Date ▼  360.00	
Full Name (Last, First, Middle Initial) Ms. Patricia Yoder-Wise  Mailing Address 7309 93rd Street		Date of Receipt
City <u>Lubbock</u>	State Zip Code TX 79424-4939	1 2 0 5 2 0 0 9  Transaction ID: 17795098  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer The Wise Group	Occupation President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  300.00	
SUBTOTAL of Receipts This Page (optional)		410.00

Primary General Other (specify)   Full Name (Last, First, Middle Initial) Mr. Peter J. Bernard Mailing Address 5801 Bremo Road  City State Richmond VA  FEC ID number of contributing federal political committee.  Name of Employer Bon Secours-Richmond Community Hospita  Occupation	Zip Code 22401-4453	Date of Receipt    Date of Receipt
Full Name (Last, First, Middle Initial)  Ms. Amy Adome  Mailing Address 1001 Sam Perry Blvd.  City State Fredericksburg VA  FEC ID number of contributing federal political committee.  Name of Employer Medicorp Health System  Receipt For: Primary General Other (specify)  Other (specify)  Full Name (Last, First, Middle Initial) Mr. Peter J. Bernard  Mailing Address 5801 Bremo Road  City State Richmond VA  FEC ID number of contributing federal political committee.  Name of Employer Bon Secours-Richmond Community Hospita  Occupating CC  Occupat	22401-4453  on esident te Year-to-Date ▼	Transaction ID: 17795188  Amount of Each Receipt this Period
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Mr. Peter J. Bernard  Mailing Address 5801 Bremo Road  City State Richmond VA  FEC ID number of contributing federal political committee.  Name of Employer Bon Secours-Richmond Community Hospita  Occupation		
Mr. Peter J. Bernard  Mailing Address 5801 Bremo Road  City State  Richmond VA  FEC ID number of contributing federal political committee.  Name of Employer Bon Secours-Richmond Community Hospita  Occupating CEO		
Richmond  FEC ID number of contributing federal political committee.  Name of Employer Bon Secours-Richmond Community Hospita  Occupation CEO	Zip Code	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Bon Secours-Richmond Comm- unity Hospita CEO	23226-1900	Amount of Each Receipt this Period  350.00
Primary General Other (specify) ▼	te Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. James Grebosky Mailing Address 11409 North Club Drive		Date of Receipt
City State Fredericksburg VA	Zip Code 22408-2064	Transaction ID: 17795736  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer Occupation	00	350.00
Medicorp Health System Sr Medi	cal Director te Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)		1050.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Michael J Halseth  Mailing Address P O Box 3340  City Winchester  FEC ID number of contributing federal political committee.  Name of Employer Valley Health System  Receipt For: Primary General Other (specify)	State Zip Code VA 22604-1334  C  Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼  350.00	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) Mr. William D Jacobsen  Mailing Address 180 Floyd Avenue  City  Rocky Mount  FEC ID number of contributing federal political committee.  Name of Employer Carilion Franklin Memorial Hospital  Receipt For:  Primary General  Other (specify)	State Zip Code VA 24151-1318  C  Occupation Chief Executive Officer Aggregate Year-to-Date  350.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Donald Jansen, M.D.  Mailing Address 118 Jenny Court  City  Strasburg  FEC ID number of contributing federal political committee.  Name of Employer Shenandoah Memorial Hospital  Receipt For: Primary General Other (specify)	State Zip Code VA 22657-3789  C  Occupation Vice President, Medical Affairs  Aggregate Year-to-Date   350.00	Date of Receipt    M
SUBTOTAL of Receipts This Page (optional)		1050.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Report or for commercial purposes, other than unlike NAME OF COMMITTEE (In Full)  American Hospital Association	ts and Statements may not be sold or used by any persong the name and address of any political committee of PAC	son for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial)  Mr Dean Morehouse  Mailing Address 14290 Cypress	Island Cirola	Date of Receipt
Mailing Address 14290 Cypress  City  West Palm Beach	State Zip Code FL 33410-1031	Transaction ID: 17795772  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Inova Health System  Receipt For:  Primary General  Other (specify) ▼	Occupation Trustee  Aggregate Year-to-Date ▼  350.00	
Full Name (Last, First, Middle Initial) Ms. Patricia Schmehl Mailing Address 3221 Sargent D	rive	Date of Receipt  1 2 0 3 2 0 0 9
City	State Zip Code	Transaction ID: 17795788
Falls Church	VA 22044-1614	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Inova Fairfax Hospital	Occupation Senior Director	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms Kathy Walls		Date of Receipt
Mailing Address 11513 Kingswoo	od BLVD	12 03 YYYY 12 03 2009
City	State Zip Code	Transaction ID: 17795798
Fredericksburg	VA 22408-1882	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Medicorp Health System	Occupation Executive Vice President Human Re	esourc
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (opt	ional)	1050.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	statements may not be sold or used by any person ename and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. David Marshall  Mailing Address 1319 Walhni Street  City Galveston  FEC ID number of contributing federal political committee.  Name of Employer University of Texas Medical Branch Hos Receipt For: Primary General Other (specify)	State Zip Code TX 77554-6918  C  Occupation Chief Nursing & Patient Care Services Aggregate Year-to-Date  520.00	Date of Receipt    M M
Full Name (Last, First, Middle Initial) Mr. John F Prochilo  Mailing Address 70 Butler Street  City Salem  FEC ID number of contributing federal political committee.  Name of Employer Northeast Rehabilitation Hospital Receipt For:  Primary General Other (specify)	State Zip Code NH 03079-3925  C  Occupation Chief Executive Officer and Administr Aggregate Year-to-Date  350.00	Date of Receipt  M M M / D D / Y Y Y Y Y  1 2 0 0 9  Transaction ID: 17796805  Amount of Each Receipt this Period  350.00
Full Name (Last, First, Middle Initial) Mr. Eric P. Norwood  Mailing Address 2701 North Decatur R.  City Decatur  FEC ID number of contributing federal political committee.  Name of Employer DeKalb Medical Center  Receipt For: Primary General Other (specify)	State Zip Code GA 30033-5918  C  Occupation President and Chief Executive Officer  Aggregate Year-to-Date  500.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	620.00

City Topeka KS 66614-4305  FEC ID number of contributing federal political committee.  Name of Employer Names Hospital Association Receipt For: Primary General Other (specify) ▼		SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Mr. Chad R. Austin  Mailing Address 6518 SW 26th Court  City State Zip Code Topeka KS 66614-4305  FEC ID number of contributing federal political committee.  Name of Employer Cocupation Other (specify) ▼  State Zip Code Transaction ID: 17796847  Amount of Each Recept this Period  President, Government Relations Occupation Vice President, Government Relations Occupation Vice President, Government Relations Occupation Vice President, Government Relations Occupation Other (specify) ▼  State Zip Code Transaction ID: 17796850  Transaction ID: 17796854  Transacti		or for commercial purposes, other than using the  NAME OF COMMITTEE (In Full)	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
FEC ID number of contributing federal political committee.  Name of Employer Clay Committee.  Name of Employer Clay Contributing federal political committee.  Name of Employer Clay Contributing federal political committee.  Name of Employer Clay Contributing federal political committee.  Name (Last, First, Middle Initial)  Mr. Ron Bender  Mailing Address P O Box 512  City State Zip Code KS 67432-0512  City Clay Center KS 67432-0512  Transaction ID: 17796850  Amount of Each Receipt this Period Chief Executive Officer  Receipt For:    Primary   General   Occupation   Occupation Chief Executive Officer    Primary   General Clay Contributing federal political committee.    Date of Receipt   Name of Employer Clay County Medical Center   Occupation Chief Executive Officer    Primary   General Clay Contributing federal political committee.    Date of Receipt   Name of Employer Clay Contributing federal political committee.    Date of Receipt   Name of Employer Clay Contributing federal political committee.    Date of Receipt   Name of Employer Clay Contributing federal political committee.    Date of Receipt   Name of Employer Clay Contributing federal political committee.    Date of Receipt   Name of Employer Clay Contributing federal political committee.    Date of Receipt   Name of Employer Clay Contributing federal political committee.   Date of Receipt   Name of Employer Clay Contributing federal political committee.   Date of Receipt   Name of Employer Clay Contribution   Name of Employer Clay Clay Clay Clay Clay Clay Clay Clay	. ∠ A.	Mr. Chad R. Austin  Mailing Address 6518 SW 26th Court  City		·	1 2 0 4 2 0 0 9 Transaction ID: 17796847
Receipt For:     Primary		FEC ID number of contributing federal political committee.  Name of Employer Kansas Hospital Associati-	C	n	125.00
Mailing Address P O Box 512  City State Zip Code KS 67432-0512  FEC ID number of contributing federal political committee.  Name of Employer Clay Center  Receipt For: Primary General Other (specify) ▼  City State Zip Code KS 67432-0512  Amount of Each Receipt this Period Chief Executive Officer  Receipt For: Primary General Other (specify) ▼  City State Zip Code KS 6757-1570  Full Name (Last, First, Middle Initial) Nancy Carpenter Mailing Address 602 Iowa  City State Zip Code KS 66757-1570  FEC ID number of contributing federal political committee.  Name of Employer Wilson Medical Center  Name of Employer Wilson Medical Center  Name of Employer Wilson Medical Center  Aggregate Year-to-Date ▼  Coccupation CNO  Aggregate Year-to-Date ▼	_	Receipt For:  Primary General		e Year-to-Date ▼ 240.31	
Clay Center  KS 67432-0512  Amount of Each Receipt this Period Celevation Chief Executive Officer  Receipt For: Primary General Other (specify) ▼  City State Zip Code KS 66757-1570  FEC ID number of contributing federal political committee.  City State Zip Code KS 66757-1570  FEC ID number of contributing federal political committee.  Name of Employer Wilson Medical Center  Coccupation City State Zip Code KS 66757-1570  FEC ID number of contributing federal political committee.  Name of Employer Wilson Medical Center  Aggregate Year-to-Date ▼  Coccupation CNO  Receipt For: Aggregate Year-to-Date ▼  Amount of Each Receipt this Period Transaction ID: 17796854  Amount of Each Receipt this Period Transaction ID: 17796854  Amount of Each Receipt this Period Transaction ID: 17796854  Amount of Each Receipt this Period Transaction ID: 17796854  Amount of Each Receipt this Period Transaction ID: 17796854  Amount of Each Receipt this Period Transaction ID: 17796854  Amount of Each Receipt this Period Transaction ID: 17796854  Amount of Each Receipt Transaction ID: 17796854	3.	Mr. Ron Bender			M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer Clay County Medical Center  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Nancy Carpenter  Mailing Address 602 Iowa  City State Zip Code KS 66757-1570  FEC ID number of contributing federal political committee.  Name of Employer Wilson Medical Center  Name of Employer Wilson Medical Center  Primary General Other (specify) ▼  Occupation CNO  Receipt For: Aggregate Year-to-Date ▼  Transaction ID: 17796854  Amount of Each Receipt this Period  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼		City		Zip Code	Transaction ID: 17796850
Receipt For:    Primary   General   Other (specify) ▼		FEC ID number of contributing		67432-0512	Amount of Each Receipt this Period 262.50
Receipt For:    Primary		Name of Employer Clay County Medical Center			
Nancy Carpenter  Mailing Address 602 Iowa  City State Zip Code Neodesha KS 66757-1570  FEC ID number of contributing federal political committee.  Name of Employer Wilson Medical Center  Receipt For: Primary General Other (specify) ▼  Date of Receipt  Transaction ID: 17796854  Amount of Each Receipt this Period  437.5		Primary General		e Year-to-Date ▼	
City  Neodesha  FEC ID number of contributing federal political committee.  Name of Employer Wilson Medical Center  Primary  Other (specify)   Aggregate Year-to-Date  State Zip Code  Transaction ID: 17796854  Amount of Each Receipt this Period  Aggregate Year-to-Date  437.5	-				Date of Receipt
City Neodesha  KS 66757-1570  FEC ID number of contributing federal political committee.  Name of Employer Wilson Medical Center  Receipt For: Primary General Other (specify) ▼  State Zip Code KS 66757-1570  Amount of Each Receipt this Period  437.50  Amount of Each Receipt this Period  437.50	•				M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer Wilson Medical Center  Receipt For: Primary General Other (specify)  Occupation CNO  Aggregate Year-to-Date  437.50		City	State	Zip Code	
Federal political committee.  Name of Employer Wilson Medical Center  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  437.50		Neodesha	KS	66757-1570	Amount of Each Receipt this Period
Wilson Medical Center  CNO  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  437.50			C		437.50
Primary General Other (specify) ▼  437.50		Name of Employer Wilson Medical Center		n	7
		Primary General	Aggregate		
SUBTOTAL of Receipts This Page (optional)		SUBTOTAL of Receipts This Page (optional)			825.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personant and address of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Stella Clark		Date of Receipt
Mailing Address PO Box 1032  City	State Zip Code	1 2 0 4 2 0 0 9  Transaction ID: 17796856
Parsons	KS 67357-1032	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	235.00
Name of Employer Labette Health	Occupation VP of Patient Services/CNO	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	
Full Name (Last, First, Middle Initial) Mr. Kevin P Conlin		Date of Receipt
Mailing Address 3720 East Bayley		12 04 7 2009
City	State Zip Code	Transaction ID: 17796857
<u>Wichita</u>	KS 67218-3002	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Via Christi Health System	Occupation President and Chief Executive Office	ır
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Michael A Dorsey		Date of Receipt
Mailing Address 8929 Parallel Parkwa	/	12 04 2009
City	State Zip Code	Transaction ID: 17796861
Kansas City	KS 66112-1689	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Providence Medical Center	Occupation President and Chief Executive Office	r
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	250.00	
		735.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports ar or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  American Hospital Association PAC	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Beth Hedberg Mailing Address 2570 First Avenue  City Marquette  FEC ID number of contributing	State Zip Code KS 67464-9801	Date of Receipt    M M
federal political committee.  Name of Employer Lindsborg Community Hospital Receipt For: Primary General Other (specify)	Occupation Nursing Administration  Aggregate Year-to-Date   325.00	312.50
Full Name (Last, First, Middle Initial) Mr. Leonard Hernandez  Mailing Address P O Box 937		Date of Receipt  1 2 0 4 2 0 0 9
City Elkhart  FEC ID number of contributing federal political committee.	State         Zip Code           KS         67950-0937	Transaction ID: 17796878  Amount of Each Receipt this Period  75.00
Name of Employer Morton County Health System Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Chief Executive Officer  Aggregate Year-to-Date   263.00	
Full Name (Last, First, Middle Initial) Mr. Everett Lutjemeier Mailing Address 304 East Third Stre	et	Date of Receipt  1 2 0 4 2 0 0 9
City Washington	State Zip Code KS 66968-2033	Transaction ID: 17796892  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	325.00
Name of Employer Washington County Hospital	Occupation Administrator	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
SUBTOTAL of Receipts This Page (optional	l)	712.50

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	for each ca	ate schedule(s) (check only one) (check only one)    X
Any information copied from such Reports ar	nd Statements may not be sold or	r used by any person for the purpose of soliciting contributions olitical committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	the name and address of any pe	Similar Committee to construct the many cash committee.
American Hospital Association PA		
Full Name (Last, First, Middle Initial) Mr. Gerald J Marquette, , Jr.		Date of Receipt
Mailing Address 1400 West Fourth	12 04 2009	
City	State Zip Code	Transaction ID: 17796895
Coffeyville	KS 67337-33	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Coffeyville Regional Medi- cal Center	Occupation Chief Executive Office	er
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date	250.00
Full Name (Last, First, Middle Initial) Mr. Scott J Taylor		Date of Receipt
Mailing Address 401 East Spuce Str	12 / 04 / 2009	
City	State Zip Code	Transaction 121
Garden City	KS 67846-56	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	375.00
Name of Employer St. Catherine Hospital	Occupation President and Chief E	Executive Officer
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date	375.00
Full Name (Last, First, Middle Initial) Mr. Samuel H Turner, , Sr.		Date of Receipt
Mailing Address Box 2923		12 04 2009
City	State Zip Code	Transaction ID: 17796919
Shawnee Mission	KS 66201-13	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Shawnee Mission Medical Center	Occupation Chief Executive Office	er
Receipt For:	Aggregate Year-to-Date	▼
Primary General Other (specify) ▼	0 0 0 0 0	250.00

NA	oformation against from auch Departs and Ch		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16
l <b>\</b>	nformation copied from such Reports and Stacommercial purposes, other than using the reason of COMMITTEE (In Full)	atements may	y not be sold or used by any person dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Ar	merican Hospital Association PAC			
Mr.	Il Name (Last, First, Middle Initial)  Steven D Wilkinson			Date of Receipt
Ма	ailing Address 5721 West 119th Street	t		12 04 2009
Cit	ty	State	Zip Code	Transaction ID: 17796928
<u>O</u>	verland Park	KS	66209-3722	Amount of Each Receipt this Period
	CC ID number of contributing deral political committee.	C		250.00
Na Me	ame of Employer enorah Medical Center	Occupation President	n t and Chief Executive Officer	
Re	eceipt For:	Aggregate	e Year-to-Date ▼	1
	Primary General Other (specify) ▼		500.00	
	II Name (Last, First, Middle Initial) ad Eustace			Date of Receipt
_	ailing Address 620 West Eighth Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Cit	ty	State	Zip Code	Transaction ID: 17801234
<u>Ki</u>	nsley	KS	67547-2329	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		350.00
Na Ed an	ame of Employer Iwards County Hospital d Healthcare	Occupation Trustee	n	
Re	eceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼	
	II Name (Last, First, Middle Initial) : William A Brown, , FACHE			Date of Receipt
Ма	ailing Address 77 North Airlite Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Cit		State	Zip Code	Transaction ID: 17802274
<u>El</u>	gin	<u> </u>	60123-4912	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		400.00
Pro <u>ital</u>		Occupation Presiden	n t and Chief Executive Officer	
Re	eceipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		400.00	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
A	ny information copied from such Reports and Si for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
∠ <b>A</b> .	Full Name (Last, First, Middle Initial) Ms. Lena Dobbs-Johnson Mailing Address 3435 West Van Buren	Street	Date of Receipt  1 2 0 9 2 0 0 9
	City Chicago	State Zip Code IL 60624-3312	Transaction ID: 17802275  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	400.00
	Name of Employer Advocate Bethany Hospital Receipt For:	Occupation President  Aggregate Year-to-Date ▼	<b>-</b>
	Primary General Other (specify) ▼	400.00	
3.	Full Name (Last, First, Middle Initial) Ms Susan Hayes Gordon Mailing Address 2300 Children's Plaza		Date of Receipt
	City	State Zip Code	1 2 0 9 2 0 0 9 Transaction ID: 17802277
	Chicago  FEC ID number of contributing federal political committee.	IL 60614-3394	Amount of Each Receipt this Period 800.00
	Name of Employer Children's Memorial Hospi- tal	Occupation Chief Public Policy Officer	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	]
_	Full Name (Last, First, Middle Initial) Mr Philip Gustafson		Date of Receipt
-	Mailing Address 400 North Pleasant Av	enue	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Centralia	State Zip Code IL 62801-3056	Transaction ID: 17802278  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	800.00
	Name of Employer St. Mary's Hospital	Occupation President & CEO	7
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼	
Γ	SUBTOTAL of Receipts This Page (optional)		2000.00

	HEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 194 (check only one)    X
	information copied from such Reports and Stor commercial purposes, other than using the	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
1	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Kenneth W Lukhard			Date of Receipt
Ν	Mailing Address 4440 West 95th Street			12 09 2009
(	Dity	State	Zip Code	Transaction ID: 17802283
(	Oak Lawn	IL	60453-2600	Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	C		800.00
	Name of Employer Advocate Christ Medical Center	Occupatio Presiden		
_	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	800.00	]
				Date of Receipt
_	Mailing Address 2500 West Reynolds			1 2 0 9 2 0 0 9
(	Dity	State	Zip Code	Transaction ID: 17802284
<u> </u>	Pontiac	IL	61764-2194	Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	C		800.00
	Name of Employer OSF Saint James - John W. Albrecht Med	Occupatio Presiden	n t and Chief Executive Office	 r
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 800.00	
	Full Name (Last, First, Middle Initial) Mr. David L. Schreiner			Date of Receipt
N	Mailing Address 1435 Tilton Park Drive			12 09 YYYYY 12 09 2009
(	Dity	State	Zip Code	Transaction ID: 17802495
<u>]</u>	Dixon	<u>IL</u>	61021-1437	Amount of Each Receipt this Period
f	EC ID number of contributing ederal political committee.	C		400.00
	Name of Employer Katherine Shaw Bethea Hos- pital	Occupatio Vice Pres		
F	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		400.00	]

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 194 (check only one)    X
An	y information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	not be sold or used by any person ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\ <u></u>	Full Name (Last, First, Middle Initial)  Ms. Connie L Schroeder  Mailing Address 640 West Washington	Street		Date of Receipt  1 2 0 9 2 0 0 9
	City	State	Zip Code	Transaction ID: 17802496
	Pittsfield  FEC ID number of contributing federal political committee.	C	62363-1350	Amount of Each Receipt this Period 400.00
	Name of Employer Illini Community Hospital  Receipt For: Primary General Other (specify)		ecutive Officer Year-to-Date ▼	
 B.	Full Name (Last, First, Middle Initial) Mr Bruce Smith Mailing Address 2025 Windsor Drive			Date of Receipt
	City	1 2 0 9 2 0 0 9 Transaction ID: 17802497		
	Oak Brook	State IL	Zip Code 60523-1586	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		800.00
	Name of Employer Advocate Health Care	Occupation Senior Vid	ce President Information Sy	est
	Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼	]
	Full Name (Last, First, Middle Initial) Mr. Guy R. Wiebking Mailing Address 55 W. Delaware			Date of Receipt
				12 09 2009
	City Chicago	State IL	Zip Code 60610-3360	Transaction ID: 17802501  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33010 3330	400.00
	Name of Employer Provena Health	Occupation President		
	Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 400.00	
	UBTOTAL of Receipts This Page (optional)	I		1600.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 194 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
7	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
<b>A</b> .	Full Name (Last, First, Middle Initial) Ms. Maryjane Wurth Mailing Address 1151 East Warrenville	Road		Date of Receipt  1 2 0 9 2 0 0 9
	City	State	Zip Code	Transaction ID: 17802502
	Naperville  FEC ID number of contributing federal political committee.	C	60563-9339	Amount of Each Receipt this Period  1200.00
	Name of Employer Illinois Hospital Association Receipt For:  ☐ Primary ☐ General Other (specify) ▼	Occupation President Aggregate		
3.	Full Name (Last, First, Middle Initial) Mr. Andrew Busz Mailing Address 300 Elliott Avenue Wes	st		Date of Receipt  1 2 1 0 2 0 0 9
	Suite 300 City	Transaction ID: 17803692		
	Seattle	WA	98119-4198	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		225.00
	Name of Employer Washington State Hospital Association Receipt For:		Financial Policy	
	Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 225.00	
- ;.	Full Name (Last, First, Middle Initial) Mr. Dennis A Popp			Date of Receipt
	Mailing Address P O Box 218			12 10 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 17803728
	Enumclaw  FEC ID number of contributing federal political committee.	C	98022-0218	Amount of Each Receipt this Period  350.00
	Name of Employer Enumclaw Regional Hospital	Occupation Administration	n trator and Chief Executive Of	fi
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)			1775.00
	TOTAL This Period (last page this line number of	only)		

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
A 0	r for commercial purposes, other than using th	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
۸.	Full Name (Last, First, Middle Initial) Ms. Susan Reiter		Date of Receipt
	Mailing Address PO Box 307		12 10 2009
	City Enumclaw	State Zip Code WA 98022-0307	Transaction ID: 17803729  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Name of Employer Franciscan Health System	Occupation Trustee	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
	Full Name (Last, First, Middle Initial) Ms. Pamela MacEwan		Date of Receipt
	Mailing Address 521 Wall Street		12 10 2009
	City Seattle	State Zip Code WA 98121-1536	Transaction ID: 17803735
	FEC ID number of contributing federal political committee.	C 90121-1330	Amount of Each Receipt this Period 250.00
	Name of Employer Group Health Eastside Hos- pital	Occupation Vice President, Public Affairs & Gover	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
. –	Full Name (Last, First, Middle Initial) Ms. Mariel S Kagan, , R.N., MS		Date of Receipt
	Mailing Address 2520 Cherry Avenue		1 2 1 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 17803737
	Bremerton FEC ID number of contributing federal political committee.	WA 98310-4229	Amount of Each Receipt this Period 250.00
	Name of Employer Harrison Medical Center	Occupation Vice President and Legal Counsel	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Г			

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate sche for each category of Detailed Summary	of the Crieck only one)
7	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	atements may not be sold or used b name and address of any political co	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Mr. Thomas Kruse Mailing Address 6860 NW RAnger Way City	State Zip Code	Date of Receipt  1 2 1 0 2 0 0 9  Transaction ID: 17803738
	<u>Silverdale</u>	WA 98383-6306	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 30003-0000	250.00
	Name of Employer Harrison Medical Center	Occupation Vice President	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	50.00
- В.	Full Name (Last, First, Middle Initial) Mr. Rand J Wortman Mailing Address 888 Swift Boulevard		Date of Receipt
	City	State Zip Code	Transaction ID: 17803739
	Richland	WA 99352-3542	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Kadlec Medical Center	Occupation President and Chief Executi	ive Officer
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	50.00
- C.	Full Name (Last, First, Middle Initial) Mr. Glen Marshall		Date of Receipt
	Mailing Address 300 Elliott Avenue Wes	t	12 10 2009
	City Seattle	State Zip Code WA 98119-4198	Transaction ID: 17803749
	FEC ID number of contributing federal political committee.	WA 98119-4198	Amount of Each Receipt this Period  250.00
	Name of Employer Kennewick General Hospital	Occupation Chief Executive Officer	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	50.00
	SUBTOTAL of Receipts This Page (optional)		750.00
f	TOTAL This Period (last page this line number of		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 194 (check only one)    X	
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)  American Hospital Association PA	and Statements may not be sold or used by any persor g the name and address of any political committee to s	for the purpose of soliciting contributions	
Full Name (Last, First, Middle Initial) Dr. George J Brown, , M.D. Mailing Address 1919 NW Lovejoy City	State Zip Code	Date of Receipt  1 2 1 0 2 0 0 9  Transaction ID: 17803750	
Portland  FEC ID number of contributing federal political committee.	OR 97209-1503	Amount of Each Receipt this Period 250.00	
Name of Employer Legacy Health System  Receipt For:  Primary General  Other (specify) ▼	Occupation President and Chief Executive Officer  Aggregate Year-to-Date   250.00		
Full Name (Last, First, Middle Initial) Mr George Cioffi, MD Mailing Address 2211 Northeast 13			
City	State Zip Code	1 2 1 0 2 0 0 9 Transaction ID: 17803751	
Vancouver	WA 98686-2742	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	250.00	
Name of Employer Legacy Salmon Creek Hospi- tal	Occupation Board Member		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		
Full Name (Last, First, Middle Initial) Mr. Thomas W Wilbur		Date of Receipt	
Mailing Address 714 West Pine Str	reet	12 10 2009	
City	State Zip Code	Transaction ID: 17803752	
Newport  FEC ID number of contributing federal political committee.	WA 99156-9046	Amount of Each Receipt this Period 375.00	
Name of Employer Newport Hospital and Heal- th Services Receipt For:	Occupation Chief Executive Officer and Superinter Aggregate Year-to-Date	<u>1</u>	
Primary General Other (specify) ▼	375.00		
	nal)	875.00	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 194 (check only one)    X
Ar	for commercial purposes, other than using th	Statements may not be sold or used by any perse e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۸.	Full Name (Last, First, Middle Initial)  Mr. Harold S Geller  Mailing Address 315 North 14th Street		Date of Receipt
			12 10 2009
	City Othello	State Zip Code WA 99344-1297	Transaction ID: 17803753  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Othello Community Hospital	Occupation Administrator	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
-	Full Name (Last, First, Middle Initial)  Ms. Andrea Nenzel  Mailing Address 14422 SE Feetgets M	Date of Receipt	
	Mailing Address 14432 SE Eastgate W	12 10 2009	
	City Bellevue	State Zip Code WA 98007-6493	Transaction ID: 17803797
	FEC ID number of contributing federal political committee.	C 30007-0493	Amount of Each Receipt this Period 250.00
	Name of Employer PeaceHealth	Occupation Administrator	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼  250.00	
. —	Full Name (Last, First, Middle Initial) Mr. Josiah Johnson		Date of Receipt
	Mailing Address 1615 Delaware Street		12 10 2009
	City	State Zip Code	Transaction ID: 17803798
	Longview FEC ID number of contributing federal political committee.	WA 98632-2394	Amount of Each Receipt this Period 250.00
	Name of Employer PeaceHealth	Occupation Chief Executive Officer	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
			750.00

	FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
A	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
. ∠ \.	Full Name (Last, First, Middle Initial) Mr. Thomas Corley		Date of Receipt
	Mailing Address North 5633 Lidgerwoo		12 10 2009
	City	State Zip Code	Transaction ID: 17803799
	Spokane FEC ID number of contributing federal political committee.	WA 99208-1224	Amount of Each Receipt this Period 350.00
	Name of Employer Holy Family Hospital	Occupation	
		President	
	Receipt For:  ☐ Primary ☐ General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
_ s.	Full Name (Last, First, Middle Initial) Mr. Dan Harris	Date of Receipt	
	Mailing Address 2934 Westside Drive N	12 10 2009	
	City	Transaction ID: 17803800	
	Olympia	WA 98502-3277	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Providence Health System	Occupation Regional CFO	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼  250.00	
_	Full Name (Last, First, Middle Initial) Mr Michael Marsh		Date of Receipt
	Mailing Address 1321 Colby Avenue	12 10 2009	
	City	State Zip Code	Transaction ID: 17803801
	Everett	WA 98201-1665	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Providence Everett Medical Center - Co	Occupation Chief Operations & Strategy Officer	
	Receipt For:	Aggregate Year-to-Date ▼	_ [
	Primary General Other (specify) ▼	250.00	
			850.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 17		
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may not be sold or used by any perso the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) American Hospital Association PAC				
Full Name (Last, First, Middle Initial)  Ms. Patricia De Groodt		Date of Receipt		
Mailing Address 506 Second Avenue Suite 1200		1 2 1 0 1 0 1 0 0 9		
City Seattle	State Zip Code WA 98104-2343	Transaction ID: 17804001  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	250.00		
Name of Employer Providence Health System	Occupation Hospital Administrator			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial) Mr Preston M Simmons		Date of Receipt		
Mailing Address 1321 Colby Avenue	)	12 10 2009		
City	·			
Everett	WA 98201-1665	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	250.00		
Name of Employer Providence Regional Medic- al Center Eve	Occupation Chief Operating Officer			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial) Ms. Kim Williams		Date of Receipt		
Mailing Address 2815 Kayak View P	lace	12 10 2009		
City	State Zip Code	Transaction ID: 17804003		
Camano Island  FEC ID number of contributing federal political committee.	WA 98282-5022	Amount of Each Receipt this Period 250.00		
Name of Employer Providence Regional Medic-	Occupation	_		
<u>al Center Eve</u>	Interim CNE	4		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00			
SUBTOTAL of Receipts This Page (optional	l) <b>&gt;</b>	750.00		
TOTAL This Period (last page this line num	ber only)			

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)  American Hospital Association PA	and Statements may not be sold or used by any person g the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Ms. Elaine Couture  Mailing Address 101 West Eighth A		Date of Receipt    M M
Spokane  FEC ID number of contributing federal political committee.	State Zip Code WA 99204-2307	Transaction ID: 17804004  Amount of Each Receipt this Period  500.00
Name of Employer Providence Sacred Heart Medical Center Receipt For:  Primary General Other (specify) ▼	Occupation Vice President  Aggregate Year-to-Date   500.00	
Full Name (Last, First, Middle Initial) Mr. Clarence (Bud) Barnes Mailing Address 101 West Eighth A	Date of Receipt  1 2 1 0 2 0 0 9	
City	State Zip Code	Transaction ID: 17804005
Spokane	WA 99204-2307	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Providence Sacred Heart Medical Center Receipt For:  Primary General Other (specify) ▼	Occupation CEO  Aggregate Year-to-Date   250.00	
Full Name (Last, First, Middle Initial) Mr. Kenneth A Samet		Date of Receipt
Mailing Address 8820 Burdette Roa	ad	12 10 2009
City	State Zip Code	Transaction ID: 17804143
Bethesda  FEC ID number of contributing federal political committee.	MD 20817-2807	Amount of Each Receipt this Period  1000.00
Name of Employer MedStar Health	Occupation President and Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (option	nal)	1750.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	f	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 194 (check only one)    X   11a
A	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may not e name and address	be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Dr. Jeff Collins			Date of Receipt
	Mailing Address 101 West Eighth Aver	nue		12 10 2009
	City	State	Zip Code	Transaction ID: 17804194
	Spokane	WA	99204-2307	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Providence Sacred Heart Medical Center	Occupation Chief Medica	al Officer	
	Receipt For:	Aggregate Yea	ar-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
	Full Name (Last, First, Middle Initial) Mr. Gerard Fischer			Date of Receipt
	Mailing Address 5909 West Pima Cou	12 10 2009		
	City	State	Zip Code	Transaction ID: 17804196
	Spokane	WA	99208-9010	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Providence Sacred Heart Medical Center	Occupation Vice Preside	nt- Systems Developme	nt
	Receipt For:	Aggregate Yea	ar-to-Date ▼	
	Primary General Other (specify)		250.00	
	Full Name (Last, First, Middle Initial) Ms. Medrice Coluccio			Date of Receipt
	Mailing Address 413 Lilly Road NE			1 2 1 0 2 0 0 9
	City	State	Zip Code	Transaction ID: 17804197
	<u>Olympia</u>	WA	98506-5133	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Providence St. Peter Hosp- ital	Occupation Chief Execut	ive Officer	
	Receipt For:	Aggregate Yea	ar-to-Date 🔻	
	Primary General Other (specify) ▼	0 0 0	250.00	
Г				750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 11			
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any persor name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)  American Hospital Association PAC					
Full Name (Last, First, Middle Initial) Mr. James Leonard		Date of Receipt			
Mailing Address 413 Lilly Road NE  City	State Zip Code	1 2 1 0 2 0 0 9 Transaction ID: 17804198			
<u>Olympia</u>	WA 98506-5166	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	250.00			
Name of Employer Providence St. Peter Hosp- ital	Occupation Administrator	_			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00				
Full Name (Last, First, Middle Initial)  Mr. Paul Wilkinson		Date of Receipt			
Mailing Address 6922 Quartz Lane NE	Mailing Address 6922 Quartz Lane NE				
City	,				
<u>Olympia</u>	WA 98516-9197	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	250.00			
Name of Employer Providence St. Peter Hosp- ital	Occupation Chief Operating Officer				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00				
Full Name (Last, First, Middle Initial) Mr. Gregg A Davidson, , FACHE		Date of Receipt			
Mailing Address P O Box 1376		1 2 1 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City	State Zip Code	Transaction ID: 17804200			
Mount Vernon	WA 98273-1376	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	350.00			
Name of Employer Skagit Valley Hospital	Occupation Chief Executive Officer				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General Other (specify) ▼	350.00				
SUBTOTAL of Receipts This Page (optional)		850.00			
TOTAL This Period (last page this line number of	<u> </u>				

	EHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 194 (check only one)    X
or f	r information copied from such Reports and Si or commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Renate M. Atkins			Date of Receipt
	Mailing Address 300 Elliott Avenue Wes Suite 300			12 10 2009
	City	State WA	Zip Code	Transaction ID: 17804201
	Seattle FEC ID number of contributing federal political committee.	C	98119-4198	Amount of Each Receipt this Period 250.00
	Name of Employer Southwest Washington Medical Center Receipt For: Primary General Other (specify)	<del>. '                                   </del>	erating Officer  Year-to-Date   250.00	
•	Full Name (Last, First, Middle Initial) Mr. Dan Dixon Mailing Address 747 Broadway Avenue			Date of Receipt
	City	State	Zip Code	12 10 2009
	Seattle	WA	98122-4379	Transaction ID: 17804202  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
•	Name of Employer Swedish Health Services	Occupation Administ		
•	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Mr. Martin Siegel Mailing Address 747 Broadway Avenue			Date of Receipt
				12 10 2009
	City Seattle	State WA	Zip Code 98122-4379	Transaction ID: 17804203  Amount of Each Receipt this Period
•	FEC ID number of contributing federal political committee.	C	30122-4373	250.00
•	Name of Employer Swedish Health Services	Occupation	1	
-	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
SI	IBTOTAL of Receipts This Page (optional)			750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 194 (check only one)  X 11a 11b 11c 12  13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any persor e name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Henry Turner		Date of Receipt
Mailing Address 1654 103rd S.E.		12 10 2009
City	State Zip Code	Transaction ID: 17804204
Bellevue	WA 98004-7001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Swedish Health Services	Occupation Chairman	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr Robert A Caplan	1	Date of Receipt
Mailing Address 1100 Ninth Avenue		1 2 1 0 2 0 0 9
City	State Zip Code	Transaction ID: 17804205
Seattle	WA 98101-2756	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Virginia Mason Medical Ce- nter	Occupation  Medical Director of Quality	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr Andrew Jacobs	1	Date of Receipt
Mailing Address 1100 Ninth Avenue		12 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Seattle</u>	State Zip Code WA 98101-2756	Transaction ID: 17804206  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 30101-2730	250.00
Name of Employer Virginia Mason Medical Ce- nter	Occupation Chief Medical Officer	1
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	·····	750.00

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

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16
Ar	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	statements may not be sold or used by any person ename and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Kathleen Paul		Date of Receipt
	Mailing Address 1100 Ninth Avenue	Ohata Zin Oada	12 10 2009
	City Seattle	State Zip Code WA 98101-2756	Transaction ID: 17804207  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Virginia Mason Medical Center	Occupation Administrator	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	]
	Full Name (Last, First, Middle Initial) Mr. James C Cannon	Date of Receipt	
	Mailing Address 12844 Military Road S	12 10 YYYY 12 10 2009	
	City	State Zip Code	Transaction ID: 17804208
	Seattle	WA 98168-9981	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Regional Hospital for Res- piratory and	Occupation Administrator and Chief Executive Of	ffi
	Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
	Other (specify)	250.00	
	Full Name (Last, First, Middle Initial) Mr. Russell M. Myers		Date of Receipt
	Mailing Address 2908 Shelton Avenue	12 10 2009	
	City	State Zip Code	Transaction ID: 17804212
	Yakima	WA 98902-4073	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Yakima Valley Memorial Ho- spital	Occupation Vice President	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
			750.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or fo	information copied from such Reports and S r commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	IAME OF COMMITTEE (In Full) American Hospital Association PAC			
A. <u>N</u>	ull Name (Last, First, Middle Initial)  Mr Jack Evans			Date of Receipt
_	Mailing Address 1201 South Miller Stre	et 		12 10 2009
	ity Venatchee	State WA	Zip Code 98801-3201	Transaction ID: 17804213
F	EC ID number of contributing ederal political committee.	C	90001-3201	Amount of Each Receipt this Period  500.00
N C a	lame of Employer Central Washington Hospit- I	Occupation Presiden	n t and CEO	
F	eceipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
B. <u>N</u>	full Name (Last, First, Middle Initial)  Mr. Ronald O'Halloran  Mailing Address 36 Klondike Road			Date of Receipt
_				12 10 2009
	ity Republic	State WA	Zip Code 99166-9701	Transaction ID: 17804214  Amount of Each Receipt this Period
F	EC ID number of contributing ederal political committee.	C	33100-3701	500.00
	lame of Employer erry County Memorial Hos- ital	Occupation Administ		
F	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	]
	ull Name (Last, First, Middle Initial) fr. Joseph W. Wilczek			Date of Receipt
M	Mailing Address 1175 SW 296th Street			12 10 2009
	ity	State	Zip Code	Transaction ID: 17804215
_	ederal Way	WA	98023-8251	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		500.00
_	lame of Employer ranciscan Health System	Occupation Presiden	t & CEO	
F	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUI	BTOTAL of Receipts This Page (optional)			1500.00
	TAL This Period (last page this line number		<u> </u>	

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
A C	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Mr. Scott E. Armstrong			Date of Receipt
	Mailing Address 3855 44th Avenue NE			12 10 7 2009
	City <u>Seattle</u>	State WA	Zip Code 98105-5448	Transaction ID: 17804216  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Group Health Eastside Hos- pital	Occupatio Executive	n e Vice President	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) Mr. Peter Morgan			Date of Receipt
	Mailing Address 2700 152nd Avenue N	12 10 2009		
	City Redmond	State WA	Zip Code	Transaction ID: 17804217
	FEC ID number of contributing federal political committee.	C	98052-5543	Amount of Each Receipt this Period 500.00
	Name of Employer Group Health Eastside Hos- pital	Occupatio Chief Exc	n ecutive Officer	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
_ C.	Full Name (Last, First, Middle Initial) Mr. Scott W Bosch	Date of Receipt		
	Mailing Address 2520 Cherry Avenue	1 2 1 0 2 0 0 9		
	City	State	Zip Code	Transaction ID: 17804218
	Bremerton FEC ID number of contributing federal political committee.	C	98310-4270	Amount of Each Receipt this Period 500.00
	Name of Employer Harrison Medical Center	Occupatio Presiden	n t and Chief Executive Office	r
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			1500.00
	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	(3)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 194 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  American Hospital Association PAC	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Mr. John Wallen  Mailing Address 2520 Cherry Avenue	e		Date of Receipt
City Bremerton FEC ID number of contributing	State WA	Zip Code 98310-4229	1 2 1 0 2 0 0 9  Transaction ID: 17804219  Amount of Each Receipt this Period  500.00
Receipt For:  Primary  General	Occupatio CEO	e Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Ms. Diane Cecchettini, RN, MS Mailing Address 12709 54th Avenue	, NW	500.00	Date of Receipt  1 2 1 0 2 0 0 9
City  Gig Harbor  FEC ID number of contributing federal political committee.	State WA	Zip Code 98332-8853	Transaction ID: 17804220  Amount of Each Receipt this Period  500.00
Name of Employer MultiCare Health System  Receipt For:  Primary General  Other (specify) ▼		n t and Chief Executive Officer e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Alan R Yordy Mailing Address 14432 SE Eastgate Way, Ste 300			Date of Receipt
City Bellevue	State WA	Zip Code 98007-6493	Transaction ID: 17804221  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer PeaceHealth	Occupatio	n t and Chief Mission Officer	750.00
Receipt For:  Primary General  Other (specify) ▼	<del> </del>	Year-to-Date ▼ 1500.00	
SUBTOTAL of Receipts This Page (optional	)		1750.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 194 (check only one)    X
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC			
۸.	Full Name (Last, First, Middle Initial) Mr. John Fletcher			Date of Receipt
	Mailing Address 506 Second Avenue Suite 1200			12 10 2009
	City Seattle	State WA	Zip Code 98104-2343	Transaction ID: 17804223  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1 1	500.00
	Name of Employer Providence Health & Servi- ces	Occupation Vice Pres	n sident&Chief Executive Office	eer eer
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
. –	Full Name (Last, First, Middle Initial) Mr Greg Van Pelt			Date of Receipt
	Mailing Address 506 Second Avenue, S	12 10 2009		
	City Seattle	State WA	Zip Code 98104-2329	Transaction ID: 17804224
	FEC ID number of contributing federal political committee.	C	30104-2329	Amount of Each Receipt this Period 500.00
	Name of Employer Providence Health & Servi- ces	Occupation Vice Pres	n sident and Chief Regional O	per
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
_	Full Name (Last, First, Middle Initial) Mr. David T. Brooks	Date of Receipt		
	Mailing Address 1321 Colby Avenue			12 10 YYYYY 12 10 2009
	City	State WA	Zip Code	Transaction ID: 17804225
	Everett  FEC ID number of contributing federal political committee.	C	98201-1600	Amount of Each Receipt this Period 500.00
	Name of Employer Providence Health System/- NWSA	Occupation CEO	n	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)	ı		1500.00

A.

В.

C.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 194 (check only one)  X 11a 11b 11c 12			
Any information copied from such Reports and State or for commercial purposes, other than using the results of the state o	atements may not be sold or used by any personame and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) American Hospital Association PAC	, , , , , , , , , , , , , , , , , , ,				
Full Name (Last, First, Middle Initial) Mr. Gary V Peck		Date of Receipt			
Mailing Address P O Box 197	Mailing Address P O Box 197				
City	State Zip Code	Transaction ID: 17804226			
Chewelah  FEC ID number of contributing federal political committee.	WA 99109-0197	Amount of Each Receipt this Period 750.00			
Name of Employer Providence St. Joseph's Hospital Receipt For:  Primary  General  Other (specify) ▼	Occupation President  Aggregate Year-to-Date   750.00				
Full Name (Last, First, Middle Initial) Mr. Joseph M Kortum		Date of Receipt			
Mailing Address P O Box 1600		12 10 2009			
City	State Zip Code WA 98668-1600	Transaction ID: 17804227			
Vancouver  FEC ID number of contributing federal political committee.	WA 98668-1600	Amount of Each Receipt this Period  500.00			
Name of Employer Southwest Washington Medical Center Receipt For: Primary General	Occupation President and Chief Executive Officer Aggregate Year-to-Date ▼ 500.00				
Other (specify) ▼	300.00				
Full Name (Last, First, Middle Initial) Mr. Jon D Smiley		Date of Receipt			
Mailing Address P O Box 719		1 2 1 0 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City Sunnyside	State Zip Code WA 98944-0719	Transaction ID: 17805107  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	500.00			
Name of Employer Sunnyside Community Hospi- tal	Occupation Chief Executive Officer				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00				
SUBTOTAL of Receipts This Page (optional)		1750.00			

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS  Any information copied from such Reports and S	Use separate schedule(s) for each category of the Detailed Summary Page  Statements may not be sold or used by any person	FOR LINE NUMBER: PAGE 53 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 17  for the purpose of soliciting contributions			
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	e name and address of any political committee to s	olicit contributions from such committee.			
Full Name (Last, First, Middle Initial) Dr. Rodney F Hochman, , M.D.  Mailing Address 747 Broadway Avenue	9	Date of Receipt			
City	State Zip Code	Transaction ID: 17805108			
Seattle	WA 98122-4379	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	500.00			
Name of Employer Swedish Health Services	Occupation Chief Executive Officer				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00				
Full Name (Last, First, Middle Initial) Mr Calvin K Knight	1	Date of Receipt			
Mailing Address 747 Broadway Avenue	<u> </u>				
City Seattle	State Zip Code WA 98122-4307	Transaction ID: 17805109			
FEC ID number of contributing federal political committee.	C 96122-4507	Amount of Each Receipt this Period 500.00			
Name of Employer Swedish Health Services	Occupation Chief Operating Officer				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00				
Full Name (Last, First, Middle Initial) Mr. Marcel C Loh, , FACHE		Date of Receipt			
Mailing Address 500 17th Avenue		12 10 YYYYY 12 10 2009			
City <u>Seattle</u>	State Zip Code WA 98124-5711	Transaction ID: 17805110  Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	500.00			
Name of Employer Swedish Medical Center-Ch- erry Hill Cam	Occupation Senior Vice President and Chief Admir	1			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00				
SUBTOTAL of Receipts This Page (optional) .	<u> </u>	1500.00			

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

mation copied from such Reports and S nmercial purposes, other than using the E OF COMMITTEE (In Full) rican Hospital Association PAC ame (Last, First, Middle Initial) ary Kaplan g Address 1100 Ninth Avenue  tle D number of contributing al political committee.  of Employer ia Mason Medical Ce- pt For: Primary General Other (specify)  ame (Last, First, Middle Initial) arah Patterson g Address 1100 Ninth Avenue	State Zip Code WA 98101-2799  C  Occupation Chief Executive Officer Aggregate Year-to-Date  State Zip Code	Date of Receipt    M M
ame (Last, First, Middle Initial) ary Kaplan g Address 1100 Ninth Avenue  tle  D number of contributing al political committee.  of Employer ia Mason Medical Cept For: Primary General Other (specify)  ame (Last, First, Middle Initial) arah Patterson	WA 98101-2799  C Occupation Chief Executive Officer Aggregate Year-to-Date ▼  500.00	Transaction ID: 17805111  Amount of Each Receipt this Period  500.00  Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
ary Kaplan g Address 1100 Ninth Avenue  ttle  D number of contributing al political committee.  of Employer ia Mason Medical Cept For: Primary General Other (specify)  ame (Last, First, Middle Initial) arah Patterson	WA 98101-2799  C Occupation Chief Executive Officer Aggregate Year-to-Date ▼  500.00	Transaction ID: 17805111  Amount of Each Receipt this Period  500.00  Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
tle  D number of contributing al political committee.  of Employer ia Mason Medical Ce- pt For: Primary General Other (specify) ▼  ame (Last, First, Middle Initial) arah Patterson	WA 98101-2799  C Occupation Chief Executive Officer Aggregate Year-to-Date ▼  500.00	1 2
D number of contributing al political committee.  of Employer ia Mason Medical Cept For: Primary General Other (specify)  ame (Last, First, Middle Initial) arah Patterson	WA 98101-2799  C Occupation Chief Executive Officer Aggregate Year-to-Date ▼  500.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
D number of contributing al political committee.  of Employer ia Mason Medical Cept For: Primary General Other (specify)  ame (Last, First, Middle Initial) arah Patterson	C Occupation Chief Executive Officer Aggregate Year-to-Date ▼  500.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
pt For: Primary General Other (specify) ▼  ame (Last, First, Middle Initial) arah Patterson	Chief Executive Officer  Aggregate Year-to-Date ▼  500.00	1 2 1 0 / Y Y Y Y Y Y
Primary General Other (specify) ▼  ame (Last, First, Middle Initial) arah Patterson	500.00	1 2 1 0 / Y Y Y Y Y Y
arah Patterson	State 7in Code	1 2 1 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	State Zin Code	
tle	WA 98101-2756	Transaction ID: 17805113  Amount of Each Receipt this Period
D number of contributing all political committee.	C	500.00
of Employer ia Mason Medical Ce-	Occupation Executive VP/Chief Operating Officer	<del>-</del>
pt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 500.00	
ame (Last, First, Middle Initial) ctoria S. Galanti		Date of Receipt
g Address 300 Elliott Avenue W. Ste. 300		12 10 7 2009
tla	•	Transaction ID: 17805114
D number of contributing all political committee.	C 90113-4136	Amount of Each Receipt this Period  500.00
of Employer iington State Hospital ciation	Occupation Executive Vice President	
pt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
TAL of Receipts This Page (ontional)		1500.00
	ot For: Primary General Other (specify)   ame (Last, First, Middle Initial) ctoria S. Galanti g Address 300 Elliott Avenue W. Ste. 300  tile D number of contributing al political committee.  of Employer ington State Hospital ciation pt For: Primary General Other (specify)   TAL of Receipts This Page (optional)	ot For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  500.00  ame (Last, First, Middle Initial) ctoria S. Galanti g Address 300 Elliott Avenue W. Ste. 300  State Zip Code WA 98119-4198  D number of contributing all political committee.  of Employer ington State Hospital citation pt For: Primary General  Executive VP/Ciner Operating Officer  Aggregate Year-to-Date ▼  C  Occupation Executive Vice President  Aggregate Year-to-Date ▼

	JLE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 194 (check only one)  X 11a 11b 11c 12  13 14 15 16 11
or for comme	ion copied from such Reports and St ercial purposes, other than using the F COMMITTEE (In Full) an Hospital Association PAC	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Mr. Leo F.	e (Last, First, Middle Initial) Greenawalt ddress 4423 E. Sequim Bay R	oad		Date of Receipt
City <u>Sequim</u>		State WA	Zip Code 98382-9679	Transaction ID: 17805115  Amount of Each Receipt this Period
	umber of contributing olitical committee.	C		500.00
Associati Receipt F Prir			n t and Chief Executive Office e Year-to-Date ▼ 500.00	r ]
Full Name Mr. Randy Mailing A		st		Date of Receipt  1 2 1 0 2 0 0 9
City		State	Zip Code	Transaction ID: 17805116
	umber of contributing olitical committee.	C	98119-4198	Amount of Each Receipt this Period 500.00
Associati Receipt F Prir	ton'Státe Hospital on		n Policy & Public Affairs e Year-to-Date ▼ 500.00	
Full Name	e (Last, First, Middle Initial)			Date of Receipt
Mailing A		12 10 2009		
City <u>Seattle</u>		State WA	Zip Code 98119-4198	Transaction ID: 17805117
FEC ID n	umber of contributing litical committee.	C	90119-4190	Amount of Each Receipt this Period 500.00
<u>Associati</u>	-		nent Relations Officer	
	or: mary General er (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
SUBTOTAL	of Receipts This Page (optional)			1500.00

rinformation copied from such Reports and or commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Richard W Linneweh, , Jr. Mailing Address 2811 Tieton Drive	Statements may not be sold or used by any person e name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
American Hospital Association PAC Full Name (Last, First, Middle Initial) Mr. Richard W Linneweh, , Jr.		
Mr. Richard W Linneweh, , Jr.		
Mailing Address 2811 Tieton Drive		Date of Receipt
S !:		12 10 2009
City Yakima	State Zip Code WA 98902-3799	Transaction ID: 17805119  Amount of Each Receipt this Period
FEC ID number of contributing	C	500.00
spital	Occupation President and Chief Executive Officer  Aggregate Year-to-Date   500.00	-
Dr. Gregory D. Sawyer, MD, PhD.	Date of Receipt	
City	State Zip Code	Transaction ID: 17805120
Yakima	WA 98908	Amount of Each Receipt this Period
	C	500.00
spital	Occupation Director, Organizational Health Willne  Aggregate Year-to-Date   500.00	- -
		Date of Receipt
	1 2 1 1 2 0 0 9	
•	State Zip Code	Transaction ID: 17805447
•	TX 76006-4836	Amount of Each Receipt this Period
	C	350.00
	<u> </u>	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
BTOTAL of Receipts This Page (optional).		1350.00
	Yakima  FEC ID number of contributing federal political committee.  Name of Employer Yakima Valley Memorial Hospital Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Dr. Gregory D. Sawyer, MD, PhD.  Mailing Address 11503 Sara Loop Road Gity Yakima  FEC ID number of contributing federal political committee.  Name of Employer Yakima Valley Memorial Hospital Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Ms. Joan Shinkus Clark, MSN, RN, N  Mailing Address 2110 Royal Dominion City Arlington  FEC ID number of contributing federal political committee.  Name of Employer Texas Health Resources  Receipt For:  Primary General Other (specify) ▼	Yakima  WA 98902-3799  FEC ID number of contributing federal political committee.  Name of Employer Yakima Valley Memorial Hospital Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Dr. Gregory D. Sawyer, MD, PhD.  Mailing Address 11503 Sara Loop Road  City State Zip Code WA 98908  FEC ID number of contributing federal political committee.  Name of Employer Yakima Valley Memorial Hospital Receipt For:  Primary General Other (specify) ▼  C Cucupation Director, Organizational Health Willne Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Director, Organizational Health Willne Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Ms. Joan Shinkus Clark, MSN, RN, N Mailing Address 2110 Royal Dominion Ct  City State Zip Code TX 76006-4836  C C State Zip Code TX 76006-4836  C C State Zip Code TX 76006-4836  C State Zip Code TX 76006-4836  C State Typ Code TX 76006-4836

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	<b>.)</b>	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 / 194 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American Hospital Association PAC	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Hollie Phillips			Date of Receipt
Mailing Address 237 Kingsway Dr City	State	Zip Code	1 2 1 1 2 0 0 9  Transaction ID: 17806477
Lexington	KY	40502-1642	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10002 1012	400.00
Name of Employer Appalachian Regional Heal- thcare	Occupatio VP Corpo	n orate Startegy	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 400.00	]
Full Name (Last, First, Middle Initial) Mr. Mark Klein Mailing Address 185 Berry Street	L		Date of Receipt
			12 11 2009
City	State	Zip Code	Transaction ID: 17806480
San Francisco	CA	94107-5705	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Catholic Healthcare West	Occupatio Vice Pres		
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial) Ms Julie Hester, MPM, BSN,			Date of Receipt
Mailing Address 569 Kimble Dr			12 11 2009
City	State	Zip Code	Transaction ID: 17806488
Glenshaw	PA	15116-2366	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.			300.00
Name of Employer St. Francis Hospital	Occupatio Presiden	t & CEO	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional	, .		1200.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 11			
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)  American Hospital Association PAC					
Full Name (Last, First, Middle Initial) Mr. Michael C Patterson		Date of Receipt			
Mailing Address 425 Home Street		12 11 2009			
City	State Zip Code	Transaction ID: 17806496			
Georgetown	OH 45121-1407	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer Brown County General Hosp- ital	Occupation Chief Executive Officer				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General Other (specify) ▼	225.00				
Full Name (Last, First, Middle Initial) Mr. Peter E Makowski		Date of Receipt			
Mailing Address 4231 West 16th Ave	Mailing Address 4231 West 16th Avenue				
City	State Zip Code	Transaction ID: 17806504			
Denver	CO 80204-1335	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	250.00			
Name of Employer St. Anthony Central Hospi- tal	Occupation Chief Executive Officer				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General Other (specify) ▼	250.00				
Full Name (Last, First, Middle Initial) Mr. Michael L. Fordyce	,				
Mailing Address 3425 South Clarkson	Mailing Address 3425 South Clarkson Street				
City	State Zip Code	Transaction ID: 17806734			
Englewood	CO 80113-2811	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer Craig Hospital	Occupation CEO				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00				
SUBTOTAL of Receipts This Page (optional)		350.00			
TOTAL This Period (last page this line number	·				

	JLE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 194 (check only one)    X
or for comme	on copied from such Reports and St ercial purposes, other than using the COMMITTEE (In Full) In Hospital Association PAC	atements mand add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Mr. Jeffrey	e (Last, First, Middle Initial) D Selberg ddress 2420 West 26th Ave, S	te 100-D		Date of Receipt  1 2 1 1 2 2 0 0 9
City Denver		State CO	Zip Code 80211-5302	Transaction ID: 17806737  Amount of Each Receipt this Period
	umber of contributing litical committee.	C		250.00
Receipt F	Employer Healthcare, Inc. or: nary General er (specify)		t and CEO e Year-to-Date ▼ 250.00	
Ms. Janet	e (Last, First, Middle Initial) Stephens ddress 6014 Watson Drive			Date of Receipt  1 2 1 1 2 2 0 0 9
City		State	Zip Code	Transaction ID: 17806744
	lins umber of contributing litical committee.	CO	80528-8877	Amount of Each Receipt this Period  125.00
tion Receipt F	Employer Hospital Associa- or: nary General er (specify)		n sident of Government Affairs • Year-to-Date ▼ 250.00	
Full Name	e (Last, First, Middle Initial) Wisdom			Date of Receipt
Mailing Ad	ddress P O Box 912			12 11 2009
City Rifle		State CO	Zip Code 81650-0912	Transaction ID: 17806748  Amount of Each Receipt this Period
FEC ID n	umber of contributing litical committee.	C	01030-0912	250.00
<u>rict</u>	Employer ver Hospital Dist-		ecutive Officer	
	or: nary General er (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL	of Receipts This Page (optional)			625.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 60 / 194 (check only one)    X   11a
A C	any information copied from such Reports and S r for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC			
۸.	Full Name (Last, First, Middle Initial) Mr. Steven A. Millard			Date of Receipt
	Mailing Address 615 N. 7th Street		7: 0 !	12 14 2009
	City <u>Eag</u> le	State ID	Zip Code 83702-5502	Transaction ID: 17807698  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Idaho Hospital Association	Occupatio Presiden		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
 3.	Full Name (Last, First, Middle Initial) Mr Bruce Harlow			Date of Receipt
	Mailing Address 2520 Cherry Avenue			12 10 2009
	City	State	Zip Code	Transaction ID: 17808020
	Bremerton  FEC ID number of contributing federal political committee.	C	98310-4229	Amount of Each Receipt this Period 250.00
	Name of Employer Harrison Medical Center	Occupatio Board Me		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
. –	Full Name (Last, First, Middle Initial) Dr. Peter N Herbert, , M.D.	Date of Receipt		
	Mailing Address 789 Howard Avenue	12 15 2009		
	City New Haven	State CT	Zip Code 06519-1304	Transaction ID: 17808780
	FEC ID number of contributing federal political committee.	C	06319-1304	Amount of Each Receipt this Period  350.00
	Name of Employer Yale New Haven Health Sys- tem	Occupatio Senior V	n ice President Medical Affairs	<b>S</b>
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
Г		<u> </u>		1100.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 194 (check only one)    X   11a
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	statements may not be sold or used by any poen ame and address of any political committe	erson for the purpose of soliciting contributions ee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. O. Joseph Bizzozero Mailing Address 51 Curtis Farms Rd  City Middlebury  FEC ID number of contributing federal political committee.  Name of Employer Waterbury Hospital	State Zip Code CT 06762-3013  C	Date of Receipt    M M M
Receipt For: Primary General Other (specify)	Director  Aggregate Year-to-Date ▼  350.00	
Full Name (Last, First, Middle Initial) Mr. Charles L Denton Mailing Address 960 Avent Drive		Date of Receipt  1 2 1 1 2 2 0 0 9
City	State Zip Code	Transaction ID: 17808986
Grenada FEC ID number of contributing federal political committee.	MS 38901-5230	Amount of Each Receipt this Period
Name of Employer Grenada Lake Medical Cent- er	Occupation Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Larry C. Bourne	<u> </u>	Date of Receipt
Mailing Address 424 Autumn Oak Driv	9	12 11 2009
City	State Zip Code MS 39110-9148	Transaction ID: 17808987
Madison  FEC ID number of contributing federal political committee.	MS 39110-9148	Amount of Each Receipt this Period
Name of Employer HPI Company	Occupation President and CEO	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	
SUBTOTAL of Receipts This Page (optional) .		370.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 194 (check only one)    X
An	y information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may r name and addre	not be sold or used by any perso ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Randy King Mailing Address 7601 Southcrest Parkw	vay		Date of Receipt  1 2 1 1 2 0 0 9
	City Southaven	State MS	Zip Code 38671-4739	Transaction ID: 17808988  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		10.00
	Name of Employer Baptist Memorial Hospital- Desoto Receipt For: Primary General Other (specify)		eutive Officer ′ear-to-Date ▼ 260.00	
3.	Full Name (Last, First, Middle Initial) Mr. Steve Lesley Mailing Address 116 Woodgreen Crossi	ing		Date of Receipt
	City	State	Zip Code	Transaction ID: 17808994
	Madison FEC ID number of contributing federal political committee.	MS C	39130-1909	Amount of Each Receipt this Period 33.34
	Name of Employer Mississippi Hospital Association Receipt For: Primary General Other (specify)		Data Services  Year-to-Date ▼  300.72	
	Full Name (Last, First, Middle Initial) Mr. Sam W. Cameron			Date of Receipt
•	Mailing Address 28 Waterford Place			1 2 1 1 2 2 0 0 9
	City	State	Zip Code	Transaction ID: 17808995
	Jackson FEC ID number of contributing federal political committee.	MS C	39211-2945	Amount of Each Receipt this Period  5.00
	Name of Employer Mississippi Hospital Asso- ciation	Occupation President 8	& Chief Executive Officer	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	'ear-to-Date ▼ 535.00	
SI	JBTOTAL of Receipts This Page (optional)			48.34

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 194 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Ms. Shawn Lea  Mailing Address 116 Woodgreen Cross  City  Madison  FEC ID number of contributing	State Zip Code MS 39110-4522	Date of Receipt    M M
Name of Employer Mississippi Hospital Association Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation VP for Strategic Communications Aggregate Year-to-Date  207.14	
Full Name (Last, First, Middle Initial) Dr. Marcella McKay, Ph.D.  Mailing Address 322 Helmsley Drive		Date of Receipt    M M
City	State Zip Code	Transaction ID: 17809003
Brandon  FEC ID number of contributing federal political committee.	MS 39047-8159	Amount of Each Receipt this Period 252.50
Name of Employer Mississippi Hospital Association Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation VP Nursing/CEO MHA Health, Reserved Aggregate Year-to-Date  252.50	ardh &
Full Name (Last, First, Middle Initial) Mr. James G Chastain, , FACHE		Date of Receipt
Mailing Address P O Box 157-A		12 / D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Whitfield	State Zip Code MS 39193-0157	Transaction ID: 17809011
FEC ID number of contributing federal political committee.	C 39193-0157	Amount of Each Receipt this Period 175.00
Name of Employer Mississippi State Hospital	Occupation Director	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  260.00	
	•	447.09

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 64 / 194 (check only one)    X
A	ny information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements ma name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial)  Mr. Eddie L. Foster  Mailing Address 116 Woodgreen Crossi	ing		Date of Receipt
	City Madison	State MS	Zip Code 39110-4522	Transaction ID: 17809012  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		350.00
	Name of Employer Mississippi Hospital Asso- ciation Receipt For:  Primary  General  Other (specify) ▼	<del>. '                                     </del>	n perating Officer e Year-to-Date ▼ 380.00	
3.	Full Name (Last, First, Middle Initial) Gerald Cotton Mailing Address 501 Castlewood Blvd			Date of Receipt  1 2 1 1 2 2 0 0 9
	City	State	Zip Code	Transaction ID: 17809028
	Brandon	MS	39047-7327	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Mississippi Baptist Medic- al Center		e Vice President	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
. –	Full Name (Last, First, Middle Initial) Mr. James L Daily			Date of Receipt
	Mailing Address 115 Porter Drive			12 16 2009
	City	State	Zip Code	Transaction ID: 17814115
	Middlebury  FEC ID number of contributing federal political committee.	C	05753-8423	Amount of Each Receipt this Period 350.00
	Name of Employer Porter Medical Center	Occupatio Presiden		
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)	I		1200.00

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 194 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr Richard C Lord		Date of Receipt
Mailing Address 222 Berkeley St		12 16 2009
City	State Zip Code	Transaction ID: 17814123
Boston	MA 02116-3748	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Massachusetts Hospital As- sociation	Occupation Trustee	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Mr. Joseph A. Carr	1	Date of Receipt
Mailing Address 2378 Orchard Crest B	lvd.	12 18 2009
City	State Zip Code	Transaction ID: 17814395
Manasquan	NJ 08736-4001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Chief Information Officer	
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼  245.00	
Full Name (Last, First, Middle Initial) Ms. Kimberly A. Champi Krenik		Date of Receipt
Mailing Address 605 Upland Place		1 2 1 8 2 0 0 9
City	State Zip Code	Transaction ID: 17814397
Alexandria	VA 22301-2743	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Director, Federal Legislative Affairs	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		855.00

Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC  Full Name (Last, First, Middle Initial)  Ms. Belinda Brown Cooper  Mailing Address 121 Clear Creek Road		Date of Receipt
Ms. Belinda Brown Cooper		· '
City Langhorne	State Zip Code PA 19047	1 2 1 8 2 0 0 9  Transaction ID: 17814401
FEC ID number of contributing federal political committee.	C Occupation	Amount of Each Receipt this Period  5.00
Name of Employer New Jersey Hospital Association Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Vice President, Human Resources  Aggregate Year-to-Date ▼  245.00	_
Full Name (Last, First, Middle Initial) Ms. Theresa L. Edelstein Mailing Address 27 Harvest Lane	-	Date of Receipt  1 2 1 8 2 0 0 9
City Livingston	State Zip Code NJ 07039-2750	Transaction ID: 17814410  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5.00
Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify)	Occupation Vice President Continuing Care Servic Aggregate Year-to-Date ▼  230.00	- e
Full Name (Last, First, Middle Initial) Mr. David L. Flood Mailing Address 27Gull Point Road		Date of Receipt
City	State Zip Code	1 2 1 8 2 0 0 9 Transaction ID: 17814412
Monmouth Beach	NJ 07750-1007	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Meridian Health	Occupation President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional) .	·····	260.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 67 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins		Date of Receipt
Mailing Address 6180 Lower Mountain		12 18 2009
City <u>New Hope</u>	State Zip Code PA 18938	Transaction ID: 17814416  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.42
Name of Employer New Jersey Hospital Assoc- iation	Occupation Sr. VP., Health Economics	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 370.04	
Full Name (Last, First, Middle Initial) Mr. Fredrick J. Jacobs		Date of Receipt
Mailing Address 23 E. Delaware Aven	ue	12 18 2009
City	State Zip Code	Transaction ID: 17814418
Pennington	NJ 08534-2302	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation General Counsel	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  375.00	
Full Name (Last, First, Middle Initial) Mr. David P. Lavins		Date of Receipt
Mailing Address 10 Fox Chase Road		12 18 2009
City Malvern	State Zip Code PA 19355	Transaction ID: 17814423
FEC ID number of contributing federal political committee.	PA 19355	Amount of Each Receipt this Period 745.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Chief Financial Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	865.00	]
		775.42

Any information copied from such Reports and Sta or for commercial purposes, other than using the normal NAME OF COMMITTEE (In Full)  American Hospital Association PAC  Full Name (Last, First, Middle Initial)  Mr. Gary L. Long  Mailing Address 2 Meadowview Drive  City  Shamong  FEC ID number of contributing federal political committee.  Name of Employer Virtua Health	state Zip Code NJ 08088-8596  C  Occupation COO  Aggregate Year-to-Date	Date of Receipt    Date of Receipt   1 8
Mr. Gary L. Long  Mailing Address 2 Meadowview Drive  City  Shamong  FEC ID number of contributing federal political committee.	NJ 08088-8596  C Occupation COO	1 2 1 8 2 0 0 9  Transaction ID: 17814425  Amount of Each Receipt this Period
federal political committee.	Occupation COO	
Virtua Health	coo	
Receipt For: Primary General Other (specify)	250.00	
Full Name (Last, First, Middle Initial) Mr. Roger D. Sarao, Jr.  Mailing Address 4 Poppy Lane		Date of Receipt
City Howell	State Zip Code NJ 7731	Transaction ID: 17814449  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5.00
Name of Employer New Jersey Hospital Association Receipt For:  ☐ Primary ☐ General  ☐ Other (specify) ▼	Occupation VP Health Economics  Aggregate Year-to-Date ▼  245.00	
Full Name (Last, First, Middle Initial) Mr. Kevin J. Slavin		Date of Receipt
Mailing Address 360 Lafayette Street  City	State Zip Code	1 2 1 8 2 0 0 9 Transaction ID: 17814453
Hackettstown	NJ 07840-1919	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	650.00
Name of Employer East Orange General Hospi- tal	Occupation President & CEO	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (optional)		905.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 69 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using	nd Statements may not be sold or used by any person g the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PA	С	
Full Name (Last, First, Middle Initial)  Mr. Daniel Waldmann  Mailing Address 2001 19th St NW		Date of Receipt
Mailing Address 2001 19th St NW Apt 5 City	State Zip Code	1 2 1 8 2 0 0 9 Transaction ID: 17819174
Washington	DC 20009-1343	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer TENET Healthcare Corporat- ion	Occupation Vice President, Government Relations	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Ms. Nancy Steiger		Date of Receipt
Mailing Address 2901 Squalicum Pa	•	12 10 2009
City	State Zip Code	Transaction ID: 17821423
Bellingham	WA 98225-1851	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer St. Joseph Hospital	Occupation Chief Executive Officer and Chief Miss	3
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) Jodi Chambers		Date of Receipt
Mailing Address 4231 West 16th Av	/enue	12 14 2009
City	State Zip Code	Transaction ID: 17821448
Denver	CO 80204-1335	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer St. Anthony Central Hospi- tal	Occupation Chief Medical Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (option	al)	950.00
	nber only)	

SCHEDULE ITEMIZED R	A (FEC Form 3X) ECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
or for commercial p	urposes, other than using the r	atements may iname and addr	not be sold or used by any pers ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\ \	MITTEE (In Full) spital Association PAC			
Full Name (Last Ms Suzanne And Mailing Address				Date of Receipt
	1100 Militii Aveilue	Ctata	7:a Code	12 10 2009
City <u>Seattle</u>		State WA	Zip Code 98101-2756	Transaction ID: 17821478  Amount of Each Receipt this Period
FEC ID number federal political		С		250.00
Name of Employ Virginia Mason nter	/er Medical Ce-	Occupation Senior VP	, CFO, CIO	
Receipt For: Primary Other (spe	☐ General	Aggregate \	/ear-to-Date ▼ 250.00	
Mr. Matthew And	, First, Middle Initial) erson, JD 2550 University Avenue	2 W		Date of Receipt
	2330 Oniversity Avenue	= vv.		12 18 2009
City Saint Paul		State MN	Zip Code 55114-1052	Transaction ID: 17821510
FEC ID number federal political		C	33114-1032	Amount of Each Receipt this Period  57.69
Name of Employ Minnesota Hosp ation	/er oital Associ-	Occupation Vice Pres,	Regulatory/Strategic Affai	ir
Receipt For: Primary Other (spe	☐ General	Aggregate \	/ear-to-Date ▼ 249.98	
Full Name (Last Ms. Ann Gibson	, First, Middle Initial)			Date of Receipt
	Mailing Address 2550 University Avenue W. Suite 350-S			12 18 2009
City <u>Sa</u> int Paul		State MN	Zip Code 55114-1052	Transaction ID: 17821523  Amount of Each Receipt this Period
FEC ID number federal political		C	3311+1032	57.69
Name of Emplo Minnesota Hosp ation	/er pital Associ-	Occupation Director, F	ederal Relations	
Receipt For: Primary Other (spe	General ecify) ▼	Aggregate \	Year-to-Date ▼ 312.49	
SURTOTAL of B	ceipts This Page (optional)			365.38

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Λ)	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  American Hospital Association PA	<u>-                                      </u>		
Full Name (Last, First, Middle Initial) Mr. Richard Kreyer			Date of Receipt
Mailing Address 2550 University Av	venue W.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Saint Paul	State MN	Zip Code 55114-1052	Transaction ID: 17821537  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		63.45
Name of Employer Minnesota Hospital Associ- ation	Occupation Vice Pres	n sident, Work Force	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 274.94	
Full Name (Last, First, Middle Initial) Mr. Mark Sonneborn			Date of Receipt
Mailing Address 2550 University Av	renue W.		12 18 7 2009
City Saint Paul	State MN	Zip Code 55114-1052	Transaction ID: 17821545  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33114-1032	60.00
Name of Employer Minnesota Hospital Associ- ation	Occupation Vice Pres	n sident of Information Service	s l
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) Ms. Susan Stout			Date of Receipt
Mailing Address 2550 University Av Suite 350-S	/enue W.		12 18 2009
City Saint Paul	State MN	Zip Code 55114-1052	Transaction ID: 17821546  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1 1 1 1 1 1	40.38
Name of Employer Minnesota Hospital Associ- ation	<del> </del>	State Government Relations	3
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 227.48	
SUBTOTAL of Receipts This Page (option	al)		163.83

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and Si or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\ <b>4.</b>	Full Name (Last, First, Middle Initial)  Ms. Peggy Westby  Mailing Address 2550 University Avenue	a W		Date of Receipt
	Suite 350-S City	State	Zip Code	1 2 1 8 2 0 0 9  Transaction ID: 17821548
	Saint Paul	MN	55114-1052	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		57.69
	Name of Employer Minnesota Hospital Associ- ation	Occupation Vice Pres		
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 249.99	
3.	Full Name (Last, First, Middle Initial) Ms. Coletta Barrett, RN, MHA Mailing Address	lord		Date of Receipt
	Mailing Address 5000 Hennessy Boulev	ard		12 18 2009
	City	State	Zip Code	Transaction ID: 17825891
	Baton Rouge	LA	70808-4375	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer Our Lady of the Lake Regi- onal Medical	Occupation Vice Pre-	sident	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	]
- ).	Full Name (Last, First, Middle Initial) Mr. Clark R. Cosse, III			Date of Receipt
	Mailing Address 9521 Brookline Avenue	)		12 18 2009
	City	State	Zip Code	Transaction ID: 17825892
	Baton Rouge	LA	70809-8409	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		750.00
	Name of Employer Louisiana Hospital Associ- ation		sident, Legal & Government	Aff
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
	SUBTOTAL of Receipts This Page (optional)		<b>)</b>	1307.69
ļ	TOTAL This Period (last page this line number of	onlv)	<b>\</b>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 73 / 194 (check only one)    X   11a
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American Hospital Association PA	g the name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial)  Mr. Kenneth E. Alexander  Mailing Address 9521 Brookline Av			Date of Receipt
City Baton Rouge	State LA	Zip Code 70809-1431	Transaction ID: 17825893  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer Louisiana Hospital Association Receipt For:		n lity and Regulatory Activities	500.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)	Aggregate	500.00	
Mr. Wayne M Arboneaux  Mailing Address 135 Highway 402			Date of Receipt  1 2 1 8 2 0 0 9
City	State	Zip Code	Transaction ID: 17825894
Napoleonville  FEC ID number of contributing federal political committee.	C	70390-2217	Amount of Each Receipt this Period  500.00
Name of Employer Assumption Community Hosp- ital		ecutive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. James K Elrod			Date of Receipt
Mailing Address 2600 Greenwood F	Road		12 18 2009
City	State	Zip Code	Transaction ID: 17825895
Shreveport  FEC ID number of contributing federal political committee.	C	71130-2600	Amount of Each Receipt this Period  500.00
Name of Employer Willis-Knighton Health Sy- stem Receipt For:	<del>- 1 -</del>	n t and Chief Executive Officer Year-to-Date	<del>-</del>
Primary General Other (specify) ▼	Aggregate	500.00	
SUBTOTAL of Receipts This Page (option	al)		1500.00
TOTAL This Period (last page this line nur	nber only)		

SCHEDULE A (F ITEMIZED RECE	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 / 194 (check only one)  X 11a 11b 11c 12  13 14 15 16 11
or for commercial purpose:  NAME OF COMMITTE	s, other than using the name and E (In Full)	may not be sold or used by any persold address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Mr. Mark E Marley, , CHE	Middle Initial)		Date of Receipt
Mailing Address PO		7.0	12 18 2009
City Natchitoches	State LA	e Zip Code 71457-2009	Transaction ID: 17825896
FEC ID number of cont federal political committee	ributing	71457-2009	Amount of Each Receipt this Period 500.00
Name of Employer Natchitoches Regional ical Center Receipt For:	Admir	nistrator	
Primary Other (specify)	General	egate Year-to-Date ▼ 500.00	
Full Name (Last, First, Mr Tatsy Jeter  Mailing Address 952	, 		Date of Receipt
Mailing Address 952	i Brookline Avenue		12 18 2009
City	State	e Zip Code	Transaction ID: 17825897
Baton Rouge	LA	70809-1431	Amount of Each Receipt this Period
FEC ID number of cont federal political committ			500.00
Name of Employer Louisiana Hospital Ass ation	Serio	or VP &CFO	
Receipt For: Primary Other (specify)	General	egate Year-to-Date ▼ 500.00	
Full Name (Last, First, Ms. Karen Mixon	Middle Initial)		Date of Receipt
Mailing Address 163	5 Marvel Street		12 18 2009
City	State	e Zip Code	Transaction ID: 17825898
<u>Coushatta</u>	LA	71019-9022	Amount of Each Receipt this Period
FEC ID number of cont federal political committee			500.00
Name of Employer CHRISTUS Coushatta Care Center	Admir	nistrator	
Receipt For: Primary Other (specify)	General	egate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts	This Page (optional)		1500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 75 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. James T Montgomery, , CHE		Date of Receipt
Mailing Address 1401 Foucher Street  City	State Zip Code	1 2 1 8 2 0 0 9  Transaction ID: 17825899
New Orleans	LA 70115-3515	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Touro Infirmary	Occupation Chief Executive Officer	
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Phyllis Peoples, , MSN, R.N		Date of Receipt
Mailing Address P O Box 6037		12 18 2009
City	State Zip Code	Transaction ID: 17825900
Houma	LA 70361-6037	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Terrebonne General Medical Center	Occupation President and Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ♥	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Mark J Peters, , M.D.		Date of Receipt
Mailing Address 4200 Houma Boulevar		12 18 2009
City	State Zip Code	Transaction ID: 17825901
Metairie	LA 70006-2970	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer East Jefferson General Ho-	Occupation  President and Chief Executive Officer	
spital Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		1500.00
TOTAL This Period (last page this line number	·	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 76 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	tatements may name and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
<b>∠</b> <b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Steve Worley Mailing Address 200 Henry Clay Avenue	e		Date of Receipt  1 2 1 8 2 0 0 9
	City	State	Zip Code	Transaction ID: 17825902
	New Orleans	LA	70118-5798	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Children's Hospital	Occupation Presiden	n t and Chief Executive Officer	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
- 3.	Full Name (Last, First, Middle Initial) Ms. Karen Sue Zoeller			Date of Receipt
	Mailing Address 9521 Brookline Avenue	)		12 18 2009
	City	State	Zip Code	Transaction ID: 17825903
	Baton Rouge	LA	70809-1431	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Louisiana Hospital Associ- ation	Occupation Vice Pres	sident	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
- C.	Full Name (Last, First, Middle Initial) Mr. Kevin Bridwell			Date of Receipt
	Mailing Address 9521 Brookline			12 18 2009
	City	State LA	Zip Code	Transaction ID: 17825904
	Baton Rouge  FEC ID number of contributing federal political committee.	C	70809-1431	Amount of Each Receipt this Period  375.00
	Name of Employer Louisiana Hospital Associ- ation	Occupation Director	n of Healthcare Reimbursemer	nt
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 375.00	
	SUBTOTAL of Receipts This Page (optional)			1375.00
Ī	TOTAL This Period (last page this line number of	only)		

ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 77 / 194 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  American Hospital Association PAC	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Louis H Bremer, , Jr.  Mailing Address P O Box 1901  City Monroe	State LA	Zip Code 71210-1901	Date of Receipt  M M M / D D M 2 0 0 9  Transaction ID: 17825905  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer St. Francis Medical Center  Receipt For:  Primary General  Other (specify) ▼	<del> </del>	n t and Chief Executive Officer e Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Mr. Greg Frost Mailing Address 451 Florida St., Ban	k One Centre		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State LA	Zip Code	Transaction ID: 17825916
Baton Rouge  FEC ID number of contributing federal political committee.	C	70801-1700	Amount of Each Receipt this Period  500.00
Name of Employer Breazeale Sachse & Wilson, LLP Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Attorney Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms Nancy Cassagne			Date of Receipt
Mailing Address 1101 Medical Center	r Boulevard		12 18 2009
City Marrero	State LA	Zip Code 70072-3147	Transaction ID: 17825917  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	7 5672 67 17	250.00
Name of Employer West Jefferson Medical Ce- nter	_, -	ecutive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	\		1050.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 78 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr Zachary Smith		Date of Receipt
Mailing Address 3600 Florida Street		12 18 2009
City	State Zip Code	Transaction ID: 17825918
Baton Rouge FEC ID number of contributing	LA 70806-3889	Amount of Each Receipt this Period  300.00
federal political committee.		566.66
Name of Employer Baton Rouge General Medic-	Occupation Director Radiology	
al Center Receipt For:	Aggregate Year-to-Date ▼	-
Primary General		
Other (specify)	300.00	
Full Name (Last, First, Middle Initial) Mr. James E Cathey, , Jr.		Date of Receipt
Mailing Address P O Box 2668		1 2 1 8 2 0 0 9
City	State Zip Code	Transaction ID: 17825919
<u>Hammond</u>	LA 70404-2668	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer North Oaks Medical Center	Occupation President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Charles Daigle		Date of Receipt
Mailing Address 8001 Youree Drive		12 18 2009
City	State Zip Code	Transaction ID: 17825920
Shreveport	LA 71115-2302	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Willis-Knighton Pierremont Health Cent	Occupation Chief Operating Officer	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General	250.00	
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional) .		800.00
TOTAL This Period (last page this line numbe	·	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 79 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Cindy Dolan		Date of Receipt
Mailing Address P.O. Box 40318		12 18 2009
City	State Zip Code	Transaction ID: 17825943
Baton Rouge	LA 70816-8359	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer HSLI	Occupation President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Benjamin Frank		Date of Receipt
Mailing Address 4200 Houma Blvd.		12 18 2009
City	State Zip Code	Transaction ID: 17825944
<u>Metairie</u>	LA 70006-2970	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer East Jefferson General Ho- spital	Occupation Executive VP	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr Bill Hankins		Date of Receipt
Mailing Address P O Box 33932		12 18 2009
City	State Zip Code	Transaction ID: 17825945
Shreveport	LA 71130-3932	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer LSU Medical Center-Univer- sity Hospital	Occupation Associate Administrator	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General Other (specify) ▼	250.00	
CURTOTAL of Descirto This David (antique)		750.00
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number)	· · · · · · · · · · · · · · · · · · ·	750.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 80 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
A or	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC		
٠.	Full Name (Last, First, Middle Initial)  Mr. Craig S Juengling  Mailing Address 728 North Boulevard		Date of Receipt
	City	State Zip Code	12 18 2009
	Baton Rouge	LA 70802-5724	Transaction ID: 17825946  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Greenbrier Hospital	Occupation Chief Executive Officer	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
	Full Name (Last, First, Middle Initial) Glenn Landry		Date of Receipt
	Mailing Address P.O. Box 40318		12 18 2009
	City	State Zip Code	Transaction ID: 17825947
	Baton Rouge FEC ID number of contributing federal political committee.	LA 70835-0318	Amount of Each Receipt this Period  250.00
	Name of Employer HSLI	Occupation Executive VP	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Mr. John C Neal		Date of Receipt
	Mailing Address P O Box 1670		12 18 2009
	City Kinder	State Zip Code  LA 70648-1670	Transaction ID: 17825963
	FEC ID number of contributing federal political committee.	LA 70648-1670	Amount of Each Receipt this Period  250.00
	Name of Employer Allen Parish Hospital	Occupation Chief Executive Officer	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)		750.00

SCHEDULE A (FEC Form 3	for each category of the  Detailed Summary Page	FOR LINE NUMBER: PAGE 81 / 194 (check only one)    X   11a
Any information copied from such Reports or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American Hospital Association Page 1985	and Statements may not be sold or used by any person ng the name and address of any political committee to AC	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Michael O'Bryan, , M.D.		Date of Receipt
Mailing Address 2500 Belle Chass	e Highway	1 2 1 8 2 0 0 9
City	State Zip Code	Transaction ID: 17825964
Terrytown	LA 70056-7127	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Ochsner Medical Center - West Bank	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. Patrick J Quinlan, , M.D.	L	Date of Receipt
Mailing Address 1514 Jefferson Hi	ghway	M M / D D / Y Y Y Y Y Y 1 2 1 8 2 0 0 9
City	State Zip Code	Transaction ID: 17825965
New Orleans	LA 70121-2484	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Ochsner Health System	Occupation Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr David Mak	<b>L</b>	Date of Receipt
Mailing Address 1701 Oak Park Bo	oulevard	1 2 1 8 2 0 0 9
City	State Zip Code	Transaction ID: 17825966
Lake Charles	LA 70601-8911	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	225.00
Name of Employer Lake Charles Memorial Hos- pital	Occupation Vice President of Finance	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	225.00	
		725.00

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 82 / 194 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any perso le name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Leif Pedersen Mailing Address 1701 Oak Park Boule City Lake Charles FEC ID number of contributing	State Zip Code LA 70601-8911	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Lake Charles Memorial Hospital Receipt For: Primary General Other (specify)	Occupation SeniorVP-Philanthropy  Aggregate Year-to-Date   225.00	
Full Name (Last, First, Middle Initial) Mr. Jeffrey M Brannon Mailing Address 400 North Edwards S	Street	Date of Receipt  1 2 2 2 2 0 0 9
City	State Zip Code	Transaction ID: 17826873
Enterprise  FEC ID number of contributing federal political committee.	AL 36330-2510  C Occupation	Amount of Each Receipt this Period  1000.00
Name of Employer Medical Center Enterprise  Receipt For: Primary General Other (specify)	Chief Executive Officer  Aggregate Year-to-Date ▼  1000.00	
Full Name (Last, First, Middle Initial) Mr. William H Anderson Mailing Address P O Box 610	.1	Date of Receipt
Mailing Address P O Box 610		12 22 2009
City	State Zip Code	Transaction ID: 17826874
Sheffield  FEC ID number of contributing federal political committee.	AL 35660-0610	Amount of Each Receipt this Period 1000.00
Name of Employer Helen Keller Hospital	Occupation President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)	<b></b>	2225.00
TOTAL This Period (last page this line number	er only)	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 83 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or	for commercial purposes, other than using the	Statements may not be sold or used by any persename and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
$\rangle$	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
۸.	Full Name (Last, First, Middle Initial) Mr. J. David McCormack		Date of Receipt
	Mailing Address 600 South Third Stree		12 22 2009
	City Gadsden	State Zip Code  AL 35901-5399	Transaction ID: 17826875  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Riverview Regional Medical Center	Occupation Executive Director	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
3.	Full Name (Last, First, Middle Initial) Mr. Ronald S Owen		Date of Receipt
	Mailing Address P O Box 6987		1 2 2 2 2 0 0 9
	City	State Zip Code	Transaction ID: 17826876
	Dothan  FEC ID number of contributing federal political committee.	AL 36302-6987	Amount of Each Receipt this Period 500.00
	Name of Employer Southeast Alabama Medical Center	Occupation Chief Executive Officer	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Mr. Sammy Watson		Date of Receipt
	Mailing Address 809 University Bouleva	ard East	12 22 2009
	City	State Zip Code	Transaction ID: 17826877
	Tuscaloosa FEC ID number of contributing federal political committee.	AL 35401-2029	Amount of Each Receipt this Period 430.00
	Name of Employer DCH Health System	Occupation Director, Community Relations	
	Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate Year-to-Date ▼ 430.00	
		1	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 84 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  American Hospital Association PAC	the name and address of any political committee	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Charles C Brannen Mailing Address P O Box 6987		Date of Receipt  1 2 2 2 2 0 0 9
City	State Zip Code	Transaction ID: 17826878
<u>Dothan</u>	AL 36302-6987	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Southeast Alabama Medical Center Receipt For:  Primary General Other (specify) ▼	Occupation Senior Vice President and Chief Op Aggregate Year-to-Date  250.00	erat
Full Name (Last, First, Middle Initial) Dr. Charles L. Harkness, D.O.		Date of Receipt
Mailing Address 2836 Country Club I	Boulevard	12 22 2009
City	State Zip Code	Transaction ID: 17826879
Orange Park	FL 32073-5727	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Southeast Alabama Medical Center	Occupation VP Medical Affairs	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Derek Miller		Date of Receipt
Mailing Address P O Box 6987		1 2 2 2 2 2 0 0 9
City	State Zip Code	Transaction ID: 17826880
<u>Dothan</u>	AL 36302-6987	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Southeast Alabama Medical Center	Occupation Senior Vice President and Chief Fin	and
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	)	750.00

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 85 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Jody Pigg		Date of Receipt
Mailing Address P O Box 3359  City	State Zip Code	1 2 2 3 2 0 0 9 2 17000000
Muscle Shoals	AL 35662-3359	Transaction ID: 17826882  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Shoals Hospital	Occupation Interim Administrator	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Mr. Gary R Gore		Date of Receipt
Mailing Address 227 Britany Road		12 23 7 2009
City	State Zip Code	Transaction ID: 17826883
Guntersville  FEC ID number of contributing federal political committee.	AL 35976-5766	Amount of Each Receipt this Period  1000.00
Name of Employer Marshall County Health Ca- re Authority	Occupation Chief Executive Officer	
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr. John O Wilhelm, Jr.		Date of Receipt
Mailing Address 85 Herrrick Street		12 22 2009
City	State Zip Code	Transaction ID: 17826890
Beverly  FEC ID number of contributing federal political committee.	MA 01915-1777	Amount of Each Receipt this Period  1000.00
Name of Employer Emerson Hospital	Occupation Executive Vice President & Chief Final	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  1000.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	3000.00
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number	<u> </u>	3,000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 86 / 194 (check only one)  X 11a 11b 11c 12
	Statements may not be sold or used by any person solution and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Edward H Moore		Date of Receipt
Mailing Address 100 South Street		12 22 2009
City	State Zip Code	Transaction ID: 17826893
Southbridge	MA 01550-4051	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Harrington Memorial Hospi-	Occupation President and Chief Executive Officer	
<u>tal</u> Receipt For:	Aggregate Year-to-Date ▼	+
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Mr. Joseph A. Carr	1	Date of Receipt
Mailing Address 2378 Orchard Crest B	lvd.	M M / D D / Y Y Y Y Y Y Y 1 2 2 4 2 0 0 9
City	State Zip Code	Transaction ID: 17826901
<u>Manasquan</u>	NJ 08736-4001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Chief Information Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Kimberly A. Champi Krenik	<u>I</u>	Date of Receipt
Mailing Address 605 Upland Place		12 24 2009
City	State Zip Code	Transaction ID: 17826903
Alexandria	VA 22301-2743	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Director, Federal Legislative Affairs	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	750.00	
SUBTOTAL of Receipts This Page (optional) .		605.00

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 87 / 194 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any perse e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Belinda Brown Cooper Mailing Address 121 Clear Creek Road City Langhorne FEC ID number of contributing federal political committee.  Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify)	State Zip Code PA 19047  C  Occupation Vice President, Human Resources  Aggregate Year-to-Date  250.00	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) Ms. Theresa L. Edelstein Mailing Address 27 Harvest Lane  City Livingston  FEC ID number of contributing federal political committee.  Name of Employer New Jersey Hospital Assoc-	State Zip Code NJ 07039-2750  C Occupation	Date of Receipt  12 24 2009  Transaction ID: 17826913  Amount of Each Receipt this Period
iation Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins	Vice President Continuing Care Serv Aggregate Year-to-Date ▼  245.00	Date of Receipt
Mailing Address 6180 Lower Mountain  City  New Hope	State Zip Code PA 18938	Transaction ID: 17826919  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5.00
Name of Employer New Jersey Hospital Association Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Sr. VP., Health Economics  Aggregate Year-to-Date   375.04	
SUBTOTAL of Receipts This Page (optional) .		25.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 88 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any perse name and address of any political committee to	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Fredrick J. Jacobs  Mailing Address 23 E. Delaware Aven  City	ue State Zip Code	Date of Receipt    M
Pennington  FEC ID number of contributing federal political committee.	NJ 08534-2302	Amount of Each Receipt this Period  5.00
Name of Employer New Jersey Hospital Association Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation General Counsel  Aggregate Year-to-Date   380.00	
Full Name (Last, First, Middle Initial) Mr. Stephen J. Kolesk Mailing Address 155 York Road		Date of Receipt  1 2 2 4 2 0 0 9
City	State Zip Code	Transaction ID: 17826926
Delran  FEC ID number of contributing federal political committee.	NJ 08075-2217	Amount of Each Receipt this Period 250.00
Name of Employer Virtua Health	Occupation Vice President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. David P. Lavins		Date of Receipt
Mailing Address 10 Fox Chase Road		1 2 2 4 2 0 0 9
City Malvern	State Zip Code PA 19355	Transaction ID: 17826928  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Chief Financial Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 870.00	
SUBTOTAL of Receipts This Page (optional)	1	260.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 89 / 194 (check only one)  X 11a 11b 11c 12  13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Roger D. Sarao, Jr.  Mailing Address 4 Poppy Lane  City Howell  FEC ID number of contributing federal political committee.  Name of Employer New Jersey Hospital Association  Receipt For:  Primary General Other (specify)	State Zip Code NJ 7731  C  Occupation VP Health Economics  Aggregate Year-to-Date  250.00	Date of Receipt  1 2
Full Name (Last, First, Middle Initial) Mr Wayne C Schiffner Mailing Address 158 Hearthstone Drive City Berlin FEC ID number of contributing federal political committee.  Name of Employer	State Zip Code NJ 08009-9550  C	Date of Receipt  1 2
South Jersey Healthcare  Receipt For:  Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial)  Mr. William E Winter	Executive Vice President  Aggregate Year-to-Date ▼  500.00	Date of Receipt
Mailing Address 342 Fairview Street  City Silverton  FEC ID number of contributing federal political committee.	State Zip Code OR 97381-1917  C	Transaction ID: 17827056  Amount of Each Receipt this Period  500.00
Name of Employer Silverton Hospital  Receipt For:  Primary General Other (specify) ▼	Occupation Administrative Director  Aggregate Year-to-Date   500.00	
SUBTOTAL of Receipts This Page (optional) .		1005.00

SCHEDULE A (FEC Form 3: ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 90 / 194   (check only one)     X   11a
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PA	<u> </u>	, , , , , , , , , , , , , , , , , , , ,	
Full Name (Last, First, Middle Initial) Mr. David Holloway, MD.			Date of Receipt
Mailing Address 3735 Cherokee Dri	ive South		12 22 2009
City Salem	State OR	Zip Code 97302-9712	Transaction ID: 17827057  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Salem Hospital	Occupation Chief Med	dical Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) George Brown, MD			Date of Receipt
Mailing Address 376 NW 81 PI			12 22 2009
City Portland	State OR	Zip Code 97229-6777	Transaction ID: 17827058
FEC ID number of contributing federal political committee.	C	31229-0111	Amount of Each Receipt this Period 250.00
Name of Employer Legacy Health System	Occupation President		
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Russ Reinhard			Date of Receipt
Mailing Address 1500 Division Stre	et		M M / D D / Y Y Y Y Y Y Y 12 22 2009
City Oregon City	State OR	Zip Code	Transaction ID: 17827059
FEC ID number of contributing federal political committee.	C	97045-1527	Amount of Each Receipt this Period 250.00
Name of Employer Willamette Falls Hospital	Occupation Chief Exe	cutive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option	al)		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 91 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16	
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any persor e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Paul Janke, , FACHE		Date of Receipt	
Mailing Address 1775 Thompson Road		12 22 2009	
City <u>Coos</u> Bay	State Zip Code OR 97420-2125	Transaction ID: 17827069  Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C 97420-2125	300.00	
Name of Employer Bay Area Hospital	Occupation Chief Executive Officer		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
Full Name (Last, First, Middle Initial) Mr David Russell	<u> </u>	Date of Receipt	
Mailing Address 1470 SW 19 Ct		12 22 YYYY 12 22 2009	
City	State Zip Code	Transaction ID: 17827070	
Gresham	OR 97080-9658	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	250.00	
Name of Employer Adventist Medical Center	Occupation VP Business Development		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		
Full Name (Last, First, Middle Initial) Mr. Peter F Rapp		Date of Receipt	
Mailing Address 3181 SW Sam Jackso	on Park Road	12	
City	State Zip Code	Transaction ID: 17827071	
Portland	OR 97239-3011	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	500.00	
Name of Employer OHSU Hospital	Occupation Vice President and Executive Director		
Receipt For:	Aggregate Year-to-Date ▼		
Primary General Other (specify) ▼	500.00		
SUBTOTAL of Receipts This Page (optional)		1050.00	
TOTAL This Period (last page this line number	<u> </u>		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	(X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 92/194   (check only one)
Any information copied from such Reports or for commercial purposes, other than usin	and Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association P	<u> </u>	, , , , , , , , , , , , , , , , , , , ,	
Full Name (Last, First, Middle Initial) Mr Trent Green			Date of Receipt
Mailing Address 2211 Northeast 13	39th Street		12 22 2009
City Vancouver	State WA	Zip Code 98686-2742	Transaction ID: 17827072
FEC ID number of contributing federal political committee.	C	90000-2742	Amount of Each Receipt this Period  175.00
Name of Employer Legacy Health System	Occupation Senior V		
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr. Richard Gibson	I		Date of Receipt
Mailing Address 1000 NE Greenlea	af Road		12 22 2009
City Portland	State OR	Zip Code 97229	Transaction ID: 17827073
FEC ID number of contributing federal political committee.	C	91229	Amount of Each Receipt this Period 250.00
Name of Employer Legacy Health System	Occupation Senior V	n P & Chief Information Office	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Pamela S Vukovich			Date of Receipt
Mailing Address 1919 NW Lovejoy	Street		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 17827080
Portland  FEC ID number of contributing federal political committee.	OR C	97209-1503	Amount of Each Receipt this Period 250.00
Name of Employer Legacy Health System	Occupation Senior Vi	n ice President and Chief Fina	nd
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 250.00	
			675.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 93 / 194 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
7	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
<b>∠</b> <b>A</b> .	Full Name (Last, First, Middle Initial) Wayne Clark Mailing Address 7555 SW Afton Lane  City Tigard  FEC ID number of contributing federal political committee.	State Zip Code OR 97224-7680	Date of Receipt  1 2 2 2 2 2 0 0 9  Transaction ID: 17827090  Amount of Each Receipt this Period  250.00
	Name of Employer Legacy Health System  Receipt For:  Primary General Other (specify) ▼	Occupation VP Comm Relations & Marketing Aggregate Year-to-Date  250.00	
_ В.	Full Name (Last, First, Middle Initial) Dr. George Cioffi, MD.  Mailing Address 3639 NW Thurman		Date of Receipt  1 2 2 2 2 0 0 9
	City	State Zip Code	Transaction ID: 17827091
	Portland  FEC ID number of contributing federal political committee.	OR 97210-1232	Amount of Each Receipt this Period  250.00
	Name of Employer Legacy Health System	Occupation Chief of Opthalmology	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
_ ).	Full Name (Last, First, Middle Initial) Mr. Randall L. Mee		Date of Receipt
	Mailing Address 1601 Southeast Court	Avenue	12 22 2009
	City	State Zip Code	Transaction ID: 17827095
	Pendleton	OR 97801-3217	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer St. Anthony Hospital	Occupation President	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)		750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 94 / 194 (check only one)    X   11a
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  American Hospital Association PAC	d Statements may not be sold or used by any person the name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Russ Danielson Mailing Address 1926 Aztec Court  City West Linn FEC ID number of contributing federal political committee.  Name of Employer Providence St. Vincent Medical Center Receipt For:	State Zip Code OR 97068-4804  C  Occupation Sr. Vice President/CEO-Oregon Region	Date of Receipt    M M M
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr Thomas Russell Mailing Address 9670 SE 257 Ave		Date of Receipt  1 2 2 2 2 0 0 9
City <u>Damascus</u> FEC ID number of contributing federal political committee.	State Zip Code OR 97089-6353  C	Transaction ID: 17827097  Amount of Each Receipt this Period  500.00
Name of Employer Adventist Medical Center  Receipt For:  Primary General  Other (specify) ▼	Occupation President  Aggregate Year-to-Date   500.00	
Full Name (Last, First, Middle Initial) Mr. Kelly C Morgan Mailing Address 2700 Stewart Parkw	ray	Date of Receipt
City Roseburg	State Zip Code OR 97470-1281	Transaction ID: 17827098  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer Mercy Medical Center	Occupation President and Chief Evecutive Officer	250.00
Receipt For:  Primary General  Other (specify) ▼	President and Chief Executive Officer  Aggregate Year-to-Date ▼  250.00	-
	)	1250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 95 / 194 (check only one)    X	
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any persore name and address of any political committee to	n for the purpose of soliciting contributions	
NAME OF COMMITTEE (In Full)  American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Paul R Stewart		Date of Receipt	
Mailing Address 2865 Daggett Avenue  City	State Zip Code	1 2 2 2 2 0 0 9 Transaction ID: 17831276	
Klamath Falls	OR 97601-1106	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	75.00	
Name of Employer Sky Lakes Medical Center	Occupation Chief Executive Officer	1	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00		
Full Name (Last, First, Middle Initial) Mr. Frederick D. Hobby Mailing Address 3903 Carrington Drive		Date of Receipt	
		12 28 2009	
City	State Zip Code	Transaction ID: 17831487	
Hazel Crest	IL 60429-1677	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	350.00	
Name of Employer American Hospital Associa- tion-Chicago	Occupation President and CEO, Institute for Diver		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		
Full Name (Last, First, Middle Initial) Ms. Dianne J. Anderson, MS, RN		Date of Receipt	
Mailing Address 330 Brookline Avenue Mail Stop ST221		12 28 7 2009	
City	State Zip Code	Transaction ID: 17831489	
Boston  FEC ID number of contributing federal political committee.	MA 02215-5400	Amount of Each Receipt this Period  350.00	
Name of Employer Lawrence General Hospital	Occupation Chief Executive Officer	1	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		
SUBTOTAL of Receipts This Page (optional)		775.00	
TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 96/194   (check only one)   X   11a
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may	not be sold or used by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  American Hospital Association PA		need of any pointed committee to	y doile Contributions from Scott Committee.
Full Name (Last, First, Middle Initial) Mr. Harold A. Williamson, Jr.			Date of Receipt
Mailing Address 1112 South Glenw	ood Avenue		12 23 7 9 9 9
City Columbia	State MO	Zip Code 65203-2877	Transaction ID: 17831496  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer University of Missouri He- alth Care	Occupation Vice Cha	n ncellor, Health System	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Michael D. Aubin	<b>L</b>		Date of Receipt
Mailing Address 6445 Renwick Circ	le		12 28 2009
City Tampa	State FL	Zip Code 33647-1176	Transaction ID: 17831506
FEC ID number of contributing federal political committee.	C	33047-1170	Amount of Each Receipt this Period 250.00
Name of Employer BayCare Health System	Occupation Chief Op	erating Officer	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 250.00	]
Full Name (Last, First, Middle Initial) Mr John A Benz			Date of Receipt
Mailing Address 3501 Johnson Stre	eet		12 28 2009
City	State FL	Zip Code	Transaction ID: 17831507
Hollywood  FEC ID number of contributing federal political committee.	C	33021-5421	Amount of Each Receipt this Period  250.00
Name of Employer Memorial Healthcare System	Occupation Sr. VP &	Chief Strategic Officer	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option:	al)		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 97 / 194 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Philip E. Boyce		Date of Receipt
Mailing Address 3563 Phillips Highway Suite 101		12 28 2009
City Jacksonville	State Zip Code FL 32207-5663	Transaction ID: 17831508
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  180.00
Name of Employer Baptist Health	Occupation Senior Vice President	1
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) Mr. John R. Brownlow		Date of Receipt
Mailing Address 5608 Bear Lake Circle	9	12 28 2009
City	State Zip Code	Transaction ID: 17831509
Apopka	FL 32703-1916	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	45.00
Name of Employer Florida Hospital	Occupation  Vice President and Chief Operating O	ff
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	590.00	
Full Name (Last, First, Middle Initial) Mr. Ronald M Gilliard, , FACHE		Date of Receipt
Mailing Address P O Box 419		12 28 2009
City	State Zip Code	Transaction ID: 17831521
Blountstown	FL 32424-0419	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Calhoun-Liberty Hospital	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional) .	<b>&gt;</b>	350.00
TOTAL This Period (last page this line number	<u> </u>	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 98 / 194 (check only one)    X
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial)		
Mr. Joe Johnson  Mailing Address 1055 Saxon Boulevard	1	Date of Receipt  1 2 2 8 2 0 0 9
City	State Zip Code	Transaction ID: 17831525
Orange City	FL 32763-8468	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Florida Hospital Fish Mem- orial	Occupation President and Chief Executive Office	er .
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  740.00	
Full Name (Last, First, Middle Initial) Dr. John Mahoney, MD		Date of Receipt
Mailing Address 2920 Ivanahoe Road		12 28 2009
City	State Zip Code	Transaction ID: 17831534
Tallahassee FEC ID number of contributing federal political committee.	FL 32312-2824	Amount of Each Receipt this Period 250.00
Name of Employer Tallahassee Memorial Heal- thCare	Occupation Chief Medical Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial) Mr. Jim L Mayo, , FACHE		Date of Receipt
Mailing Address 1250 South 18th Stree		12 28 7 9 9
City	State Zip Code	Transaction ID: 17831535
Fernandina Beach	FL 32034-3098	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Baptist Medical Center Na- ssau	Occupation Administrator	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼  360.00	
SUBTOTAL of Receipts This Page (optional)		1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 99 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 17			
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) American Hospital Association PAC					
Full Name (Last, First, Middle Initial) Ms. Paula McGuiness		Date of Receipt			
Mailing Address 14655 Village Glen Ci		12 28 7 2009			
City Tampa	State Zip Code FL 33618-2733	Transaction ID: 17831536			
FEC ID number of contributing federal political committee.	C 33010-2733	Amount of Each Receipt this Period  250.00			
Name of Employer BayCare Health System	Occupation Administrator				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00				
Full Name (Last, First, Middle Initial) Mr Mike Schultz		Date of Receipt			
Mailing Address 1437 Langham Terrac	Mailing Address 1437 Langham Terrace				
City	State Zip Code	Transaction ID: 17831539			
<u>Lake Mary</u>	FL 32746-1967	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	100.00			
Name of Employer Florida Hospital	Occupation CEO Florida Region				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00				
Full Name (Last, First, Middle Initial) Mr Carl Bahnlein		Date of Receipt			
Mailing Address 1701 North George Ma		12 22 2009			
City	State Zip Code VA 22205-3698	Transaction ID: 17833152			
Arlington  FEC ID number of contributing federal political committee.	VA 22205-3698	Amount of Each Receipt this Period  250.00			
Name of Employer Virginia Hospital Center - Arlington	Occupation Executive Vice President and COO				
Receipt For:	Aggregate Year-to-Date ▼	1			
Primary General Other (specify) ▼	250.00				
SUBTOTAL of Receipts This Page (optional)		600.00			
TOTAL This Period (last page this line number	·				

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 100 / 194 (check only one)    X
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)  American Hospital Association PA	and Statements may not be sold or used by any persor ag the name and address of any political committee to s	for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Christopher R Mosley Mailing Address 736 Battlefield Blv	d North	Date of Receipt
City Chesapeake FEC ID number of contributing	State Zip Code VA 23320-4941	1 2 2 2 2 0 0 9  Transaction ID: 17833161  Amount of Each Receipt this Period  350.00
Receipt For:  Primary  Other (specify)  General  Other (specify)  Primary  General	Occupation President & CEO  Aggregate Year-to-Date   350.00	330.00
Full Name (Last, First, Middle Initial) Mr. Alfred E. Pilong, Jr. Mailing Address 1840 Amherst Str	eet	Date of Receipt  1 2 2 2 2 0 0 9
City	State Zip Code	Transaction ID: 17833164
Winchester	VA 22601-2808	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Valley Health System	Occupation President, Winchester Medical Center	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Patricia L. Robertson	-	Date of Receipt
Mailing Address 205 Oxford Circle	West	12 22 2009
City	State Zip Code	Transaction ID: 17833165
Richmond  FEC ID number of contributing federal political committee.	VA 23221-3250	Amount of Each Receipt this Period 350.00
Name of Employer Bon Secours St. Mary's Ho- spital	Occupation Executive Vice President & Administra	nt.
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
	nal)	1050.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  American Hospital Association PAC	d Statements may not be sold or used by any persor he name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Rayburn Thompson Mailing Address Post Office Box 1330 City Roanoke	67 State Zip Code VA 24033-3367	Date of Receipt  1 2 2 2 2 0 0 9  Transaction ID: 17833169  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer Carilion Medical Center  Receipt For:  Primary General Other (specify) ▼	Occupation Executive Vice President Aggregate Year-to-Date  350.00	350.00
Full Name (Last, First, Middle Initial) Mr. R. Reed Fraley Mailing Address 257 Clouse Lane  City Granville  FEC ID number of contributing federal political committee.  Name of Employer Ohio Hospital Association  Receipt For: Primary General Other (specify)	State Zip Code OH 43023-1428  C  Occupation Senior Vice President  Aggregate Year-to-Date   1000.00	Date of Receipt    M   M   D   D   2 0 0 9
Full Name (Last, First, Middle Initial) Ms. Bridget A. Gargan  Mailing Address 54 West Weisheime  City  Columbus  FEC ID number of contributing federal political committee.  Name of Employer Ohio Hospital Association  Receipt For:  Primary  General  Other (specify)	r Road  State Zip Code OH 43214-2545  C  Occupation Vice President, State Policy & Advoca Aggregate Year-to-Date ▼  500.00	Date of Receipt    M   M   D   D   2 2   2 0 0 9
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	1100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 102 / 194 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may le name and add	not be sold or used by any perso lress of any political committee to	
Full Name (Last, First, Middle Initial)  Mr. James R. Castle  Mailing Address 815 Gatehouse Lane  City  Columbus  FEC ID number of contributing federal political committee.  Name of Employer Ohio Hospital Association  Receipt For:  Primary General  Other (specify)	<del> '</del>	Zip Code 43235-1733  a. & Chief Executive Officer Year-to-Date ▼ 1000.00	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) Dr. David Engler, PhD Mailing Address 323 Pebble Creek Dri  City Dublin  FEC ID number of contributing federal political committee.  Name of Employer Ohio Hospital Association  Receipt For: Primary General Other (specify)	State OH C Occupation VP Qualit	Zip Code 43017-1370  ty Institute  Year-to-Date ▼  500.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ms. Mary M. Yost Mailing Address 924 Riva Ridge Boule City Gahanna FEC ID number of contributing federal political committee.  Name of Employer Ohio Hospital Association  Receipt For: Primary General Other (specify)	State OH C Occupation Vice Pres	Zip Code 43230-3825  Dident, Public Affairs Year-to-Date ▼ 500.00	Date of Receipt    M
SUBTOTAL of Receipts This Page (optional) .		<b>)</b>	1000.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 103 / 194 (check only one)    X   11a
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person e name and address of any political committee to	
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Mary L. Gallagher		Date of Receipt
Mailing Address 155 East Broad Stree 15th Floor	,	12 22 2009
City Columbus	State Zip Code OH 43215-3609	Transaction ID: 17833630
FEC ID number of contributing federal political committee.	C 43213-3009	Amount of Each Receipt this Period  250.00
Name of Employer Ohio Hospital Association	Occupation Vice President & General Counsel	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial) Ms. Kimberly A. Keiser	I	Date of Receipt
Mailing Address 2237 Bryden Road		12 22 2009
City	State Zip Code	Transaction ID: 17833631
Bexley	OH 43209-1612	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Ohio Hospital Association	Occupation Chief Information Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	]
Full Name (Last, First, Middle Initial) Mr. Joseph R. Ruggles		Date of Receipt
Mailing Address 1780 Buck Creek Lan	е	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17833632
Springfield	OH 45502-8800	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Ohio Hospital Association	Occupation Vice President, Member Developmer	nt
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional) .		750.00

	for each category of the Detailed Summary Page	(check only one)         X       11a       11b       11c       12         13       14       15       16       11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. BJ Swanson  Mailing Address 1121 Lamb Road  City Troy  FEC ID number of contributing federal political committee.  Name of Employer Gritman Medical Center  Receipt For: Primary General Other (specify)	State Zip Code ID 83871-9619  C  Occupation Trustee  Aggregate Year-to-Date  308.00	Date of Receipt    M M
Full Name (Last, First, Middle Initial) Mr. Carl Hanson  Mailing Address 1224 Eighth Street  City Rupert  FEC ID number of contributing federal political committee.  Name of Employer Minidoka Memorial Hospital and Extende  Receipt For: Primary General Other (specify)	State Zip Code ID 83350-1527  C  Occupation Administrator  Aggregate Year-to-Date ▼  472.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Jeffrey W Martin Mailing Address 700 South Main Stree  City Moscow  FEC ID number of contributing federal political committee.  Name of Employer Gritman Medical Center  Receipt For: Primary General Other (specify)	State Zip Code ID 83843-3056  C  Occupation Chief Executive Officer  Aggregate Year-to-Date   593.00	Date of Receipt    M
SUBTOTAL of Receipts This Page (optional) .	· • • • • • • • • • • • • • • • • • • •	678.00

SCHEDULE A (FEC ITEMIZED RECEIPT	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 105 / 194 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
Any information copied from su or for commercial purposes, oth NAME OF COMMITTEE (Ir American Hospital Asso	ner than using the name and an Full)	ay not be sold or used by any persoddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Midd Mr. Joseph E Morris Mailing Address 2003 Lin  City Coeur D Alene  FEC ID number of contributifederal political committee.  Name of Employer Kootenai Medical Center	State ID C	Zip Code 83814-2611 ion xecutive Officer	Date of Receipt  1 2 2 8 2 0 0 9  Transaction ID: 17833650  Amount of Each Receipt this Period
Receipt For:  Primary Gen  Other (specify) ▼	Aggrega	tte Year-to-Date ▼ 613.00	
Full Name (Last, First, Midd John Fullmer  Mailing Address 1160 Ail  City	,	Zip Code	Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
Blackfoot  FEC ID number of contributifederal political committee.  Name of Employer	ID C Occupat	83221-1531	Amount of Each Receipt this Period  392.00
Bingham Memorial Hospital  Receipt For: Primary Gen Other (specify)	Trustee Aggrega		
Full Name (Last, First, Midd Mr. Joseph P Caroselli Mailing Address P O Box	<u> </u>		Date of Receipt  1 2 2 8 2 0 0 9
City Boise	State ID	Zip Code 83701-1100	Transaction ID: 17833654  Amount of Each Receipt this Period
FEC ID number of contributi federal political committee.  Name of Employer Idaho Elks Rehabilitation	Occupat		113.00
Hospital  Receipt For:  Primary  Gen  Other (specify) ▼	Aggrega	xecutive Officer te Year-to-Date ▼ 288.00	
SUBTOTAL of Receipts This	Page (optional)		618.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 106 / 194   (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Ms. Judy Van Komen			Date of Receipt
Mailing Address PO Box 981			12 28 2009
City	State	Zip Code	Transaction ID: 17833655
McCall FEC ID number of contributing federal political committee.	C	83638-0981	Amount of Each Receipt this Period  226.00
Name of Employer McCall Memorial Hospital	Occupatio Auxillian	n	
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 226.00	
Full Name (Last, First, Middle Initial) Ms. Linda Porter			Date of Receipt
Mailing Address 1236 Fairview Ave			12 28 2009
City Rexburg	State ID	Zip Code 83440-5085	Transaction ID: 17833656  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00770 0000	226.00
Name of Employer Madison Memorial Hospital	Occupatio	n Administrator	
Receipt For:  Primary General  Other (specify) ▼	<del>_ , ' _ · _ · _ </del>	e Year-to-Date ▼ 226.00	
Full Name (Last, First, Middle Initial) Ms. Margaret Soulen Hinson			Date of Receipt
Mailing Address 645 East Fifth Stree	t		12 28 2009
City	State	Zip Code	Transaction ID: 17833659
Weiser FEC ID number of contributing federal political committee.	C	83672-2202	Amount of Each Receipt this Period  113.00
Name of Employer Weiser Memorial Hospital	Occupatio Chair, Bo	n pard of Trustees	
Receipt For:  Primary  General  Other (specify) ▼		e Year-to-Date ▼ 363.00	
SUBTOTAL of Receipts This Page (optional	)		565.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 107 / 194 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American Hospital Association PAC	d Statements may not be sold or used by any perso the name and address of any political committee to	
Full Name (Last, First, Middle Initial) Mr Stephen Zollinger Mailing Address 707 Engleman  City Rexburg	State Zip Code ID 83440-1861	Date of Receipt    M M
FEC ID number of contributing federal political committee.  Name of Employer Madison Memorial Hospital  Receipt For:  Primary General Other (specify)	Occupation General Counsel  Aggregate Year-to-Date   452.00	452.00
Full Name (Last, First, Middle Initial) Mr. Steven A. Millard Mailing Address 615 N. 7th Street		Date of Receipt  1 2 2 8 2 0 0 9
City Eagle FEC ID number of contributing federal political committee.	State         Zip Code           ID         83702-5502	Transaction ID: 17833662  Amount of Each Receipt this Period  113.00
Name of Employer Idaho Hospifal Association  Receipt For:  Primary General  Other (specify) ▼	Occupation President  Aggregate Year-to-Date   613.00	
Full Name (Last, First, Middle Initial) Ms. Toni Lawson Mailing Address P.O. Box 1278		Date of Receipt  1 2 2 8 2 0 0 9
City Boise  FEC ID number of contributing federal political committee.	State         Zip Code           ID         83701-1278	Transaction ID: 17833664  Amount of Each Receipt this Period  226.00
Name of Employer Idaho Hospital Association  Receipt For:  Primary General  Other (specify) ▼	Occupation Vice President, Government Affairs  Aggregate Year-to-Date   401.00	
SUBTOTAL of Receipts This Page (optional	)	791.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 108 / 194 (check only one)    X
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Tracy Broome Mailing Address Box 102  City Lake Fork  FEC ID number of contributing federal political committee.  Name of Employer McCall Memorial Hospital  Receipt For:		Zip Code 83635-0102 n Plant & Grounds	Date of Receipt    M   M   28   2009   Transaction ID: 17833666    Amount of Each Receipt this Period   226.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Ms Susan Ell	Aggregate	226.00	Date of Receipt
Mailing Address 931 N. Race Ave  City  Arlington Heights  FEC ID number of contributing federal political committee.  Name of Employer Advocate Health Care  Receipt For:  Primary General Other (specify) ▼		Zip Code 60004-4451  n velopment Officer 2 Year-to-Date  250.00	Transaction ID: 17833687  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial) Ms. Robin Fell-Nuccio  Mailing Address 7961 Creekwood Drive  City  Burr Ridge  FEC ID number of contributing federal political committee.  Name of Employer Advocate Christ Medical Center  Receipt For:  Primary  General  Other (specify)	State IL  C Occupation Director,	Zip Code 60527-8014 n Human Resources Year-to-Date ▼	Date of Receipt  1 2 2 8 2 0 0 9  Transaction ID: 17833688  Amount of Each Receipt this Period  370.00
SUBTOTAL of Receipts This Page (optional)		<b>)</b>	846.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 109 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any persor e name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial)  Mr Robert Christie		Date of Receipt
Mailing Address 240 East Ontario Stre Suite 500		12 28 7 2009
City <u>Chicago</u>	State Zip Code IL 60611-3223	Transaction ID: 17833689  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Northwestern Memorial Hos- pital Receipt For:  Primary General Other (specify) ▼	Occupation VP, Government and Legislative Relat Aggregate Year-to-Date ▼  250.00	tio
Full Name (Last, First, Middle Initial) Ms. Michelle Janney  Mailing Address 1620 Meadow Lane		Date of Receipt
City	State Zip Code	1 2 2 8 2 0 0 9 Transaction ID: 17833691
Glenview	IL 60025-2350	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Northwestern Memorial Hos- pital	Occupation Sr. VP/Chief Nurse Executive	
Receipt For:  Primary General  Other (specify) ♥	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial) Mr. Dean M Harrison		Date of Receipt
Mailing Address 251 East Huron Stree		12 28 2009
City Chicago	State Zip Code	Transaction ID: 17833693
FEC ID number of contributing federal political committee.	IL 60611-2908	Amount of Each Receipt this Period 500.00
Name of Employer Northwestern Memorial Hospital Receipt For:  Primary  General  Other (specify) ▼	Occupation President and Chief Executive Officer  Aggregate Year-to-Date   500.00	-
SUBTOTAL of Receipts This Page (optional) .		1000.00
TOTAL This Period (last page this line number	only)	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 110 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Ai	for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. B. Bradford Billings		Date of Receipt
	Mailing Address 2829 Cheswick Rd.  City	State Zip Code	1 2 2 8 2 0 0 9 Transaction ID: 17833697
	Quincy	IL 62301-6380	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Name of Employer Blessing Hospital	Occupation President and Chief Executive Officer	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1550.00	
. —	Full Name (Last, First, Middle Initial) Mr. Brad Copple		Date of Receipt
	Mailing Address 11 East Pleasant Aver	nue	12 28 2009
	City	State Zip Code	Transaction ID: 17833698
	Sandwich	IL 60548-1100	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Valley West Community Hos- pital	Occupation Administrator	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Ms. Julie Lehr Creamer		Date of Receipt
	Mailing Address 3527 Illinois Road		12 28 2009
	City	State Zip Code	Transaction ID: 17833699
	Wilmette	IL 60091-1011	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Northwestern Memorial Hos- pital	Occupation Vice President, Operations and Quality	y
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	250.00	
		<b>&gt;</b>	850.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	ζ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE   111 / 194   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  American Hospital Association PAG	0		
Full Name (Last, First, Middle Initial) Mr. Mark Deaton			Date of Receipt
Mailing Address 740 North Hayes			12 28 2009
City Oak Park	State IL	Zip Code 60302-1706	Transaction ID: 17833700  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	000017700	250.00
Name of Employer Illinois Hospital Associa- tion	Occupation Sr. VP, O	n General Counsel	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 937.55	
Full Name (Last, First, Middle Initial) Mr. Richard B Floyd			Date of Receipt
Mailing Address 1425 North Randall	l Road		12 28 7 2009
City Elgin	State IL	Zip Code 60123-2300	Transaction ID: 17833703  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00120 2000	600.00
Name of Employer Sherman Hospital	Occupation President	n t and Chief Executive Office	<del>-</del>
Receipt For:  Primary General  Other (specify) ▼	'	e Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Mr. Patrick M Magoon			Date of Receipt
Mailing Address 2300 Children's Pla	ıza		12 28 2009
City	State	Zip Code	Transaction ID: 17833706
Chicago FEC ID number of contributing federal political committee.	C	60614-3394	Amount of Each Receipt this Period  1500.00
Name of Employer Children's Memorial Hospi- tal	Occupation Presiden	n t and Chief Executive Office	r
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1500.00	
			2350.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for	se separate schedule(s) r each category of the etailed Summary Page	FOR LINE NUMBER: PAGE 112 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be name and address	pe sold or used by any perso of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Peter McCanna Mailing Address 2025 Schiller  City Wilmette  FEC ID number of contributing federal political committee.  Name of Employer Northwestern Memorial Hospital Receipt For: Primary General Other (specify)	IL C Occupation	Zip Code 60091-2323  resident and Chief Fina -to-Date ▼ 500.00	Date of Receipt  1 2 2 8 2 0 0 9  Transaction ID: 17833710  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial) Mr. Dennis Murphy Mailing Address 48 Royal Vale Drive  City Oak Brook  FEC ID number of contributing federal political committee.  Name of Employer Northwestern Memorial Hospital  Receipt For: Primary General Other (specify)			Date of Receipt    M M
Full Name (Last, First, Middle Initial) Ms Paula Noble  Mailing Address 2300 Children's Plaza  City Chicago  FEC ID number of contributing federal political committee.  Name of Employer Children's Memorial Hospital Receipt For: Primary General Other (specify)	State Z	Zip Code 60614-3394 al Officer and Treasurer -to-Date ▼ 250.00	Date of Receipt    M   M   28   2009   Transaction ID: 17833715   Amount of Each Receipt this Period   250.00
SUBTOTAL of Receipts This Page (optional) .  TOTAL This Period (last page this line number		<u>·</u>	1000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 113 / 194 (check only one)    X	
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	g the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions	
American Hospital Association PA  Full Name (Last, First, Middle Initial)  Mr. Kevin P Poorten			Date of Receipt	
Mailing Address P O Box 707  City  Dekalb	State IL	Zip Code 60115-0707	Transaction ID: 17833716  Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	00110 0707	250.00	
Name of Employer Kish Health System  Receipt For:  Primary General  Other (specify) ▼	<del> </del>	n t and Chief Executive Office Year-to-Date ▼ 250.00		
Full Name (Last, First, Middle Initial) Mr. Bob S. Ellzey, FACHE Mailing Address 311 North Morrow	Street		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City				
<u>Mena</u>	AR	71953-2516	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		227.50	
Name of Employer Mena Regional Health Syst- em	Occupation President			
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 227.50		
Full Name (Last, First, Middle Initial) Mr. Ron Peterson			Date of Receipt	
Mailing Address 624 Hospital Drive			12 / 29 / Y Y Y Y Y Y Y	
City Mountain Home	State AR	Zip Code 72653-2955	Transaction ID: 17833731  Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	7,200 2000	325.00	
Name of Employer Baxter Regional Medical Center Receipt For:	1	t and Chief Executive Office	<u></u>	
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 325.00		
SUBTOTAL of Receipts This Page (options	al)		802.50	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 114 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Mr. Barry Pipkin  Mailing Address 10301 Maumelle Blvd  City  North Little Rock  FEC ID number of contributing federal political committee.  Name of Employer Rivendell Behavioral Health Services o  Receipt For:  Primary General  Other (specify)	State Zip Code AR 72113-6620  C  Occupation Chief Executive Officer and Managing Aggregate Year-to-Date  227.50	Date of Receipt  1 2 2 9 2 0 0 9  Transaction ID: 17833732  Amount of Each Receipt this Period  227.50
Full Name (Last, First, Middle Initial) Mr. Russ D Sword, , FACHE Mailing Address 2729 Highway 65 and City Lake Village FEC ID number of contributing federal political committee.  Name of Employer Chicot Memorial Hospital  Receipt For: Primary General Other (specify)	82 South  State Zip Code AR 71653  C  Occupation Interim Chief Executive Officer  Aggregate Year-to-Date  227.50	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. John R Tucker  Mailing Address 2801 Medical Center D  City Pocahontas  FEC ID number of contributing federal political committee.  Name of Employer Five Rivers Medical Center  Receipt For:  Primary General Other (specify)	State Zip Code AR 72455-9436  C  Occupation Chief Executive Officer Aggregate Year-to-Date  227.50	Date of Receipt  M M M / 29 / 2009  Transaction ID: 17833734  Amount of Each Receipt this Period  227.50
SUBTOTAL of Receipts This Page (optional)		682.50

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 115 / 194 (check only one)  X 11a 11b 11c 12  13 14 15 16
A	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may not be sold or used by any perse name and address of any political committee t	son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Dr C Gregory Martin, , M.D.		Date of Receipt
	Mailing Address 133 Old Rd to Nine Ad		12 29 2009
	City Concord	State Zip Code  MA 01742-9120	Transaction ID: 17833740
	FEC ID number of contributing federal political committee.	MA 01742-9120	Amount of Each Receipt this Period  250.00
	Name of Employer Emerson Hospital	Occupation Chief Medical Officer	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) Ms. Christine C Schuster Mailing Address 133 Old Rd to Nine Ad	cre Corner	Date of Receipt
	-		12 29 2009
	City Concord	State Zip Code  MA 01742-9120	Transaction ID: 17833751
	FEC ID number of contributing federal political committee.	MA 01742-9120	Amount of Each Receipt this Period 350.00
	Name of Employer Emerson Hospital	Occupation President and Chief Executive Office	er
	Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
	Full Name (Last, First, Middle Initial) Mr. James Shannon	1	Date of Receipt
	Mailing Address 2800 North Dallas Par Suite 200	rkway	12 29 7 2009
	City	State Zip Code	Transaction ID: 17833754
	Plano FEC ID number of contributing federal political committee.	TX 75093-5994	Amount of Each Receipt this Period 350.00
	Name of Employer LHP Hospital Group	Occupation Executive Vice President	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Γ,	SURTOTAL of Receipts This Page (ontional)		950.00

City State Zip Code TX 75093-2419  FEC ID number of contributing federal political committee.  Name of Employer LHP Hospital Group  Fell Name (Last, First, Middle Initial)  Mr Frank Giarrusso  Mailing Address 67 Union Street, 6th Floor  City State Zip Code MA 01760-7700  City State Zip Code MA 01760-7700  City State Zip Code MA 01760-7700  FEC ID number of contributing federal political committee.  C Transaction ID: 17833758  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17833758  Amount of Each Receipt  Aggregate Year-to-Date ▼  Transaction ID: 17833758  Amount of Each Receipt this Period  C Transaction ID: 17833758  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  C Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Director  Aggregate Year-to-Date ▼  Director  Aggregate Year-to-Date ▼  Director  Director	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 116 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16
Mr. Thomas Frazier  Mailing Address 1813 Cliffview Dr  City State Zip Code TX 75093-2419  FEC ID number of contributing federal political committee.  Name of Employer Lith Hospital Group  Full Name (Last, First, Middle Initial)  Mr. Frank Giarrusso  Mailing Address 67 Union Street, 6th Floor  City State Zip Code MA 01760-7700  City State Zip Code MA 01760-7700  FEC ID number of contributing federal political committee.  C C Decupation  FEC ID number of contributing federal political committee.  C Date of Receipt  Mailing Address 67 Union Street, 6th Floor  City State Zip Code MA 01760-7700  FEC ID number of contributing federal political committee.  C Decupation  Director  Receipt For:  Primary General Other (specify) ▼ 270.00  Date of Receipt  Mailing Address 524 Oella Avenue  City State Zip Code Question  Director  Receipt For:  Primary General Other (specify) ▼ 270.00  Date of Receipt  Transaction ID: 17833758  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17833758  Transaction ID: 17833758  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17834077  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17834077  Amount of Each Receipt this Period  C Date of Receipt  Transaction ID: 17834077  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17834077  Amount of Each Receipt this Period  Primary General  Occupation  C Date of Receipt  Transaction ID: 17834077  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17834077  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: 17834077  Amount of Each Receipt this Period  Primary General	or for commercial purposes, other than using the  NAME OF COMMITTEE (In Full)	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Mr Frank Giarrusso Mailing Address 67 Union Street, 6th Floor  City State Zip Code Natick MA 01760-7700  FEC ID number of contributing federal political committee.  Name of Employer Kindred Hospital Northeas-Inatick Receipt For: Primary General Other (specify) ▼  City State Zip Code MA 01760-7700  Cocupation Director  Aggregate Year-to-Date ▼  Transaction ID: 17833758  Amount of Each Receipt this Period  270.00  Date of Receipt  Transaction ID: 17833758  Transaction ID: 17833758  Amount of Each Receipt this Period  Date of Receipt  1 2 1 2 0 0 9  Transaction ID: 17834077  Transaction ID: 17834077  Amount of Each Receipt  1 2 1 2 0 0 9  Transaction ID: 17834077  Amount of Each Receipt this Period  City State Zip Code FEC ID number of contributing federal political committee.  City FEC ID number of contributing federal political committee.  City FEC ID number of contributing federal political committee.  City FEC ID number of contributing federal political committee.  City Figure 1 2 0 0 9  Transaction ID: 17834077  Amount of Each Receipt this Period  City Aggregate Year-to-Date ▼  Primary General  City Aggregate Year-to-Date ▼  Primary General	Mr. Thomas Frazier  Mailing Address 1813 Cliffview Dr  City Plano  FEC ID number of contributing federal political committee.  Name of Employer LHP Hospital Group  Receipt For: Primary General	TX 75093-2419  C  Occupation Executive Vice President, Administrative Aggregate Year-to-Date ▼	Transaction ID: 17833755  Amount of Each Receipt this Period  500.00
Other (specify) ▼ 270.00  Full Name (Last, First, Middle Initial) Ms. Elizabeth Bowerman  Mailing Address 524 Oella Avenue  City State Zip Code Ellicott City MD 21043-4724  FEC ID number of contributing federal political committee.  Name of Employer Keswick Multi-Care Center  Receipt For: Primary General  Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Mr Frank Giarrusso  Mailing Address 67 Union Street, 6th Flo  City  Natick  FEC ID number of contributing federal political committee.  Name of Employer Kindred Hospital Northeast-Natick Receipt For:	State Zip Code MA 01760-7700  C Occupation Director	Transaction ID: 17833758  Amount of Each Receipt this Period
Receipt For:  Primary  General  Aggregate Year-to-Date  704.00	Other (specify)  Full Name (Last, First, Middle Initial) Ms. Elizabeth Bowerman Mailing Address 524 Oella Avenue  City Ellicott City  FEC ID number of contributing federal political committee.	State Zip Code MD 21043-4724	Transaction ID: 17834077  Amount of Each Receipt this Period
SUBTOTAL of Pessints This Pess (entional)	Receipt For: Primary General	CEO Aggregate Year-to-Date ▼	07/00

A. Fu Mr Ma Gill Fe fec	commercial purposes, other than using the IME OF COMMITTEE (In Full) merican Hospital Association PAC II Name (Last, First, Middle Initial) Michael J Curran illing Address 3551 Cattail Creek Dri	Statements may not be sold or used by any person and address of any political committee to ename and address of any political	Date of Receipt    Mark
A. Fu Mr Ma	nerican Hospital Association PAC  Il Name (Last, First, Middle Initial)  Michael J Curran  illing Address 3551 Cattail Creek Dri  y  enwood  C ID number of contributing leral political committee.  me of Employer  xdStar Health  ceipt For:  Primary General  Other (specify)  Il Name (Last, First, Middle Initial)  Eugene A. Friedman	State Zip Code MD 21738-9607  C  Occupation Executive Vice President and CFO Aggregate Year-to-Date  255.00	Transaction ID: 17834084  Amount of Each Receipt this Period  255.00  Date of Receipt
A. Mr Ma Cit Gi FE fec	Michael J Curran illing Address 3551 Cattail Creek Dri y enwood C ID number of contributing leral political committee.  me of Employer dStar Health  ceipt For: Primary General Other (specify)  Il Name (Last, First, Middle Initial) . Eugene A. Friedman	State Zip Code MD 21738-9607  C  Occupation Executive Vice President and CFO Aggregate Year-to-Date  255.00	Transaction ID: 17834084  Amount of Each Receipt this Period  255.00  Date of Receipt
Cit GI FE fec Na Me	enwood  C ID number of contributing leral political committee.  me of Employer edStar Health  ceipt For: Primary General Other (specify)  Il Name (Last, First, Middle Initial) Eugene A. Friedman	State Zip Code MD 21738-9607  C  Occupation Executive Vice President and CFO Aggregate Year-to-Date  255.00	Transaction ID: 17834084  Amount of Each Receipt this Period  255.00  Date of Receipt
G FE fec Na Me	enwood C ID number of contributing leral political committee.  me of Employer edStar Health ceipt For: Primary General Other (specify)  Il Name (Last, First, Middle Initial) Eugene A. Friedman	MD 21738-9607  C  Occupation Executive Vice President and CFO  Aggregate Year-to-Date ▼  255.00	Amount of Each Receipt this Period  255.00  Date of Receipt
FE fec Na Me	C ID number of contributing leral political committee.  me of Employer adStar Health  ceipt For: Primary General Other (specify)  Il Name (Last, First, Middle Initial) Eugene A. Friedman	Occupation Executive Vice President and CFO Aggregate Year-to-Date  255.00	Date of Receipt
	ceipt For: Primary General Other (specify) ▼  Il Name (Last, First, Middle Initial) Eugene A. Friedman	Executive Vice President and CFO  Aggregate Year-to-Date ▼  255.00	<del>-</del>
Re	Primary General Other (specify) ▼  Il Name (Last, First, Middle Initial) Eugene A. Friedman	255.00	<del>-</del>
	. Eugene A. Friedman		<del>-</del>
<b>3.</b> Mr	illing Address 2211 Crost Road		M M / D D / Y Y Y
_			12 30 2009
Cit	y altimore	State Zip Code MD 21209-4227	Transaction ID: 17834092  Amount of Each Receipt this Period
FE	C ID number of contributing leral political committee.	C	255.00
Na Lif	me of Employer eBridge Health	Occupation Trustee	
Re	ceipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	
	II Name (Last, First, Middle Initial) ry Joy Maxwell		Date of Receipt
_	iling Address 20265 Watermark Pla	се	12 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Cit		State Zip Code	Transaction ID: 17834309
FE	otomac Falls  C ID number of contributing leral political committee.	VA 20165-5134	Amount of Each Receipt this Period 255.00
Na Me	me of Employer dStar Health	Occupation Executive VP, Operations Washingto	on
Re	ceipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	
SUB	FOTAL of Receipts This Page (optional)		765.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 118 / 194 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	atements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
∠ <b>4</b> .	Full Name (Last, First, Middle Initial) Christine Swearingen Mailing Address 3022 Chestnut Street, I	NW	Date of Receipt  1 2 3 0 2 0 0 9
	City Washington	State Zip Code DC 20015-1408	Transaction ID: 17834342  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	255.00
	Name of Employer MedStar Health	Occupation Executive VP	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	
3.	Full Name (Last, First, Middle Initial) Dr William L Thomas, , M.D. Mailing Address 124 W. Lee Street		Date of Receipt  1 2 3 0 2 0 0 9
	City	State Zip Code	Transaction ID: 17834344
	Baltimore  FEC ID number of contributing federal political committee.	MD 21201-2421	Amount of Each Receipt this Period 255.00
	Name of Employer MedStar Health	Occupation  Executive Vice President Medical Affa	ai l
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	
_ ;.	Full Name (Last, First, Middle Initial) Ms. Pegeen Townsend		Date of Receipt
	Mailing Address 225 McKeon Road		12 30 7 9 2009
	City Severna Park	State Zip Code MD 21146-3012	Transaction ID: 17834347  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	255.00
	Name of Employer MedStar Health	Occupation Corporate VP, Government Affairs	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	
Γ	SUBTOTAL of Receipts This Page (optional)		765.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 119 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may not be sold or used by any person g the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PA	oC .	
Full Name (Last, First, Middle Initial) Eric R. Wagner		Date of Receipt
Mailing Address 711 E. Timber Bra	,	12 30 2009
City Alexandria	State Zip Code VA 22302-3619	Transaction ID: 17834353  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 22302-3019	255.00
Name of Employer MedStar Health	Occupation Executive Vice President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	
Full Name (Last, First, Middle Initial) Mr. James J Xinis		Date of Receipt
Mailing Address 8430 Meadowview	Circle	12 30 7 2009
City	State Zip Code	Transaction ID: 17834358
Owings	MD 20736-9502	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	391.00
Name of Employer Calvert Memorial Hospital	Occupation President and Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 391.00	
Full Name (Last, First, Middle Initial) Steven Allen		Date of Receipt
Mailing Address 4040 Baughman C	Grant	12 30 2009
City	State Zip Code	Transaction ID: 17834389
New Albany  FEC ID number of contributing federal political committee.	OH 43054-8933	Amount of Each Receipt this Period  250.00
Name of Employer Nationwide Children's Hos-	Occupation	-
pital	Chief Executive Officer	4
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
		896.00
SUBTOTAL of Receipts This Page (option	al)	030.00
TOTAL This Period (last page this line nur	mber only)	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 120 / 194 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  American Hospital Association PAC	the name and add	γ not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Mr Bruce James  Mailing Address 101 Poolside I n			Date of Receipt
Mailing Address 101 Poolside Ln  City	State	Zip Code	1 2 3 0 7 2 0 0 9 Transaction ID: 17834393
Dover FEC ID number of contributing federal political committee.	OH C	44622-9565	Amount of Each Receipt this Period 250.00
Name of Employer Union Hospital	Occupation Presiden	t & CEO	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Dennis B Johnson Mailing Address 1025 New Moody La	ıne		Date of Receipt  1 2 3 0 2 0 0 9
City	State	Zip Code	Transaction ID: 17834519
La Grange	KY	40031-9154	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Baptist Hospital Northeast	Occupation Administ		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr Michael W Gough			Date of Receipt
Mailing Address P O Box 35070			12 30 Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 17834685
Louisville  FEC ID number of contributing federal political committee.	C	40232-5070	Amount of Each Receipt this Period  330.00
Name of Employer Norton Healthcare	Occupation Chief Fin	n ancial Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 330.00	
SUBTOTAL of Receipts This Page (optional)			830.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 121 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Brian Brezosky Mailing Address Post Office Box 43662  City Louisville  FEC ID number of contributing federal political committee.  Name of Employer Kentucky Hospital Association Receipt For: Primary General	State Zip Code KY 40253-6620  C  Occupation Senior Vice President Aggregate Year-to-Date	Date of Receipt  1 2 3 0 2 0 0 9  Transaction ID: 17834686  Amount of Each Receipt this Period  500.00
Other (specify)  Full Name (Last, First, Middle Initial) Ms. Elizabeth G. Cobb  Mailing Address P.O. Box 436629  City	State Zip Code	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
Louisville  FEC ID number of contributing federal political committee.  Name of Employer Kentucky Hospital Associa-	KY 40205-3033  C Occupation	Amount of Each Receipt this Period  500.00
Rentucky Hospital Association  Receipt For:  Primary General  Other (specify)	Director of Health Policy  Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial)  Ms. Kim J. Dees  Mailing Address 2501 Nelson Miller Pa	rkway	Date of Receipt
Post Office Box 43662 City	State Zip Code	1 2 3 0 2 0 0 9 Transaction ID: 17834779
Louisville	KY 40223-2221	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Kentucky Hospital Associa- tion	Occupation Executive Dir, Center for Health Care	е
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 122 / 194 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American Hospital Association PA	and Statements may not be sold or used by any person g the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Paige Franklin Mailing Address 404 Kaelin Drive		Date of Receipt  1 2 3 0 2 0 0 9
City Louisville	State Zip Code KY 40207-2204	Transaction ID: 17834780  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Kentucky Hospital Association Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Vice President, Information Services  Aggregate Year-to-Date   500.00	
Full Name (Last, First, Middle Initial) Ms. Nancy C. Galvagni Mailing Address 2501 Nelson Miller	Parkway	Date of Receipt  1 2 3 0 2 0 0 9
City	State Zip Code	Transaction ID: 17834781
<u>Louisville</u>	KY 40253	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Kentucky Hospital Associa- tion	Occupation Senior Vice President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Stephen P. Miller		Date of Receipt
Mailing Address 1101 Cardinal Driv	⁄e	12 30 2009
City	State Zip Code	Transaction ID: 17834783
Louisville	KY 40253-6629	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Kentucky Hospital Associa- tion Receipt For:	Occupation Vice President	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
CURTOTAL of Descints This Desc (culture	al)	1500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 123 / 194 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American Hospital Association PA	nd Statements may not be sold or used by any person g the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Sarah S. Nicholson Mailing Address 2501 Nelson Miller	Parkway	Date of Receipt
City	State Zip Code	Transaction ID: 17834791
Louisville  FEC ID number of contributing federal political committee.	KY 40223-2221	Amount of Each Receipt this Period 500.00
Name of Employer Kentucky Hospital Association Receipt For:  Primary General Other (specify) ▼	Occupation Vice President, Government Relations Aggregate Year-to-Date   500.00	5
Full Name (Last, First, Middle Initial) Ms. Debbie Riley  Mailing Address 502 Trotwood Place	e	Date of Receipt
City	State Zip Code	1 2 3 0 2 0 0 9 Transaction ID: 17834793
Louisville	KY 40245-4071	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Kentucky Hospital Associa- tion	Occupation Chief Financial Officer	
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Carol J. Walters	L	Date of Receipt
Mailing Address Post Office Box 43	6629	1 2 3 0 2 0 0 9
City	State Zip Code	Transaction ID: 17834794
Louisville  FEC ID number of contributing federal political committee.	KY 40253-6629	Amount of Each Receipt this Period 500.00
Name of Employer Kentucky Hospital Associa- tion	Occupation Vice President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		1500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 124 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any person ne name and address of any political committee to s	for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Charles J. Warnick Mailing Address 120 Hillitop Meadow  City Frankfort  FEC ID number of contributing federal political committee.  Name of Employer Baptist Hospital East  Receipt For:	State Zip Code KY 46001  C  Occupation Director of Planning  Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Mr. Blake A Dye  Mailing Address P O Box 490	500.00	Date of Receipt
City  New Castle  FEC ID number of contributing federal political committee.  Name of Employer Henry County Hospital  Receipt For:  Primary General Other (specify)	State Zip Code IN 47362-0490  C  Occupation President and Chief Executive Officer  Aggregate Year-to-Date  1000.00	Transaction ID: 17834829  Amount of Each Receipt this Period  500.00
Full Name (Last, First, Middle Initial) Mr. Spencer L. Grover  Mailing Address 3636 Emily Way  City Carmel  FEC ID number of contributing federal political committee.  Name of Employer Indiana Hospital Association  Receipt For:  Primary General Other (specify)	State Zip Code IN 46033-4442  C Occupation Vice President Aggregate Year-to-Date  1000.00	Date of Receipt  1 2 3 0 2 0 0 9  Transaction ID: 17834830  Amount of Each Receipt this Period  500.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	1500.00

ITEMIZ	DULE A (FEC Form 3X) ZED RECEIPTS  nation copied from such Reports and Sta	Use separate for each cate Detailed Sum	egory of the nmary Page	X         11a         11b         15         16         17           for the purpose of soliciting contributions
or for com	mercial purposes, other than using the n OF COMMITTEE (In Full) can Hospital Association PAC	ame and address of any polit	ical committee to s	olicit contributions from such committee.
A. Mr. Dou Mailing  City  Colum  FEC ID  federal  Name of Indianal ion  Receip	number of contributing political committee. of Employer a Hospital Associat-	State Zip Code IN 47201-364  C  Occupation Hospital Association P Aggregate Year-to-Date	resident	Date of Receipt  1 2 3 0 2 0 0 9  Transaction ID: 17834831  Amount of Each Receipt this Period  1000.00
Mr. Bria Mailing City Indian FEC ID federal Name of Indianation Receip P	me (Last, First, Middle Initial) an Tabor  Address 10762 Forest Lake Cour  napolis  number of contributing political committee.  of Employer a Hospital Associat- t For:  Orimary General Other (specify)	State Zip Code IN 46278-961  C  Occupation Hospital Association V Aggregate Year-to-Date	P	Date of Receipt  1 2 3 0 2 0 0 9  Transaction ID: 17834832  Amount of Each Receipt this Period  500.00
C. Mr. Dav Mailing City Green FEC ID federal Name of Indianation Receip P	number of contributing political committee. of Employer a Hospital Associat-	State Zip Code IN 46143-744  C  Occupation Hospital Associaton VF Aggregate Year-to-Date		Date of Receipt    M   M
SUBTOT	AL of Receipts This Page (optional)		<b>&gt;</b>	2000.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 126 / 194 (check only one)    X   11a
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  American Hospital Association PAC	d Statements may not be sold or used by any personante name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Matthew D Bailey, , FACHE		Date of Receipt
Mailing Address 665 Ironwood Drive		12 30 2009
City	State Zip Code	Transaction ID: 17834834
Avon	IN 46123-9458	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	158.25
Name of Employer Clarian West Medical Cent- er	Occupation Hospital President & CEO	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 658.25	
Full Name (Last, First, Middle Initial)		Data of Bassist
Mr. Francis G Albarano  Mailing Address P O Box 407		Date of Receipt  1 2 3 0 2 0 0 9
City	State Zip Code	Transaction ID: 17834835
Winchester	IN 47394-0407	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. Vincent Randolph Hosp- ital	Occupation Administrator	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. James Buchanan, M.D.		Date of Receipt
Mailing Address 2653 County Road	60	12 30 2009
City	State Zip Code	Transaction ID: 17834838
Auburn	IN 46706-9511	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Fort Wayne Medical Educat- ion Program	Occupation CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
		908.25

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

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 127 / 194 (check only one)  X 11a 11b 11c 12  13 14 15 16
ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	itatements may not be sold or used by any persename and address of any political committee t	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial)		
Ms. Anne Coleman  Mailing Address 6630 S. 850 E.		Date of Receipt  1 2 3 0 2 0 0 9
City	State Zip Code	Transaction ID: 17834841
Zionsville	IN 46077-9313	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. Vincent Indianapolis Hospital	Occupation CEO. St. Vincent Women's	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Joseph E Roche		Date of Receipt
Mailing Address 911 North Shelby Stre	12 30 4 2009	
City	State Zip Code	Transaction ID: 17834864
Salem	IN 47167-2304	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. Vincent Salem Hospital	Occupation Interim Chief Executive Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial) Kevin Speer		Date of Receipt
Mailing Address 13664 Smokey Ridge	Place	12 30 2009
City	State Zip Code	Transaction ID: 17834866
<u>Carmel</u>	IN 46033-9263	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer St. Vincent Health	Occupation Chief Strategy Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 128 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persol e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Thomas J. VanOsdol		Date of Receipt
Mailing Address 13772 Wyandotte Pla		12 30 2009
City Fishers	State Zip Code IN 46038-4500	Transaction ID: 17834868  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Saint John's Health System	Occupation President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial) Mr. Jerry Young		Date of Receipt
Mailing Address 2967 Redwood Court		12 30 7 7 7 7 7
City	State Zip Code	Transaction ID: 17834870
Bremen	IN 46506-9605	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Community Hospital of Bre- men	Occupation Board President	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial)  Ms Patty Crowley	1	Date of Receipt
Mailing Address Five New England Ex	ecutive Park	12 30 7 2009
City	State Zip Code	Transaction ID: 17834872
Burlington	MA 01803-5010	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Massachusetts Hospital As- sociation	Occupation Director of Association Relations	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
SUBTOTAL of Receipts This Page (optional) .	1	850.00
TOTAL This Period (last page this line number	·	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 129 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Thomas A Dee  Mailing Address 100 Hospital Drive Ea  City Bennington  FEC ID number of contributing federal political committee.  Name of Employer Southwestern Vermont Medical Center Receipt For: Primary General Other (specify)	State Zip Code VT 05201-5004  C  Occupation Chief Executive Officer  Aggregate Year-to-Date  350.00	Date of Receipt    M   M   J   D   J   Y   Y   Y   Y   Y   Y   Y   Y   Y
Full Name (Last, First, Middle Initial) Mr. David E Phelps  Mailing Address 725 North Street  City Pittsfield  FEC ID number of contributing federal political committee.  Name of Employer Berkshire Health Systems, Inc.  Receipt For: Primary General Other (specify)	State Zip Code MA 01201-4124  C  Occupation President and Chief Executive Office  Aggregate Year-to-Date  350.00	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) Ms. Mary Winters  Mailing Address 7750 N Chisholm HIII  City Yukon  FEC ID number of contributing federal political committee.  Name of Employer Oklahoma Hospital Association Receipt For:  Primary General Other (specify)	State Zip Code OK 73099  C  Occupation Vice President Support Services  Aggregate Year-to-Date   500.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .		950.00

ITEMIZE	JLE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 130 / 194 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
or for comme	on copied from such Reports and S rcial purposes, other than using the F COMMITTEE (In Full)	tatements may name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
America	n Hospital Association PAC			
Mr. Rick S	<i>'</i>			Date of Receipt
Mailing Ad	ddress 4000 Lincoln Boulevard		7'n Oada	12 31 2009
City <u>Oklahon</u>	na Citv	State OK	Zip Code 73105-5207	Transaction ID: 17834894  Amount of Each Receipt this Period
FEC ID nu	umber of contributing litical committee.	C		500.00
Name of E Oklahoma tion	Employer a Hospital Associa-	Occupation VP, Fina	n Ince & Information Services	
Receipt For		Aggregate	Year-to-Date ▼ 1000.00	
Ms. Sheryl	e (Last, First, Middle Initial) R. McLain, MS ddress 2301 Steeplechase Ro	l and		Date of Receipt
	2301 Steeplechase no	au		12 31 2009
City		State	Zip Code	Transaction ID: 17834895
	umber of contributing litical committee.	OK C	73034-5893	Amount of Each Receipt this Period 500.00
Name of E Oklahoma tion	Employer a Hospital Associa-	Occupation Vice Pres	n sident, Communications	
Receipt Fo		Aggregate	Year-to-Date ▼ 1000.00	
	e (Last, First, Middle Initial) W. Jones, FACHE			Date of Receipt
Mailing Ac	ddress 1904 Windermere Driv	re		12 31 2009
City		State	Zip Code	Transaction ID: 17834896
	umber of contributing litical committee.	OK C	73072-3005	Amount of Each Receipt this Period 875.00
Name of E Oklahoma tion	Employer a Hospital Associa-	Occupation President		
Receipt Fo		Aggregate	Year-to-Date ▼ 1750.00	
SURTOTAL	of Receipts This Page (optional)			1875.00

	EDULE A (FEC Form 3X) IZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 131 / 194 (check only one)    X
or for co	ormation copied from such Reports and Stommercial purposes, other than using the ME OF COMMITTEE (In Full) erican Hospital Association PAC	tatements ma name and add	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Ms. Maili City	Name (Last, First, Middle Initial) Shelly Dunham ng Address P O Box 489 eene	State OK	Zip Code 73763-0489	Date of Receipt  1 2 3 1 2 0 0 9  Transaction ID: 17834898  Amount of Each Receipt this Period
FEC fede	ID number of contributing ral political committee.	C		21.00
	e of Employer ene Municipal Hospital  eipt For: Primary General  Other (specify)		ecutive Officer  Year-to-Date  250.00	
Ms.	Name (Last, First, Middle Initial) Patricia Davis ng Address 4414 Manchester Cour	t		Date of Receipt  1 2 3 1 2 0 0 9
City		State	Zip Code	Transaction ID: 17834899
	man  ID number of contributing	OK	73072-3915	Amount of Each Receipt this Period
fede	ral political committee.	C		500.00
Nam Okla tion	e of Employer homa Hospital Associa-	Occupatio Executive	n e Vice President	
	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1060.00	
Dr. 0	Name (Last, First, Middle Initial) Charles W Sorenson, , Jr., M.D  ng Address 36 South State Street,	22nd Fl		Date of Receipt
			Zin Codo	12 31 2009
City <u>Sal</u> i	Lake City	State UT	Zip Code 84111-1453	Transaction ID: 17835480  Amount of Each Receipt this Period
	ID number of contributing ral political committee.	C		500.00
Nam Inter Inc.	e of Employer mountain Healthcare,	Occupatio Chief Exc	n ecutive Officer	
	eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBT	OTAL of Receipts This Page (optional)	<u> </u>		1021.00

	E A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 132 / 194 (check only one)    X
Any information or for commerc	copied from such Reports and sial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
<b>\</b>	COMMITTEE (In Full) Hospital Association PAC			
Full Name (I Mr Chris Coo	ast, First, Middle Initial)			Date of Receipt
Mailing Add	ress 243 East St. George I Suite 240		7:- Onda	12 31 2009
City <u>Saint Geo</u>	rne	State UT	Zip Code 84770-2990	Transaction ID: 17835481  Amount of Each Receipt this Period
FEC ID num	nber of contributing cal committee.	C	04770 2330	250.00
Name of Em Intermounta Inc.	ployer in Healthcare,	Occupatio V.P. Sou	n thwestern Region	
Receipt For:		Aggregate	e Year-to-Date ▼ 250.00	]
Mr. Jeffrey S				Date of Receipt
Mailing Add	ress 4816 Amber Valley Pa	arkway		1 2 3 1 2 0 0 9
City		State	Zip Code	Transaction ID: 17835482
<u>Fargo</u>		ND	58104-8404	Amount of Each Receipt this Period
	ber of contributing cal committee.	C		500.00
Name of Em Catholic Hea	ployer alth Initiativ-	Occupatio SVP Divi	n sion Executive	7
Receipt For:		Aggregate	e Year-to-Date 🔻	
Other	ry		500.00	]
Full Name (I Mr. Jonathan	_ast, First, Middle Initial) Archey			Date of Receipt
Mailing Add	ress 155 East Broad Stree	t		12 31 2009
City		State	Zip Code	Transaction ID: 17835495
Columbus		OH	43215-3626	Amount of Each Receipt this Period
	nber of contributing cal committee.	C		350.00
Name of Em Ohio Hospit	ployer al Association	Occupatio Manager	n , Federal Relations	
Receipt For: Primal Other		Aggregate	e Year-to-Date ▼ 350.00	
SURTOTAL	f Pagaints This Paga (antional)	1		1100.00

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 133 / 194 (check only one)    X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persecutive name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Paul R Bengtson		Date of Receipt
Mailing Address P O Box 905		12 31 2009
City	State Zip Code	Transaction ID: 17839281
Saint Johnsbury	VT 05819-9962	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Northeastern Vermont Regi- onal Hospital	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Ms. Judith C Tarr	1	Date of Receipt
Mailing Address P O Box 547		12 31 2009
City	State Zip Code	Transaction ID: 17839283
Barre	VT 05641-0547	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Central Vermont Medical Center	Occupation President and Chief Executive Office	r
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Mr. William Hibbitt		Date of Receipt
Mailing Address 2800 North Dallas Pa Suite 200	ırkway	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 17839284
Plano	TX 75093-5994	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer LHP Hospital Group	Occupation Exec. VP & Deputy CFO	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)		1700.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 134 / 194 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any person name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Daniel J. Moen Mailing Address 3621 Twin Lakes Wa	у	Date of Receipt  1 2 3 1 2 0 0 9
City Plano	State Zip Code TX 75093-7538	Transaction ID: 17839307  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer LHP Hospital Group  Receipt For:  Primary General  Other (specify) ▼	Occupation Chief Executive Officer  Aggregate Year-to-Date   2000.00	
Full Name (Last, First, Middle Initial) Mr. Charles A Sted  Mailing Address 55 Merchant Street		Date of Receipt  1 2 3 1 2 0 0 9
City	State Zip Code	Transaction ID: 17839393
Honolulu  FEC ID number of contributing federal political committee.	HI 96813-4306	Amount of Each Receipt this Period 250.00
Name of Employer Hawaii Pacific Health	Occupation President and Chief Executive Office	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial) Dr. Andrew Agwunobi, , M.D.		Date of Receipt
Mailing Address P O Box 2555		1 2 3 1 2 0 0 9
City	State Zip Code	Transaction ID: 17852417
Spokane  FEC ID number of contributing federal political committee.	WA 99220-2555	Amount of Each Receipt this Period  500.00
Name of Employer Providence Sacred Heart Medical Center	Occupation Interim President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	·····	1750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 135 / 194 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using t	d Statements may not be sold or used by any person he name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Dawn Ahner		Date of Receipt
Mailing Address 77 Pringle Way		12 31 7 2009
City	State Zip Code	Transaction ID: 17855842
Reno	NV 89502-1474	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Renown Health	Occupation Chief Financial Officer	7
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr Allen Flagg, Jr		Date of Receipt
Mailing Address 5606 Golden Leaf Av	ve.	12 31 2009
City	State Zip Code	Transaction ID: 17855957
Las Vegas	NV 89122-4756	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Seven Hills Behavioral In- stitute	Occupation Chief Operation Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Eva C. LaBarge		Date of Receipt
Mailing Address 6434 Sun Flag Ct.		M M / D D / Y Y Y Y Y Y 1 2 0 0 9
City	State Zip Code	Transaction ID: 17855963
<u>Sparks</u>	NV 89436-5400	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Nevada Hospital Associati- on	Occupation Vice President of Operations	7
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
CUPTOTAL of Descints This Desc (anti-nat)		1350.00
SUBTOTAL of Receipts This Page (optional)		

Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC  Full Name (Last, First, Middle Initial)  Mr Jim Sinek  Mailing Address 2700 West Norfolk A	Avenue	solicit contributions from such committee.  Date of Receipt
Mr Jim Sinek		<b>=</b>
	7'- 0-4-	M M / D D / Y Y Y Y
City Norfolk	State Zip Code NE 68701-4438	Transaction ID: 17855964  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Faith Regional Health Services Receipt For: Primary General Other (specify)	Occupation President & CEO  Aggregate Year-to-Date   350.00	
Full Name (Last, First, Middle Initial) Mr. Dennis C Millirons, , FACHE Mailing Address 720 Fourth Street No.	orth	Date of Receipt
City	State Zip Code	Transaction ID: 17855970
<u>Fargo</u>	ND 58122-4520	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer MeritCare Medical Center	Occupation President and Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. David R Molmen		Date of Receipt
Mailing Address 1000 South Columb	ia Road	12 31 2009
City	State Zip Code	Transaction ID: 17856606
Grand Forks  FEC ID number of contributing federal political committee.	ND 58201-4032	Amount of Each Receipt this Period 350.00
Name of Employer Altru Health System	Occupation Chief Executive Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional	<b>_</b>	1200.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Δ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 13// 194   (check only one)     X
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any person	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	the name and add	dress of any political committee to	5 SOUCH COMMISSIONS HOM SUCH COMMISSION.
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. James T. Kirkpatrick			Date of Receipt
Mailing Address 73 North Ave.			12 31 2009
City Mendon	State MA	Zip Code 01756-1015	Transaction ID: 17856717  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	01760 1010	350.00
Name of Employer Massachusetts Hospital As- sociation	Occupatio Senior V	n P, Healthcare Finance & Ma	 nage
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr Paul J Andrews			Date of Receipt
Mailing Address 238 Win St.			1 2 3 1 2 0 0 9
City	State	Zip Code	Transaction ID: 17856722
Woburn	MA	01801-2832	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer Winchester Hospital	Occupatio Board Mo		
Receipt For:	Aggregate	e Year-to-Date 🔻	
Primary General Other (specify) ▼	0 0	350.00	
Full Name (Last, First, Middle Initial) Ms. Katie Vaughan			Date of Receipt
Mailing Address 506A East Howell A	venue		12 31 2009
City	State	Zip Code	Transaction ID: PR1034595123156
Alexandria	VA	22301-1216	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.00
Name of Employer American Hospital Associa- tion-Washingt	<del>'</del>	e Director	
Receipt For:    Primary   General	Aggregate	e Year-to-Date ▼	D/D Doduction (000 00 D)
Other (specify)		500.00	P/R Deduction (\$20.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optiona	<u> </u>		740.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 138 / 194 (check only one)  X 11a 11b 11c 12  13 14 15 16 11
, c	Any information copied from such Reports and S or for commercial purposes, other than using the	atements may not be sold or used by any pename and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Ms. Melinda Reid Hatton		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700		12 31 2009
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR1045726223156  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	103.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:	Occupation Senior Vice President & General C	Counse
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$40.00 Bi- Weekly)
- 3.	Full Name (Last, First, Middle Initial) Ms. Sarah Berk		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	V	12 31 2009
	City	State Zip Code DC 20004-2818	Transaction ID: PR1082532723156
	Washington FEC ID number of contributing federal political committee.	DC 20004-2818	Amount of Each Receipt this Period 46.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Director	
	Receipt For:  Primary  General  Other (specify)	Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi-Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Barbara Jellen		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	V	12 31 7 2009
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR1113464223156
	FEC ID number of contributing federal political committee.	C 20004-2010	Amount of Each Receipt this Period 28.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Section Director, Constituency Sec	ction
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi-Weekly)
Г	SUBTOTAL of Receipts This Page (optional)		177.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 139 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
0	ny information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any person name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Davon Gray		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700		12 31 2009
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR1143013023156  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:	Occupation Legislative Assistant Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	350.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Mary Meadows		Date of Receipt
	Mailing Address One North Franklin		12 31 2009
	City	State Zip Code	Transaction ID: PR1260472923156
	Chicago  FEC ID number of contributing federal political committee.	IL 60606-3436	Amount of Each Receipt this Period 28.00
	Name of Employer American Hospital Associa-	Occupation	
	tion-Chicago Receipt For:	Director of Professional Practice, AON  Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	350.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Michelle M. Mathy		Date of Receipt
	Mailing Address 1660 Lanier PL Apt. 30	9	12 31 2009
	City	State Zip Code	Transaction ID: PR1300853723156
	Washington  FEC ID number of contributing federal political committee.	DC 20009-2939	Amount of Each Receipt this Period 28.00
	Name of Employer American Hospital Associa-	Occupation	
	tion-Washingt Receipt For:	Project Manager AHAPAC Coordinator  Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	350.00	P/R Deduction (\$14.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional)		84.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 140 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16
Ar	y information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC		
_	Full Name (Last, First, Middle Initial) Mr. Stephen Mayfield		Date of Receipt
	Mailing Address One North Franklin Str Suite 32139		12 31 7 2009
	City	State Zip Code	Transaction ID: PR1302378923156
	Chicago	IL 60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	130.40
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Senior Vice President	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	P/R Deduction (\$40.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. James Wadzinski		Date of Receipt
	Mailing Address One North Franklin		12 31 2009
	City	State Zip Code	Transaction ID: PR1347703423156
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President Account Services	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1150.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Jack A. Mackay		Date of Receipt
	Mailing Address One North Franklin		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR1347703623156
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President & CIO	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$20.00 Bi- Weekly)
			210.40

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	fc	se separate schedule(s) or each category of the etailed Summary Page	FOR LINE NUMBER: PAGE 141 / 194 (check only one)    X
\ \	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not name and address	be sold or used by any perso of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
/	American Hospital Association PAC  Full Name (Last, First, Middle Initial)			
۱.	Ms. Susan Gergely  Mailing Address One North Franklin			Date of Receipt  1 2 3 1 2 0 0 9
	City Chicago	State IL	Zip Code 60606-3436	Transaction ID: PR1347791023156  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.00
	Name of Employer American Hospital Association-Chicago Receipt For:  Primary General Other (specify) ▼	Occupation Director of O Aggregate Year	perations, AONE r-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi-Weekly)
_	Full Name (Last, First, Middle Initial) Mr. John Slotman			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	V		12 / 31 / 2009
	City		Zip Code	Transaction ID: PR1384065323156
	Washington  FEC ID number of contributing federal political committee.	C	20004-2802	Amount of Each Receipt this Period  103.00
	Name of Employer American Hospital Associa- tion-Washingt		ector, Federal Relations	3
	Receipt For: Primary General Other (specify)	Aggregate Year	1000.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Stephanie H. Drake			Date of Receipt
	Mailing Address One North Franklin			12 31 2009
	City		Zip Code	Transaction ID: PR1492459923156
	Chicago FEC ID number of contributing federal political committee.	C	60606-3436	Amount of Each Receipt this Period 40.00
	Name of Employer American Hospital Associa- tion-Chicago		ecutive Director - ASHH	RA
	Receipt For: Primary General Other (specify)	Aggregate Year	r-to-Date ▼ 500.00	P/R Deduction (\$20.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)			171.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for e	e separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER: PAGE 142 / 194 (check only one)    X
A	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be name and address of	e sold or used by any perso f any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Ms. Monica D Day			Date of Receipt
	Mailing Address 10224 Prince Place #2	205		12 31 2009
	City Largo		p Code 0774-1210	Transaction ID: PR1516850623156  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		43.61
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Political Affairs		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to	o-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Elisa Arespacochaga			Date of Receipt
	Mailing Address One North Franklin			1 2 3 1 2 0 0 9
	City		p Code	Transaction ID: PR1555656223156
	Chicago	IL 60	0606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		45.60
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Associate Direct	cor, Constituency Sect	tio
	Receipt For:	Aggregate Year-to		
	Primary General Other (specify) ▼		350.00	P/R Deduction (\$15.22 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Clinton S. Manning			Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W		12 31 2009
	City		p Code	Transaction ID: PR1555656523156
	Washington	DC 20	0004-2802	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		45.60
	Name of Employer American Hospital Associa- tion-Washingt	· ·	Advocacy & Member C	Commu
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to	o-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)	1		134.81

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 143 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	son for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Kathy Poole		Date of Receipt
	Mailing Address One North Franklin		12 31 2009
	City	State Zip Code	Transaction ID: PR1589439923156
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	47.71
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Director, Governance Projects	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	349.98	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Linda Fishman	<u> </u>	Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700	W	12 31 2009
	City	State Zip Code	Transaction ID: PR327629123156
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	103.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Vice President, Public Policy	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	P/R Deduction (\$40.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Debbie F. Weiner	<u> </u>	Date of Receipt
	Mailing Address 11004 Petersborough	Drive	12 / 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR327745923156
	Rockville	MD 20852-3249	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	103.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, Grassroots Advocacy	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	P/R Deduction (\$40.00 Bi- Weekly)
Г	SUBTOTAL of Receipts This Page (optional)	<u> </u>	253.71

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 144 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
0	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
	American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Michael P. McCue		Date of Receipt
	Mailing Address 122 N. Greenwood Ave		12 31 2009
	City Park Ridge	State Zip Code IL 60068-3227	Transaction ID: PR327771623156  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Associate Director	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Suzanne R. Sonik		Date of Receipt
	Mailing Address One North Franklin		12 31 2009
	City	State Zip Code	Transaction ID: PR327777223156
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Director, Long-Term Care	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Debra J. Stock		Date of Receipt
	Mailing Address 1022 S. Harvey Avenue	)	12 31 2009
	City	State Zip Code	Transaction ID: PR327777823156
	Oak Park  FEC ID number of contributing federal political committee.	IL 60304-2132	Amount of Each Receipt this Period  40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Member Relations	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$40.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		96.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate sch for each category Detailed Summar	of the (Crieck Grilly Grie)
Ai	for commercial purposes, other than using the	tatements may not be sold or used name and address of any political	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
٠.	Full Name (Last, First, Middle Initial) Mr. Neil J. Jesuele		Date of Receipt
	Mailing Address 1003 Kimberly Place		12 31 2009
	City Great Falls	State Zip Code VA 22066-1546	Transaction ID: PR327801723156  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Executive Vice President	
	Receipt For:  Primary General  Other (specify) ▼	1	P/R Deduction (\$20.00 Bi- Weekly)
. –	Full Name (Last, First, Middle Initial) Ms. Pamela Austin Thompson, RN, MSN		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W	12 31 2009
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR327812023156
	FEC ID number of contributing federal political committee.	C 20004-2818	Amount of Each Receipt this Period  103.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Chief Executive Officer, AG	DNE & Sr. Vi
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	P/R Deduction (\$40.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Joan H. Lewis		Date of Receipt
	Mailing Address 6034 North 22nd Street	et	12 31 2009
	City	State Zip Code	Transaction ID: PR327831723156
	Arlington FEC ID number of contributing federal political committee.	VA 22205-3408	Amount of Each Receipt this Period 40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Regional Executive	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	P/R Deduction (\$20.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)	I	183.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	f	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 146 / 194 (check only one)    X
A	ny information copied from such Reports and s r for commercial purposes, other than using th	Statements may not e name and addres	t be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Mr. Robert J. Donovan			Date of Receipt
	Mailing Address One North Franklin St	treet		12 31 2009
	City	State	Zip Code	Transaction ID: PR327846223156
	Chicago	IL	60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.00
	Name of Employer American Hospital Associa-	Occupation Vice Preside	ent, Meetings & Travel Se	
	tion-Chicago Receipt For:	Aggregate Yea	<u> </u>	
	Primary General Other (specify) ▼	Aggregate rea	350.00	P/R Deduction (\$14.00 Bi- Weekly)
-	Full Name (Last, First, Middle Initial) Ms. Ellen A. Pryga			Date of Receipt
	Mailing Address 2401 Calvert Street, N Apt. 1008	1W		1 2 3 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR327851923156
	Washington	DC	20008-2614	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, Pol	icy Development	
	Receipt For:	Aggregate Yea	ar-to-Date ▼	
	Primary General Other (specify) ▼	0 0 0	500.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Mark Seklecki			Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	IW		12 31 2009
	City	State	Zip Code	Transaction ID: PR327858023156
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		103.00
	Name of Employer American Hospital Associa- tion-Washingt	<del>, '</del>	ent, Political Affairs	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 1000.00	P/R Deduction (\$40.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional) .	1		171.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 147 / 194 (check only one)    X
or f	y information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personal ename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. John F. Barry		Date of Receipt
	Mailing Address One North Franklin  City	State Zip Code	1 2 3 1 2 0 0 9  Transaction ID: PR327877823156
	Millis	MA 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	103.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	P/R Deduction (\$40.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. George F. Bergstrom		Date of Receipt
	Mailing Address 130 North Garland Co #3002		12 31 7 2009
	City	State Zip Code	Transaction ID: PR327895723156
	Chicago	IL 60602-4750	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	500.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Judy Williams		Date of Receipt
	Mailing Address One North Franklin S		12 31 2009
	City	State Zip Code	Transaction ID: PR327918923156
	Chicago	IL 60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	28.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Director Membership	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	D/D Dadwati's (44.4.00 B)
	Other (specify)	350.00	P/R Deduction (\$14.00 Bi- Weekly)
	IRTOTAL of Receipts This Page (optional)		171.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 148 / 194 (check only one)  X 11a 11b 11c 12  13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Richard J. Umbdenstock		Date of Receipt
Mailing Address 325 Seventh Street, NV Suite 700		12 31 2009
City <u>Washington</u>	State         Zip Code           DC         20004-2818	Transaction ID: PR328132823156  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	103.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation President and Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$40.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Barbara Lorsbach		Date of Receipt
Mailing Address 204 7th Ave		12 31 7 2009
City La Grange	State Zip Code  IL 60525-6406	Transaction ID: PR328136923156  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	103.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Sr. Vice President, Member Relations	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$40.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Lauren A. Barnett	<u> </u>	Date of Receipt
Mailing Address One North Franklin Str	eet	1 2 3 1 2 0 0 9
City Chicago	State Zip Code IL 60606	Transaction ID: PR328174923156  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Executive Director, SHSMD	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)		234.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 149 / 194 (check only one)  X 11a 11b 11c 12  13 14 15 16
A	for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
_	Full Name (Last, First, Middle Initial) Ms. Donna J. Melkonian		Date of Receipt
	Mailing Address 5545 North Wayne		12 31 7 2009
	City Chicago	State Zip Code IL 60640-1318	Transaction ID: PR328223823156  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	103.00
	Name of Employer American Hospital Associa-	Occupation Vice President	
	tion-Chicago Receipt For:	Vice President  Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	P/R Deduction (\$40.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Dr. James D. Bentley, Ph.D.		Date of Receipt
	Mailing Address 13106 Vingle Lane		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR328224923156
	Silver Spring	MD 20906	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	103.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Vice President	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	P/R Deduction (\$39.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Ron O. Purcell		Date of Receipt
	Mailing Address 1093 N. Faldo Way		12 31 2009
	City	State Zip Code	Transaction ID: PR328241423156
	<u>Eagle</u>	ID 83616-5369	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
	Receipt For:  Primary General	Aggregate Year-to-Date ▼	D/D Daduation (figs. so D)
	Other (specify) ▼	500.00	P/R Deduction (\$20.00 Bi- Weekly)
			246.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for each	parate schedule(s) category of the Summary Page	FOR LINE NUMBER: PAGE 150 / 194 (check only one)    X
,	ny information copied from such Reports and St r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be soloname and address of any	d or used by any persor political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\angle$	American Hospital Association PAC			
۱.	Full Name (Last, First, Middle Initial) Mr. Richard J. Pollack			Date of Receipt
	Mailing Address 3475 North Venice Stre	et		12 31 2009
	City Arlington	State Zip Co VA 22207	ode 7-4446	Transaction ID: PR328260923156  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1110	103.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Executive Vice Pre	esident	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Da	tte ▼ 1000.00	P/R Deduction (\$40.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Richard H. Wade			Date of Receipt
	Mailing Address 1221 Cavalier Road			12 31 2009
	City	State Zip Co		Transaction ID: PR328310423156
	Arnold	MD 21012	2-2126	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		103.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Vice Presid	ent Strategic Comm	nun
	Receipt For:	Aggregate Year-to-Da	ate 🔻	
	Primary General Other (specify) ▼		1000.00	P/R Deduction (\$25.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Lori M. Schor			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	V		12 31 2009
	City	State Zip Co		Transaction ID: PR328341823156
	Washington	DC 20004	-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		103.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, Political A		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Da	1000.00	P/R Deduction (\$40.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)			309.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 151 / 194 (check only one)  X 11a 11b 11c 12  13 14 15 16 11
A	ny information copied from such Reports and St r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC			
۱.	Full Name (Last, First, Middle Initial) Ms. Carla L. Luggiero			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	N		12 31 2009
	City Washington	State DC	Zip Code 20004-2818	Transaction ID: PR328490123156
	FEC ID number of contributing federal political committee.	C	20004-2618	Amount of Each Receipt this Period  20.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupatio Senior A	n ssociate Director	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	P/R Deduction (\$10.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Carolyn Forcina			Date of Receipt
	Mailing Address 200 Clover Hill Court			1 2 3 1 2 0 0 9
	City	State	Zip Code	Transaction ID: PR328511823156
	Yardley	PA	19067-5736	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		103.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupatio Regional	n Executive	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	1000.00	P/R Deduction (\$40.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Alicia N. Mitchell			Date of Receipt
	Mailing Address 1501 N. Harrison Stree	et		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR328512023156
	Arlington	VA	22205-2726	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Associa- tion-Washingt		ice President, Communication	on <b>s</b>
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	P/R Deduction (\$20.00 Bi- Weekly)
Γ,	SUBTOTAL of Receipts This Page (optional)			163.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 152 / 194 (check only one)    X   11a
A	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC		
۱.	Full Name (Last, First, Middle Initial)  Mr. George Arges  Mailing Address One North Franklin St		Date of Receipt
			12 31 2009
	City Chicago	State Zip Code IL 60606	Transaction ID: PR328641123156  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	68.13
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Senior Director, Health Data Manage	emen
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 499.94	P/R Deduction (\$22.73 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Anthony J. Burke		Date of Receipt
	Mailing Address One North Franklin Av	re.	1 2 3 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR328913323156
	Chicago FEC ID number of contributing federal political committee.	IL 60606	Amount of Each Receipt this Period  120.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation President & CEO, AHA Solutions, Inc.	 c. &
	Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$40.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Rebecca Chickey		Date of Receipt
	Mailing Address One North Franklin St	reet	12 31 2009
	City	State Zip Code	Transaction ID: PR329013423156
	Chicago FEC ID number of contributing federal political committee.	IL 60606	Amount of Each Receipt this Period 40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation SPSA Director	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$20.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		228.13

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 153 / 194 (check only one)    X
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may not be sold or used by any personante name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Dr. John R. Combes, MD		Date of Receipt
	Mailing Address One North Franklin		12 31 2009
	City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR329071323156  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	103.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation President & Chief Operating Officer,	c
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$40.00 Bi- Weekly)
. –	Full Name (Last, First, Middle Initial) Ms. Robyn Cooke		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700		12 31 2009
	City	State Zip Code DC 20004-2818	Transaction ID: PR329084423156
	Washington FEC ID number of contributing federal political committee.	DC 20004-2818	Amount of Each Receipt this Period 40.00
	Name of Employer American Hospital Associa- tion-Washinot	Occupation Senior Associate Director	
	Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. W. Thomas Deweese		Date of Receipt
	Mailing Address 500 Interstate Bouleva	ard South	12 31 YYYY 12 31 2009
	City	State Zip Code	Transaction ID: PR329215723156
	Nashville  FEC ID number of contributing federal political committee.	TN 37210-4634	Amount of Each Receipt this Period  103.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation AHA Regional Executive	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$40.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional)		246.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 154 / 194   (check only one)
Ar	ny information copied from such Reports and St for commercial purposes, other than using the	atements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
01	NAME OF COMMITTEE (In Full)	name and add	dress of any political committee to	Solicit Contributions from Such Committee.
$\rangle$	American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Mr. John Evans			Date of Receipt
	Mailing Address One North Franklin Stre	eet		12 31 YYYY 12 31 2009
	City	State	Zip Code	Transaction ID: PR329342623156
	Chicago	<u> </u>	60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupatio Senior V	n ice President & CFO	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Audrey L. Harris			Date of Receipt
	Mailing Address 1136 W. Farwell Ave.			12 31 7 2009
	City	State	Zip Code	Transaction ID: PR329654223156
	Chicago	<u> L</u>	60626-3861	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.00
	Name of Employer American Hospital Associa-	Occupatio		
	tion-Chicago		e Director, ASDVS	
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	D/D Doduction (\$14.00 Di
	Other (specify) ▼		350.00	P/R Deduction (\$14.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Patricia Meersman			Date of Receipt
	Mailing Address One North Franklin			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR330343323156
	Chicago	<u>IL</u>	60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Associa-	Occupatio		
	tion-Chicago		irector Member Relations	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	P/R Deduction (\$20.00 Bi- Weekly)
_	UBTOTAL of Receipts This Page (optional)			96.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for e	e separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER: PAGE 155 / 194 (check only one)    X   11a
0	ny information copied from such Reports and r for commercial purposes, other than using th	Statements may not be e name and address of	sold or used by any person f any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC			
. <u>/</u>	Full Name (Last, First, Middle Initial) Mr. Thomas Misfeldt			Date of Receipt
	Mailing Address One North Franklin			12 31 7 2009
	City Chicago		p Code 0606-3436	Transaction ID: PR330411623156  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Associate Regi		
	Primary General Other (specify) ▼	Aggregate real-ti	500.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Maureen D. Mudron	L		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	IW		12 31 2009
	City		p Code	Transaction ID: PR330465223156
	Washington	DC 20	0004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Deputy Genera	ıl Counsel	
	Receipt For:	Aggregate Year-to		
	Primary General Other (specify) ▼		350.00	P/R Deduction (\$14.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Paul N. Muraca	<u> </u>		Date of Receipt
	Mailing Address 4960 138th Cricle We	st		1 2 3 1 2 0 0 9
	City	State Zi	p Code	Transaction ID: PR330475423156
	Apple Valley	MN 55	5124-9229	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		103.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Regional Execu		
	Primary General Other (specify) ▼	Aggregate Year-to	1000.00	P/R Deduction (\$40.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional)	1		171.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 156 / 194 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
A	ny information copied from such Reports and S for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Jennifer E. Mallard		Date of Receipt
	Mailing Address 6109 North 9th Road		12 31 2009
	City <u>Arlington</u>	State         Zip Code           VA         22205-1609	Transaction ID: PR330534323156  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Director	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Gene O'Dell		Date of Receipt
	Mailing Address One North Franklin		12 31 2009
	City	State Zip Code	Transaction ID: PR330547723156
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Strategic Planning	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	500.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Eileen O'Keefe		Date of Receipt
	Mailing Address 172 Atteridge		12 31 2009
	City	State Zip Code	Transaction ID: PR330549223156
	Lake Forest	IL 60045-1715	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	135.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Vice President, Constituency Section Aggregate Year-to-Date	1
	Primary General Other (specify) ▼	1000.00	P/R Deduction (\$40.00 Bi- Weekly)
Γ,	SUBTOTAL of Receipts This Page (optional)		215.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 157 / 194 (check only one)  X 11a 11b 11c 12  13 14 15 16
4	any information copied from such Reports and St r for commercial purposes, other than using the	atements may not be sold or used by any p name and address of any political committe	erson for the purpose of soliciting contributions ee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Walter James Reiter		Date of Receipt
	Mailing Address 6820 Deerpath Road		12 31 7 2009
	City Elkridae	State Zip Code MD 21075-6200	Transaction ID: PR330776123156
	FEC ID number of contributing federal political committee.	MD 21075-6200	Amount of Each Receipt this Period 40.00
	Name of Employer Maryland Hospital Associa- tion	Occupation V.P., Advocacy & Member Comm	unications
	Receipt For:  Primary  General	Aggregate Year-to-Date ▼	P/R Deduction (\$20.00 )
	Other (specify) ▼	500.00	1711 Deddesion (\$20.00)
	Full Name (Last, First, Middle Initial) Ms. Debi H. Tucker, Esq.	Date of Receipt	
	Mailing Address 1101 N. Kentucky Stree	et	12 31 2009
	City	State Zip Code	Transaction ID: PR331278823156
	Arlington FEC ID number of contributing	VA 22205-3515	Amount of Each Receipt this Period 28.00
	federal political committee.	C	20.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, State Issues Forum	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	350.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Darlene S. Vanderbush		Date of Receipt
	Mailing Address 26 West Glendale Ave.		12 31 2009
	City	State Zip Code	Transaction ID: PR331304223156
	Alexandria	VA 22301-2402	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director Advocacy and Public Pol	icy Op
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$20.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional)		108.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 158 / 194 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
4	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC			
١.	Full Name (Last, First, Middle Initial) Ms. Jo Ann Webb			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	<i>N</i>		12 31 2009
	City Washington	State DC	Zip Code	Transaction ID: PR331379123156
	FEC ID number of contributing federal political committee.	C	20004-2818	Amount of Each Receipt this Period  28.00
	Name of Employer American Hospital Associa- tion-Washingt		tor Federal Relations & Polic	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Judy Weinsheimer	l		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	N		12 / 31 / 2009
	City	State DC	Zip Code	Transaction ID: PR331386923156
	Washington  FEC ID number of contributing federal political committee.	C	20004-2818	Amount of Each Receipt this Period  28.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior As	n ssociate Director	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Alex R. White, Sr.			Date of Receipt
	Mailing Address 6225 US Hwy 290 E			1 2 3 1 2 0 0 9
	City	State	Zip Code	Transaction ID: PR331416023156
	Austin	TX	78761-5587	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		166.00
	Name of Employer American Hospital Associa- tion-Chicago	,	ional Executive for TX	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1500.00	P/R Deduction (\$60.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)			222.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 159 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
4	or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Mr. Donald May		Date of Receipt
	Mailing Address 521 Great Falls St.		12 31 2009
	City Falls Church	State Zip Code VA 22046-2613	Transaction ID: PR331533223156  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	103.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President, Policy	
	Receipt For:  Primary General	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$40.00 Bi- Weekly)
_	Other (specify) ▼		Weekly)
3.	Full Name (Last, First, Middle Initial) Ms. Elizabeth Summy  Mailing Address - One North Franklin		Date of Receipt
	Mailing Address One North Franklin		12 31 2009
	Chicago	State Zip Code IL 60606-3436	Transaction ID: PR346168123156
	Chicago  FEC ID number of contributing federal political committee.	IL 60606-3436	Amount of Each Receipt this Period 59.60
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, PMG	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$40.00 Bi- Weekly)
- ;.	Full Name (Last, First, Middle Initial) Ms. Kristin Welsh		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W	12 31 2009
	City	State Zip Code DC 20004-2818	Transaction ID: PR517619723156
	Washington  FEC ID number of contributing federal political committee.	C 20004-2818	Amount of Each Receipt this Period
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President Executive Branch Relati	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  1000.00	P/R Deduction (\$40.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional) .		265.60

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for ea	eparate schedule(s) ch category of the ed Summary Page	FOR LINE NUMBER: PAGE 160 / 194 (check only one)    X
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	atements may not be s name and address of a	old or used by any perso any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC			
۷.	Full Name (Last, First, Middle Initial) Ms. Megan Cundari			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700			12 7 31 7 2009
	City Washington		Code 04-2818	Transaction ID: PR518031923156  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 200	04 2010	65.20
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate	e Director	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-	Date ▼ 500.00	P/R Deduction (\$21.74 Bi- Weekly)
. –	Full Name (Last, First, Middle Initial) Ms. Laura M. Werner			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	V		12 31 7 2009
	City Washington		Code	Transaction ID: PR560101523156
	FEC ID number of contributing federal political committee.	C 200	04-2818	Amount of Each Receipt this Period 45.60
	Name of Employer American Hospital Associa- tion-Washinot	Occupation Project Manager		7
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-	Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Carlos Jackson			Date of Receipt
	Mailing Address 325 Seventh Street, NV	V		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	•	Code	Transaction ID: PR566280923156
	Washington FEC ID number of contributing federal political committee.	DC 200	04-2802	Amount of Each Receipt this Period 40.00
	Name of Employer American Hospital Associa- tion-Washingt	-	or, Federal Relations	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-	Date ▼ 500.00	P/R Deduction (\$20.00 Bi- Weekly)
Γ,	SUBTOTAL of Receipts This Page (optional)			150.80

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 161 / 194 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
0	ny information copied from such Reports and r for commercial purposes, other than using the	Statements may not be sold or used by any pe e name and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Ashley B. Thompson		Date of Receipt
	Mailing Address 606 S. Royal St.		12 31 7 2009
	City <u>Alexandria</u>	State Zip Code VA 22314-4142	Transaction ID: PR766023723156  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, Policy	
	Receipt For:  Primary  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$20.00 Bi-Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Rochelle M. Archuleta		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	NW	12 31 2009
	City	State Zip Code	Transaction ID: PR801366323156
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Director Policy	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	350.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Lisa Kidder Hrobsky		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	NW .	12 31 2009
	City	State Zip Code	Transaction ID: PR876637223156
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	63.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President, Legislative Affairs	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$20.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional)		131.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 162 / 194 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Ms. Sheila R. Meadows			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	V		12 31 2009
	City	State	Zip Code	Transaction ID: PR936292323156
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior D	n irector of Operations	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
ь В.	Full Name (Last, First, Middle Initial) Mr. David A. Strickland			Date of Receipt
	Mailing Address One N. Franklin Street			12 31 YYYYY 2009
	City	State	Zip Code	Transaction ID: PR939603923156
	Chicago	IL	60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Executiv	n e Director Quality Center	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		350.00	P/R Deduction (\$14.00 Bi- Weekly)

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	56.00
TOTAL This Period (last page this line number only)	<b>•</b>	142545.45

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 163 / 194 (check only one)  11a 11b 11c X 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	statements may not be sold or used by any person name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Montana Hospital Association PAC - Federal Fur Mailing Address P.O. Box 5119  City Helena FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: Primary General Other (specify)	State Zip Code MT 59604-5119  C C00238782  Occupation  Aggregate Year-to-Date  8000.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) New York Hospital & Healthcare Assoc. FED PAR Mailing Address One Empire Drive  City Rensselaer  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: Primary General Other (specify)	State Zip Code NY 12144  C C00160259  Occupation  Aggregate Year-to-Date  155000.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) California Healthcare Association PAC - Federal Mailing Address 1215 K Street Suite 800 City Sacramento FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: Primary General Other (specify)	State Zip Code CA 95814  C C00237495  Occupation  Aggregate Year-to-Date  180000.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		20290.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 164 / 194 (check only one)  11a 11b 11c X 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any personne name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Wisconsin Hospital Association Federal PAC Mailing Address 5510 Research Park		Date of Receipt  1 2 0 8 2 0 0 9
City Madison	State Zip Code WI 53725-9038	Transaction ID: 17801247
FEC ID number of contributing federal political committee.	C C00359455	Amount of Each Receipt this Period  1825.00
Name of Employer	Occupation	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 15600.00	
Full Name (Last, First, Middle Initial) Texas Hospital Association HOSPAC - Federal Mailing Address P.O. Box 15587		Date of Receipt  1 2 2 8 2 0 0 9
City	State Zip Code	Transaction ID: 17831485
Austin	TX 78761-5587	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<b>C</b> C00301325	31200.00
Name of Employer  Receipt For:  Primary General  Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼  94700.00	
Full Name (Last, First, Middle Initial) Wisconsin Hospital Association Federal PAC		Date of Receipt
Mailing Address 5510 Research Park	Drive	12 28 2009
City	State Zip Code	Transaction ID: 17831486
Madison  FEC ID number of contributing federal political committee.	WI 53725-9038  C C00359455	Amount of Each Receipt this Period  550.00
Name of Employer	Occupation	-
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 16150.00	
SUBTOTAL of Receipts This Page (optional)		33575.00
TOTAL This Period (last page this line number	<u> </u>	53865.00

SCHEDULE A (FEC Form 3)	<b>X</b> )		FOR LINE NUMBER: PAGE 165 / 194
ITEMIZED RECEIPTS	/	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)  11a
Any information copied from such Reports a or for commercial purposes, other than using			con for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
American Hospital Association PA	С		
Full Name (Last, First, Middle Initial) Citibank, F.S.B.			Date of Receipt
Mailing Address 1400 G Street, NW	1		12 31 2009
City	State	Zip Code	Transaction ID: 17869772
Washington	DC	20005	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		277.76
Name of Employer	Occupatio	n	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		3283.46	Interest Earned

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	277.76
TOTAL This Period (last page this line number only)	<b>•</b>	277.76

	CHEDOLL B (I LC I OIIII 3X)	Use separate schedule(s)			R LINE eck only		٠				IGL.	166 /	194
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		Ù	21b 27	22 28a	X	23 28b		24 28c		25 29	2
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full)												
$\rangle$	American Hospital Association PAC												
	Full Name (Last, First, Middle Initial) MACPAC (Missourians for Accountability 8	& Change)				Trans Date		sburs	emer			V	V
	Mailing Address 607 - 14th Street, NW Suite 800					1 2			2	<u> </u>		0 ŏ 9	
	City Washington	State Zip Code DC 20005				Amou	nt of	Each	n Disk	ourse	-	this F	-
	Purpose of Disbursement 2009 Contribution Candidate Name			011			•				100	00.00	
	MACPAC (Missourians for Accountability 8	÷ '		tego Type									
	Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼				2009	Cor	ntribu	tion				
	Full Name (Last, First, Middle Initial) Gillibrand For Senate					Trans					426		
	Mailing Address 313 C Street NE					1 <sup>M</sup> 2	M	D C	2	/ Y	2	0 ŏ 9	Y
	City Washington	State Zip Code DC 20002				Amou	nt of	Each	n Disk	ourse		t this F	
	Purpose of Disbursement Contribution Candidate Name									00.00			
	Sen. Kirsten Gillibrand  Office Sought: House X Senate President  State: NY District:	ement For: 2010 Primary X General Other (specify)		Гуре		Contr	ibut	ion					
	Full Name (Last, First, Middle Initial) Bennett Election Committee Inc					Trans Date of	of Di	sburs	emer				_
	Mailing Address 175 South West Temple	Suite 650				1 <sup>M</sup> 2	M	<sup>D</sup> C	2	/ L	ž	0 0 9	Y
	City State Zip Code Salt Lake City UT 84101					Amou	nt of	Each	n Disk	ourse		this F	
	Purpose of Disbursement Contribution			011			•			•	100	00.00	-
	Candidate Name Sen. Robert F. Bennett			itego Type									
	X Senate X President	ment For: 2010 Primary General Other (specify)				Contri	ibut	ion					
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		3 (FEC Form	.		arate schedule(s)	)	-	IE NUMBER: PAGE 167/1
TE	EMIZED DI	SBURSEMEN	ITS		category of the Summary Page		(check or 21b 27	22 X 23 24 25 28 28 28 29 29
								n for the purpose of soliciting contributions solicit contributions from such committee
\	NAME OF COM	·			, μ			
	Full Name (Last, Friends Of By	First, Middle Initial) on Dorgan						Transaction ID: 17803428 Date of Disbursement
	Mailing Address	PO Box 871						12 M / 02 / Y Y Y O Y 9
	City Bismarck			State ND	Zip Code 58502			Amount of Each Disbursement this Pe
	Purpose of Disbu						011	1000.00
	Candidate Name Sen. Byron L.	Dorgan	I B'alaman		0040		tegory/ Type	
	Office Sought:	House X Senate President		nent For: Primary Other (spe	2010 X General ecify) ▼			Contribution
	,	District: First, Middle Initial) seth Sandlin For S	outh Dako	ta				Transaction ID: 17803429 Date of Disbursement
	Mailing Address	PO Box 2009						M2 M / D0 D / Y Y Y 0 9 9
	City Sioux Falls			State SD	Zip Code 57101			Amount of Each Disbursement this Pe
	Purpose of Disbu	ırsement					011	1000.00
		e Herseth Sandlin					tegory/ Type	
	Office Sought: State: SD	X House Senate President District: 01		nent For: Primary Other (spe	2010 General ecify)	•		Contribution
	Full Name (Last, Carnahan In C	First, Middle Initial) Congress						Transaction ID: 17803430 Date of Disbursement
	Mailing Address	7370 Manchest	ter Rd Ste	20				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City St. Louis			State MO	Zip Code 63143			Amount of Each Disbursement this Pe
	Purpose of Disbu Contribution					-	011	500.00
	Candidate Name Rep. Russ Ca	rnahan	I po		2015		tegory/ Type	
		χ House	Disbursen	nent For: Primary	2010 General			Contribution
	Office Sought:	Senate President		Other (spe				

	CHEDULE B (FEC FOIII 3X)	Use separate schedule(s	()		OR LINE heck only		H:		L	PAGE	168 /	194
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		È	21b 27	22 28a	<u> </u>	23 28b	24 28	С	25 29	
	Information copied from such Reports and State or commercial purposes, other than using the na											3
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC	To and data occ of any points.							000.			
<u>v                                    </u>	Full Name (Last, First, Middle Initial) Kay Granger Campaign Fund					Trans			1780 ement	)3431		
	Mailing Address 715 Jones Street, Suite	101				1 <sup>M</sup> 2	M /	<sup>D</sup> 0	2 /	ÝŽ	0 0 9	) Y
	City Fort Worth	State Zip Code TX 76102				Amou	nt of E	Each	Disbur			-
	Purpose of Disbursement Contribution			01		L.	•		•	10	00.00	
	Candidate Name Rep. Kay Granger  Office Sought: X House Disbur	sement For: 2010		Typ	gory/ pe							
	Senate President	X Primary General Other (specify) ▼				Contr	ibutic	on				
	State: TX District: 12  Full Name (Last, First, Middle Initial)  Friends Of Erik Paulsen					Trans			1780	03432	2	
	Mailing Address P.O. Box 44369						M /		<sup>D</sup> /	ÝŽ	0 0 9	Y
	City Eden Prairie	State Zip Code MN 55344				Amou	nt of E	Each	Disbur	semen	t this F	Perio
	Purpose of Disbursement Contribution			01				•	•	10	00.00	
	Candidate Name Rep. Erik P. Paulsen			atec Typ	gory/ e							
		sement For: 2010  X Primary General  Other (specify)	,			Contr	ibutio	on				
	Full Name (Last, First, Middle Initial) Shelley Moore Capito For Congress					Date of	of Disl	burse		)3433	3	
	Mailing Address P.O. Box 11519					<sup>M</sup> 2	M /	0	<sup>D</sup> /	ÝŽ	0 ŏ 9	) <sup>Y</sup>
	City Charleston	State Zip Code WV 25339				Amou	nt of E	Each	Disbur			
	Purpose of Disbursement Contribution Candidate Name		Ĺ	01				•		10	00.00	
	Rep. Shelley Moore Capito			Typ	gory/ pe							
	ů A	sement For: 2010  X Primary General  Other (specify)				Contr	ibutic	n				
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					for the purpose of soliciting contributions olicit contributions from such committee
$\left.\right\rangle$	NAME OF COMMITTEE (In Full) American Hospital Association F	<u> </u>	, po		
,	Full Name (Last, First, Middle Initial) Michaud For Congress				Transaction ID: 17803434 Date of Disbursement
	Mailing Address 213 Lisbon St				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Lewiston	State ME	Zip Code 04240		Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name			011	1000.00
	Rep. Michael H. Michaud  Office Sought: X House	Disbursement For:	2010	Category/ Type	
	Senate President State: ME District: 02	X Primary Other (sp	General		Contribution
	Full Name (Last, First, Middle Initial) Moore For Congress				Transaction ID: 17803435 Date of Disbursement
	Mailing Address PO Box 16646	;			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} $
	City Milwaukee	State WI	Zip Code 53216		Amount of Each Disbursement this Perio
	Purpose of Disbursement			044	1000.00
	Contribution			011	
	Candidate Name Rep. Gwendolynne Moore			O11 Category/ Type	
	Candidate Name Rep. Gwendolynne Moore  Office Sought:  X House Senate President	Disbursement For:  X Primary Other (sp	2010 General	Category/	Contribution
	Candidate Name Rep. Gwendolynne Moore Office Sought:  X House Senate	X Primary	General	Category/	Transaction ID: 17803436 Date of Disbursement
	Candidate Name Rep. Gwendolynne Moore  Office Sought: X House Senate President State: WI District: 04  Full Name (Last, First, Middle Initial) Garamendi For Congress  Mailing Address C/O California	X Primary	General	Category/	Transaction ID: 17803436
	Candidate Name Rep. Gwendolynne Moore  Office Sought: X House Senate President State: WI District: 04  Full Name (Last, First, Middle Initial) Garamendi For Congress  Mailing Address C/O California	X Primary Other (sp	General	Category/	Transaction ID: 17803436 Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Candidate Name Rep. Gwendolynne Moore  Office Sought:  State: WI  Full Name (Last, First, Middle Initial) Garamendi For Congress  Mailing Address  C/O California 3605 Long Beach  Purpose of Disbursement Contribution	Political Law, Inc. ach Blvd., Ste. 426 State	General ecify) ▼  Zip Code	Category/ Type	Transaction ID: 17803436 Date of Disbursement
	Candidate Name Rep. Gwendolynne Moore  Office Sought:  X House Senate President State: WI District: 04  Full Name (Last, First, Middle Initial) Garamendi For Congress  Mailing Address C/O California 3605 Long Beach Purpose of Disbursement Contribution  Candidate Name Rep. John Garamendi	Political Law, Inc. ach Blvd., Ste. 426 State CA	General ecify)   Zip Code 90807	Category/ Type	Transaction ID: 17803436 Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Candidate Name Rep. Gwendolynne Moore  Office Sought: X House Senate President State: WI District: 04  Full Name (Last, First, Middle Initial) Garamendi For Congress  Mailing Address C/O California 3605 Long Beach City Long Beach Purpose of Disbursement Contribution Candidate Name	Political Law, Inc. ach Blvd., Ste. 426 State	General ecify)   Zip Code 90807  2010  General	Category/ Type  011 Category/	Transaction ID: 17803436 Date of Disbursement  M M / D D / Y Y O Y Y  Amount of Each Disbursement this Period

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II EMIZ	ED DISBURSEME	INIS		category of the Summary Page			21b 27	22 28a	X	23 28b	$\Box$	24 28c	П	25 29	
	ntion copied from such Repo Percial purposes, other than I														
NAME	OF COMMITTEE (In Full)														
Amerio	an Hospital Association	PAC													
	ne (Last, First, Middle Initial)	ı						1		on ID:			137		
	of Glenn Thompson							1 2		sburs	emen	τ / Υ	Ý	0 ŏ 9	Y
Mailing	Address PO Box 1112	2													
City State (	College		State PA	Zip Code 16804				Amou	int o	f Each	Disb	ursen	nent	this P	erio
	e of Disbursement					01	1	<u> </u>				_	100	0.00	
Candida	ite Name Ilenn W. Thompson				Ca		jory/								
Office S	ought: X House Senate President	Disburse	ment For: Primary Other (spe	2010 General		1 91-		Contr	ibut	ion					
Full Na	ne (Last, First, Middle Initial) y PAC							1		on ID:			352		
Mailing	Address 6849 Old Do Suite 222	minion Drive	)					1 <sup>M</sup> 2	М	<sup>′</sup>	) <b>4</b>	/ Y	ž	o ŏ 9	Y
City McLea	n		State VA	Zip Code 22101				Amou	int o	f Each	Disb	ursen	nent	this P	erio
	of Disbursement				Г	01	1	<u> </u>					250	0.00	
	ite Name				Ca	_	jory/								
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Mailing	Address 2236 Se 10th	n Ave						1 <sup>M</sup> 2	М		) <b>4</b>	/ Y	ž	o ŏ 9	Y
City Portla	nd		State OR	Zip Code 97214				Amou	int o	f Each	Disb	ursen	nent	this P	erio
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	te Name effrey Merkley				Ca	_	jory/								
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CHEDULE B (FEC Form 3X)	Use sep	arate schedule(s) category of the				NUMBE y one)	ER:				PAGE	171	/ 194
EMIZED DISBURSEMENTS		Summary Page		2 2	1b 7	22 28a	X	23 28l	b [	24 28		25 29	
ny Information copied from such Reports and State for commercial purposes, other than using the nar													s
NAME OF COMMITTEE (In Full)		bo or any pomiour	-		10 00								
American Hospital Association PAC													
Full Name (Last, First, Middle Initial) Gillibrand For Senate						Tran: Date				_	05377	7	
Mailing Address 313 C Street NE						1 <sup>M</sup> 2	М	′	0 4	<b>4</b> /	Y	Ó 0 Š	9 <sup>Y</sup>
City Washington	State DC	Zip Code 20002				Amo	unt o	of Ea	ch [	Disbur	semer	nt this	Perio
Purpose of Disbursement Contribution				011	7	L.					10	00.00	)
Candidate Name Sen. Kirsten Gillibrand			Ca	ategory Type	//								
	sement For: Primary Other (spe	2010 X General ecify) ▼		- 7,7~		Cont	ribut	tion					
State: NY District:													
Full Name (Last, First, Middle Initial) Guthrie For Congress						Tran: Date		-	ırser	nent	05384	1	
Mailing Address PO Box 9639						1 <sup>M</sup> 2	М	/	0 4	<b>4</b> /	Y 2	2 0 ŏ	9 <sup>Y</sup>
City Bowling Green	State KY	Zip Code 42102				Amo	unt o	of Ea	ch [	Disbur	semer	nt this	Perio
Purpose of Disbursement Contribution				011		L.					10	00.00	)
Candidate Name Rep. Brett Guthrie			Ca	011 ategory Type	1/								
Senate President	sement For: X Primary Other (spe	2010 General		NI		Cont	ribut	tion					
State: KY District: 02  Full Name (Last, First, Middle Initial)						<b>T</b>		•		170	25001		
Moore For Congress						Date	of D	)isbu	ırser	nent	0538		
Mailing Address PO Box 16646						1 <sup>™</sup> 2	М		0 4	4	Y 2	0 ŏ	9 <sup>*</sup>
City Milwaukee	State WI	Zip Code 53216				Amo	unt o	of Ea	ch [	Disbur	semer	nt this	Perio
Purpose of Disbursement Contribution				011	7	L.					5	500.00	)
Candidate Name Rep. Gwendolynne Moore			Ca	ategory Type	//								
Office Sought: X House Disburs	sement For:  X Primary Other (see	2010 General				Cont	ribut	tion					
State: WI District: 04	Other (spe	eciiy) ▼											
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	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		È	21b 27	22 28a	2	23 28b	24 28	С	25 29	
	y Information copied from such Reports and S for commercial purposes, other than using the											5
$ \rangle$	NAME OF COMMITTEE (In Full) American Hospital Association PAC											
<u>/_</u>	Full Name (Last, First, Middle Initial) Mike Ross For Congress Committee  Mailing Address PO Box 360					Date		n ID: burser	ment		6 0 0 8	) <sup>Y</sup>
	City Prescott	State Zip Code AR 71857				Amou	ınt of I	Each [	Disbur	semer	nt this F	Period
	Purpose of Disbursement Contribution Candidate Name		-	01 ateg	1 gory/					10	00.00	
	Rep. Michael Avery Ross  Office Sought:  X House Senate President State: AR  District: 04	oursement For: 2010  X Primary General  Other (specify)		Тур		Contr	ibutio	on				
	Full Name (Last, First, Middle Initial) Southwest Pennsylvania PAC  Mailing Address PO Box 1776					Date		n ID: burser	ment		3 2 o ó s	) <sup>Y</sup>
	City Freedom Purpose of Disbursement 2009 Contribution Candidate Name	State Zip Code PA 15042	-	01 ateg	1 gory/	Amou	int of I	Each [	Disbur		nt this F	
	Southwest Pennsylvania PAC  Office Sought: House Senate President  State: District:	oursement For:  Primary General  Other (specify) ▼	<u> </u>	Тур	oe .	2009	Cont	ributi	on			
	Full Name (Last, First, Middle Initial) Patrick Murphy For Congress					Date		n ID: burser	ment			Υ
	Mailing Address P.O. Box 868  City	State Zip Code				1 2	int of l	Each [		•	0 0 9	
	Levittown Purpose of Disbursement	PA 19058		0.4		Amo	int or i	Laciri	Jisbui		00.00	
	Contribution  Candidate Name  Rep. Patrick J. Murphy		Ca	01 ateg Typ	gory/							
	Office Sought:  X House Senate President State: PA District: 08	oursement For: 2010 Primary X General Other (specify) ▼				Contr	ibutio	on				
		nal)							•		00.00	

_	CHEDULE B (FEC FOIII 3X)	Use separate schedule(s	s)	(check onl	NUMBER: PAGE 173 / 194
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 X 23 24 25 28a 28b 28c 29
	y Information copied from such Reports and State for commercial purposes, other than using the nan				
$\rangle$	NAME OF COMMITTEE (In Full) American Hospital Association PAC	, , , , , , , , , , , , , , , , , , ,			
<u> </u>	Full Name (Last, First, Middle Initial) Scott Garrett For Congress				Transaction ID: 17805391 Date of Disbursement
	Mailing Address P.O. Box 905				12
	City Newton	State Zip Code NJ 07860			Amount of Each Disbursement this Perio
	Purpose of Disbursement Contribution			011	500.00
	Candidate Name Rep. Scott Garrett			ategory/ Type	
	Senate >	ement For: 2010 Primary General Other (specify)			Contribution
	State: NJ District: 05  Full Name (Last, First, Middle Initial)  New Democrat Coalition Political Action C	Committee			Transaction ID: 17805393 Date of Disbursement
	Mailing Address 607 14th Street NW Sui	te 800			M M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Washington	State Zip Code DC 20005			Amount of Each Disbursement this Perio
	Purpose of Disbursement 2009 Contribution			011	2000.00
	Candidate Name New Democrat Coalition Political Action C	Committee		ategory/ Type	
	Office Sought:    House   Disburs	ement For: Primary General Other (specify) ▼	•		2009 Contribution
	Full Name (Last, First, Middle Initial) Fund For The Majority, The				Transaction ID: 17805394 Date of Disbursement
	Mailing Address 1212 S. Victory Blvd.				12 08 7 2009
	City Burbank	State Zip Code CA 91502			Amount of Each Disbursement this Perio
	Purpose of Disbursement 2009 Contribution			011	5000.00
	Candidate Name Fund For The Majority, The			ategory/ Type	
	Office Sought: House Disburs Senate	ement For: Primary General			2009 Contribution
	President State: District:	Other (specify) ▼			

	CHEDULE B (FEC FOIII 3X)	Use separate schedule(s)	) FOR LIN	NE NUMBER: PAGE 174 / 194
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28 28 28 28 29
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$\rangle$	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
<b>/</b>	Full Name (Last, First, Middle Initial) The Freedom Project			Transaction ID: 17805395 Date of Disbursement
	Mailing Address 111 C Street SE Lower Unit			12 08 7 2009
	City Washington	State Zip Code DC 20003		Amount of Each Disbursement this Perio
	Purpose of Disbursement 2009 Contribution		011	5000.00
	Candidate Name The Freedom Project		Category/ Type	
	Senate President	oursement For: Primary General Other (specify)		2009 Contribution
	State: District:  Full Name (Last, First, Middle Initial)  We the People PAC			Transaction ID: 17805445 Date of Disbursement
	Mailing Address PO Box 2232			M M / D B / Y Y Y O O 9
	City Jenkintown	State Zip Code PA 19046		Amount of Each Disbursement this Period
	Purpose of Disbursement 2009 Contribution		011	2500.00
	Candidate Name We the People PAC		Category/ Type	
	Office Sought: House Senate President State: District:	oursement For: Primary General Other (specify)		2009 Contribution
	Full Name (Last, First, Middle Initial) Friends Of Blanche Lincoln			Transaction ID: 17805448 Date of Disbursement
	Mailing Address PO Box 3197			12 D 08 / Y 2009
	City Little Rock	State Zip Code AR 72203		Amount of Each Disbursement this Perio
	Purpose of Disbursement Contribution		011	1000.00
	Candidate Name Sen. Blanche Lambert Lincoln		Category/ Type	
	Office Sought:  House X Senate President  State: AR  District:	oursement For: 2010 Primary X General Other (specify) ▼		Contribution
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NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Citizens For Harkin			Transaction ID: 17805449 Date of Disbursement
Mailing Address P O Box 811			12 08 7 2009
City Des Moines	State Zip Code IA 50304		Amount of Each Disbursement this Period
Purpose of Disbursement 2014 Contribution		011	1500.00
Candidate Name Sen. Tom Harkin  Office Sought: House Dist	pursement For: 2014	Category/ Type	
X Senate President	X Primary General Other (specify)		2014 Contribution
State: IA District:  Full Name (Last, First, Middle Initial) Geoff Davis For Congress			Transaction ID: 17805460 Date of Disbursement
Mailing Address PO Box 17192 Suite F			12 M / D D D / Y Y Y O Y O Y
City Ft Mitchell	State Zip Code KY 41017		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution Candidate Name		011	1000.00
Rep. Geoffrey Davis		Category/ Type	
Office Sought:  X House Senate President State: KY District: 04	ursement For: 2010  X Primary General  Other (specify)		Contribution
Full Name (Last, First, Middle Initial) Bill Foster For Congress Committee			Transaction ID: 17805462 Date of Disbursement
Mailing Address PO Box 703			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Geneva	State Zip Code IL 60134		Amount of Each Disbursement this Perio
Purpose of Disbursement Contribution		011	1000.00
Candidate Name Rep. Bill Foster		Category/ Type	
Office Sought:    X   House   Disk   Senate   President   State: IL   District: 14	ursement For: 2010  X Primary General  Other (specify) ▼		Contribution

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American Hospital Association PAC						
Full Name (Last, First, Middle Initial)  Donald A. Manzullo For Congress			Transaction ID: Date of Disburser		0	
Mailing Address PO Box 7783					ž o ŏ s	) <sup>Y</sup>
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Candidate Name Rep. Donald A. Manzullo		011 Category/ Type				
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State: IL District: 16  Full Name (Last, First, Middle Initial)			Tuescation ID:	1700547	· -	
Judy Biggert For Congress			Transaction ID: Date of Disburser		ı	
Mailing Address P.O. Box 637			12 08	B / Y	ž 0 ŏ 9	) Y
City Hinsdale	State Zip Code IL 60522		Amount of Each D	Disburseme	ent this F	Period
Purpose of Disbursement Contribution		011		1	000.00	
Candidate Name Rep. Judy Biggert		Category/ Type				
9 1	sement For: 2010  C Primary General  Other (specify)		Contribution			
Full Name (Last, First, Middle Initial)			Transaction ID:	1700547	· · · · · · · · · · · · · · · · · · ·	
Stupak For Congress			Date of Disburser	nent		Y
Mailing Address 817 Ninth Avenue P.O. PO Box 143			12 08		ž 0 ŏ 9	
City Menominee	State Zip Code MI 49858		Amount of Each D			-
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Candidate Name Rep. Bart Stupak		Category/ Type				
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	Name (Last, F	irst, Middle Initial)									on ID:	_	11682	2	
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City Was	hington			State DC	Zip Code 20044				Amou	ınt of	Each	Disbu	rsemer	nt this F	Perio
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/ F	ull Name (Last, I	First, Middle Initial)										178	1468	 8				
_	Friends Of Schumer  Mailing Address 509 Madison Ave Suite 1902								Date of Disbursement    Max M									
	City State Zip Code New York NY 10022								Amount of Each Disbursement this Period									
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C	Mailing Address	PO Box 270701		State	Zip Code					ınt o				nt this F				
P C	West Hartford CT 06127  Purpose of Disbursement Contribution  Candidate Name Sen. Christopher J. Dodd						011 ategory/ Type						00.00					
C	Office Sought:	House X Senate President District:	Disburser	ment For: Primary Other (spe	2010  X General ecify)		- 71-	<u> </u>	Conti	ribut	tion							
	Full Name (Last, First, Middle Initial) Dutch Ruppersberger For Congress								Transaction ID: 17814706 Date of Disbursement									
N	Mailing Address 22 West Padonia Road Suite C-141								1 <sup>M</sup> 2	М	<sup>/</sup> 1	0 /	Y	2009	Υ			
	City Timonium			State MD	Zip Code 21093				Amou	ınt o	f Each	Disbu		nt this F	-			
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$ \rangle$	American Hospital Association PAC																	
<u></u>	Full Name (Last, First, Middle Initial) Mike McMahon For Congress						Transaction ID: 17814707 Date of Disbursement											
	Mailing Address 66 Arnold Street							<sup>M</sup> 2	М	/ [	1	0	/ Y	ž	οŏs	9 <sup>Y</sup>		
	City Staten Island	State NY	Zip Code 10301				1	mou	int o	f Ead	ch I	Disb	urse	men	t this	Peri	od	
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	Candidate Name Rep. Michael E. McMahon			С	ateg Typ	ory/ e												
		ement For: Primary Other (spe	2010 General				С	ontr	ibut	ion								
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	Full Name (Last, First, Middle Initial) Kosmas For Congress							ate	of D	isbuı	se	men	'814 t					
	Mailing Address PO Box 1547							<sup>M</sup> 2	М	/ [	1	0	/ Y	ž	o ŏ s	9 <sup>Y</sup>		
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	Candidate Name Rep. Suzanne M. Kosmas			С	ateg Typ	ory/ e												
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	Full Name (Last, First, Middle Initial) Nunes For Congress			Transaction ID: 17814709 Date of Disbursement														
	Mailing Address PO Box 891							<sup>M</sup> 2	М	/ [	1	0	/ Y	ž	o ŏ s	9 <sup>Y</sup>		
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<u> </u>	Full Name (Last, First, Middle Initial) Friends Of Rosa Delauro					Date		burse				V
	Mailing Address 12 Trumbull Street					1 <sup>M</sup> 2		1	0 /	2	0 0 9	)
	City New Haven	State Zip Code CT 06511				Amou	int of	Each	Disbur		t this F	-
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	Rep. Rosa L. DeLauro			Typ	ory/ e							
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	State: CT District: 03  Full Name (Last, First, Middle Initial)					Trans	actio	n ID:	178	14711		
	Nita Lowey For Congress					Date of		burse	_		0 ŏ 9	Y
	Mailing Address PO Box 271					1 2		<u> </u>	0	2	009	}
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	Mailing Address PO Box 68444					<sup>M</sup> 2	M /	<sup>D</sup> 1	0 /	Ž	0 ŏ 9	) Y
	City Virginia Beach	State Zip Code VA 23471				Amou	int of	Each	Disbur	semen	t this F	Perio
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	Office Sought:  X House Senate President  State: VA District: 02	rsement For: 2010  X Primary General Other (specify)	•			Contr	ibutio	on				
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	y Information copied from such Reports and State or commercial purposes, other than using the nar			
$\rangle$	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
<u>/</u>	Full Name (Last, First, Middle Initial) Re-Elect McGovern Committee			Transaction ID: 17814714  Date of Disbursement
	Mailing Address PO Box 60405			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City Worcester	State Zip Code MA 01606		Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution		011	1000.00
	Candidate Name Rep. James P. McGovern		Category/ Type	
	X	ement For: 2010  Primary General  Other (specify)		Contribution
	Full Name (Last, First, Middle Initial) Schauer For Congress			Transaction ID: 17814715 Date of Disbursement
	Mailing Address PO Box 100			M2 M / D D / Y Y Y O O 9 Y
	City Battle Creek	State Zip Code MI 49016		Amount of Each Disbursement this Perio
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	Full Name (Last, First, Middle Initial) Engel For Congress			Transaction ID: 17814716 Date of Disbursement
	Mailing Address 462 California Road			12 10 7 2009
	City Bronxville	State Zip Code NY 10708		Amount of Each Disbursement this Perio
	Purpose of Disbursement Contribution		011	1000.00
	Candidate Name Rep. Eliot L. Engel		Category/ Type	
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	y Information copied from such Reports and Sta or commercial purposes, other than using the n											
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<b>/</b>	Full Name (Last, First, Middle Initial) Boyd For Congress						action of Disbu		-	717		
	Mailing Address P.O. Box 15703					1 <sup>M</sup> 2	M /	10	/ Y	ž 0	) 9 °	
	City Tallahassee	State Zip Code FL 32317				Amou	nt of Ea	ach Dis	bursen			io
	Purpose of Disbursement Contribution			Ō-	11					500	.00	_
	Candidate Name Mr. F Allen Boyd			ate Ty	gory/ pe							
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	Mailing Address P.O. Box 15703						of Disbu		/ Y	ž o	ý 9 <sup>°</sup>	
	City Tallahassee	State Zip Code FL 32317				Amou	nt of Ea	ach Dis	bursen	nent th	is Peri	io
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	Candidate Name Mr. F Allen Boyd			ate Ty	gory/ pe							
	Office Sought:  X House Senate President State: FL District: 02	rsement For: 2010 Primary X General Other (specify) ▼				Contr	bution	ı				
	Full Name (Last, First, Middle Initial) Friends Of Jim Marshall					Date	action of Disbu			722		_
	Mailing Address 586 Orange Street					1 <sup>M</sup> 2	M /	10	/ Y	ž o	) 9 Y	
	City Macon	State Zip Code GA 31201				Amou	nt of Ea	ach Dis	bursen		-	io
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<u>v                                    </u>	Full Name (Last, First, Middle In Dave Wu For Us Congress	itial)					Date	action ID	ement		γ ,	Y
	Mailing Address 818 Sw T	hird Ave. #118	2				1 <sup>M</sup> 2		10 /	2	0 0 9	
	City Portland		State OR	Zip Code 97204			Amou	nt of Eacl	n Disburs	-		erioc
	Purpose of Disbursement Contribution Candidate Name				_	011				100	00.00	
	Rep. David Wu					ategory/ Type						
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	Adler For Congress	and y					Date	action ID of Disburs	ement		Υ,	Υ
	Mailing Address 14 Knight	swood Drive					1 2		10 /	2	0 0̈́ 9 ̈	_
	City Marlton		State NJ	Zip Code 08053			Amou	nt of Eacl	n Disburs	ement	this Pe	erio
	Purpose of Disbursement Contribution					011	<u> </u>			100	00.00	_
	Candidate Name Rep. John Herbert Adler					ategory/ Type						
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	Mailing Address 224 18th P.O. Box						1 2	M / D	10 /	Ý Ž	0 ŏ 9 `	Y
	City Rock Island		State IL	Zip Code 61204			Amou	nt of Eacl	Disburs	ement	this Pe	erio
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# SCHEDULE B (FEC Form 3X)

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	y Information copied from such Reports and Stat for commercial purposes, other than using the na											
$ \rangle$	NAME OF COMMITTEE (In Full) American Hospital Association PAC											
	Full Name (Last, First, Middle Initial) Ellsworth For Indiana Mailing Address P.O. Box 62					Date of		n ID: bursen			0 ŏ 9	Y
	City Evansville	State Zip Code IN 47701				Amou	nt of I	Each D	Disburs		t this P	-
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	Full Name (Last, First, Middle Initial) Harry Mitchell For Congress					Date o		bursen	D /		0 ŏ 9	Y
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	١ .	FOR LINE	-	R:		PA	AGE	187 /	194
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American Hospital Association PAC										
Full Name (Last, First, Middle Initial) Dan Lipinski For Congress				Transa Date o			17833 ment	723		
Mailing Address P.O. Box 520				12	M /	<sup>D</sup> 1	6 /	ž	o ŏ 9	Y
City Western Springs	State Zip Code IL 60558			Amour	nt of	Each [	Disburse			eriod
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Full Name (Last, First, Middle Initial) Charlie Dent For Congress				Transa Date o			17833 ment	3750		
Mailing Address PO Box 442				1 <sup>M</sup> 2	M /	1	6 /	ž	o ŏ 9	Y
City Allentown	State Zip Code PA 18105			Amour	nt of	Each [	Disburse	ement	this P	eriod
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Full Name (Last, First, Middle Initial) Lee Terry For Congress				Transa Date o			17833 ment	759		
Mailing Address PO Box 540098				12	M /	<sup>D</sup> 1	6 /	ž	o ŏ 9	Y
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	Full Name (Last, First, Middle Initial) Team Emerson For Jo Ann Emerson						action ID: f Disbursem		760		
	Mailing Address P.O. Box 822 400 Broadway, Suite 50	1				12	16	) / Y	ž 0	ŏ9 <sup>°</sup>	
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	Full Name (Last, First, Middle Initial) Ted Deutch For Congress Committee					Date o	action ID: f Disbursen	nent			
	Mailing Address 20423 Sr 7 Suite F6-38			1 <sup>M</sup> 2	16	) /   Y	ž o	ŏ9			
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11	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21k	only one)  22
	y Information copied from such Reports and Stat for commercial purposes, other than using the na		ed by any pers	on for the purpose of soliciting contributions
$\frac{1}{}$	NAME OF COMMITTEE (In Full)  American Hospital Association PAC	me and address of any politica	di committee to	Solicit contributions from such committee
	Full Name (Last, First, Middle Initial) Moore For Congress			Transaction ID: 17834383 Date of Disbursement
	Mailing Address PO Box 14631			12 / 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Shawnee Mission	State Zip Code KS 66285		Amount of Each Disbursement this Perio
	Purpose of Disbursement Void of 10/09 check		011	-1000.00
	Candidate Name Rep. Dennis Moore		Category/ Type	
	- I	sement For: 2010  X Primary General  Other (specify)		Void of 10/09 check
	Full Name (Last, First, Middle Initial) Hawkeye PAC			Transaction ID: 17834396 Date of Disbursement
	Mailing Address P.O.Box 7255			12 M / D 18 / Y Y Y 0 9 9 Y
	City Des Moines	State Zip Code IA 50309		Amount of Each Disbursement this Period
	Purpose of Disbursement 2009 Contribution		011	2500.00
	Candidate Name Hawkeye PAC		Category/ Type	
	Office Sought: House Disbute Senate President State: District:	sement For: Primary General Other (specify) ▼		2009 Contribution
	Full Name (Last, First, Middle Initial) Schiff For Congress			Transaction ID: 17834408 Date of Disbursement
	Mailing Address 777 O. E O.			12 18 7 2009
	Mailing Address 777 S. Figueroa St. Suite 4050			
	- 3	State Zip Code CA 90017		
	Suite 4050  City Los Angeles  Purpose of Disbursement Contribution		011	Amount of Each Disbursement this Period 1000.00
	Suite 4050  City Los Angeles  Purpose of Disbursement Contribution  Candidate Name Rep. Adam B. Schiff	CA 90017	011 Category/ Type	Amount of Each Disbursement this Period 1000.00
	Suite 4050  City Los Angeles  Purpose of Disbursement Contribution  Candidate Name Rep. Adam B. Schiff  Office Sought: X House Disbur		Category/	

	CHEDULE B (FEC FOIII 3X)	Use separate schedule(s)		R LINE NUMBER: PAGE 190 / 194 eck only one)
	EMIZED DISBURSEMENTS	for each category of to Detailed Summary Pa	age	21b 22 X 23 24 25 27 28a 28b 28c 29
				erson for the purpose of soliciting contributions ee to solicit contributions from such committee
$\rangle$	NAME OF COMMITTEE (In Full) American Hospital Association PAC	· · · · · · · · · · · · · · · · · · ·		
<u> </u>	Full Name (Last, First, Middle Initial) Schiff For Congress			Transaction ID: 17834515 Date of Disbursement
	Mailing Address 777 S. Figueroa St. Suite 4050			1 2 M / D 1 8 / Y 2 0 0 9 Y
	City Los Angeles	State Zip Code CA 90017		Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution		011	1000.00
	Candidate Name Rep. Adam B. Schiff		Catego Type	
	Senate President	sbursement For: 2010 Primary X Gene Other (specify) ▼	eral	Contribution
	State: CA District: 29  Full Name (Last, First, Middle Initial)  John Carney For Congress			Transaction ID: 17834774 Date of Disbursement
	Mailing Address PO Box 2162			12
	City Wilmington	State Zip Code DE 19899		Amount of Each Disbursement this Perio
	Purpose of Disbursement Contribution Candidate Name		011	5000.00
	Mr. John Carney		Catego Type	
	Office Sought: X House Dis Senate President State: DE District: 01	sbursement For: 2010  X Primary Gene Other (specify)	eral	Contribution
	Full Name (Last, First, Middle Initial) Dan Lipinski For Congress			Transaction ID: 17834776 Date of Disbursement
	Mailing Address P.O. Box 520			12 M / D 18 / Y Y Y O O 9 Y
	City Western Springs	State Zip Code IL 60558		Amount of Each Disbursement this Perio
	Purpose of Disbursement Contribution		011	1000.00
	Candidate Name Rep. Daniel William Lipinski		Catego Type	
	Office Sought:  X House Senate President State: IL District: 03	sbursement For: 2010  X Primary Gene Other (specify)	eral	Contribution
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Full Name (La Ryan For Co	st, First, Middle Initial) ongress				Transaction ID: 17870508 Date of Disbursement				
Mailing Addre	ss P. O. Box 1919				12 M / 29 / Y 2009	9 <sup>Y</sup>			
City Janesville		State WI	Zip Code 53547		Amount of Each Disbursement this				
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Candidate Na Rep. Paul D	. Ryan			Category/ Type					
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•	District: 01 st, First, Middle Initial)				Transaction ID: 17870645				
Adam Smith	n For Congress Committ	ee			Date of Disbursement	Υ			
Mailing Addre	ss PO Box 23626		12 D 29 / 2009	9					
City Federal Wa	y	State WA	Zip Code 98093		Amount of Each Disbursement this				
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Candidate Na Rep. D. Ada	m Smith			Category/ Type					
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Full Name (La	st, First, Middle Initial) or Congress				Transaction ID: 17870814 Date of Disbursement				
Mailing Addre	ss PO Box 15395				12	9 <sup>Y</sup>			
City Rochester		State NY	Zip Code 14615		Amount of Each Disbursement this				
Purpose of Dis Contribution				011	1250.00	Ò			
	pher John Lee			Category/ Type					
Office Sought	Senate President	Disbursement For:  X Primary  Other (spe	2010 General		Contribution				
State: NY	District: 26								
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	CHEDULE B (FEC Form 3 EMIZED DISBURSEMENT	for each	arate schedule(s) category of the Summary Page	FOR LINE (check onl 21b 27	NUMBER:   PAGE   192 / 194
	y Information copied from such Reports a for commercial purposes, other than using	•			' '
$\rangle$	NAME OF COMMITTEE (In Full) American Hospital Association PA	С			
	Full Name (Last, First, Middle Initial) Butterfield For Congress Committe  Mailing Address PO Box 2571	ee			Transaction ID: 17870917 Date of Disbursement    M
	City Wilson Purpose of Disbursement Contribution Candidate Name Rep. George K. Butterfield	State NC	Zip Code 27894	011 Category/ Type	Amount of Each Disbursement this Period 1000.00
	Office Sought:  X House Senate President State: NC District: 01	Disbursement For:  X Primary Other (spr	2010 General ecify)	NE -	Contribution

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SCHEDULE B (FEC Form 3X)			FOR LIN	IE NUMBER: PAGE 193	PAGE 193 / 194							
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or for commercial purposes, other than using the name	e and address of any political	l comi	mittee to	solicit contributions from such committee	<del>)</del>							
NAME OF COMMITTEE (In Full)  American Hospital Association PAC												
/												
Full Name (Last, First, Middle Initial) American Express				Transaction ID: 17869767 Date of Disbursement								
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Mailing Address Ste. 001				12 01 200	9							
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Chicago Purpose of Disbursement	IL 60679			4.9	95							
Merchant Fees			001									
Candidate Name			tegory/									
Office Sought: House Disburse	ement For:		Гуре									
Senate	Primary General			Merchant Fees								
President State: District:	Other (specify)											
Full Name (Last, First, Middle Initial)				T :: ID 17000700								
American Express				Transaction ID: 17869768  Date of Disbursement								
Mailing Address Ste. 001				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	9 Y							
Mailing Address Ste. 001				12 07 200								
City Chicago	State Zip Code IL 60679			Amount of Each Disbursement this	Period							
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Mailing Address 1601 Elm Street				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	9							
City	State Zip Code			Amount of Each Disbursement this	Period							
Dallas	TX 75201											
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Candidate Name			ategory/									
060	and Fam	1	Туре									
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Senate

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President

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NAME OF COMMITTEE (In Full) American Hospital Association PAC				
Full Name (Last, First, Middle Initial) Paymentech  Mailing Address 14221 Dallas Parkway Building Two			Transaction ID: 17869770 Date of Disbursement  M 2 M / D 0 4 / Y 2 0 0 9 Y	
City	State Zip Code TX 75254		Amount of Each Disbursement this Period	_
Purpose of Disbursement Merchant Fees Candidate Name		001 Category/ Type	76.39	_
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)		Merchant Fees	
Full Name (Last, First, Middle Initial) Citibank, F.S.B.  Mailing Address 1400 G Street, NW			Transaction ID: 17869771 Date of Disbursement  12	
	State Zip Code DC 20005		Amount of Each Disbursement this Period	_
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General

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Primary

Other (specify)

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