

**FEC
FORM 3X**

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

Office Use Only

1. NAME OF COMMITTEE (In full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

FEDERATION OF AMERICAN HOSPITALS PAC

ADDRESS (number and street)

801 PENNSYLVANIA AVENUE

SUITE 245

Check if different than previously reported. (ACC)

WASHINGTON

DC

20004

2804

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00002261

3. IS THIS REPORT

X

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Quarterly Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3)

Jun 20 (M6)

X

Sep 20 (M9)

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

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

08

01

2005

through

08

31

2005

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Sylvia Ulrich

Signature of Treasurer

Electronically Filed by Sylvia Ulrich

Date

09

20

2005

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only

FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
 FEDERATION OF AMERICAN HOSPITALS PAC

Report Covering the Period: From: ^M08 ^D01 ^Y2005 To: ^M08 ^D31 ^Y2005

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^Y 2005		15428.57
(b) Cash on Hand at Beginning of Reporting Period	6221.20	
(c) Total Receipts (from Line 19)	36886.09	245277.97
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	45107.29	260706.54
<hr/>		
7. Total Disbursements (from Line 31)	16087.08	231686.33
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	29020.21	29020.21
<hr/>		
9. Debts and Obligations owed TO the committee (itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (itemize all on Schedule C and/or Schedule D)	0.00	

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
 999 E street, NW
 Washington, DC 20463

Toll Free 800-424-9530
 Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

FEDERATION OF AMERICAN HOSPITALS PAC

Report Covering the Period: From: ^M08 ^D01 ^Y2005 To: ^M08 ^D31 ^Y2005

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	17507.34	180949.04
(ii) Unitemized	16670.00	33839.68
(iii) TOTAL (add Lines 11(a)(i) and (ii))	34177.34	214788.72
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	25650.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	34177.34	240438.72
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	2708.75	4839.25
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	36886.09	245277.97
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	36886.09	245277.97

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	168.06
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	168.06
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	16000.00	226660.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	0.00
29. Other Disbursements.....	67.08	4858.27
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election ActMty (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	16067.08	231686.33
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(i) from Line 31).....	16067.08	231686.33

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	34177.34	240438.72
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	34177.34	240438.72
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	168.06
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	168.06

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

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

FOR LINE NUMBER: PAGE 6 / 21

(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial) A. J D Miller		Date of Receipt M / D / Y Y Y Y 08 / 01 / 2005
Mailing Address P.O. Box 758		Transaction ID: 8495934
City Crystal Beach	State FL	Zip Code 34681
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer HCA, Inc.	Occupation Division President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) B. Meura Welsh		Date of Receipt M / D / Y Y Y Y 08 / 02 / 2005
Mailing Address 813D Annapolis Street		Transaction ID: 8495935
City Houston	State TX	Zip Code 77005-3114
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer HCA, Inc.	Occupation President-Gulf Coast Division	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) C. Richard Shaleross		Date of Receipt M / D / Y Y Y Y 08 / 04 / 2005
Mailing Address 1513 Kimberleigh Court		Transaction ID: B504001
City Franklin	State TN	Zip Code 37069
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer HCA, Inc.	Occupation CFQ-Western Group	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

SUBTOTAL of Receipts TN's Page (optional)	4500.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 7 / 21

(check only one)

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

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

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

Full Name (Last, First, Middle Initial) A. Jeffrey R. Anthony		Date of Receipt M / D / Y 08 / 05 / 2005
Mailing Address 2707 Winston Court		Transaction ID: 8505334
City Pearland	State TX	Zip Code 77584
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer HCA, Inc.	Occupation Healthcare Executive	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Michael S Hongola		Date of Receipt M / D / Y 08 / 05 / 2005
Mailing Address 8704 Westmont Drive		Transaction ID: 8505332
City Colleyville	State TX	Zip Code 76034
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Tenet Healthcare Corpora- tion	Occupation VP of Information Systems	Aggregate Year-to-Date ▼ 300.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. David Tropaeur		Date of Receipt M / D / Y 08 / 05 / 2005
Mailing Address 241 Potest Place		Transaction ID: 8505333
City Franklin	State TN	Zip Code 37064-2041
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer HCA, Inc.	Occupation Controller, Eastern Group Operations	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts TN's Page (optional)	950.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 8 / 21

(check only one)

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

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

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

Full Name (Last, First, Middle Initial) A. Jayne Chambers		Date of Receipt M / D / Y 08 / 15 / 2005
Mailing Address 1258 Kensington Rd		Transaction ID: 8981903
City McLean	State VA	Zip Code 22101
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer FAH	Occupation Lobbyist	Aggregate Year-to-Date ▼ 450.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Chip Kehn		Date of Receipt M / D / Y 08 / 15 / 2005
Mailing Address 4545 N Glebe Road		Transaction ID: 8981904
City Arlington	State VA	Zip Code 22207
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 41.67
Name of Employer FAH	Occupation President & CEO	Aggregate Year-to-Date ▼ 625.05
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jeffrey E Cohen		Date of Receipt M / D / Y 08 / 15 / 2005
Mailing Address 4927 15th Street, North		Transaction ID: 8981902
City Arlington	State VA	Zip Code 22205
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer FAH	Occupation Lobbyist	Aggregate Year-to-Date ▼ 225.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	96.67
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 9 / 21

(check only one)

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

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

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

Full Name (Last, First, Middle Initial) A. Bonnie Money Penny		Date of Receipt M / D / Y 08 / 15 / 2005	
Mailing Address 141 28 Burlingame Road		Transaction ID: 8981906	
City Little Rock	State AR	Zip Code 72211	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer FAH	Occupation SVP Administrative Services		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00		
Full Name (Last, First, Middle Initial) B. Douglas D Mairano		Date of Receipt M / D / Y 08 / 15 / 2005	
Mailing Address 3105 Collie Lane		Transaction ID: 8981907	
City Falls Church	State VA	Zip Code 22044	Amount of Each Receipt this Period 42.00
FEC ID number of contributing federal political committee. C			
Name of Employer FAH	Occupation Controller		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00		
Full Name (Last, First, Middle Initial) C. David T Vandewater		Date of Receipt M / D / Y 08 / 16 / 2005	
Mailing Address 425 Jackson Blvd		Transaction ID: 8983609	
City Nashville	State TN	Zip Code 37205	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Ardent Health Services	Occupation President and CEO		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

SUBTOTAL of Receipts TN's Page (optional) ► **2567.00**

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

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

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

FOR LINE NUMBER: PAGE 10 / 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial) A. Michael P Joyce		Date of Receipt M / D / Y 08 / 16 / 2005
Mailing Address 8955 Laurel Oak Drive		Transaction ID: 8983611
City Suwanee	State GA	Zip Code 30024-5353
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer HCA, Inc.	Occupation Division President	Aggregate Year-to-Date ▼ 1500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jon M Foster		Date of Receipt M / D / Y 08 / 16 / 2005
Mailing Address 2908 Maravillas Loop		Transaction ID: 8983629
City Austin	State TX	Zip Code 78735-1497
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer St. David's Healthcare Partnership	Occupation President & CEO	Aggregate Year-to-Date ▼ 1000.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Randall Hempling		Date of Receipt M / D / Y 08 / 17 / 2005
Mailing Address 2260 Amethyst		Transaction ID: B1098D1
City Barstow	State CA	Zip Code 92311
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Barstow Community Hospital	Occupation Hospital CEO	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	2750.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 11 / 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial) A. Harold L Sigler		Date of Receipt M / D / Y 08 / 17 / 2005
Mailing Address 1307 Cedar Ridge		Transaction ID: 9109798
City Moberly	State MO	Zip Code 65270
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer Moberly Regional Medical Center	Occupation Hospital CEO	Aggregate Year-to-Date ▼ 300.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Wayne T Smith		Date of Receipt M / D / Y 08 / 17 / 2005
Mailing Address 4 Peach Blossom Square		Transaction ID: 9003491
City Nashville	State TN	Zip Code 37205
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Community Health Systems, Inc	Occupation Chairman, President & CEO	Aggregate Year-to-Date ▼ 1000.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Larry Cash		Date of Receipt M / D / Y 08 / 17 / 2005
Mailing Address 1111 Vaughn Crest Drive		Transaction ID: 9003482
City Franklin	State TN	Zip Code 37069
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Community Health Systems, Inc	Occupation EVP & Chief Financial Officer	Aggregate Year-to-Date ▼ 300.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts TN's Page (optional)	▶	1450.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 12 / 21

(check only one)

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

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

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

Full Name (Last, First, Middle Initial) A. David L Miller		Date of Receipt M / D / Y 08 / 17 / 2005
Mailing Address 857 Goodsprings Road		Transaction ID: 9003493
City Brentwood	State TN	Zip Code 37027
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Community Health Systems, Inc	Occupation SVP-Group I	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Gary D Newsome		Date of Receipt M / D / Y 08 / 17 / 2005
Mailing Address 8457 Winston Drive		Transaction ID: 9003494
City Brentwood	State TN	Zip Code 37027
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Community Health Systems, Inc	Occupation SVP	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Michael T Portaeel		Date of Receipt M / D / Y 08 / 17 / 2005
Mailing Address 6225 Waxwood Court		Transaction ID: 9003449
City Brentwood	State TN	Zip Code 37027-5622
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Community Health Systems, Inc	Occupation SVP Group Operations	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts TN's Page (optional)	750.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 13 / 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial) A. William S Hussey		Date of Receipt M / D / Y 08 / 17 / 2005
Mailing Address 8904 Stone Run Drive		Transaction ID: 9003450
City Nashville	State TN	Zip Code 37211-6841
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Community Health Systems, Inc	Occupation SVP Group Operations	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Martin G Schweinhart		Date of Receipt M / D / Y 08 / 17 / 2005
Mailing Address 824D Weston Drive		Transaction ID: 9003451
City Brentwood	State TN	Zip Code 37027-2406
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Community Health Systems, Inc	Occupation SVP Operations	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Rachel A Selfert		Date of Receipt M / D / Y 08 / 17 / 2005
Mailing Address 3824 Rainbow Place		Transaction ID: 9003452
City Nashville	State TN	Zip Code 37204-5821
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Community Health Systems, Inc	Occupation Lawyer	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts TN's Page (optional)	750.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 14 / 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial) A. Carolyn Lipp		Date of Receipt M / D / Y 08 / 17 / 2005
Mailing Address 8 Portrush Court		Transaction ID: 9003453
City Brentwood	State TN	Zip Code 37027
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Community Health Systems, Inc	Occupation Healthcare Executive	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Kenneth D Hawkins		Date of Receipt M / D / Y 08 / 17 / 2005
Mailing Address 9152 Jones Court		Transaction ID: 9003454
City Brentwood	State TN	Zip Code 37027-6536
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Community Health Systems, Inc	Occupation Senior Vice President	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Thomas M Buford		Date of Receipt M / D / Y 08 / 17 / 2005
Mailing Address 1003 Heathrow Hills Court		Transaction ID: 9003455
City Brentwood	State TN	Zip Code 37027-6838
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Community Health Systems, Inc	Occupation VP & Corporate Controller	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts TN's Page (optional)	750.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 15 / 21

(check only one)

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

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

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

Full Name (Last, First, Middle Initial) A. Tim G Marlette		Date of Receipt M / D / Y 08 / 17 / 2005
Mailing Address 1205 State Boulevard		Transaction ID: 9003463
City Franklin	State TN	Zip Code 37064-8807
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Community Health Systems, Inc	Occupation Chief Purchasing Officer	Aggregate Year-to-Date ▼ 300.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Thomas J May		Date of Receipt M / D / Y 08 / 18 / 2005
Mailing Address 1525 Villa Rica Drive		Transaction ID: 8978049
City Henderson	State NV	Zip Code 89052
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer HCA, Inc.	Occupation President, Far West Division	Aggregate Year-to-Date ▼ 1500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Robert E Hardson		Date of Receipt M / D / Y 08 / 18 / 2005
Mailing Address 1209 Tyne		Transaction ID: 8978050
City Nashville	State TN	Zip Code 37215
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Community Health Systems, Inc	Occupation Senior Vice President	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts TN's Page (optional)	▶	2050.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 16 / 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial) A. Ron Shefer		Date of Receipt M / D / Y 08 / 18 / 2005
Mailing Address 513 Averwater Court		Transaction ID: 8978053
City Franklin	State TN	Zip Code 37067
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Community Health Systems, Inc	Occupation VP Operations, Group 3	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Stephanie Moore		Date of Receipt M / D / Y 08 / 18 / 2005
Mailing Address 310 Taylor Street		Transaction ID: 8978054
City Nashville	State TN	Zip Code 37205
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Community Health Systems, Inc	Occupation VP Operations, Group 4	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Jayna Chambers		Date of Receipt M / D / Y 08 / 31 / 2005
Mailing Address 1256 Kensington Rd		Transaction ID: B1519B1
City McLean	State VA	Zip Code 22101
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer FAH	Occupation Lobbyist	Aggregate Year-to-Date ▼ 480.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts TN's Page (optional)	780.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 17 / 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial) A. Chip Kahn		Date of Receipt M / D / Y 08 / 31 / 2005
Mailing Address 4545 N Glebe Road		Transaction ID: 9151992
City Arlington	State VA	Zip Code 22207
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 41.67
Name of Employer FAH	Occupation President & CEO	Aggregate Year-to-Date ▼ 666.72
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jeffrey E Cohen		Date of Receipt M / D / Y 08 / 31 / 2005
Mailing Address 4927 15th Street, North		Transaction ID: 9151990
City Arlington	State VA	Zip Code 22205
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer FAH	Occupation Lobbyist	Aggregate Year-to-Date ▼ 240.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Bonnie Moneypenny		Date of Receipt M / D / Y 08 / 31 / 2005
Mailing Address 14128 Burlingame Road		Transaction ID: 9151984
City Little Rock	State AR	Zip Code 72211
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer FAH	Occupation SVP Administrative Services	Aggregate Year-to-Date ▼ 400.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	81.67
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 18 / 21
(check only one)

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

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

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

Full Name (Last, First, Middle Initial) A. Douglas D Mairena		Date of Receipt M / D / Y 08 / 31 / 2005	
Mailing Address 3105 Collie Lane		Transaction ID: 9151995	
City Falls Church	State VA	Zip Code 22044	Amount of Each Receipt this Period 42.00
FEC ID number of contributing federal political committee. C			
Name of Employer FAH	Occupation Controller	Aggregate Year-to-Date ▼ 672.00	
Receipt For: Primary General Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	▶	42.00
TOTAL This Period (last page this line number only)	▶	17507.34

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

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

FOR LINE NUMBER: PAGE 10 / 21

(check only one)

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

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

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

Full Name (Last, First, Middle Initial) A. Federation of American Hospitals		Date of Receipt M / D / Y 08 / 23 / 2005
Mailing Address 801 Pennsylvania Ave., NW Suite 245		Transaction ID: 9151986
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2708.75
Name of Employer	Occupation	Reimbursement of July 05 Bank Fees
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4839.25	

SUBTOTAL of Receipts This Page (optional)	▶	2708.75
TOTAL This Period (last page this line number only)	▶	2708.75

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

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

FOR LINE NUMBER:
(check only one)

PAGE 20 / 21

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

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

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

Full Name (Last, First, Middle Initial)
A. National Republican Senatorial Committee

Mailing Address The Ronald Reagan Republican Cente
425 Second Street NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Political Contribution

Candidate Name

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

State: District

011
Category/
Type

Transaction ID: 9001589

Date of Disbursement
08 / 18 / 2005

Amount of Each Disbursement this Period

15000.00

Political Contribution

Full Name (Last, First, Middle Initial)
B. Dave Camp For Congress 2006

Mailing Address 5915 Eastman Ave. Suite 100

City Midland State MI Zip Code 48640

Purpose of Disbursement

Candidate Name
Rep. David Camp

Office Sought: House Senate President
Disbursement For: 2006
 Primary General Other (specify) ▼

State: MI District 4

011
Category/
Type

Transaction ID: 9001590

Date of Disbursement
08 / 23 / 2005

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

16000.00

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

16000.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 21 / 21

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

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

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

Full Name (Last, First, Middle Initial)

A. Wachovia Bank

Mailing Address 801 Pennsylvania Ave, NW

City Washington State DC Zip Code 20004

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Transaction ID: 9210446

Date of Disbursement

08 / 31 / 2005

Amount of Each Disbursement this Period

87.08

Bank Fees

SUBTOTAL of Disbursements This Page (optional) ▶

87.08

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

87.08