Image# 12963777825 PAGE 1 / 7

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

1 Offivi OX	or Other Than An Au	itiiorizea Committe		0	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing over the lines.	ng, type 1	L2FE4M5	
Surgical Institute of Re	ading - PAC				
ADDRESS (number and street)	2752 Century Blvd				
Check if different					
than previously reported. (ACC)	Wyomissing			PA L	19610-3345
2. FEC IDENTIFICATION NU	JMBER ▼ C	ITY 🛦	ST	ΓΑΤΕ ▲	ZIP CODE 🛦
C C00466771	3.		NEW N) OR	× AMEN	NDED
4. TYPE OF REPORT (Choose One)	Report Due On:		May 20 (M5)	Aug 20	Year Only)
(a) Quarterly Reports:			Jun 20 (M6)	Sep 20	(M9) Dec 20 (M12) (Non-Election Year Only)
April 15		or 20 (M4)	Jul 20 (M7)	Oct 20	(M10) Jan 31 (YE)
Quarterly Report (C	(c) 12-Day	Primary (12F	2)	General (12	G) Runoff (12R)
Quarterly Report (C	Report for the:	Convention (12C)	Special (125	5)
X Quarterly Report (C	23)	M = M /	D D / Y	TY TY TY	in the
Year-End Report (Y	Elect	tion on			State of
July 31 Mid-Year Report (Non-electio Year Only) (MY)	n (d) 30-Day POST-Election Report for the:	General (300	ā)	Runoff (30R	Special (30S)
Termination Report (TER)	Elect	tion on	D = D / Y	YYYY	in the State of
5. Covering Period 07			09	30 /	2012
I certify that I have examined th	is Report and to the best of	of my knowledge and l	pelief it is true,	, correct and co	omplete.
Type or Print Name of Treasure	Stephen Banco				
Signature of Treasurer Steph	en Banco	[Electronicall	Filed] Dat	te 12	21 / 2012
NOTE: Submission of false, errone	eous, or incomplete informati	ion may subject the pers	son signing this	Report to the p	penalties of 2 U.S.C. §437g.
Office Use Only					FEC FORM 3X Rev. 12/2004

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Surgical Institute of Reading - PAC 07 2012 09 30 2012 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 7527.04 January 1, 2012 (b) Cash on Hand at 7511.04 Beginning of Reporting Period..... 0.00 0.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 7511.04 7527.04 6(a) and 6(c) for Column B)..... 7511.04 7527.04 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 0.00 0.00 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Surgical Institute of Reading	- PAC
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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	0.00	0.00			
(i) Itemized (use Schedule A)	7				
(ii) Unitemized	0.00	0.00			
(iii) TOTAL (add					
Lines 11(a)(i) and (ii)▶	0.00	0.00			
_					
(b) Political Party Committees	0.00	0.00			
(c) Other Political Committees	0.00	0.00			
(such as PACs)	0.00	0.00			
(d) Total Contributions (add Lines					
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ▶	0.00	0.00			
Transfers From Affiliated/Other	7				
Party Committees	0.00	0.00			
All Loans Received	0.00	0.00			
Loan Repayments Received	0.00	0.00			
Offsets To Operating Expenditures		, , , , , , , , , , , , , , , , , , , ,			
(Refunds, Rebates, etc.)	0.00				
(Carry Totals to Line 37, page 5)	0.00	0.00			
Refunds of Contributions Made to Federal Candidates and Other					
Political Committees	0.00	0.00			
Other Federal Receipts	0.00	5.00			
(Dividends, Interest, etc.)	0.00	0.00			
Transfers from Non-Federal and Levin Funds	3.00				
(a) Non-Federal Account					
(from Schedule H3)	0.00	0.00			
(b) Levin Funds (from Schedule H5)	0.00	0.00			
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00			
Total Receipts (add Lines 11(d),					
12, 13, 14, 15, 16, 17, and 18(c))▶	0.00	0.00			
Total Federal Receipts					
(subtract Line 18(c) from Line 19)▶	0.00	0.00			
(Gabaraot Line 10(0) non Line 13)	0.00	0.00			

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			
Operating Expenditures:	1000 11110 1 01100	Calelidal Teal-IO-Date			
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)					
(i) Federal Share	0.00	0.00			
(ii) Non-Federal Share	0.00	0.00			
(b) Other Federal Operating	5044.04	5007.04			
Expenditures(c) Total Operating Expenditures	5011.04	5027.04			
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	5011.04	5027.04			
Transfers to Affiliated/Other Party					
Committees	0.00	0.00			
Contributions to Federal Candidates/Committees					
and Other Political Committees	2500.00	2500.00			
Independent Expenditures	0.00	0.00			
(use Schedule E) Coordinated Party Expenditures	0.00	0.00			
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00			
(use Schedule F)	3.00	0.00			
Loan Repayments Made	0.00	0.00			
Loan riepayments wade					
Loans Made	0.00	0.00			
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	0.00	0.00			
(such as PACs)	0.00	0.00			
(d) Total Contribution Refunds					
(add Lines 28(a), (b), and (c))▶	0.00	0.00			
(0.00 = 0.00 = 0.00), (0), 0.00 (0),					
Other Disbursements	0.00	0.00			
Federal Election Activity (2 U.S.C. §431(20))					
(a) Allocated Federal Election Activity					
(from Schedule H6)	0.00	0.00			
(i) Federal Share	7				
(ii) "Levin" Share	0.00	0.00			
(b) Federal Election Activity Paid Entirely	7				
With Federal Funds	0.00	0.00			
(c) Total Federal Election Activity (add					
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00			
Total Disbursements (add Lines 21(c), 22,					
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	7511.04	7527.04			
Total Federal Disbursements					
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)					
from Line 31)	7511.04	7527.04			
	, , , , , , , , , , , , , , , , , , , ,				

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
3. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	0.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	5011.04	5027.04
. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	5011.04	5027.04

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SCHEDULE B (FEC Form 3X)			FOR	LINE	NUMBER: PAGE 6				OF	7		
IT	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(ched	(check only one)								
		Detailed Summary Page	<u>×</u>	21b	22		23		24	25		26
_				27	28a		28b		28c	29		30b
	ly information copied from such Reports and Statem for commercial purposes, other than using the name											}
\setminus	NAME OF COMMITTEE (In Full)											
$ \rangle$	Surgical Institute of Reading - PAC											
	Full Name (Last, First, Middle Initial)											
Α.	Romney Victory Inc.					Date of Disbursement						
	Mailing Address 585 COMMERCIAL STREET						30	0	L	2012	_	
	,	State Zip Code			Trans	sactio	on ID	· SI	B21B.42	253		
	200.0.1	MA 02109			mans	Jactic	JII ID	. 01	JZ 1 D.72	.55		
	Purpose of Disbursement		011		Amoun	it of E	Each	Dist	burseme	ent this	Perio	od
	Candidate Name		Catego	ry/						500	7.04	П.
	Romney Victory Inc.	_	Туре	•			7	_	7	300	7.04	_
	Senate	nent For: 2012 Primary										
	State: District:											
В.	Full Name (Last, First, Middle Initial)				Date o	f Dis	burse	mer	nt			
						M M / D D / Y Y Y Y						
	Mailing Address											
	City	State Zip Code										
	Purpose of Disbursement				Amount of Each Disbursement this Period				od			
	Candidate Name	Catego					Ī	45				
	Office Sought: House Disbursen	nent For:	. 7 -									
		Primary General										
	President State: District:	Other (specify) ▼										
	Full Name (Last, First, Middle Initial)											
C.					Date o	f Dis						
	Mailing Address					/	D	D	/ Y	Y	Y	
	City S	State Zip Code										
	Purpose of Disbursement			\dashv								
	Candidate Name	Catego Type	ery/	Amoun	t of E	Each	Disk	burseme	ent this	Perio	bd	
	Office Sought: House Disbursen	nent For:							7			
		Primary General										
		Other (specify) ▼										
_	State: District:							_				
s	UBTOTAL of Disbursements This Page (optional)						,	Ξ		500	7.04	
L					-		-			500	7 04	
ΙТ	OTAL This Period (last page this line number only).			. ▶			,		7	300	.04	

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Detailed Surmany Page	TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(oricon oriny	,			
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) Surgical Institute of Reading - PAC Full Name (Last, First, Middle Initial) A Romney Victory Inc. Cyty State Zip Code Bostron Mailing Address S8S COMMERCIAL STREET Cyty State Zip Code Bostron Candidate Name Romney Victory Inc. Office Sought: House President Other (specify) State: Dishursement Candidate Name Cardidate N							
Amount of Each Disbursement Candidate Name C	Any information copied from such Reports and Staten	I nents may not be sold or us	sed by any perso	on for the purp	pose of soliciting contributions		
Surgical Institute of Reading - PAC Full Name (Last, First, Middle Initial) A. Romney Victory Inc. Mailing Address 585 COMMERCIAL STREET City State Zip Code BOSTON MA 02109 Purpose of Disbursement Canddate Name City State Disbursement For: 2012 Sanata President Other (specify) Purpose of Disbursement Call Name (Last, First, Middle Initial) 3. Mailing Address City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name Condidate Name							
A Romney Victory Inc. Mailing Address 588 COMMERCIAL STREET City State Zip Code MA 02109 Purpose of Disbursement Candidate Name Category Office Sought: House Primary General Primary G	, ,						
A Romney Victory Inc. Mailing Address 585 COMMERCIAL STREET City State Zip Code BOSTON MA 02109 Purpose of Disbursement Candidate Name Romney Victory Inc. Office Sought: Fouse President Disbursement For: 2012 Full Name (Last, First, Middle Initial) State: Disbursement Category Office Sought: House Senate Primary General Pri	Surgical Institute of Reading - PAC						
A Romney Victory Inc. Mailing Address 585 COMMERCIAL STREET City State Zip Code BOSTON MA 02109 Purpose of Disbursement Candidate Name Romney Victory Inc. Office Sought: Fouse President Disbursement For: 2012 Full Name (Last, First, Middle Initial) State: Disbursement Category Office Sought: House Senate Primary General Pri	Full Name (Last, First, Middle Initial)						
Mailing Address 5a5 COMMERCIAL STREET 09 30 2012	A. Romney Victory Inc.			Date of Dis	sbursement		
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Purpose of Disbursement Candidate Name Romney Victory Inc. Office Sought:	City						
Romney Victory Inc. Office Sought:		MA 02109		Transacti	ion ID : SB23.4259		
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Romney Victory Inc. Office Sought: House President State: District: Full Name (Last, First, Middle Initial) Amount of Each Disbursement this Period Category/ Type Office Sought: House Senate Primary General Other (specify) Senate President State: Disbursement Candidate Name Office Sought: House Senate Primary General President Other (specify) Senate President Other (specify) Amount of Each Disbursement this Period Category/ Type Office Sought: House Senate Primary General President Other (specify) Office Sought: House Other (specify) State: District: Full Name (Last, First, Middle Initial) Other (specify) Other (specify) State Zip Code Purpose of Disbursement Category/ Type Office Sought: House Disbursement For: Senate President Other (specify) Office Sought: House Disbursement For: Senate President Senate President Other (specify) Office Sought: House Disbursement For: Senate President District: Other (specify) Office Sought: House Disbursement For: Senate President District: Other (specify) Office Sought: House Disbursement For: Senate President District: Other (specify) Office Sought: House Disbursement For: Senate President District: Other (specify) Office Sought: House Disbursement For: Senate President District: Other (specify) Office Sought: House Disbursement For: Senate President District: Other (specify) Office Sought: House Disbursement For: Senate President District: Other (specify) Office Sought: House Disbursement For: Senate President District: Other (specify) Office Sought: House Disbursement For: Senate President District: Other (specify) Office Sought: House Disbursement For: Senate President District: Other (specify) Office Sought: House Disbursement For: Senate President District: Other (specify) Office Sought: House Disbursement For: Senate President Disbursement For:	Candidate Name			Amount of	Each disdursement this Period		
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Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ State: District: Substruct: Primary General Other (specify) ▼ 2500.00	City	State Zip Code					
Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ State: District: Substruct: Primary General Other (specify) ▼ 2500.00	Purpose of Disbursement						
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Senate Primary General Other (specify) ▼ State: District: SUBTOTAL of Disbursements This Page (optional)	Office Sought: House Disburson	aont For:	Туре		, , , , , , , , , , , , , , , , , , , ,		
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