

**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

NATIONAL ASSOCIATION OF PSYCHIATRIC HEALTH SYSTEMS POLITICAL ACTION COMMITTEE (N-APHS/PAG)

ADDRESS (number and street)

701 13TH STREET NW SUITE 950

Check if different than previously reported. (ACC)

WASHINGTON

DC

20005

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00107136

3. IS THIS REPORT

X

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- X 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)

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

04

01

2005

through

06

30

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

Mr. Mark J. Covall

Signature of Treasurer

Electronically Filed by Mr. Mark J. Covall

Date

07

26

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

NATIONAL ASSOCIATION OF PSYCHIATRIC HEALTH SYSTEMS POLITICAL ACTION COMMITTEE (N-APHS/PAC)

Report Covering the Period: From: ^M04 ^D01 ^Y2005 To: ^M06 ^D30 ^Y2005

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^Y 2005		21775.34
(b) Cash on Hand at Beginning of Reporting Period	69496.41	
(c) Total Receipts (from Line 19)	13290.16	69687.84
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	82786.57	88463.18
<hr/>		
7. Total Disbursements (from Line 31)	13864.14	19538.75
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	68924.43	68924.43
<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**

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Page 3

Write or Type Committee Name

NATIONAL ASSOCIATION OF PSYCHIATRIC HEALTH SYSTEMS POLITICAL ACTION COMMITTEE (N-APHS/PAC)

Report Covering the Period: From: ^M04 ⁻01 ⁻2005 To: ^M06 ⁻30 ⁻2005

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	10500.00	35023.00
(ii) Unitemized	2765.00	31184.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))	13265.00	66207.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	450.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	13265.00	66657.00
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.)	25.16	30.84
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))	13290.16	66687.84
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	13290.16	66687.84

DETAILED SUMMARY PAGE

of Disbursements

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	864.14	1038.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	864.14	1038.75
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	13000.00	18500.00
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.....	0.00	0.00
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))..	13864.14	19538.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 31).....	13864.14	19538.75

DETAILED SUMMARY PAGE
of Disbursements

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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)	13265.00	66657.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	13265.00	66657.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	864.14	1038.75
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	864.14	1038.75

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

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

FOR LINE NUMBER: PAGE 6 / 17

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF PSYCHIATRIC HEALTH SYSTEMS POLITICAL ACTION COMMITTEE (N-APHS/PAC)

Full Name (Last, First, Middle Initial) A. Mr. Daniel Anderson		Date of Receipt M / D / Y 04 / 01 / 2005
Mailing Address 515 Camino Road		Transaction ID: SA11A1.4989
City Redondo Beach	State CA	Zip Code 90277
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Del Amo Hospital	Occupation Chief of Staff	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Mr. Jeff Barnett		Date of Receipt M / D / Y 04 / 15 / 2005
Mailing Address 104 Talon Place		Transaction ID: SA11A1.5065
City McDonough	State GA	Zip Code 30253
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer Arbour-HRI	Occupation CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Mr. William C. Bauer		Date of Receipt M / D / Y 04 / 01 / 2005
Mailing Address 600 Whitney Ranch # 25D		Transaction ID: SA11A1.5024
City Henderson	State NV	Zip Code 89014
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Spring Mountain	Occupation Medical Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	900.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 17
(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF PSYCHIATRIC HEALTH SYSTEMS POLITICAL ACTION COMMITTEE (N-APHS/PAC)

Full Name (Last, First, Middle Initial) A. Ms Linda Beridge			Date of Receipt M / D / Y Y Y Y 04 / 15 / 2005
Mailing Address 113 N. Winnebago Drive			Transaction ID: SA11A1.5067
City Lake Winnebago	State MO	Zip Code 64034	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer Two Rivers Hospital		Occupation CEO	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Dr. Jeff Borenslein			Date of Receipt M / D / Y Y Y Y 04 / 19 / 2005
Mailing Address 87-37 Palermo Street			Transaction ID: SA11A1.5070
City Holliswood	State NY	Zip Code 11423-1209	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Holliswood Hospital		Occupation CEO	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Mr. Ron Burns			Date of Receipt M / D / Y Y Y Y 04 / 21 / 2005
Mailing Address PO Box 103			Transaction ID: SA11A1.5085
City Marietta	State GA	Zip Code 30058	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Psychiatric Solutions, Inc.		Occupation VP of Operations	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

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

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ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF PSYCHIATRIC HEALTH SYSTEMS POLITICAL ACTION COMMITTEE (N-APHS/PAC)

<p>A. Full Name (Last, First, Middle Initial) Ms. Joanne Cohen</p> <p>Mailing Address 3623 33 Street</p> <hr/> <p>City San Diego State CA Zip Code 92104</p> <p>FEC ID number of contributing federal political committee. C</p>	<p>Date of Receipt M / D / Y Y Y Y 04 / 21 / 2005</p> <p>Transaction ID: SA11A1.5081</p> <hr/> <p>Amount of Each Receipt this Period 250.00</p>
<p>Name of Employer Psychiatric Solutions, In- c.</p> <p>Occupation VP of Operations</p> <p>Receipt For: Primary General Other (specify) ▼</p> <p style="text-align: right;">Aggregate Year-to-Date ▼ 250.00</p>	

<p>B. Full Name (Last, First, Middle Initial) Mr. Matt Crouch</p> <p>Mailing Address 2075 Asgard Court</p> <hr/> <p>City Atlanta State GA Zip Code 30345</p> <p>FEC ID number of contributing federal political committee. C</p>	<p>Date of Receipt M / D / Y Y Y Y 04 / 14 / 2005</p> <p>Transaction ID: SA11A1.5049</p> <hr/> <p>Amount of Each Receipt this Period 200.00</p>
<p>Name of Employer Peachford Hospital</p> <p>Occupation CEO</p> <p>Receipt For: Primary General Other (specify) ▼</p> <p style="text-align: right;">Aggregate Year-to-Date ▼ 250.00</p>	

<p>C. Full Name (Last, First, Middle Initial) Mr. Daryl Dubroca</p> <p>Mailing Address 503 Desert Summit Ct</p> <hr/> <p>City Henderson State NV Zip Code 89052</p> <p>FEC ID number of contributing federal political committee. C</p>	<p>Date of Receipt M / D / Y Y Y Y 04 / 01 / 2005</p> <p>Transaction ID: SA11A1.5030</p> <hr/> <p>Amount of Each Receipt this Period 250.00</p>
<p>Name of Employer Spring Mountain</p> <p>Occupation CEO</p> <p>Receipt For: Primary General Other (specify) ▼</p> <p style="text-align: right;">Aggregate Year-to-Date ▼ 250.00</p>	

SUBTOTAL of Receipts This Page (optional)	700.00
TOTAL This Period (last page this line number only)	

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

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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF PSYCHIATRIC HEALTH SYSTEMS POLITICAL ACTION COMMITTEE (N-APHS/PAC)

Full Name (Last, First, Middle Initial) A. Mr. Roy Edinger		Date of Receipt M / D / Y Y Y Y 04 / 14 / 2005
Mailing Address 837 Dedham Street		Transaction ID: SA11A1.5040
City Newton	State MA	Zip Code 02459
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Arbour Hospital	Occupation CEO/Regional VP	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Ms. Norma J. Ferris		Date of Receipt M / D / Y Y Y Y 04 / 01 / 2005
Mailing Address 4.89 Clearbrook Place		Transaction ID: SA11A1.5026
City Las Vegas	State NV	Zip Code 89103
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Spring Mountain	Occupation Director Clinical Services	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Mr. John D. Fletcher		Date of Receipt M / D / Y Y Y Y 04 / 14 / 2005
Mailing Address 227 Babcock Street		Transaction ID: SA11A1.5041
City Brookline	State MA	Zip Code 02448
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Arbour Hospital	Occupation CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

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

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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF PSYCHIATRIC HEALTH SYSTEMS POLITICAL ACTION COMMITTEE (N-APHS/PAC)

A. Mr. Robert Q. Kreider Full Name (Last, First, Middle Initial) Mailing Address 444 Devereux Drive City Villanova State PA Zip Code 19085		Date of Receipt M / D / Y 04 / 08 / 2005 Transaction ID: SA11A1.5032 Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Devereux Foundation Receipt For: Primary General Other (specify) ▼	Occupation President & CEO Aggregate Year-to-Date ▼ 500.00	

B. Ms. Mary L. Mastro Full Name (Last, First, Middle Initial) Mailing Address 12410 Ridge Rd City Palos Park State IL Zip Code 60464		Date of Receipt M / D / Y 05 / 03 / 2005 Transaction ID: SA11A1.5115 Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Linden Oaks Hospital Receipt For: Primary General Other (specify) ▼	Occupation President Aggregate Year-to-Date ▼ 1000.00	

C. Dr. Philip Merideth Full Name (Last, First, Middle Initial) Mailing Address 3531 Lakeland Drive Suite 1D80 City Jackson State MS Zip Code 39232		Date of Receipt M / D / Y 04 / 19 / 2005 Transaction ID: SA11A1.5088 Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Brentwood Behavioral HC of MS Receipt For: Primary General Other (specify) ▼	Occupation Medical Director Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	1750.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF PSYCHIATRIC HEALTH SYSTEMS POLITICAL ACTION COMMITTEE (N-APHS/PAC)

Full Name (Last, First, Middle Initial) A. Ms Debra K. Osteen		Date of Receipt M / D / Y 04 / 01 / 2005
Mailing Address 387 South Gulph Road		Transaction ID: SA11A1.5001
City King of Prussia	State PA	Zip Code 19406
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer The Keystone Center	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Mr. Michael G. Piecik		Date of Receipt M / D / Y 04 / 01 / 2005
Mailing Address 7916 Bridge Gate Drive		Transaction ID: SA11A1.5028
City Las Vegas	State NV	Zip Code 89128
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Spring Mountain	Occupation CFO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Mr. Bary Pipkin		Date of Receipt M / D / Y 04 / 14 / 2005
Mailing Address 105 Quapaw Trail		Transaction ID: SA11A1.5034
City Maumelle	State AZ	Zip Code 72113
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer The Bridgeway	Occupation Regional Vice President	
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)	

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF PSYCHIATRIC HEALTH SYSTEMS POLITICAL ACTION COMMITTEE (N-APHS/PAC)

Full Name (Last, First, Middle Initial) A. Mr. Joseph Pyle		Date of Receipt M / D / Y 04 / 21 / 2005
Mailing Address 4641 Roosevelt Blvd.		Transaction ID: SA11A1.5101
City Philadelphia	State PA	Zip Code 19124
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Friends Hospital	Occupation OOO	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Martin Schappel		Date of Receipt M / D / Y 04 / 14 / 2005
Mailing Address 10501 Six Mile Cypress Parkway		Transaction ID: SA11A1.5038
City Ft. Myers	State FL	Zip Code 33912
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Universal Health Services	Occupation Divison Vice President	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Martha Schell		Date of Receipt M / D / Y 04 / 21 / 2005
Mailing Address 398 Jackson Avenue		Transaction ID: SA11A1.5091
City Mandeville	State LA	Zip Code 70448
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Psychiatric Solutions, Inc.	Occupation Manager	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	

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

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

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF PSYCHIATRIC HEALTH SYSTEMS POLITICAL ACTION COMMITTEE (N-APHS/PAC)

A. Dr. Steven Sharfstein Full Name (Last, First, Middle Initial) Mailing Address 8 E. Bishops Road City State Zip Code Baltimore MD 21218		Date of Receipt M / D / Y Y Y Y 04 / 14 / 2005 Transaction ID: SA11A1.5050 Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 250.00
Name of Employer: Shepherd Pratt Health System Receipt For: Primary General Other (specify) ▼		

B. Mr. Brent Turner Full Name (Last, First, Middle Initial) Mailing Address 2001 Hunterwood Drive City State Zip Code Brentwood TN 37027		Date of Receipt M / D / Y Y Y Y 04 / 21 / 2005 Transaction ID: SA11A1.5089 Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 500.00
Name of Employer: Psychiatric Solutions, Inc. Receipt For: Primary General Other (specify) ▼		

C. Mr. David White Full Name (Last, First, Middle Initial) Mailing Address 5308 Park Ridge Road City State Zip Code Flower Mound TX 75022		Date of Receipt M / D / Y Y Y Y 04 / 21 / 2005 Transaction ID: SA11A1.5074 Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 500.00
Name of Employer: Horizon Health Beh. Health Srv Receipt For: Primary General Other (specify) ▼		

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 17
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF PSYCHIATRIC HEALTH SYSTEMS POLITICAL ACTION COMMITTEE (N-APHS/PAC)	
Full Name (Last, First, Middle Initial) A. Mr. Dick Windle	Date of Receipt 05 / 06 / 2005
Mailing Address 187 Knoll Drive	Transaction ID: SA11A1.5117
City State Zip Code Collegeville PA 19426	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C	
Name of Employer Universal Health Svcs	Occupation Director of IS
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

SUBTOTAL of Receipts This Page (optional)	▶	250.00
TOTAL This Period (last page this line number only)	▶	10500.00

**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)

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

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF PSYCHIATRIC HEALTH SYSTEMS POLITICAL ACTION COMMITTEE (N-APHS/PAC)

Full Name (Last, First, Middle Initial) A. Wachovia National Bank		Transaction ID: SB21B.5121 Date of Disbursement 04 / 30 / 2005	
Mailing Address PO Box 563966		Amount of Each Disbursement this Period 379.82	
City Charlotte	State NC	Zip Code 28262-3966	001 Category/ Type
Purpose of Disbursement Bank Fees			
Candidate Name			001 Category/ Type
Office Sought:	House Senate President	Disbursement For: Primary General Other (specify) ▼	
State:	District		

Full Name (Last, First, Middle Initial) B. Wachovia National Bank		Transaction ID: SB21B.5122 Date of Disbursement 05 / 31 / 2005	
Mailing Address PO Box 563966		Amount of Each Disbursement this Period 211.45	
City Charlotte	State NC	Zip Code 28262-3966	001 Category/ Type
Purpose of Disbursement Bank Fees			
Candidate Name			001 Category/ Type
Office Sought:	House Senate President	Disbursement For: Primary General Other (specify) ▼	
State:	District		

Full Name (Last, First, Middle Initial) C. Wachovia National Bank		Transaction ID: SB21B.5123 Date of Disbursement 06 / 30 / 2005	
Mailing Address PO Box 563966		Amount of Each Disbursement this Period 272.87	
City Charlotte	State NC	Zip Code 28262-3966	001 Category/ Type
Purpose of Disbursement Bank Fees			
Candidate Name			001 Category/ Type
Office Sought:	House Senate President	Disbursement For: Primary General Other (specify) ▼	
State:	District		

SUBTOTAL of Disbursements This Page (optional)	864.14
TOTAL This Period (last page this line number only)	864.14

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF PSYCHIATRIC HEALTH SYSTEMS POLITICAL ACTION COMMITTEE (N-APHS/PAC)

Full Name (Last, First, Middle Initial) A. CHAFEE FOR SENATE		Transaction ID: SB23.5142 Date of Disbursement 05 / 25 / 2005	
Mailing Address PO BOX 7329		Amount of Each Disbursement this Period 1000.00	
City WARWICK State RI Zip Code 02887	Purpose of Disbursement Fundraiser	011 Category/ Type	
Candidate Name LINCOLN D CHAFEE		Disbursement For: 2006 X Primary General	
Office Sought: House X Senate President	Other (specify) ▼		
State: RI District: D0			

Full Name (Last, First, Middle Initial) B. COMMITTEE FOR THE PRESERVATION OF CAPITALISM (CPC), THE		Transaction ID: SB23.5132 Date of Disbursement 05 / 29 / 2005	
Mailing Address P.O. Box 65314		Amount of Each Disbursement this Period 3000.00	
City Washington State DC Zip Code 20036	Purpose of Disbursement Donation	012 Category/ Type	
Candidate Name		Disbursement For: 2006 Primary General	
Office Sought: House Senate President	Other (specify) ▼		
State: District			

Full Name (Last, First, Middle Initial) C. THE CONGRESSMAN JOE BARTON		Transaction ID: SB23.5149 Date of Disbursement 04 / 27 / 2005	
Mailing Address P.O. Box 1444		Amount of Each Disbursement this Period 2000.00	
City Ennis State TX Zip Code 75120	Purpose of Disbursement Fundraiser	011 Category/ Type	
Candidate Name JOE L BARTON		Disbursement For: 2006 X Primary General	
Office Sought: X House Senate President	Other (specify) ▼		
State: TX District: 06			

SUBTOTAL of Disbursements This Page (optional) ► **6000.00**

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

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
NATIONAL ASSOCIATION OF PSYCHIATRIC HEALTH SYSTEMS POLITICAL ACTION COMMITTEE (N-APHS/PAC)

Full Name (Last, First, Middle Initial) A. JON KYL		Transaction ID: SB23.5178 Date of Disbursement 05 / 11 / 2005	
Mailing Address 4442 E CAMELBACK #180		Amount of Each Disbursement this Period 1000.00	
City PHOENIX	State AZ	Zip Code 85018	011 Category/ Type
Purpose of Disbursement Fundraiser			
Candidate Name JON KYL			
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: AZ	District: D0		

Full Name (Last, First, Middle Initial) B. NATHAN DEAL FOR CONGRESS		Transaction ID: SB23.5172 Date of Disbursement 06 / 28 / 2005	
Mailing Address PO BOX 902 PO BOX 902		Amount of Each Disbursement this Period 4000.00	
City GAINESVILLE	State GA	Zip Code 30503	011 Category/ Type
Purpose of Disbursement Fundraiser			
Candidate Name NATHAN DEAL			
Office Sought: <input checked="" type="checkbox"/> House Senate President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: GA	District: 10		

Full Name (Last, First, Middle Initial) C. SANTORUM 2006		Transaction ID: SB23.5140 Date of Disbursement 05 / 18 / 2005	
Mailing Address ONE TOWER BRIDGE SUITE 1440		Amount of Each Disbursement this Period 2000.00	
City WEST CONSHOHOCKEN	State PA	Zip Code 19428	011 Category/ Type
Purpose of Disbursement Fundraiser			
Candidate Name RICHARD J SANTORUM			
Office Sought: House <input checked="" type="checkbox"/> Senate President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary General Other (specify) ▼		
State: PA	District: 00		

SUBTOTAL of Disbursements This Page (optional)	7000.00
TOTAL This Period (last page this line number only)	13000.00