

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 FEDERATION OF AMERICAN HOSPITALS PAC

ADDRESS (number and street) 750 9th Street NW Suite 600 WASHINGTON DC 20001 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00002261 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special. Election on: M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 03 01 2012 through 03 31 2012

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 Mrs. Karen Conwell Smith

Signature of Treasurer Mrs. Karen Conwell Smith [Electronically Filed] Date 04 20 2012

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

FEDERATION OF AMERICAN HOSPITALS PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="6840.78"/>	<input type="text" value="6840.78"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="27667.66"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="74097.44"/>	<input type="text" value="105948.27"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="101765.10"/>	<input type="text" value="112789.05"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="52545.00"/>	<input type="text" value="63568.95"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="49220.10"/>	<input type="text" value="49220.10"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

FEDERATION OF AMERICAN HOSPITALS PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	68393.44	78697.54
(ii) Unitemized	159.00	1181.78
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	68552.44	79879.32
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	20000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	68552.44	99879.32
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.....	5500.00	5500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	45.00	568.95
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	74097.44	105948.27
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	74097.44	105948.27

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) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	52500.00	63000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	45.00	568.95
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	52545.00	63568.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	52545.00	63568.95

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)	68552.44	99879.32
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	68552.44	99879.32
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
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	0.00

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

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

FOR LINE NUMBER: PAGE 6 OF 42
(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

A. Stephen E Corbeil
Full Name (Last, First, Middle Initial)
Mailing Address 2063 Kingspointe Drive
City Chesterfield State MO Zip Code 63005-4484
FEC ID number of contributing federal political committee. **C**
Name of Employer HCA, Inc. Occupation President - Midwest Division
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 03 / 14 / 2012
Transaction ID : 44779767
Amount of Each Receipt this Period 1500.00

B. Mr. Ken Roth
Full Name (Last, First, Middle Initial)
Mailing Address 131 Blue Ridge Drive
City Hendersonville State TN Zip Code 37075-2666
FEC ID number of contributing federal political committee. **C**
Name of Employer HCA, Inc. Occupation AVP - Finance
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 14 / 2012
Transaction ID : 44779768
Amount of Each Receipt this Period 250.00

C. Mark J Eddy
Full Name (Last, First, Middle Initial)
Mailing Address 413 Benton Lane
City Franklin State TN Zip Code 37067
FEC ID number of contributing federal political committee. **C**
Name of Employer HCA, Inc. Occupation VP Internal Audit
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 14 / 2012
Transaction ID : 44779769
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2250.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 7 OF 42
(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. Russell K Harms

Mailing Address 1130 Frenchtown Lane

City State Zip Code
Franklin TN 37067

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

Name of Employer Occupation
HCA, Inc. Healthcare Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2012
Transaction ID : 44779770

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
B. Mr. Neil W. Kunkel

Mailing Address 300 Jackson Blvd.

City State Zip Code
Nashville TN 37205-3335

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

Name of Employer Occupation
Capella Healthcare Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
667.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2012
Transaction ID : 44779771

Amount of Each Receipt this Period
667.00

Full Name (Last, First, Middle Initial)
C. Mr. Andrew Slusser

Mailing Address 9218 Concord Road

City State Zip Code
Brentwood TN 37027-7407

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

Name of Employer Occupation
Capella Healthcare Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
667.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 14 / 2012
Transaction ID : 44779772

Amount of Each Receipt this Period
667.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3834.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 42
(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. Mr. Erik Swensson

Mailing Address 4820 NW High Heaven Road

City State Zip Code
McMinnville OR 97128-8032

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

Name of Employer Occupation
Capella Healthcare Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
667.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2012
Transaction ID : 44779773

Amount of Each Receipt this Period
667.00

Full Name (Last, First, Middle Initial)
B. Ms. Denise Warren

Mailing Address 4943 Tyne Valley Blvd.

City State Zip Code
Nashville TN 37220-1531

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

Name of Employer Occupation
Capella Healthcare Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
667.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2012
Transaction ID : 44779774

Amount of Each Receipt this Period
667.00

Full Name (Last, First, Middle Initial)
C. Mr. Daniel S. Slipkovich

Mailing Address 133 Steeplechase Lane

City State Zip Code
Nashville TN 37221-4311

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

Name of Employer Occupation
Capella Healthcare Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
667.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 14 / 2012
Transaction ID : 44779775

Amount of Each Receipt this Period
667.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2001.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 42
<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. Samuel J Coulter

Mailing Address 9538 Butler Drive

City State Zip Code
Brentwood TN 37027

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

Name of Employer Occupation
HCA, Inc. Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2012

Transaction ID : 44779776

Amount of Each Receipt this Period
500.00

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

Mailing Address 2909 Westmoreland Drive

City State Zip Code
Nashville TN 37212-4716

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

Name of Employer Occupation
HCA, Inc. AVP, Ethics and Compliance Program Dev

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2012

Transaction ID : 44779777

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Ms. Connie Glover

Mailing Address 1041 Weston Court

City State Zip Code
Brentwood TN 37027

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

Name of Employer Occupation
HCA, Inc. Vice President, Internal Audit

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2012

Transaction ID : 44779778

Amount of Each Receipt this Period
500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Full Name (Last, First, Middle Initial) A. William Paul Rutledge		Date of Receipt MM / DD / YYYY 03 / 14 / 2012 Transaction ID : 44779779
Mailing Address 9156 Saddlebow Drive		Amount of Each Receipt this Period 3000.00
City Brentwood	State TN	Zip Code 37027
FEC ID number of contributing federal political committee. C		
Name of Employer HCA, Inc.	Occupation Group President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) B. Mr. Steven N. Squires		Date of Receipt MM / DD / YYYY 03 / 14 / 2012 Transaction ID : 44779780
Mailing Address 125 S. Buteo Woods Lane		Amount of Each Receipt this Period 500.00
City Las Vegas	State NV	Zip Code 89144-4352
FEC ID number of contributing federal political committee. C		
Name of Employer HCA, Inc.	Occupation Division Chief Financial Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Mr. William Carver		Date of Receipt MM / DD / YYYY 03 / 14 / 2012 Transaction ID : 44779781
Mailing Address 101 Saddlebridge Lane		Amount of Each Receipt this Period 250.00
City Franklin	State TN	Zip Code 37069-4323
FEC ID number of contributing federal political committee. C		
Name of Employer HCA, Inc.	Occupation AVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	3750.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 42
<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. Donald W Stinnett		Date of Receipt MM / DD / YYYY 03 / 14 / 2012 Transaction ID : 44779782
Mailing Address 2520 Waterstone Drive		Amount of Each Receipt this Period 2500.00
City Franklin	State TN	Zip Code 37069
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer HCA, Inc.	Occupation Division CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. Donald Street Jr.		Date of Receipt MM / DD / YYYY 03 / 14 / 2012 Transaction ID : 44779783
Mailing Address 7913 Saddle Ridge Trace		Amount of Each Receipt this Period 500.00
City Nashville	State TN	Zip Code 37221
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer HCA, Inc.	Occupation Chief Accounting Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Mr. Richard M. Bracken		Date of Receipt MM / DD / YYYY 03 / 14 / 2012 Transaction ID : 44779784
Mailing Address 920 Tyne Blvd.		Amount of Each Receipt this Period 5000.00
City Nashville	State TN	Zip Code 37220
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer HCA, Inc.	Occupation President & Chief Operating Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional).....▶	8000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 42
<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

A. Gregory W Beasley
Full Name (Last, First, Middle Initial)

Mailing Address 6314 Northwood Road

City Dallas State TX Zip Code 75225-2823

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

Name of Employer HCA, Inc. Occupation Healthcare Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 03 / 14 / 2012
Transaction ID : 44779785

Amount of Each Receipt this Period 750.00

B. Mr. Alan R. Yuspeh
Full Name (Last, First, Middle Initial)

Mailing Address 126 Third Avenue North

City Franklin State TN Zip Code 37064

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

Name of Employer HCA, Inc. Occupation SVP and Chief Ethics and Compliance Of

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 23 / 2012
Transaction ID : 44779787

Amount of Each Receipt this Period 2500.00

C. Ms. Kim Hatley
Full Name (Last, First, Middle Initial)

Mailing Address 404 Briksbury Drive

City Franklin State TN Zip Code 37067-5004

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

Name of Employer HCA, Inc. Occupation AVP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 23 / 2012
Transaction ID : 44779788

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3750.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<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. Ms. Cathy Florek		Date of Receipt MM / DD / YYYY 03 / 23 / 2012 Transaction ID : 44779789
Mailing Address 6116 Stonehaven Drive		Amount of Each Receipt this Period 250.00
City Nashville	State TN	Zip Code 37215-5614
FEC ID number of contributing federal political committee. C		
Name of Employer HCA, Inc.	Occupation AVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. A. Bruce Moore Jr.		Date of Receipt MM / DD / YYYY 03 / 23 / 2012 Transaction ID : 44779790
Mailing Address 2105 Golf Club Lane		Amount of Each Receipt this Period 3000.00
City Nashville	State TN	Zip Code 37215
FEC ID number of contributing federal political committee. C		
Name of Employer HCA, Inc.	Occupation COO & SVP Outpatient Services	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) C. Ms. Sandra L. Morgan		Date of Receipt MM / DD / YYYY 03 / 23 / 2012 Transaction ID : 44779791
Mailing Address 105 Clarendon Ave.		Amount of Each Receipt this Period 500.00
City Nashville	State TN	Zip Code 37205-3301
FEC ID number of contributing federal political committee. C		
Name of Employer HCA, Inc.	Occupation VP, Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	3750.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 42
<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. Mr. Jerry Rooker		Date of Receipt MM / DD / YYYY 03 / 23 / 2012 Transaction ID : 44779793
Mailing Address 338 Gillette Drive		Amount of Each Receipt this Period 250.00
City Franklin	State TN	Zip Code 37069
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer HCA, Inc.	Occupation Eastern Group Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Ms. Janet Gilmore		Date of Receipt MM / DD / YYYY 03 / 23 / 2012 Transaction ID : 44779794
Mailing Address 3410 Marlborough Ave.		Amount of Each Receipt this Period 500.00
City Nashville	State TN	Zip Code 37212-3202
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer HCA, Inc.	Occupation AVP, HR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Mr. Thomas G. Morris		Date of Receipt MM / DD / YYYY 03 / 23 / 2012 Transaction ID : 44779795
Mailing Address 1672 Highfield Lane		Amount of Each Receipt this Period 250.00
City Brentwood	State TN	Zip Code 37027-3318
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer HCA, Inc.	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

Mailing Address 4008 Nestledown Drive

City State Zip Code
Franklin TN 37067-7804

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

Name of Employer Occupation
HCA, Inc. VP, Behavioral Health Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 23 / 2012
Transaction ID : 44779796

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Michael P Joyce

Mailing Address 6955 Laurel Oak Drive

City State Zip Code
Suwanee GA 30024-5353

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

Name of Employer Occupation
HCA, Inc. Division President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
03 / 23 / 2012
Transaction ID : 44779797

Amount of Each Receipt this Period
1500.00

Full Name (Last, First, Middle Initial)
C. Greg D'Argonne

Mailing Address 28 Lark Bunting Lane

City State Zip Code
Littleton CO 80127-5778

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

Name of Employer Occupation
HCA, Inc. Division CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 23 / 2012
Transaction ID : 44779798

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 OF 42
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

A. Mr. Gregg Stanley
Full Name (Last, First, Middle Initial)

Mailing Address 849 Abington Way

City Franklin State TN Zip Code 37069-7161

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

Name of Employer HCA, Inc. Occupation VP-Rehab Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2012

Transaction ID : 44779799

Amount of Each Receipt this Period
 500.00

B. Steven E Clifton
Full Name (Last, First, Middle Initial)

Mailing Address 6205 Milbrook Road

City Brentwood State TN Zip Code 37027-4911

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

Name of Employer HCA, Inc. Occupation VP-Legal Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2012

Transaction ID : 44779800

Amount of Each Receipt this Period
 500.00

C. Ms. Karen Mason
Full Name (Last, First, Middle Initial)

Mailing Address 5457 Vanderbilt Road

City Old Hickory State TN Zip Code 37138-1131

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

Name of Employer HCA, Inc. Occupation Controller, AVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2012

Transaction ID : 44779801

Amount of Each Receipt this Period
 250.00

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 OF 42
(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. Samuel N Hazen

Mailing Address 1205 Waterstone Boulevard

City State Zip Code
Franklin TN 37069

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 23 / 2012

Transaction ID : 44779802

Amount of Each Receipt this Period
4000.00

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

Mailing Address 1934 Old Hickory Blvd

City State Zip Code
Brentwood TN 37027

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

Name of Employer Occupation
HCA, Inc. Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 23 / 2012

Transaction ID : 44779803

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Mr. Patrick L. Patterson

Mailing Address 2233 W. 124th Street

City State Zip Code
Leawood KS 66209-1305

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

Name of Employer Occupation
HCA, Inc. Regional VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 23 / 2012

Transaction ID : 44779804

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 4750.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 42
<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. Margaret G Lewis		Date of Receipt MM / DD / YYYY 03 / 23 / 2012 Transaction ID : 44779805
Mailing Address 1830 Fountain Drive Apt. 1203		Amount of Each Receipt this Period 2500.00
City Reston	State VA	
Zip Code 20190		Aggregate Year-to-Date ▼ 2500.00
FEC ID number of contributing federal political committee. C		
Name of Employer HCA, Inc.	Occupation Healthcare Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Lisa Wiechart		Date of Receipt MM / DD / YYYY 03 / 23 / 2012 Transaction ID : 44779806
Mailing Address 2204 Grey Cliff Drive		Amount of Each Receipt this Period 667.00
City Franklin	State TN	
Zip Code 37064-5223		Aggregate Year-to-Date ▼ 667.00
FEC ID number of contributing federal political committee. C		
Name of Employer Capella Healthcare	Occupation Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Eric Ward		Date of Receipt MM / DD / YYYY 03 / 23 / 2012 Transaction ID : 44779851
Mailing Address 9634 Millford Court		Amount of Each Receipt this Period 750.00
City Brentwood	State TN	
Zip Code 37027		Aggregate Year-to-Date ▼ 750.00
FEC ID number of contributing federal political committee. C		
Name of Employer HCA, Inc.	Occupation CEO-Financial Services Division	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	3917.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 42
<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. Mr. James C. Scoggin Jr.		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 23 / 2012 Transaction ID : 44779852
Mailing Address 4762 Byron Circle		Amount of Each Receipt this Period 1500.00
City Irving	State TX	Zip Code 75078
FEC ID number of contributing federal political committee. C		
Name of Employer HCA North Texas	Occupation Division President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) B. Mr. Joseph Haase		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 23 / 2012 Transaction ID : 44779853
Mailing Address 9221 Fox Run Drive		Amount of Each Receipt this Period 500.00
City Brentwood	State TN	Zip Code 37027-7443
FEC ID number of contributing federal political committee. C		
Name of Employer HCA, Inc.	Occupation VP, Risk Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. David Tropauer		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 23 / 2012 Transaction ID : 44779854
Mailing Address 241 Poteat Place		Amount of Each Receipt this Period 500.00
City Franklin	State TN	Zip Code 37064-2041
FEC ID number of contributing federal political committee. C		
Name of Employer HCA, Inc.	Occupation Controller, Eastern Group Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
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 20 OF 42
(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. Joe N Steakley			Date of Receipt <table border="1" style="width:100%; text-align:center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table> Transaction ID : 44779855			M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	3		2	0	1	2
M	M	/	D	D	/	Y	Y	Y	Y																
0	3		2	3		2	0	1	2																
Mailing Address 1012 Tyne Blvd.			Amount of Each Receipt this Period <table border="1" style="width:100%; text-align:right;"> <tr> <td>2500.00</td> </tr> </table>			2500.00																			
2500.00																									
City Nashville	State TN	Zip Code 37220-1027																							
FEC ID number of contributing federal political committee. C																									
Name of Employer HCA, Inc.		Occupation SVP-Internal Audit Services																							
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1" style="width:100%; text-align:right;"> <tr> <td>2500.00</td> </tr> </table>				2500.00																			
2500.00																									

Full Name (Last, First, Middle Initial) B. Mr. Clint Jennings			Date of Receipt <table border="1" style="width:100%; text-align:center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table> Transaction ID : 44779856			M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	3		2	0	1	2
M	M	/	D	D	/	Y	Y	Y	Y																
0	3		2	3		2	0	1	2																
Mailing Address 17454 Nashville Hwy.			Amount of Each Receipt this Period <table border="1" style="width:100%; text-align:right;"> <tr> <td>250.00</td> </tr> </table>			250.00																			
250.00																									
City Buffalo Valley	State TN	Zip Code 38548-5329																							
FEC ID number of contributing federal political committee. C																									
Name of Employer HCA, Inc.		Occupation AVP																							
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1" style="width:100%; text-align:right;"> <tr> <td>250.00</td> </tr> </table>				250.00																			
250.00																									

Full Name (Last, First, Middle Initial) C. Mr. Frederick Lee Adams			Date of Receipt <table border="1" style="width:100%; text-align:center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>2</td> </tr> </table> Transaction ID : 44779857			M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	3		2	0	1	2
M	M	/	D	D	/	Y	Y	Y	Y																
0	3		2	3		2	0	1	2																
Mailing Address 3600 Bellwood			Amount of Each Receipt this Period <table border="1" style="width:100%; text-align:right;"> <tr> <td>500.00</td> </tr> </table>			500.00																			
500.00																									
City Nashville	State TN	Zip Code 37205																							
FEC ID number of contributing federal political committee. C																									
Name of Employer HCA, Inc.		Occupation VP - Service Delivery																							
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1" style="width:100%; text-align:right;"> <tr> <td>500.00</td> </tr> </table>				500.00																			
500.00																									

SUBTOTAL of Receipts This Page (optional).....▶	<table border="1" style="width:100%; text-align:right;"> <tr> <td>3250.00</td> </tr> </table>	3250.00
3250.00		
TOTAL This Period (last page this line number only).....▶	<table border="1" style="width:100%; text-align:right;"> <tr> <td> </td> </tr> </table>	

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

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

FOR LINE NUMBER: PAGE 21 OF 42
(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. Mr. Stephen Horner

Mailing Address 1600 Masters Court

City State Zip Code
Franklin TN 37064-9693

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

Name of Employer Occupation
HCA, Inc. VP, Clinical Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2012
Transaction ID : 44779858

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Mr. Mitch Tibbitts

Mailing Address 1017 Whisperwood Cove

City State Zip Code
Kaysville UT 84037-2835

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

Name of Employer Occupation
HCA Mountain Division CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2012
Transaction ID : 44779859

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
c. Mr. David Gragg

Mailing Address 101 Pineywood Acres

City State Zip Code
Madison TN 37115-5709

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

Name of Employer Occupation
HCA, Inc. Accountant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2012
Transaction ID : 44779860

Amount of Each Receipt this Period
250.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Mr. Thomas O. Corley
 Full Name (Last, First, Middle Initial)
 Mailing Address 1300 Bentley Ct.
 City Southlake State TX Zip Code 76092
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HCA, Inc. Occupation Chief Financial Officer, North Texas D
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 23 / 2012
Transaction ID : 44779861
 Amount of Each Receipt this Period 500.00

B. Ms. Bonnie S. Reid
 Full Name (Last, First, Middle Initial)
 Mailing Address 2262 Scott Drive
 City Franklin State TN Zip Code 37067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HCA, Inc. Occupation VP of Reimbursement
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 23 / 2012
Transaction ID : 44779862
 Amount of Each Receipt this Period 500.00

C. Jonathan H Ray
 Full Name (Last, First, Middle Initial)
 Mailing Address 6002 Belle Rive Drive
 City Brentwood State TN Zip Code 37027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HCA, Inc. Occupation Healthcare Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 23 / 2012
Transaction ID : 44779863
 Amount of Each Receipt this Period 250.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 42
<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. Mr. George A. Hays

Mailing Address 1052 Beech Tree Lane

City State Zip Code
Brentwood TN 37027-7642

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

Name of Employer Occupation
HCA, Inc. AVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
03 / 23 / 2012
Transaction ID : 44779864

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Jayne Chambers

Mailing Address 1256 Kensington Rd

City State Zip Code
McLean VA 22101

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

Name of Employer Occupation
FAH Vice President Legislation & Public Af

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
326.00

Date of Receipt
03 / 15 / 2012
Transaction ID : 44779866

Amount of Each Receipt this Period
80.00

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

Mailing Address 4927 15th Street, North

City State Zip Code
Arlington VA 22205-2616

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

Name of Employer Occupation
FAH Lobbyist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
03 / 15 / 2012
Transaction ID : 44779867

Amount of Each Receipt this Period
42.00

SUBTOTAL of Receipts This Page (optional).....▶	372.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Charles N. Kahn III
 Full Name (Last, First, Middle Initial)
 Mailing Address 4545 N Glebe Road
 City Arlington State VA Zip Code 22207-4848
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FAH Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.35

Date of Receipt 03 / 15 / 2012
Transaction ID : 44779868
 Amount of Each Receipt this Period 41.67

B. Jeffrey G. Micklos
 Full Name (Last, First, Middle Initial)
 Mailing Address 3130 Tennyson St., N.W.
 City Washington State DC Zip Code 20015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FAH Occupation General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 03 / 15 / 2012
Transaction ID : 44779870
 Amount of Each Receipt this Period 55.00

c. Mr. Steve Speil
 Full Name (Last, First, Middle Initial)
 Mailing Address 1948 Rockingham Street
 City McLean State VA Zip Code 22101-4922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FAH Occupation Chief Financial Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 422.75

Date of Receipt 03 / 15 / 2012
Transaction ID : 44779871
 Amount of Each Receipt this Period 84.55

SUBTOTAL of Receipts This Page (optional).....▶ 181.22
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Ms. Tammy L. Culpepper
 Full Name (Last, First, Middle Initial)
 Mailing Address 206 West Meade Drive
 City Nashville State TN Zip Code 37205-3510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HCA, Inc. Occupation AVP - Corporate Accounting
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 30 / 2012
Transaction ID : 44806670
 Amount of Each Receipt this Period 250.00

B. Mr. Darrel M. Mogilles
 Full Name (Last, First, Middle Initial)
 Mailing Address 1655 Brentwood Pointe
 City Franklin State TN Zip Code 37067-4605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HCA, Inc. Occupation AVP, Supply Chain
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 30 / 2012
Transaction ID : 44806671
 Amount of Each Receipt this Period 250.00

C. William L Francis
 Full Name (Last, First, Middle Initial)
 Mailing Address 314 Deerwood Lane
 City Brentwood State TN Zip Code 37027-8692
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HCA, Inc. Occupation Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 30 / 2012
Transaction ID : 44806672
 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
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 26 OF 42
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

A. Mr. Rodney V. Bennett
 Full Name (Last, First, Middle Initial)
 Mailing Address 5720 Traceside Drive
 City Nashville State TN Zip Code 37221-4016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HCA, Inc. Occupation AVP, Internal Audit
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2012
Transaction ID : 44806673
 Amount of Each Receipt this Period
 250.00

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

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2012
Transaction ID : 44806674
 Amount of Each Receipt this Period
 2500.00

C. Maura Walsh
 Full Name (Last, First, Middle Initial)
 Mailing Address 3314 Plumb Street
 City Houston State TX Zip Code 77005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HCA, Inc. Occupation President-Gulf Coast Division
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 30 / 2012
Transaction ID : 44806675
 Amount of Each Receipt this Period
 1500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 4250.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 42
<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. Sandra J Metzler		Date of Receipt
Mailing Address 6573 Rolling Fork Drive		<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City State Zip Code Nashville TN 37205		Transaction ID : 44806676
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="500.00"/>
Name of Employer HCA, Inc.	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) B. Charles J Hall		Date of Receipt
Mailing Address 2658 Millstone Plantation Road		<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City State Zip Code Tallahassee FL 32312		Transaction ID : 44806677
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="3000.00"/>
Name of Employer HCA, Inc.	Occupation Division President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="3000.00"/>	

Full Name (Last, First, Middle Initial) C. Ms. Brenda J. Smith		Date of Receipt
Mailing Address 718 Pearre Springs Way		<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2012"/>
City State Zip Code Franklin TN 37064-4844		Transaction ID : 44806678
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer HCA, Inc.	Occupation AVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="3750.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 28 OF 42
<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

A. David G Anderson
Full Name (Last, First, Middle Initial)

Mailing Address 1057 Vaughn Crest Drive

City Franklin	State TN	Zip Code 37069
------------------	-------------	-------------------

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

Name of Employer HCA, Inc.	Occupation SVP Finance & Treasurer
-------------------------------	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2012

Transaction ID : 44806679

Amount of Each Receipt this Period
2500.00

B. Ms. Sylvia Young
Full Name (Last, First, Middle Initial)

Mailing Address 9513 Verlaine Court

City Las Vegas	State NV	Zip Code 89145
-------------------	-------------	-------------------

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

Name of Employer Sunrise Health	Occupation CEO
------------------------------------	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2012

Transaction ID : 44806680

Amount of Each Receipt this Period
1000.00

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

Mailing Address 12518 South Bear Club Circle

City Draper	State UT	Zip Code 84020
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2012

Transaction ID : 44806681

Amount of Each Receipt this Period
1500.00

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 29 OF 42
(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. Jayne Chambers

Mailing Address 1256 Kensington Rd

City State Zip Code
McLean VA 22101

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

Name of Employer Occupation
FAH Vice President Legislation & Public Af

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
406.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2012
Transaction ID : 44806739

Amount of Each Receipt this Period
80.00

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

Mailing Address 4927 15th Street, North

City State Zip Code
Arlington VA 22205-2616

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

Name of Employer Occupation
FAH Lobbyist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2012
Transaction ID : 44806740

Amount of Each Receipt this Period
42.00

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

Mailing Address 4545 N Glebe Road

City State Zip Code
Arlington VA 22207-4848

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

Name of Employer Occupation
FAH President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.02

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2012
Transaction ID : 44806741

Amount of Each Receipt this Period
41.67

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

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

Mailing Address 14128 Burlingame Road

City Little Rock State AR Zip Code 72211

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

Name of Employer FAH Occupation SVP Administrative Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2012

Transaction ID : 44806742

Amount of Each Receipt this Period
35.00

Full Name (Last, First, Middle Initial)
B. Jeffrey G. Micklos

Mailing Address 3130 Tennyson St., N.W.

City Washington State DC Zip Code 20015

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

Name of Employer FAH Occupation General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2012

Transaction ID : 44806743

Amount of Each Receipt this Period
55.00

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

Mailing Address 1948 Rockingham Street

City McLean State VA Zip Code 22101-4922

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

Name of Employer FAH Occupation Chief Financial Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **507.30**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2012

Transaction ID : 44806744

Amount of Each Receipt this Period
84.55

SUBTOTAL of Receipts This Page (optional)..... **174.55**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 42
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Mr. Blake Watt
Full Name (Last, First, Middle Initial)

Mailing Address 9452 Ashford Place

City State Zip Code
Brentwood TN 37027-8717

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

Name of Employer Occupation
HCA, Inc. Sr. Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
03 / 30 / 2012
Transaction ID : 44806746

Amount of Each Receipt this Period
250.00

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

Mailing Address 117 Newton Nook

City State Zip Code
Brentwood TN 37027

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

Name of Employer Occupation
HCA, Inc. Chief Financial Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
03 / 30 / 2012
Transaction ID : 44806747

Amount of Each Receipt this Period
250.00

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

Mailing Address 1701 Wilson Pk

City State Zip Code
Brentwood TN 37027

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 30 / 2012
Transaction ID : 44806748

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

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 32 OF 42
(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. Mr. Joe Roddy

Mailing Address 468 Wire Grass Lane

City State Zip Code
Franklin TN 37064-8645

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

Name of Employer Occupation
HCA, Inc. VP

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2012
Transaction ID : 44806749

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Dee Anna Smith

Mailing Address 1826 Grey Pointe Drive

City State Zip Code
Brentwood TN 37027

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

Name of Employer Occupation
Sarah Cannon Research Institute, LLC CEO

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2012
Transaction ID : 44806750

Amount of Each Receipt this Period
750.00

Full Name (Last, First, Middle Initial)
C. Mr. Brian Weldy

Mailing Address 114 Wilshire Drive

City State Zip Code
Franklin TN 37064-0766

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

Name of Employer Occupation
HCA, Inc. VP Engineering

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 30 / 2012
Transaction ID : 44806751

Amount of Each Receipt this Period
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

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

FOR LINE NUMBER: PAGE 33 OF 42
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Full Name (Last, First, Middle Initial)
A. Ms. Susan Goodwin

Mailing Address 4933 Tulip Grove Lane

City State Zip Code
Hermitage TN 37076-4418

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

Name of Employer Occupation
HCA, Inc. AVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 30 / 2012
Transaction ID : 44806752

Amount of Each Receipt this Period
250.00

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

Mailing Address 1809 Legacy Cove Lane

City State Zip Code
Brentwood TN 37027-3826

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

Name of Employer Occupation
HCA, Inc. VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 30 / 2012
Transaction ID : 44806753

Amount of Each Receipt this Period
250.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	68393.44

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

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

FOR LINE NUMBER: PAGE 34 OF 42
(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. Federation of American Hospitals - FEE REIMBURSEME

Mailing Address 801 Pennsylvania Ave., NW
Suite 245

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
568.95

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2012
Transaction ID : 44806685

Amount of Each Receipt this Period
45.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	45.00
TOTAL This Period (last page this line number only).....▶	45.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 35 OF 42
<input 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 checked="" type="checkbox"/> 16
			<input type="checkbox"/> 17

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

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

A. Snowe For Senate
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 2006
 City Portland State ME Zip Code 04104
 FEC ID number of contributing federal political committee. **C** C00291955
 Name of Employer Occupation
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2012
Transaction ID : 44806682
 Amount of Each Receipt this Period
 500.00

B. Nelson for U.S. Senate
 Full Name (Last, First, Middle Initial)
 Mailing Address P O Box 8666
 City Omaha State NE Zip Code 68103
 FEC ID number of contributing federal political committee. **C** C00368209
 Name of Employer Occupation
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2012
Transaction ID : 44806684
 Amount of Each Receipt this Period
 5000.00

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	5500.00
TOTAL This Period (last page this line number only).....▶	5500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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. We the People PAC

Mailing Address 38 Ivy Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 12 / 2012

Transaction ID : 44562070

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. John Lewis For Congress

Mailing Address PO Box 2323
Suite 5300

City Atlanta State GA Zip Code 30301

Purpose of Disbursement

011

Candidate Name

Rep. John Lewis

Category/
Type

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify) ▼

State: GA District: 05

Date of Disbursement

MM / DD / YYYY
03 / 12 / 2012

Transaction ID : 44562072

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Friends Of Sherrod Brown

Mailing Address PO Box 76187
Suite 800

City Washington State DC Zip Code 20013

Purpose of Disbursement

011

Candidate Name

Sen. Sherrod Brown

Category/
Type

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify) ▼

State: OH District:

Date of Disbursement

MM / DD / YYYY
03 / 12 / 2012

Transaction ID : 44562073

Amount of Each Disbursement this Period

2500.00

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)

<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

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. Pete Stark Re-Election Committee

Mailing Address P.O. Box 8331

City State Zip Code
Fremont CA 94537

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Fortney Peter Stark

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		12		2012

Transaction ID : 44562075

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Nancy Pelosi For Congress

Mailing Address 607 14th Street, Nw
Suite 800

City State Zip Code
Washington DC 20005

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Nancy Pelosi

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		12		2012

Transaction ID : 44562088

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. National Republican Congressional Committee

Mailing Address 320 First Street, S.E.

City State Zip Code
Washington DC 20003

Purpose of Disbursement

011

Category/
Type

Candidate Name

National Republican Congressional Committee

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		12		2012

Transaction ID : 44562089

Amount of Each Disbursement this Period

5000.00

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

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

10000.00

--

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

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

FOR LINE NUMBER:
(check only one)

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

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. Hoyer For Congress

Mailing Address 607 14th Street, Nw
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Steny H. Hoyer

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MD District: 05

Date of Disbursement

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

Transaction ID : 44562106

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

B. Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street, S.E.

City Washington State DC Zip Code 20003

Purpose of Disbursement

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : 44786415

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

C. Friends Of Scott Desjarlais

Mailing Address PO Box 311

City Jasper State TN Zip Code 37347

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Scott Desjarlais

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: TN District: 04

Date of Disbursement

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

Transaction ID : 44786416

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

1	1	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

1	1	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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. Ted Deutch For Congress Committee

Mailing Address 1050 17th St, Nw, Ste 590

City Washington State DC Zip Code 20036

Purpose of Disbursement

011

Candidate Name

Rep. Ted Deutch

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: FL District: 19

Date of Disbursement

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

Transaction ID : 44786417

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

B. Democrats Win Seats PAC

Mailing Address P.O. Box 1756

City Hallandale Beach State FL Zip Code 33008

Purpose of Disbursement

011

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : 44786419

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

C. Mccaskill For Missouri 2012

Mailing Address 607 14th Street Nw Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement

011

Candidate Name

Sen. Claire McCaskill

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MO District:

Date of Disbursement

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

Transaction ID : 44786426

Amount of Each Disbursement this Period

4	5	0	0	.	0	0
---	---	---	---	---	---	---

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

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

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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. Mccaskill For Missouri 2012

Mailing Address 607 14th Street Nw Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement

011

Candidate Name

Sen. Claire McCaskill

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MO District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		26		2012

Transaction ID : 44786427

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Searchlight Leadership Fund

Mailing Address 422 C street, NE
Lower Level

City Washington State DC Zip Code 20002

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		26		2012

Transaction ID : 44786431

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Continuing a Majority Party Action Committee

Mailing Address

City Midland State MI Zip Code 48640

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		26		2012

Transaction ID : 44786444

Amount of Each Disbursement this Period

2500.00

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

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

8000.00

--

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

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

FOR LINE NUMBER:
(check only one)

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

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. R.O.S.K.A.M. PAC

Mailing Address 1006 Pendleton Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 26 / 2012

Transaction ID : 44786446

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. Schock For Congress

Mailing Address PO Box 10555

City Peoria State IL Zip Code 61612

Purpose of Disbursement

011

Candidate Name

Category/
Type

Rep. Aaron Schock

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IL District: 18

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 26 / 2012

Transaction ID : 44786451

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Heller For Senate

Mailing Address PO Box 371907

City Las Vegas State NV Zip Code 89137

Purpose of Disbursement

011

Candidate Name

Category/
Type

Sen. Dean Heller

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NV District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 27 / 2012

Transaction ID : 44787528

Amount of Each Disbursement this Period

2500.00

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

8000.00

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

52500.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 44784373

Amount of Each Disbursement this Period

Bank Fees

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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