

**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="2016"/>		146274.02
(b) Cash on Hand at Beginning of Reporting Period.....	148947.83	
(c) Total Receipts (from Line 19)	27505.87	73770.39
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	176453.70	220044.41
7. Total Disbursements (from Line 31).....	46883.24	90473.95
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	129570.46	129570.46
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 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).....	26995.68	51428.19
(ii) Unitemized	196.90	1628.30
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	27192.58	53056.49
(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)	27192.58	73056.49
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	313.29	713.90
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))..... ▶	27505.87	73770.39
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	27505.87	73770.39

DETAILED SUMMARY PAGE
of Disbursements

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	883.24	1473.95
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	883.24	1473.95
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	46000.00	89000.00
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	0.00	0.00
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)) ..	46883.24	90473.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	46883.24	90473.95

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)	27192.58	73056.49
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	27192.58	73056.49
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	883.24	1473.95
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	883.24	1473.95

**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 29
(check only one)

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

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

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

Full Name (Last, First, Middle Initial)
A. Frederick Adams

Mailing Address 2545 Park Plaza
HCA

City Nashville State TN Zip Code 37203

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

Name of Employer HCA Occupation VP IT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 30 / 2016
Transaction ID : 44644336-60B6-4EDB-

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 23510 Berdon St

City Woodland Hills State CA Zip Code 91367-3004

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

Name of Employer Tenet Healthcare Corporation Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 03 / 2016
Transaction ID : 7385E83F2F6A5BAED96

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 455 Canterbury Rise

City Franklin State TN Zip Code 37067

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

Name of Employer HCA Occupation Healthcare Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 29 / 2016
Transaction ID : 4B288EA7-A435-4137-

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00

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 7 OF 29
	<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	

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

A. Robert Campbell
Full Name (Last, First, Middle Initial)

Mailing Address One Maryland Farms

City Brentwood State TN Zip Code 37027

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

Name of Employer HCA Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 03 / 30 / 2016
Transaction ID : 8D5A46C1-86F9-483D-

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 1256 Kensington Rd

City McLean State VA Zip Code 22101-2920

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

Name of Employer FAH Occupation Senior Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt
 03 / 03 / 2016
Transaction ID : C33FA468BBEF6DA5AD3

Amount of Each Receipt this Period
85.00

Memo Item

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

Mailing Address 1256 Kensington Rd

City McLean State VA Zip Code 22101-2920

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

Name of Employer FAH Occupation Senior Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
510.00

Date of Receipt
 03 / 15 / 2016
Transaction ID : 807652ACCA830E41A35

Amount of Each Receipt this Period
85.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 670.00

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 8 OF 29
	<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	

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

A. Jeff Cohen
Full Name (Last, First, Middle Initial)

Mailing Address 1955 Massachusetts Ave

City McLean State VA Zip Code 22101-4908

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

Name of Employer Federation of American Hospitals Occupation EVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 253.00

Date of Receipt 03 / 03 / 2016
Transaction ID : 288A193CAFD066018D0

Amount of Each Receipt this Period 42.00

Memo Item

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

Mailing Address 1955 Massachusetts Ave

City McLean State VA Zip Code 22101-4908

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

Name of Employer Federation of American Hospitals Occupation EVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 253.00

Date of Receipt 03 / 15 / 2016
Transaction ID : 3DE41F36083957EDA45

Amount of Each Receipt this Period 42.00

Memo Item

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

Mailing Address One Park Plaza

City Nashville State TN Zip Code 37203

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

Name of Employer HCA Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 29 / 2016
Transaction ID : F036A83A-16B2-4471-

Amount of Each Receipt this Period 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 584.00

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 29
	<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	

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

A. Wes Fountain
Full Name (Last, First, Middle Initial)

Mailing Address 90 Canyon Bluff Dr

City Boerne State TX Zip Code 78006-8289

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

Name of Employer HCA Occupation Chief Financial Officer

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 / 29 / 2016

Transaction ID : BAE1DE37-D78D-4523-

Amount of Each Receipt this Period
 500.00

Memo Item

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

Mailing Address 714 Estes Rd

City Nashville State TN Zip Code 37215

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

Name of Employer HCA Occupation 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 / 29 / 2016

Transaction ID : 3B1A797D-3B09-49BE-

Amount of Each Receipt this Period
 250.00

Memo Item

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

Mailing Address 946 Ireland Street

City Nashville State TN Zip Code 37208

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

Name of Employer HCA Occupation Government Relations

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 / 31 / 2016

Transaction ID : 12C46CDE-47CB-4181-

Amount of Each Receipt this Period
 250.00

Memo Item

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 11 OF 29
	<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	

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

A. Lee Grubbs
Full Name (Last, First, Middle Initial)

Mailing Address 426 Lynnwood Blvd

City Nashville State TN Zip Code 37205

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

Name of Employer HCA Occupation VP/Chief Tax Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 29 / 2016
Transaction ID : CE548753-A3FF-4ED8-

Amount of Each Receipt this Period 500.00

Memo Item

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

Mailing Address 9221 Fox Run Dr

City Brentwood State TN Zip Code 37027

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

Name of Employer HCA Occupation Risk Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 29 / 2016
Transaction ID : 074BB4FF-9440-4778-

Amount of Each Receipt this Period 500.00

Memo Item

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

Mailing Address 155 Franklin Road Suite 400

City Brentwood State TN Zip Code 37027

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

Name of Employer HCA Occupation Supply Chain Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 29 / 2016
Transaction ID : 255BBDC8-8046-41A0-

Amount of Each Receipt this Period 250.00

Memo Item

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 12 OF 29
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Milton Johnson
Full Name (Last, First, Middle Initial)

Mailing Address One Park Plaza

City Nashville State TN Zip Code 37203

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

Name of Employer HCA Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 31 / 2016
Transaction ID : E9A015E9-88A5-4D5D-

Amount of Each Receipt this Period 5000.00

Memo Item

B. 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 ▼ 250.02

Date of Receipt 03 / 03 / 2016
Transaction ID : B2BA96474D8A3682E01

Amount of Each Receipt this Period 41.67

Memo Item

C. 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 ▼ 250.02

Date of Receipt 03 / 15 / 2016
Transaction ID : D2DD86608C6341ED2E1

Amount of Each Receipt this Period 41.67

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	5083.34
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 29
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Matthew Klein
 Full Name (Last, First, Middle Initial)
 Mailing Address 367 S. Gulph Rd
 City King of Prussia State PA Zip Code 19002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Universal Health Services Inc. Occupation General Counsel
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 400.00

Date of Receipt 03 / 30 / 2016
Transaction ID : 0EA7CE01-EC48-4AFC-
 Amount of Each Receipt this Period 400.00
 Memo Item

B. James Koss
 Full Name (Last, First, Middle Initial)
 Mailing Address 1704 Players Mill Rd
 City Franklin State TN Zip Code 37067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HCA Occupation Healthcare
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 03 / 29 / 2016
Transaction ID : 9614BFA5-A0DA-4573-
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Maurice Lagarde
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 Rosa Park
 City New Orleans State LA Zip Code 70115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HCA Occupation Hospital Executive
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1500.00

Date of Receipt 03 / 29 / 2016
Transaction ID : F1A85443-5976-443C-
 Amount of Each Receipt this Period 1500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2400.00
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 29
	<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	

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

A. Ann Laseter
Full Name (Last, First, Middle Initial)

Mailing Address 2905 Parthenon Avenue
Unit 307

City Nashville State TN Zip Code 37203

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

Name of Employer HCA Occupation Managed Care Contracting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 29 / 2016
Transaction ID : D718B439-B4DE-4FDA-

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 434 wild elm street

City Franklin State TN Zip Code 37064

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

Name of Employer HCA Occupation CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 31 / 2016
Transaction ID : 4A404E6E-4656-4AF1-

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 3439 Hampton Ave.

City Nashville State TN Zip Code 37215

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

Name of Employer HCA Occupation Vice President, Cardiovascular Service

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 29 / 2016
Transaction ID : A39F002E-C064-46F6-

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
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 29
	<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	

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

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

Mailing Address 5457 Vanderbilt Rd

City Old Hickory State TN Zip Code 37138

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

Name of Employer HCA Occupation CPA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 29 / 2016
Transaction ID : 534EFBDB-9E83-4716-

Amount of Each Receipt this Period 250.00

Memo Item

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

Mailing Address 1019 Noelton Ave

City Nashville State TN Zip Code 37204

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

Name of Employer HCA Occupation attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 29 / 2016
Transaction ID : 5A32960D-FE61-4887-

Amount of Each Receipt this Period 500.00

Memo Item

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

Mailing Address 13904 beverly

City overland park State KS Zip Code 66223

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

Name of Employer HCA Occupation cfo

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 29 / 2016
Transaction ID : D1ED0861-184D-4A2F-

Amount of Each Receipt this Period 500.00

Memo Item

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 16 OF 29
	<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	

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

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

Mailing Address 5208 Shaw Court

City Brentwood State TN Zip Code 37027

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

Name of Employer HCA Occupation Healthcare

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2016

Transaction ID : 92AEDADD-D270-40A7-

Amount of Each Receipt this Period
 250.00

Memo Item

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

Mailing Address 105 Clarendon Ave

City Nashville State TN Zip Code 37205

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

Name of Employer HCA Occupation Senior Vice President Provider Relatio

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 / 31 / 2016

Transaction ID : 0FDBB6F8-6015-404B-

Amount of Each Receipt this Period
 2500.00

Memo Item

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

Mailing Address 1672 Highfield Lane

City Brentwood State TN Zip Code 37027

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

Name of Employer HCA Occupation 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 Y
 03 / 30 / 2016

Transaction ID : 4067EF0B-17B9-4BF9-

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	3000.00
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 29
(check only one)

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

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

Full Name (Last, First, Middle Initial)
A. Michael Nanko

Mailing Address 116 Westover Park Court

City Nashville	State TN	Zip Code 37215
-------------------	-------------	-------------------

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

Name of Employer HCA	Occupation healthcare
-------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 29 / 2016
Transaction ID : 95115FDE-BEB2-4A77-

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 204 wilsonia ave

City Nashville	State TN	Zip Code 37205
-------------------	-------------	-------------------

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

Name of Employer HCA	Occupation Healthcare Administration
-------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 29 / 2016
Transaction ID : 02669D3C-5F33-405F-

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 903 E. 104th Street
Suite 500

City Kansas City	State MO	Zip Code 64131
---------------------	-------------	-------------------

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

Name of Employer HCA	Occupation CVP, Payor Engagement
-------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 29 / 2016
Transaction ID : F19A5E4F-78A3-432C-

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
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 29
	<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	

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

A. Joseph Roddy
Full Name (Last, First, Middle Initial)

Mailing Address 468 Wiregrass Ln

City Franklin State TN Zip Code 37064

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

Name of Employer HCA Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 29 / 2016
Transaction ID : 2605FDA6-2432-42EB-

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 415 Church Street Suite 2401

City Nashville State TN Zip Code 37219

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

Name of Employer HCA Occupation Gov. relations Exec.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
03 / 31 / 2016
Transaction ID : 0E0969AF-5C3B-4315-

Amount of Each Receipt this Period
250.00

Memo Item

c. cathryn rolfe
Full Name (Last, First, Middle Initial)

Mailing Address One Maryland Farms

City Brentwood State TN Zip Code 37205

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

Name of Employer HCA Occupation Vice President Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
03 / 30 / 2016
Transaction ID : 49238B2F-BF43-447A-

Amount of Each Receipt this Period
250.00

Memo Item

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 19 OF 29
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)
A. Brenda Smith

Mailing Address 2810 22nd Ave S

City Nashville State TN Zip Code 37215

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

Name of Employer HCA Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 29 / 2016
Transaction ID : 2FBBC3E5-3413-48CF-

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 1948 Rockingham St

City McLean State VA Zip Code 22101-4922

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

Name of Employer FAH Occupation Executive Vice President, Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
625.02

Date of Receipt
03 / 03 / 2016
Transaction ID : FBE273C16FDB7466F7B

Amount of Each Receipt this Period
104.17

Memo Item

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

Mailing Address 1948 Rockingham St

City McLean State VA Zip Code 22101-4922

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

Name of Employer FAH Occupation Executive Vice President, Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
625.02

Date of Receipt
03 / 15 / 2016
Transaction ID : B152B3458D7A7D457AF

Amount of Each Receipt this Period
104.17

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 708.34

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 29
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial)
A. ryan stagg

Mailing Address One Park Plaza

City Nashville State TN Zip Code 37203

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

Name of Employer HCA Occupation IT

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 / 31 / 2016
Transaction ID : F2026D8D-5443-45E3-

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 101 Richards Glen Dr

City Franklin State TN Zip Code 37067

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

Name of Employer HCA Occupation Healthcare Management

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 / 29 / 2016
Transaction ID : EEF39E53-9C0D-4393-

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 110 Winners Circle

City Brentwood State TN Zip Code 37027

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

Name of Employer HCA Occupation AVP Managed Government Programs

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 / 2016
Transaction ID : 24A0A709-E941-468F-

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 29
	<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	

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

A. Kathryn Torres
Full Name (Last, First, Middle Initial)

Mailing Address 2501 Park Plaza

City Nashville State TN Zip Code 37203

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

Name of Employer HCA Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 29 / 2016
Transaction ID : F828B325-4453-4CDA-

Amount of Each Receipt this Period 500.00

Memo Item

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

Mailing Address 127 Natchez Drive

City Hendersonville State TN Zip Code 37075-7700

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

Name of Employer HCA Occupation IT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 29 / 2016
Transaction ID : B6BBDC5E-9ED9-43F0-

Amount of Each Receipt this Period 500.00

Memo Item

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

Mailing Address One Park Plaza

City Nashville State TN Zip Code 37203

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

Name of Employer HCA Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 29 / 2016
Transaction ID : 3C5EF3DB-8E08-4C55-

Amount of Each Receipt this Period 2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3500.00

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 22 OF 29
(check only one)

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

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

Full Name (Last, First, Middle Initial)
A. Arthur Weinblatt

Mailing Address 5158 Lakewood Drive

City State Zip Code
Cooper City FL 33330

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

Name of Employer Occupation
HCA Hospital Administration

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2016

Transaction ID : 2831F53B-8336-47A3-

Amount of Each Receipt this Period
300.00

Memo Item

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
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

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
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	26995.68

**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 29
<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 type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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

A. Wells Fargo

Full Name (Last, First, Middle Initial)
Mailing Address 801 Pennsylvania Ave. NW

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 ▼
713.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2016

Transaction ID : DE1458086EA84035B68C

Amount of Each Receipt this Period
3.00

Memo Item
Reimbursement of Bank Fee

B. Wells Fargo

Full Name (Last, First, Middle Initial)
Mailing Address 801 Pennsylvania Ave. NW

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 ▼
713.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2016

Transaction ID : BC952A012B7A46CF8DB8

Amount of Each Receipt this Period
310.29

Memo Item
Reimbursement of Bank Fees

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 M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	313.29
TOTAL This Period (last page this line number only).....	313.29

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. DC Treasurer

Mailing Address PO Box 96166

City Washington State DC Zip Code 20090-6166

Purpose of Disbursement
2015 DC Taxes

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : VEFF15D9D3729EFC1284

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Wells Fargo

Mailing Address 801 Pennsylvania Ave. NW

City Washington State DC Zip Code 20004

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : E435D06C69F3CA2065E

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Wells Fargo

Mailing Address 801 Pennsylvania Ave. NW

City Washington State DC Zip Code 20004

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : 5D6CDE95115A01F99D5

Amount of Each Disbursement this Period

Memo Item

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

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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Wells Fargo

Mailing Address 801 Pennsylvania Ave. NW

City Washington State DC Zip Code 20004

Purpose of Disbursement
Bank Fee

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : A0FCA22B4606DEA5663

Amount of Each Disbursement this Period

Memo Item

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

Memo Item

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

Memo Item

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

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

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

Full Name (Last, First, Middle Initial)

A. A New Direction PAC

Mailing Address 105 N State St

City Concord State NH Zip Code 03301

Purpose of Disbursement
2016 Contribution

011

Candidate Name

A New Direction PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) Contribution

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 11 / 2016

Transaction ID : 749DD0F4080DC974CBB

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Alamo PAC

Mailing Address 919 Congress Avenue
Suite 1400

City Austin State TX Zip Code 78701

Purpose of Disbursement
2016 Contribution

011

Candidate Name

Alamo PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) Contribution

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 04 / 2016

Transaction ID : 662436DC4B3DC223BCE

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERIPAC: The Fund for a Greater America

Mailing Address 700 13th Street NW
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement
2016 Contribution

011

Candidate Name

AMERIPAC: The Fund for a Greater America

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) Contribution

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 18 / 2016

Transaction ID : 98BC3991B679ED3E5A1

Amount of Each Disbursement this Period

5000.00

Memo Item

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

10000.00

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

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

Full Name (Last, First, Middle Initial)

A. DCCC

Mailing Address 430 South Capitol Street, SE
2nd Floor

City Washington State DC Zip Code 20003-4024

Purpose of Disbursement
2016 Contribution

Candidate Name
DCCC

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) **Contribution**

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : 4CBB432166E0B426538

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Martin Heinrich for Senate

Mailing Address PO Box 25763

City Albuquerque State NM Zip Code 87125

Purpose of Disbursement
2018 Primary

Candidate Name
Martin Heinrich

Office Sought: House
 Senate
 President
State: NM District:

Disbursement For: 2018
 Primary General
 Other (specify) **Contribution**

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : 2C7D23FF26ADAF31018

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. NRCC

Mailing Address 320 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
2016 Contribution

Candidate Name
NRCC

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) **Contribution**

011
Category/
Type

Date of Disbursement

/ /

Transaction ID : F698265B73B69095440

Amount of Each Disbursement this Period

Memo Item

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

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

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

Full Name (Last, First, Middle Initial)

A. NRCC

Mailing Address 320 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
2016 Contribution

011

Category/
Type

Candidate Name

NRCC

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) Contribution

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 11 / 2016

Transaction ID : FDB448170F5333D6CAA

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. NRSC

Mailing Address 425 2nd Street NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
2016 Contribution

011

Category/
Type

Candidate Name

NRSC

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) Contribution

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 18 / 2016

Transaction ID : 776BD3B7AD9EBFA5809

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Pioneer Political Action Committee

Mailing Address 701 8th Street, NW
Suite 500

City Washington State DC Zip Code 20001

Purpose of Disbursement
2016 Contribution

011

Category/
Type

Candidate Name

Pioneer Political Action Committee

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) Contribution

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 04 / 2016

Transaction ID : OFFD84E9399502986BE

Amount of Each Disbursement this Period

5000.00

Memo Item

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

15000.00

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

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

Full Name (Last, First, Middle Initial)

A. Prosperity Action Inc.

Mailing Address 320 1st Street SE

City Washington State DC Zip Code 22314-2000

Purpose of Disbursement
2016 Contribution

011

Category/
Type

Candidate Name

Prosperity Action Inc.

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) Contribution

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 04 / 2016

Transaction ID : 0D5AFD0BF0A1AED132B

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Ryan for Congress, Inc.

Mailing Address PO Box 1488

City Janesville State WI Zip Code 53547-1488

Purpose of Disbursement
2016 General

011

Category/
Type

Candidate Name

Paul Davis Ryan Jr.

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) Contribution

State: WI District: 01

Date of Disbursement

MM / DD / YYYY
03 / 04 / 2016

Transaction ID : EA04DFDDBBA1D3F6BFA

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Tiberi for Congress

Mailing Address 2931 E Dublin Granville Road
Suite 190

City Columbus State OH Zip Code 43231-2098

Purpose of Disbursement
2016 General

011

Category/
Type

Candidate Name

Patrick Joseph Tiberi

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) Contribution

State: OH District: 12

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2016

Transaction ID : 9D32A1BCEE3B0CE5500

Amount of Each Disbursement this Period

5000.00

Memo Item

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

10000.00

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

46000.00