

**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 <u>3</u> OF <u>4</u>
	<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)
Kidney Care Partners Political Action Committee

A. Full Name (Last, First, Middle Initial) <i>Kurnik, Brenda</i>		Date of Receipt <i>03 ' 17 ' 2008</i>
Mailing Address <i>56 Palmer Drive</i>		Amount of Each Receipt this Period <i>1,000.00</i>
City <i>MOONSTOWN</i>	State <i>NJ</i> Zip Code <i>08057</i>	
FEC ID number of contributing federal political committee. <i>C</i>		
Name of Employer <i>DSI</i>	Occupation <i>Nephrologist</i>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date <i>1,000.00</i>	

B. Full Name (Last, First, Middle Initial) <i>Lennox, Chad</i>		Date of Receipt <i>03 ' 19 ' 2008</i>
Mailing Address <i>3714 Mt. Pleasant NW # 33</i>		Amount of Each Receipt this Period <i>100.00</i>
City <i>Washington</i>	State <i>DC</i> Zip Code <i>20010</i>	
FEC ID number of contributing federal political committee. <i>C</i>		
Name of Employer <i>Davita Patient Citizens</i>	Occupation <i>Executive Director</i>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date <i>100.00</i>	

C. Full Name (Last, First, Middle Initial) <i>Wick, Gail</i>		Date of Receipt <i>03 ' 20 ' 2008</i>
Mailing Address <i>5420 New Wellington Close</i>		Amount of Each Receipt this Period <i>500.00</i>
City <i>Atlanta</i>	State <i>GA</i> Zip Code <i>30327</i>	
FEC ID number of contributing federal political committee. <i>C</i>		
Name of Employer <i>ANNA</i>	Occupation <i>Nurse</i>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date <i>500.00</i>	

SUBTOTAL of Receipts This Page (optional).....	<i>1,600.00</i>
TOTAL This Period (last page this line number only).....	<i>12,450.00</i>

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