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

American Health Care Association Political Action Committee

ADDRESS (number and street) ▼ 1201 L Street, NW

☐ Check if different than previously reported. (ACC)

CITY ▲ Washington STATE ▲ DC ZIP CODE ▲ 20005 –

2. **FEC IDENTIFICATION NUMBER ▼** C C00006080

3. IS THIS REPORT ☒ NEW (N) **OR** ☐ AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2)
- ☐ October 15 Quarterly Report (Q3)
- ☐ January 31 Year-End Report (YE)
- ☐ July 31 Mid-Year Report (Non-election Year Only) (MY)
- ☐ Termination Report (TER)

(b) Monthly Report Due On:

- ☐ Feb 20 (M2)
- ☐ Mar 20 (M3)
- ☐ Apr 20 (M4)
- ☐ May 20 (M5)
- ☐ Jun 20 (M6)
- ☐ Jul 20 (M7)
- ☐ Aug 20 (M8)
- ☒ Sep 20 (M9)
- ☐ Oct 20 (M10)
- ☐ Nov 20 (M11) (Non-Election Year Only)
- ☐ Dec 20 (M12) (Non-Election Year Only)
- ☐ Jan 31 (YE)

(c) 12-Day **PRE**-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R) ☐ Convention (12C) ☐ Special (12S)

Election on MM / DD / YYYY in the State of

(d) 30-Day **POST**-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period 08 / 01 / 2016 through 08 / 31 / 2016

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 Ms. Robin Hillier

Signature of Treasurer *Ms. Robin Hillier* ***[Electronically Filed]*** Date 09 / 19 / 2016

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

Office Use Only							

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Rev. 02/2003)

Write or Type Committee Name

American Health Care Association Political Action Committee

Report Covering the Period: From: 08 / 01 / 2016 To: 08 / 31 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2016		170806.91
(b) Cash on Hand at Beginning of Reporting Period	108954.40	
(c) Total Receipts (from Line 19)	52111.16	399050.83
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	161065.56	569857.74
7. Total Disbursements (from Line 31)	78829.29	487621.47
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	82236.27	82236.27
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

American Health Care Association Political Action Committee

Report Covering the Period: From: 08 / 01 / 2016 To: 08 / 31 / 2016

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)	50043.76	372064.81
(ii) Unitemized	2067.40	15986.02
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	52111.16	388050.83
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ▶	52111.16	398050.83
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.)	0.00	1000.00
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)) ▶	52111.16	399050.83
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	52111.16	399050.83

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

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	329.29	6501.60
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	329.29	6501.60
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	73500.00	454500.00
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	5619.87
(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	5619.87
29. Other Disbursements	5000.00	21000.00
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))	78829.29	487621.47
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	78829.29	487621.47

DETAILED SUMMARY PAGE
of Disbursements

FEC **Form 3X** (Rev. 02/2003)

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)	52111.16	398050.83
34. Total Contribution Refunds (from Line 28(d))	0.00	5619.87
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	52111.16	392430.96
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	329.29	6501.60
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶	329.29	6501.60

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)
☒ 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)
American Health Care Association Political Action Committee

A.
Full Name (Last, First, Middle Initial): Martin Allen
Mailing Address: 333 N. Summit Street
City: Toledo State: OH Zip Code: 43614
FEC ID number of contributing federal political committee: C
Name of Employer: HCR ManorCare
Occupation: Vice President
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 800.00
Date of Receipt: 08 / 08 / 2016
Transaction ID : C3365439
Amount of Each Receipt this Period: 100.00
☐ Memo Item

B.
Full Name (Last, First, Middle Initial): Linda Black-Kurek
Mailing Address: 4336 West Franklin St
City: Bellbrook State: OH Zip Code: 45305
FEC ID number of contributing federal political committee: C
Name of Employer: Liberty Health Care Corp
Occupation: President
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 1250.00
Date of Receipt: 08 / 12 / 2016
Transaction ID : C3370633
Amount of Each Receipt this Period: 417.00
☐ Memo Item

C.
Full Name (Last, First, Middle Initial): Rod Burkett
Mailing Address: 535 E North St, Suite E
City: Bradley State: IL Zip Code: 60901
FEC ID number of contributing federal political committee: C
Name of Employer: Gardant Management Solutions
Occupation: CEO
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: 08 / 17 / 2016
Transaction ID : C3372200
Amount of Each Receipt this Period: 2500.00
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 3017.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial): Jerome Carmy
Mailing Address: 927 Elgin Court
City: Fort Collins State: CO Zip Code: 80524
FEC ID number of contributing federal political committee: C
Name of Employer: Juniper Communities
Occupation: Executive Director
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 375.00
Date of Receipt: 08 / 03 / 2016
Transaction ID : C3364265
Amount of Each Receipt this Period: 125.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Mary Jane Carothers
Mailing Address: 6323 Panorama Drive
City: Panora State: IA Zip Code: 50216
FEC ID number of contributing federal political committee: C
Name of Employer: Iowa Health Care Association
Occupation: Director of Quality & Clinical Srvcs
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 375.00
Date of Receipt: 08 / 05 / 2016
Transaction ID : C3378915
Amount of Each Receipt this Period: 125.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Daniel Ciolek
Mailing Address: 1201 L Street NW
City: Washington State: DC Zip Code: 20005
FEC ID number of contributing federal political committee: C
Name of Employer: AHCA
Occupation: Associate VP, Therapy Advocacy
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 675.00
Date of Receipt: 08 / 22 / 2016
Transaction ID : C3378955
Amount of Each Receipt this Period: 150.00
☐ Memo Item

* Payroll Deduction: $75.00 Bi-Weekly

SUBTOTAL of Receipts This Page (optional) ▶ 400.00

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

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial): Joanne E Erickson
Mailing Address: 911 S Randolph St
City: Arlington | State: VA | Zip Code: 22204-1564
FEC ID number of contributing federal political committee: C
Name of Employer: American Health Care Association
Occupation: Senior Director
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 08 / 22 / 2016
Transaction ID : C3378957
Amount of Each Receipt this Period: 100.00
☐ Memo Item
* Payroll Deduction: $50.00 Bi-Weekly

B. Full Name (Last, First, Middle Initial): Teresa Eyet
Mailing Address: 10009 Dallas Ave
City: Takoma Park | State: MD | Zip Code: 20901-2240
FEC ID number of contributing federal political committee: C
Name of Employer: American Health Care Association
Occupation: Senior Director, Education
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 589.38
Date of Receipt: 08 / 22 / 2016
Transaction ID : C3378958
Amount of Each Receipt this Period: 107.16
☐ Memo Item
* Payroll Deduction: $53.58 Bi-Weekly

C. Full Name (Last, First, Middle Initial): Patricia Giorgio
Mailing Address: 4702 Chestnut Ridge Rd NE
City: Cedar Rapids | State: IA | Zip Code: 52411
FEC ID number of contributing federal political committee: C
Name of Employer: Evergreen Estates
Occupation: President/CEO
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 3750.00
Date of Receipt: 08 / 22 / 2016
Transaction ID : C3376772
Amount of Each Receipt this Period: 1250.00
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1457.16

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial): Karen Goldsmith
Mailing Address: P.O. Box 875
City: Cape Canaveral | State: FL | Zip Code: 32920
FEC ID number of contributing federal political committee: C
Name of Employer: Goldsmith & Grout, P.A.
Occupation: Attorney
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 250.00
Date of Receipt: 08 / 11 / 2016
Transaction ID : C3369388
Amount of Each Receipt this Period: 250.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Ronald Goux
Mailing Address: 2045 Highway 59
PO Box 1429
City: Mandeville | State: LA | Zip Code: 70448-1909
FEC ID number of contributing federal political committee: C
Name of Employer: Gulf South Medical Enterprises
Occupation: President
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 1562.50
Date of Receipt: 08 / 08 / 2016
Transaction ID : C3378923
Amount of Each Receipt this Period: 937.50
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Ben Griffin Jr
Mailing Address: 522 Rawls Street
City: Hawkinsville | State: GA | Zip Code: 31036-1954
FEC ID number of contributing federal political committee: C
Name of Employer: Community Health Systems
Occupation: Administrator
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 08 / 08 / 2016
Transaction ID : C3378921
Amount of Each Receipt this Period: 500.00
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1687.50

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial): William J. Griffith
Mailing Address: 1825 7th Street, NW #901
City: Washington State: DC Zip Code: 20001
FEC ID number of contributing federal political committee: C
Name of Employer: American Health Care Association
Occupation: Senior Manager, Political Affairs
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00
Date of Receipt: 08 / 22 / 2016
Transaction ID : C3378960
Amount of Each Receipt this Period: 50.00
☐ Memo Item
* Payroll Deduction: $25.00 Bi-Weekly

B. Full Name (Last, First, Middle Initial): Howard Groff
Mailing Address: 11337 Louisiana Cir
City: Bloomington State: MN Zip Code: 55438-2827
FEC ID number of contributing federal political committee: C
Name of Employer: Tealwood Senior Living
Occupation: President
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 6250.00
Date of Receipt: 08 / 02 / 2016
Transaction ID : C3364073
Amount of Each Receipt this Period: 1250.00
☐ Memo Item
See refund on next report

C. Full Name (Last, First, Middle Initial): Jennifer S Hahs
Mailing Address: 12423 Flint Street
City: Overland Park State: KS Zip Code: 66213
FEC ID number of contributing federal political committee: C
Name of Employer: American Health Care Association
Occupation: Senior Director, Political Affairs
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00
Date of Receipt: 08 / 22 / 2016
Transaction ID : C3378961
Amount of Each Receipt this Period: 100.00
☐ Memo Item
* Payroll Deduction: $50.00 Bi-Weekly

SUBTOTAL of Receipts This Page (optional) ▶ 1400.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial): Steven D. Heaney
Mailing Address: 1116 Ninth Ave
City: Toms River | State: NJ | Zip Code: 08757-2643
FEC ID number of contributing federal political committee: C
Name of Employer: Brandywine Senior Living
Occupation: Vice President
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 750.00
Date of Receipt: 08 / 22 / 2016
Transaction ID : C3376773
Amount of Each Receipt this Period: 250.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Sean Hurley
Mailing Address: 74 Kingery Drive
City: El Paso | State: TX | Zip Code: 79902
FEC ID number of contributing federal political committee: C
Name of Employer: Medline Industries
Occupation: Account Manager
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 08 / 12 / 2016
Transaction ID : C3370597
Amount of Each Receipt this Period: 250.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): David A Kyllo
Mailing Address: 4621 28th Road South
City: Arlington | State: VA | Zip Code: 22206
FEC ID number of contributing federal political committee: C
Name of Employer: AHCA/NCAL
Occupation: VP, Insurance and Member Programs
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 540.00
Date of Receipt: 08 / 22 / 2016
Transaction ID : C3378964
Amount of Each Receipt this Period: 120.00
☐ Memo Item
* Payroll Deduction: $60.00 Bi-Weekly

SUBTOTAL of Receipts This Page (optional) ▶ 620.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial): Randy Lee
Mailing Address: 176 Laurelhurst Ave
City: Columbia State: SC Zip Code: 29210-3824
FEC ID number of contributing federal political committee: C
Name of Employer: South Carolina Health Care Assn
Occupation: Executive Vice President
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt: 08 / 24 / 2016
Transaction ID : C3378974
Amount of Each Receipt this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Theodore J. Lee
Mailing Address: 700 Hanover St
City: Manchester State: NH Zip Code: 03104
FEC ID number of contributing federal political committee: C
Name of Employer: Hanover Hill Health Care Center
Occupation: President
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt: 08 / 02 / 2016
Transaction ID : C3378913
Amount of Each Receipt this Period: 500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Paul Liistro
Mailing Address: 1 Meadow Brook Lane
City: Westport State: CT Zip Code: 06880-3929
FEC ID number of contributing federal political committee: C
Name of Employer: Arbors of Hop Brook, LTD
Occupation: CEO
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00
Date of Receipt: 08 / 01 / 2016
Transaction ID : C3362432
Amount of Each Receipt this Period: 500.00
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2000.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial): Cornelius Murray
Mailing Address: 54 State Street
City: Albany State: NY Zip Code: 12207
FEC ID number of contributing federal political committee: C
Name of Employer: O'Connell & Aronowitz
Occupation: Attorney
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 08 / 11 / 2016
Transaction ID : C3369061
Amount of Each Receipt this Period: 250.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): O'Connell and Aronowitz
Mailing Address: 54 State Street
City: Albany State: NY Zip Code: 12207
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 08 / 05 / 2016
Transaction ID : C3378916
Amount of Each Receipt this Period: 250.00
☐ Memo Item

Refund Issued on 9/7/16; Will Appear on Next Report

C. Full Name (Last, First, Middle Initial): Julie C Painter
Mailing Address: 5023 Waple Ln
City: Alexandria State: VA Zip Code: 22304-7727
FEC ID number of contributing federal political committee: C
Name of Employer: American Health Care Association
Occupation: Vice President of Constituency Affairs
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 08 / 22 / 2016
Transaction ID : C3378966
Amount of Each Receipt this Period: 50.00
☐ Memo Item

* Payroll Deduction: $25.00 Bi-Weekly

SUBTOTAL of Receipts This Page (optional) ▶ 550.00

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)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial): Christopher Parks
Mailing Address: 1730 Truro Rd
City: Crofton | State: MD | Zip Code: 21114-2520
FEC ID number of contributing federal political committee: C
Name of Employer: American Health Care Association
Occupation: Director of IT and Operations
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 225.00

Date of Receipt: 08 / 22 / 2016
Transaction ID : C3378967
Amount of Each Receipt this Period: 50.00
☐ Memo Item

* Payroll Deduction: $25.00 Bi-Weekly

B. Full Name (Last, First, Middle Initial): Ron Payne
Mailing Address: 1518 Legacy Drive Suite 110
City: Frisco | State: TX | Zip Code: 75034
FEC ID number of contributing federal political committee: C
Name of Employer: Southwest LTC Management Services, LLC
Occupation: CEO
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 5000.00

Date of Receipt: 08 / 05 / 2016
Transaction ID : C3365268
Amount of Each Receipt this Period: 5000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Douglas Pendergras
Mailing Address: 1036 Liberty Park Dr Apt 47
City: Austin | State: TX | Zip Code: 78746-6990
FEC ID number of contributing federal political committee: C
Name of Employer: Pebble Creek Nursing Center
Occupation: Nursing Home Owner
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 1000.00

Date of Receipt: 08 / 05 / 2016
Transaction ID : C3378918
Amount of Each Receipt this Period: 500.00
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 5550.00

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)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial): John Ponthie
Mailing Address: 449 Overbrook Court
City: Shreveport State: LA Zip Code: 71106
FEC ID number of contributing federal political committee: C
Name of Employer: Self Employed
Occupation: Healthcare Consultant
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: 08 / 26 / 2016
Transaction ID : C3378145
Amount of Each Receipt this Period: 2500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Clifton Porter
Mailing Address: 3929 Azalea Court
City: Maumee State: OH Zip Code: 43537
FEC ID number of contributing federal political committee: C
Name of Employer: American Health Care Association
Occupation: SVP Government Relations
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 2515.92
Date of Receipt: 08 / 22 / 2016
Transaction ID : C3378968
Amount of Each Receipt this Period: 416.66
☐ Memo Item
* Payroll Deduction: $208.33 Bi-Weekly

C. Full Name (Last, First, Middle Initial): Denise T. Pozderac
Mailing Address: 6750 Grafton Rd
City: Valley City State: OH Zip Code: 44280-9705
FEC ID number of contributing federal political committee: C
Name of Employer: Transitional Living Centers
Occupation: Administrator
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 08 / 01 / 2016
Transaction ID : C3362757
Amount of Each Receipt this Period: 250.00
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 3166.66

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial): Melbane Pruitt
Mailing Address: 1626 Jeurgens Ct
City: Norcross State: GA Zip Code: 30093
FEC ID number of contributing federal political committee: C
Name of Employer: N/A
Occupation: Homemaker
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 3750.00
Date of Receipt: 08 / 25 / 2016
Transaction ID : C3377942
Amount of Each Receipt this Period: 1250.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Neil L. Pruitt Jr.
Mailing Address: 1626 Jeurgens Ct
City: Norcross State: GA Zip Code: 30093
FEC ID number of contributing federal political committee: C
Name of Employer: PruittHealth
Occupation: President
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 3750.00
Date of Receipt: 08 / 25 / 2016
Transaction ID : C3377943
Amount of Each Receipt this Period: 1250.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Mohammad Qazi
Mailing Address: 6405 Middlebelt Road
City: West Bloomfield State: MI Zip Code: 48322
FEC ID number of contributing federal political committee: C
Name of Employer: Ciena Healthcare
Occupation: CEO
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: 08 / 10 / 2016
Transaction ID : C3367539
Amount of Each Receipt this Period: 5000.00
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 7500.00

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)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial): Joan Reidy
Mailing Address: 37800 French Creek Road
City: Avon State: OH Zip Code: 44011
FEC ID number of contributing federal political committee: C
Name of Employer: Avon Oaks Caring Community
Occupation: President/ CEO
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 / 15 / 2016
Transaction ID : C3378930
Amount of Each Receipt this Period: 500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Frank Romano
Mailing Address: 61 Summer Street
City: Rowley State: MA Zip Code: 01969
FEC ID number of contributing federal political committee: C
Name of Employer: Essex Group
Occupation: President
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2500.00
Date of Receipt: 08 / 03 / 2016
Transaction ID : C3365131
Amount of Each Receipt this Period: 2500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): James Romano
Mailing Address: 26 Island Park Road
City: Ipswich State: MA Zip Code: 01938
FEC ID number of contributing federal political committee: C
Name of Employer: Essex Group Management
Occupation: Executive Director
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 08 / 12 / 2016
Transaction ID : C3371089
Amount of Each Receipt this Period: 250.00
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 3250.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial): Leonard Russ
Mailing Address: 40 Keogh Lane
City: New Rochelle | State: NY | Zip Code: 10805
FEC ID number of contributing federal political committee: C
Name of Employer: Bayberry Health Care
Occupation: Skilled Nursing Facility Owner & Admin
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: 08 / 12 / 2016
Transaction ID : C3370258
Amount of Each Receipt this Period: 2500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Michael Scharfenberger
Mailing Address: 7265 Kenwood Road # 300
City: Cincinnati | State: OH | Zip Code: 45236-4414
FEC ID number of contributing federal political committee: C
Name of Employer: Nursing Care Management
Occupation: Executive Vice President
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 562.50
Date of Receipt: 08 / 15 / 2016
Transaction ID : C3378926
Amount of Each Receipt this Period: 187.50
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Floyd Schlossberg
Mailing Address: 4200 W Peterson Ave # 140
City: Chicago | State: IL | Zip Code: 60646-6819
FEC ID number of contributing federal political committee: C
Name of Employer: Alden Management Inc
Occupation: President
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 5000.00
Date of Receipt: 08 / 15 / 2016
Transaction ID : C3378927
Amount of Each Receipt this Period: 2500.00
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 5187.50

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)
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial): Gerald Schroer Jr.
Mailing Address: 339 East Maple Street, Suite 100
City: North Canton | State: OH | Zip Code: 44720
FEC ID number of contributing federal political committee: C
Name of Employer: The Schroer Group | Occupation: President
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 2500.00
Date of Receipt: 08/08/2016
Transaction ID : C3378922
Amount of Each Receipt this Period: 1250.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Christina L Sharp
Mailing Address: 1644 Mount Eagle Pl
City: Alexandria | State: VA | Zip Code: 22302-2121
FEC ID number of contributing federal political committee: C
Name of Employer: American Health Care Association | Occupation: Senior Director, Member Relations
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 249.92
Date of Receipt: 08/22/2016
Transaction ID : C3378971
Amount of Each Receipt this Period: 45.44
☐ Memo Item
* Payroll Deduction: $22.72 Bi-Weekly

C. Full Name (Last, First, Middle Initial): Jennifer S Shimer
Mailing Address: 9507 Shelly Krasnow Ln
City: Fairfax | State: VA | Zip Code: 22031-4720
FEC ID number of contributing federal political committee: C
Name of Employer: American Health Care Association | Occupation: COO
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 08/22/2016
Transaction ID : C3378972
Amount of Each Receipt this Period: 100.00
☐ Memo Item
* Payroll Deduction: $50.00 Bi-Weekly

SUBTOTAL of Receipts This Page (optional) ▶ 1395.44

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

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial): Robert Siebel
Mailing Address: 13185 W. Green Mountain Drive
City: Lakewood State: CO Zip Code: 80228
FEC ID number of contributing federal political committee: C
Name of Employer: Carriage Healthcare Companies, Inc.
Occupation: CEO
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 3125.00
Date of Receipt: 08 / 12 / 2016
Transaction ID : C3370631
Amount of Each Receipt this Period: 1875.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Martin Stott
Mailing Address: 15035 Memorial Tower Dr
City: Baton Rouge State: LA Zip Code: 70810-8398
FEC ID number of contributing federal political committee: C
Name of Employer: Diversified Health Care
Occupation: Owner/Operator
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 3750.00
Date of Receipt: 08 / 12 / 2016
Transaction ID : C3378925
Amount of Each Receipt this Period: 1250.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Joseph Drew Thies
Mailing Address: 1101 L Street NW Apt. 504
City: Washington State: DC Zip Code: 20005
FEC ID number of contributing federal political committee: C
Name of Employer: AHCA
Occupation: Manager, Political and Grassroots
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00
Date of Receipt: 08 / 22 / 2016
Transaction ID : C3378973
Amount of Each Receipt this Period: 50.00
☐ Memo Item

* Payroll Deduction: $25.00 Bi-Weekly

SUBTOTAL of Receipts This Page (optional) ▶ 3175.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial): Tracy M. Veal
Mailing Address: 508 Barkwood Ct.
City: Jackson State: GA Zip Code: 30233
FEC ID number of contributing federal political committee: C
Name of Employer: Medline Industries, Inc.
Occupation: Sales Representative
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 08 / 03 / 2016
Transaction ID : C3378914
Amount of Each Receipt this Period: 300.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): Jack Vetter
Mailing Address: 20220 Harney Street
City: Elkhorn State: NE Zip Code: 68022
FEC ID number of contributing federal political committee: C
Name of Employer: Vetter Health Services
Occupation: President
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 3750.00
Date of Receipt: 08 / 08 / 2016
Transaction ID : C3386057
Amount of Each Receipt this Period: 1250.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): David Voepel
Mailing Address: 9865 State Rte. 124
City: Sherman State: IL Zip Code: 62684
FEC ID number of contributing federal political committee: C
Name of Employer: Illinois Health Care Association
Occupation: Executive Director
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 / 05 / 2016
Transaction ID : C3365306
Amount of Each Receipt this Period: 500.00
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 2050.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

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

Mailing Address 4935 Lafayette Plain City Rd.

City: London | State: OH | Zip Code: 43140

FEC ID number of contributing federal political committee. C

Name of Employer: Wesley Glen
Occupation: Chief Financial Officer

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 412.50

Date of Receipt: 08 / 30 / 2016
Transaction ID : C3380358

Amount of Each Receipt this Period: 137.50

☐ Memo Item

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

Mailing Address 3413 Tansey Close Drive

City: Wilmington | State: NC | Zip Code: 28409

FEC ID number of contributing federal political committee. C

Name of Employer: Liberty Healthcare Management
Occupation: COO

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 08 / 19 / 2016
Transaction ID : C3376670

Amount of Each Receipt this Period: 5000.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Briar Hill Management, LLC

Mailing Address PO Box 2712

City: Ridgeland | State: MS | Zip Code: 39158-2712

FEC ID number of contributing federal political committee. C

Name of Employer:
Occupation:

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 08 / 15 / 2016
Transaction ID : C3378931

Amount of Each Receipt this Period: 2500.00

☐ Memo Item

PARTNERSHIP--partners below if itemized

SUBTOTAL of Receipts This Page (optional) ▶ 7637.50

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A.
Full Name (Last, First, Middle Initial): Robert Rotolo
Mailing Address: PO Box 3376
City: Ridgeland State: MS Zip Code: 39158
FEC ID number of contributing federal political committee: C
Name of Employer: Briar Hill Management
Occupation: Owner
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: 08 / 15 / 2016
Transaction ID : C3378932
Amount of Each Receipt this Period: 2500.00
☒ Memo Item
*

B.
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
Amount of Each Receipt this Period:
☐ Memo Item

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
Amount of Each Receipt this Period:
☐ Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶ 50043.76

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)
[x] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial): American Express
Mailing Address: PO Box 53773
City: Phoenix State: AZ Zip Code: 85072-3773
Purpose of Disbursement: Credit Card Processing Fees
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 08 / D D 05 / Y Y Y Y 2016
Transaction ID : D175615
Amount of Each Disbursement this Period: 24.80
[ ] Memo Item

B. Full Name (Last, First, Middle Initial): BB&T Merchant Services
Mailing Address: PO Box 200
City: Wilson State: NC Zip Code: 27894-0200
Purpose of Disbursement: Credit Card Processing Fees
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 08 / D D 15 / Y Y Y Y 2016
Transaction ID : D175613
Amount of Each Disbursement this Period: 120.11
[ ] Memo Item

C. Full Name (Last, First, Middle Initial): BB&T
Mailing Address: 1099 New York Ave NW Ste 100
City: Washington State: DC Zip Code: 20001-4452
Purpose of Disbursement: Bank Fees
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M 08 / D D 22 / Y Y Y Y 2016
Transaction ID : D175614
Amount of Each Disbursement this Period: 184.38
[ ] Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 329.29

TOTAL This Period (last page this line number only) ▶ 329.29

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial): BRADY FOR CONGRESS
Mailing Address: P.O. Box 8277
City: The Woodlands State: TX Zip Code: 77387
Purpose of Disbursement: Contribution
Candidate Name: Rep. Kevin Brady
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: TX District: 08
Disbursement For: 2016 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: M 08 / D 17 / Y 2016
Transaction ID : D175291
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): HELLERHIGHWATER PAC
Mailing Address: PO BOX 370672
City: LAS VEGAS State: NV Zip Code: 89137
Purpose of Disbursement: Contribution
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M 08 / D 08 / Y 2016
Transaction ID : D175218
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): Kansans for Marshall
Mailing Address: PO Box 1588
City: Great Bend State: KS Zip Code: 67530
Purpose of Disbursement: Contribution
Candidate Name: Roger W Marshall
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: KS District: 01
Disbursement For: 2016 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: M 08 / D 22 / Y 2016
Transaction ID : D175332
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial): LOEBSACK FOR CONGRESS
Mailing Address: PO Box 3013
City: Iowa City State: IA Zip Code: 52244
Purpose of Disbursement: Contribution
Candidate Name: Rep. Dave Loebsack
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: IA District: 02
Disbursement For: 2016 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 08 / 22 / 2016
Transaction ID : D175327
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): New Pioneers PAC
Mailing Address: 228 S WASHINGTON ST STE 115
City: Alexandria State: VA Zip Code: 22314
Purpose of Disbursement: Contribution
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 08 / 01 / 2016
Transaction ID : D175155
Amount of Each Disbursement this Period: 5000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): ADRIAN SMITH FOR CONGRESS
Mailing Address: 3321 AVENUE I SUITE 6
City: SCOTTSBLUFF State: NE Zip Code: 69361
Purpose of Disbursement: Contribution
Candidate Name: Rep. ADRIAN SMITH
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: NE District: 03
Disbursement For: 2016 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 08 / 01 / 2016
Transaction ID : D175160
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 8500.00

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial): LATTA FOR CONGRESS
Mailing Address: PO BOX 106
City: BOWLING GREEN State: OH Zip Code: 43402
Purpose of Disbursement: Contribution
Candidate Name: Rep. Bob Latta
Office Sought: ☒ House ☐ Senate ☐ President
State: OH District: 05
Disbursement For: 2016 ☐ Primary ☒ General ☐ Other (specify)
Category/Type
Date of Disbursement: 08 / 22 / 2016
Transaction ID : D175329
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): CARLOS CURBELO CONGRESS
Mailing Address: 8770 SUNSET DRIVE #355
City: MIAMI State: FL Zip Code: 33173
Purpose of Disbursement: Contribution
Candidate Name: Rep. Carlos Curbelo
Office Sought: ☒ House ☐ Senate ☐ President
State: FL District: 26
Disbursement For: 2016 ☒ Primary ☐ General ☐ Other (specify)
Category/Type
Date of Disbursement: 08 / 30 / 2016
Transaction ID : D175376
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): YOUNG FOR IOWA, INC.
Mailing Address: PO BOX 162
City: VAN METER State: IA Zip Code: 50261
Purpose of Disbursement: Contribution
Candidate Name: Rep. David Young
Office Sought: ☒ House ☐ Senate ☐ President
State: IA District: 03
Disbursement For: 2016 ☐ Primary ☒ General ☐ Other (specify)
Category/Type
Date of Disbursement: 08 / 08 / 2016
Transaction ID : D175222
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial): FRIENDS OF DON BEYER
Mailing Address: 1751 POTOMAC GREENS DRIVE
City: ALEXANDRIA State: VA Zip Code: 22314
Purpose of Disbursement: Contribution
Candidate Name: Rep. Don Beyer Jr.
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: VA District: 08
Disbursement For: 2016 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 08 / 08 / 2016
Transaction ID : D175219
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): UPTON FOR ALL OF US
Mailing Address: P.O. Box 490
City: St. Joseph State: MI Zip Code: 49085
Purpose of Disbursement: Contribution
Candidate Name: Rep. Fred Upton
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: MI District: 06
Disbursement For: 2016 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 08 / 22 / 2016
Transaction ID : D175330
Amount of Each Disbursement this Period: 5000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): WALDEN FOR CONGRESS
Mailing Address: PO Box 1091
City: Hood River State: OR Zip Code: 97031
Purpose of Disbursement: Contribution
Candidate Name: Rep. Greg P. Walden
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: OR District: 02
Disbursement For: 2016 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 08 / 01 / 2016
Transaction ID : D175154
Amount of Each Disbursement this Period: 5000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 11000.00

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial): GREGG HARPER FOR CONGRESS
Mailing Address: POST OFFICE BOX 54344
City: PEARL State: MS Zip Code: 39288
Purpose of Disbursement: Contribution
Candidate Name: Rep. Gregg Harper
Category/Type
Office Sought: ☒ House ☐ Senate ☐ President
State: MS District: 03
Disbursement For: 2016 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 08 / 08 / 2016
Transaction ID : D175217
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): JIM RENACCI FOR CONGRESS
Mailing Address: 150 Smokerise Drive
City: Wadsworth State: OH Zip Code: 44281
Purpose of Disbursement: Contribution
Candidate Name: Rep. James B. Renacci
Category/Type
Office Sought: ☒ House ☐ Senate ☐ President
State: OH District: 16
Disbursement For: 2016 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 08 / 30 / 2016
Transaction ID : D175375
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): COURTNEY FOR CONGRESS
Mailing Address: 38 Risley Road
City: Vernon State: CT Zip Code: 06066
Purpose of Disbursement: Contribution
Candidate Name: Rep. Joe Courtney
Category/Type
Office Sought: ☒ House ☐ Senate ☐ President
State: CT District: 02
Disbursement For: 2016 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 08 / 08 / 2016
Transaction ID : D175220
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 4500.00

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial): LYNN JENKINS FOR CONGRESS
Mailing Address: P.O. Box 1441
City: Topeka State: KS Zip Code: 66601
Purpose of Disbursement: Contribution
Candidate Name: Rep. Lynn Jenkins
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: KS District: 02
Disbursement For: 2016 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 08 / 22 / 2016
Transaction ID : D175333
Amount of Each Disbursement this Period: 1500.00
☐ Memo Item

B. Full Name (Last, First, Middle Initial): PAUL TONKO FOR CONGRESS
Mailing Address: 911 CENTRAL AVENUE
City: ALBANY State: NY Zip Code: 12206
Purpose of Disbursement: Contribution
Candidate Name: Rep. Paul Tonko
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: NY District: 20
Disbursement For: 2016 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 08 / 01 / 2016
Transaction ID : D175158
Amount of Each Disbursement this Period: 2500.00
☐ Memo Item

C. Full Name (Last, First, Middle Initial): DOLD FOR CONGRESS
Mailing Address: PO BOX 8145
City: NORTHFIELD State: IL Zip Code: 60093
Purpose of Disbursement: Contribution
Candidate Name: Rep. ROBERT JAMES DOLD JR
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: IL District: 10
Disbursement For: 2016 ☐ Primary ☒ General ☐ Other (specify)
Date of Disbursement: 08 / 30 / 2016
Transaction ID : D175378
Amount of Each Disbursement this Period: 1000.00
☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 5000.00

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
FRIENDS OF TODD YOUNG, INC.

Mailing Address PO BOX 1053

City: BLOOMINGTON State: IN Zip Code: 47402

Purpose of Disbursement: Contribution

Candidate Name: Rep. Todd C. Young

Category/Type

Office Sought: ☒ House ☐ Senate ☐ President

State: IN District: 09

Disbursement For: 2016 ☐ Primary ☒ General ☐ Other (specify)

Date of Disbursement: 08 / 22 / 2016

Transaction ID : D175328

Amount of Each Disbursement this Period: 5000.00

☐ Memo Item

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

Mailing Address 6380 WILSHIRE BLVD., #1612

City: LOS ANGELES State: CA Zip Code: 90048

Purpose of Disbursement: Contribution

Candidate Name:

Category/Type

Office Sought: ☐ House ☐ Senate ☐ President

State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 08 / 31 / 2016

Transaction ID : D175388

Amount of Each Disbursement this Period: 5000.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
GEORGIANS FOR ISAKSON

Mailing Address PO BOX 250116

City: ATLANTA State: GA Zip Code: 30325

Purpose of Disbursement: Contribution

Candidate Name: Sen. John Hardy Isakson

Category/Type

Office Sought: ☐ House ☒ Senate ☐ President

State: GA District:

Disbursement For: 2016 ☐ Primary ☒ General ☐ Other (specify)

Date of Disbursement: 08 / 22 / 2016

Transaction ID : D175331

Amount of Each Disbursement this Period: 2500.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 12500.00

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
BLUMENTHAL FOR CONNECTICUT

Mailing Address C/O CACACE TUSCH & SANTAGATA
777 SUMMER STREET, STE 103

City: Stamford State: CT Zip Code: 06901

Purpose of Disbursement: Contribution

Candidate Name: Sen. Richard Blumenthal

Category/Type

Office Sought: ☐ House ☒ Senate ☐ President
State: CT District:

Disbursement For: 2016
☐ Primary ☒ General
☐ Other (specify)

Date of Disbursement: 08 / 01 / 2016

Transaction ID : D175149

Amount of Each Disbursement this Period: 5000.00

☐ Memo Item

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

Mailing Address 320 1st Street SE

City: Washington State: DC Zip Code: 20003

Purpose of Disbursement: Contribution

Candidate Name:

Category/Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

Date of Disbursement: 08 / 01 / 2016

Transaction ID : D175164

Amount of Each Disbursement this Period: 10000.00

☐ Memo Item

$5k to PAC; $5k Bldg Fund

C. Full Name (Last, First, Middle Initial)
WYDEN FOR OREGON

Mailing Address 2911 NE HANCOCK STREET

City: PORTLAND State: OR Zip Code: 97212

Purpose of Disbursement: Contribution

Candidate Name:

Category/Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

Date of Disbursement: 08 / 08 / 2016

Transaction ID : D175221

Amount of Each Disbursement this Period: 5000.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 20000.00

TOTAL This Period (last page this line number only) ▶ 73500.00

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)
☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A.
Full Name (Last, First, Middle Initial)
James E. Clyburn Research and Scholarship Foundation

Mailing Address 499 South Capitol Street SW, Suite

City: Washington
State: DC
Zip Code: 20003

Purpose of Disbursement: Donation

Candidate Name

Category/Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: M M 08 / D D 01 / Y Y Y Y 2016

Transaction ID : D175156

Amount of Each Disbursement this Period: 5000.00

☐ Memo Item

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

Mailing Address

City
State
Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

☐ Memo Item

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

Mailing Address

City
State
Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement: M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional) ▶ 5000.00

TOTAL This Period (last page this line number only) ▶ 5000.00