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

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

Election on 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 03 / 01 / 2013 through 03 / 31 / 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Leonard Russ

Signature of Treasurer *Mr. Leonard Russ* ***[Electronically Filed]*** Date 04 / 19 / 2013

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: 03 / 01 / 2013 To: 03 / 01 / 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2013		287615.28
(b) Cash on Hand at Beginning of Reporting Period	402698.36	
(c) Total Receipts (from Line 19)	110792.74	357678.44
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	513491.10	645293.72
7. Total Disbursements (from Line 31)	66912.24	198714.86
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	446578.86	446578.86
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: M M 03 / D D 01 / Y Y Y Y 2013 To: M M 03 / D D 31 / Y Y Y Y 2013

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)	105972.31	333474.31
(ii) Unitemized	2889.30	11066.75
(iii) TOTAL (add Lines 11(a)(i) and (ii)) ▶	108861.61	344541.06
(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) ▶	108861.61	354541.06
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)	1931.13	1931.13
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	1206.25
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)) ▶	110792.74	357678.44
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	110792.74	357678.44

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	1955.99	4758.61
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	1955.99	4758.61
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	63750.00	192750.00
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	1206.25	1206.25
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))	66912.24	198714.86
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) ▶	66912.24	198714.86

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)	108861.61	354541.06
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	108861.61	354541.06
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	1955.99	4758.61
37. Offsets to Operating Expenditures (from Line 15, page 3)	1931.13	1931.13
38. Net Operating Expenditures (subtract Line 37 from Line 36) ▶	24.86	2827.48

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)
[X] 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): Dirk Anjewierden
Mailing Address: 1863 E. Lincoln Lane
City: Salt Lake City | State: UT | Zip Code: 84124
FEC ID number of contributing federal political committee: C
Name of Employer: Utah Health Care Association
Occupation: State Executive
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 550.00
Date of Receipt: 03 / 05 / 2013
Transaction ID : C2281100
Amount of Each Receipt this Period: 550.00

B. Full Name (Last, First, Middle Initial): David Arnn
Mailing Address: 166 Lake Royale
City: Louisburg | State: NC | Zip Code: 27549-9595
FEC ID number of contributing federal political committee: C
Name of Employer: Smithfield Manor Inc.
Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 03 / 18 / 2013
Transaction ID : C2298950
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Shea Baker
Mailing Address: 12573 Tuscola Rd
City: Clio | State: MI | Zip Code: 48420
FEC ID number of contributing federal political committee: C
Name of Employer: Medilodge of Montrose
Occupation: Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 / 31 / 2013
Transaction ID : C2298187
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 1800.00

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): Vernon Baker
Mailing Address: 120 Dogwood Lane
City: Orange | State: VA | Zip Code: 22960-1058
FEC ID number of contributing federal political committee: C
Name of Employer: Dogwood Village | Occupation: Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 250.00
Date of Receipt: 03 / 18 / 2013
Transaction ID : C2289377
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial): Cecil Barcelo
Mailing Address: 411 Alabama Ave
City: League City | State: TX | Zip Code: 77573-2615
FEC ID number of contributing federal political committee: C
Name of Employer: Baywind Village | Occupation: Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 275.00
Date of Receipt: 03 / 18 / 2013
Transaction ID : C2298951
Amount of Each Receipt this Period: 275.00

C. Full Name (Last, First, Middle Initial): Bobby Beebe
Mailing Address: 763 Avery Boulevard North
City: Ridgeland | State: MS | Zip Code: 39157-5218
FEC ID number of contributing federal political committee: C
Name of Employer: Magnolia Management Corporation | Occupation: Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 5000.00
Date of Receipt: 03 / 04 / 2013
Transaction ID : C2282360
Amount of Each Receipt this Period: 5000.00

SUBTOTAL of Receipts This Page (optional) ▶ 5525.00

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): Elton G. Beebe
Mailing Address: 763 Avery Blvd. N
City: Ridgeland | State: MS | Zip Code: 39157
FEC ID number of contributing federal political committee: C
Name of Employer: Magnolia Management Corporation
Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: 03 / 19 / 2013
Transaction ID : C2291731
Amount of Each Receipt this Period: 5000.00

B. Full Name (Last, First, Middle Initial): Melanie Belfry
Mailing Address: 53751 Luann Drive
City: Shelby Township | State: MI | Zip Code: 48316
FEC ID number of contributing federal political committee: C
Name of Employer: Medilodge of Rochester Hills
Occupation: Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 / 31 / 2013
Transaction ID : C2298188
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial): Scott Broussard
Mailing Address: 417 Industrial Park Drive
City: Oberlin | State: LA | Zip Code: 70655
FEC ID number of contributing federal political committee: C
Name of Employer: St. Francis Nursing Home
Occupation: Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03 / 31 / 2013
Transaction ID : C2298186
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 5750.00

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

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ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Douglas Burr
Mailing Address: 1185 Wilde Run Court
City: Roswell State: GA Zip Code: 30075
FEC ID number of contributing federal political committee: C
Name of Employer: Cypress Administrative Services, LLC
Occupation: Vice President, Finance
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00
Date of Receipt: 03 / 27 / 2013
Transaction ID : C2295680
Amount of Each Receipt this Period: 275.00

B. Full Name (Last, First, Middle Initial): Calvin Callaway
Mailing Address: 510 Mill Street
City: Folsom State: CA Zip Code: 95630
FEC ID number of contributing federal political committee: C
Name of Employer: Folsom Convalescent Hospital
Occupation: Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt: 03 / 28 / 2013
Transaction ID : C2295883
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Steven Chamley
Mailing Address: 34 Northcrest Drive
City: Council Bluffs State: IA Zip Code: 51503
FEC ID number of contributing federal political committee: C
Name of Employer: Northcrest Living Center
Occupation: Owner/Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt: 03 / 21 / 2013
Transaction ID : C2296997
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 1275.00

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 E. Chies
Mailing Address: 7651 Old Central Ave NE
City: Fridley State: MN Zip Code: 55432
FEC ID number of contributing federal political committee: C
Name of Employer: Benedictine Health Services
Occupation: Healthcare Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 / 11 / 2013
Transaction ID : C2287014
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial): Gerald Coggin
Mailing Address: 100 E Vine St
City: Murfreesboro State: TN Zip Code: 37130-3734
FEC ID number of contributing federal political committee: C
Name of Employer: National Healthcare Corp
Occupation: Senior Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: 03 / 26 / 2013
Transaction ID : C2295833
Amount of Each Receipt this Period: 5000.00

C. Full Name (Last, First, Middle Initial): Cathie Coleman
Mailing Address: 9635 Bloomsbury Circle
City: Northville State: MI Zip Code: 48167
FEC ID number of contributing federal political committee: C
Name of Employer: Medilodge Group
Occupation: Life Enhancement Specialist
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 / 31 / 2013
Transaction ID : C2298209
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 5500.00

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): Michael Cowden
Mailing Address: 1801 Clydesdale Place, NW #621
City: Washington State: DC Zip Code: 20009
FEC ID number of contributing federal political committee: C
Name of Employer: American Health Care Association
Occupation: Grassroots Organizer
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 / 07 / 2013
Transaction ID : C2282390
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial): Greg Crist
Mailing Address: 5103 Gardner Drive
City: Alexandria State: VA Zip Code: 22304
FEC ID number of contributing federal political committee: C
Name of Employer: American Health Care Association
Occupation: SVP Public Affairs
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 03 / 07 / 2013
Transaction ID : C2282393
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Deborah Ann Culp
Mailing Address: 64500 Van Dyke
City: Washington State: MI Zip Code: 48095-2583
FEC ID number of contributing federal political committee: C
Name of Employer: Medilodge Group
Occupation: Director of Operations
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 / 31 / 2013
Transaction ID : C2298189
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Hap Cursey
Mailing Address: 531 Stevenson Lane
City: Towson | State: MD | Zip Code: 21286
FEC ID number of contributing federal political committee: C
Name of Employer: Holly Hill Manor | Occupation: Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 03 / 01 / 2013
Transaction ID : C2276075
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): Kathleen A. Denean
Mailing Address: 1553 Meisner Road
City: East China | State: MI | Zip Code: 48054
FEC ID number of contributing federal political committee: C
Name of Employer: Medilodge Group | Occupation: Business Finance Specialist
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 250.00
Date of Receipt: 03 / 31 / 2013
Transaction ID : C2298190
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial): Paul Diaz
Mailing Address: 680 S 4th St
City: Louisville | State: KY | Zip Code: 40202-2407
FEC ID number of contributing federal political committee: C
Name of Employer: Kindred HealthCare | Occupation: Chief Executive Officer
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 5000.00
Date of Receipt: 03 / 26 / 2013
Transaction ID : C2295836
Amount of Each Receipt this Period: 5000.00

SUBTOTAL of Receipts This Page (optional) ▶ 5750.00

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): Nathan Dikes
Mailing Address: 3005 S. Ponderosa Lane
City: Spokane | State: WA | Zip Code: 99206
FEC ID number of contributing federal political committee: C
Name of Employer: Sunshine Health Facilities, Inc.
Occupation: CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03 / 04 / 2013
Transaction ID : C2278762
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): Chris Donnellan
Mailing Address: 2830 Marshall Street
City: Falls Church | State: VA | Zip Code: 22042
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: 250.00
Date of Receipt: 03 / 07 / 2013
Transaction ID : C2282389
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial): Weston Edwards
Mailing Address: 2390 North Airport Road
City: Ft Myers | State: FL | Zip Code: 03397
FEC ID number of contributing federal political committee: C
Name of Employer: Page Healthcare
Occupation: President and CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 / 18 / 2013
Transaction ID : C2289376
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 1000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): John Elliot
Mailing Address: 240 Capitol Street, Suite 500
City: Charleston State: WV Zip Code: 25301-2297
FEC ID number of contributing federal political committee: C
Name of Employer: Amer. Medical Facilities Management, I
Occupation: CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2500.00
Date of Receipt: 03/04/2013
Transaction ID : C2306429
Amount of Each Receipt this Period: 1250.00

B. Full Name (Last, First, Middle Initial): John Elliot
Mailing Address: 240 Capitol Street, Suite 500
City: Charleston State: WV Zip Code: 25301-2297
FEC ID number of contributing federal political committee: C
Name of Employer: Amer. Medical Facilities Management, I
Occupation: CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2500.00
Date of Receipt: 03/04/2013
Transaction ID : C2306430
Amount of Each Receipt this Period: 1250.00

C. Full Name (Last, First, Middle Initial): Thomas Elliot
Mailing Address: PO Box 180972
City: Utica State: MI Zip Code: 48318
FEC ID number of contributing federal political committee: C
Name of Employer: MediLodge
Occupation: Nursing Facility Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03/31/2013
Transaction ID : C2298191
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 2750.00

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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[X] 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): Jeri Falk
Mailing Address: 4690 Buckingham Drive
City: Port Huron | State: MI | Zip Code: 48060
FEC ID number of contributing federal political committee: C
Name of Employer: Medilodge of Yale
Occupation: Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 / 31 / 2013
Transaction ID : C2298192
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial): Toni Fatone
Mailing Address: 100 Ferncliff Dr
City: West Hartfrd | State: CT | Zip Code: 06117-1026
FEC ID number of contributing federal political committee: C
Name of Employer: TMF Consulting Services
Occupation: Long Term Care Consultant
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03 / 21 / 2013
Transaction ID : C2296998
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Phillip Fogg Jr.
Mailing Address: 4560 SE International Way
City: Milwaukie | State: OR | Zip Code: 97222-4628
FEC ID number of contributing federal political committee: C
Name of Employer: Marquis Companies, Inc.
Occupation: CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: 03 / 13 / 2013
Transaction ID : C2288351
Amount of Each Receipt this Period: 5000.00

SUBTOTAL of Receipts This Page (optional) ▶ 5750.00

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): Barney Foland
Mailing Address: 4948 Sycamore Road
City: Newport | State: MI | Zip Code: 48166
FEC ID number of contributing federal political committee: C
Name of Employer: Medilodge of Taylor
Occupation: Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 / 31 / 2013
Transaction ID : C2298193
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial): Michael Forgey
Mailing Address: 3403 South Overlook Pass
City: New Palestine | State: IN | Zip Code: 46163-9484
FEC ID number of contributing federal political committee: C
Name of Employer: Miller's Health Systems Inc.
Occupation: Sr. VP of Operations
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 / 04 / 2013
Transaction ID : C2282361
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial): David Gifford
Mailing Address: 81 Kenyon Ave
City: East Greenwich | State: RI | Zip Code: 02818-2905
FEC ID number of contributing federal political committee: C
Name of Employer: AHCA/NCAL
Occupation: Physician
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 3000.00
Date of Receipt: 03 / 28 / 2013
Transaction ID : C2295736
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Misti Gilbertson
Mailing Address: 44102 152nd Street
City: Waubay State: SD Zip Code: 57273
FEC ID number of contributing federal political committee: C
Name of Employer: Tealwood Care Centers
Occupation: Director of Human Resources
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 250.00
Date of Receipt: 03 / 21 / 2013
Transaction ID : C2296999
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial): Jason Girouard
Mailing Address: 1060 Howard Broussard Rd
City: Saint Martinville State: LA Zip Code: 70582
FEC ID number of contributing federal political committee: C
Name of Employer: New Iberia Manor
Occupation: Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 03 / 13 / 2013
Transaction ID : C2288367
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Don Gormly
Mailing Address: 17011 Beach Bl., Suite 1130
City: Huntington Beach State: CA Zip Code: 92647
FEC ID number of contributing federal political committee: C
Name of Employer: Meritage Healthcare
Occupation: CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 5000.00
Date of Receipt: 03 / 18 / 2013
Transaction ID : C2290215
Amount of Each Receipt this Period: 5000.00

SUBTOTAL of Receipts This Page (optional) ▶ 5750.00

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): 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: 625.00
Date of Receipt: 03 / 11 / 2013
Transaction ID : C2287027
Amount of Each Receipt this Period: 625.00

B. Full Name (Last, First, Middle Initial): Melinda Hayes
Mailing Address: 6833 Sherwood
City: Fowlerville State: MI Zip Code: 48836
FEC ID number of contributing federal political committee: C
Name of Employer: Heritage Manor HCC
Occupation: Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 / 31 / 2013
Transaction ID : C2298194
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial): Sue Hazel
Mailing Address: 1775 N. Gates Road
City: Sandusky State: MI Zip Code: 48471
FEC ID number of contributing federal political committee: C
Name of Employer: Medilodge of Yale
Occupation: Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 / 31 / 2013
Transaction ID : C2298195
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 1125.00

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): Susan Herberholz
Mailing Address: 2538 Vero Dr
City: Highland State: MI Zip Code: 48356
FEC ID number of contributing federal political committee: C
Name of Employer: Medilodge of Milford
Occupation: Facilities Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03/31/2013
Transaction ID : C2298196
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial): Brian Holloway
Mailing Address: 1001 Center Street
City: Little Egg Harbor State: NJ Zip Code: 08087-1364
FEC ID number of contributing federal political committee: C
Name of Employer: Seacrest Village
Occupation: Owner/President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2000.00
Date of Receipt: 03/13/2013
Transaction ID : C2288327
Amount of Each Receipt this Period: 2000.00

C. Full Name (Last, First, Middle Initial): Jerry Holloway
Mailing Address: 3381 Keefer Rd
City: Chico State: CA Zip Code: 95973-8916
FEC ID number of contributing federal political committee: C
Name of Employer: Meritage Healthcare
Occupation: Owner/Operator
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: 03/18/2013
Transaction ID : C2290348
Amount of Each Receipt this Period: 5000.00

SUBTOTAL of Receipts This Page (optional) ▶ 7250.00

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): Karen Hyatt
Mailing Address: 5102 Scenic Dr
City: Yakima State: WA Zip Code: 98908-2229
FEC ID number of contributing federal political committee: C
Name of Employer: Hyatt
Occupation: Real Estate Consultant
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 550.00
Date of Receipt: 03 / 31 / 2013
Transaction ID : C2297330
Amount of Each Receipt this Period: 550.00

B. Full Name (Last, First, Middle Initial): Eddy Inzana
Mailing Address: 8796 Route 219
City: Brockway State: PA Zip Code: 15824
FEC ID number of contributing federal political committee: C
Name of Employer: Guardian Elder Care
Occupation: CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 250.00
Date of Receipt: 03 / 18 / 2013
Transaction ID : C2298954
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial): Tiffany Karlin
Mailing Address: 4541 East Anahiem Street
City: Long Beach State: CA Zip Code: 90804
FEC ID number of contributing federal political committee: C
Name of Employer: Accurate Business Results
Occupation: CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 03 / 04 / 2013
Transaction ID : C2282363
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 1300.00

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): Sonya Kemp
Mailing Address: 438 N Water Ave
City: Gallatin State: TN Zip Code: 37066-2306
FEC ID number of contributing federal political committee: C
Name of Employer: Gallatin Health Care
Occupation: ADM
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: 03 / 27 / 2013
Transaction ID : C2295679
Amount of Each Receipt this Period: 5000.00

B. Full Name (Last, First, Middle Initial): Suzanna Kohlhoff
Mailing Address: 2746 Mills Road
City: Prescott State: MI Zip Code: 48756
FEC ID number of contributing federal political committee: C
Name of Employer: Medilodge of Sterling
Occupation: Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 / 31 / 2013
Transaction ID : C2298211
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial): Steve Kuranz
Mailing Address: 1400 8th Ave
City: Union Grove State: WI Zip Code: 53182-1063
FEC ID number of contributing federal political committee: C
Name of Employer: Hope Health & Rehabilitation
Occupation: Owner
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 / 21 / 2013
Transaction ID : C2297007
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 5500.00

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): Cynthia Leach
Mailing Address: 4943 East Evans Drive
City: Scottsdale State: AZ Zip Code: 85254-2824
FEC ID number of contributing federal political committee: C
Name of Employer: CopperSands Inc. Occupation: VP
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03/04/2013
Transaction ID : C2282355
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial): William Bruce Levering
Mailing Address: 6180 Sparta Road
City: Fredericktown State: OH Zip Code: 43019
FEC ID number of contributing federal political committee: C
Name of Employer: Levering Management Occupation: CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 03/21/2013
Transaction ID : C2297001
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Bethany R Martino
Mailing Address: 8559 Window Latch Way
City: Columbia State: MD Zip Code: 21045
FEC ID number of contributing federal political committee: C
Name of Employer: American Health Care Association Occupation: Vice President, Public Affairs
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 234.81
Date of Receipt: 03/21/2013
Transaction ID : C2311526
Amount of Each Receipt this Period: 234.81

* Payroll Deduction: $78.27 Bi-Weekly

SUBTOTAL of Receipts This Page (optional) ▶ 1484.81

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 Messick
Mailing Address: 1073 Kensington Street, NW
City: Walker State: MI Zip Code: 49534
FEC ID number of contributing federal political committee: C
Name of Employer: Pilgrim Manor
Occupation: Chief Operating Officer
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 / 13 / 2013
Transaction ID : C2288349
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial): Karen Monday
Mailing Address: 46767 Franks Lane
City: Shelby Township State: MI Zip Code: 48315
FEC ID number of contributing federal political committee: C
Name of Employer: Medilodge
Occupation: Nursing Home Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 / 31 / 2013
Transaction ID : C2298197
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial): Van Moore
Mailing Address: 3155 River Rd S
City: Salem State: OR Zip Code: 97302-9819
FEC ID number of contributing federal political committee: C
Name of Employer: Westcare Management, Inc.
Occupation: Senior Vice President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03 / 13 / 2013
Transaction ID : C2288330
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 1000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Justin M. Moreau
Mailing Address: 19280 Edgewater Drive
City: Hillman State: MI Zip Code: 49746
FEC ID number of contributing federal political committee: C
Name of Employer: MediLodge of Hillman
Occupation: Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 / 31 / 2013
Transaction ID : C2298198
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial): Abraham Morse
Mailing Address: 21 Sagamore Road
City: Newton Highlands State: MA Zip Code: 02461
FEC ID number of contributing federal political committee: C
Name of Employer: Massachusetts Senior Care Association
Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 03 / 21 / 2013
Transaction ID : C2297002
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Hari Namboodiri
Mailing Address: 1301 E Quebec
City: McAllen State: TX Zip Code: 78503
FEC ID number of contributing federal political committee: C
Name of Employer: Sava Senior Care
Occupation: Senior Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03 / 18 / 2013
Transaction ID : C2289444
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 1750.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial): Renee Lynn Naylor
Mailing Address: 334 Eagles Wing Street, NW
City: Salem State: OR Zip Code: 97304
FEC ID number of contributing federal political committee: C
Name of Employer: Westcare
Occupation: VP
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03 / 05 / 2013
Transaction ID : C2281082
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): Mark V Parkinson
Mailing Address: 8930 Harvest Square Ct
City: Potomac State: MD Zip Code: 20854-4475
FEC ID number of contributing federal political committee: C
Name of Employer: American Health Care Association
Occupation: President and CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1200.00
Date of Receipt: 03 / 21 / 2013
Transaction ID : C2311532
Amount of Each Receipt this Period: 600.00
* Payroll Deduction: $200.00 Bi-Weekly

C. Full Name (Last, First, Middle Initial): Michelle M. Peeper
Mailing Address: 14359 Irene Street
City: Southgate State: MI Zip Code: 48195-1949
FEC ID number of contributing federal political committee: C
Name of Employer: Medilodge of Southfield
Occupation: Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 / 31 / 2013
Transaction ID : C2298210
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 1350.00

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): Lynne Peters
Mailing Address: 470 Timberlea Drive
City: Rochester Hills State: MI Zip Code: 48309
FEC ID number of contributing federal political committee: C
Name of Employer: MediLodge of Rochester Hills
Occupation: Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 / 31 / 2013
Transaction ID : C2298199
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial): Shelly Peterson
Mailing Address: 6420 Fox Meadow Dr
City: Bismarck State: ND Zip Code: 58503
FEC ID number of contributing federal political committee: C
Name of Employer: North Dakota LTC Association
Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 03 / 13 / 2013
Transaction ID : C2288335
Amount of Each Receipt this Period: 300.00

C. Full Name (Last, First, Middle Initial): Shelly Petoskey
Mailing Address: 4190 Highland Road
City: Highland State: MI Zip Code: 48357
FEC ID number of contributing federal political committee: C
Name of Employer: Medilodge of Howell
Occupation: Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 / 31 / 2013
Transaction ID : C2298200
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 800.00

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): Barbara L. Post
Mailing Address: 21112 Fleetwood Avenue
City: Harper Woods State: MI Zip Code: 48225
FEC ID number of contributing federal political committee: C
Name of Employer: Medilodge of Plymouth
Occupation: Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 / 31 / 2013
Transaction ID : C2298201
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial): Mebane Pruitt
Mailing Address: 4275 NE Lakehaven Drive
City: Atlanta State: GA Zip Code: 30319
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: 1250.00
Date of Receipt: 03 / 03 / 2013
Transaction ID : C2306359
Amount of Each Receipt this Period: 1250.00

C. Full Name (Last, First, Middle Initial): Eli Quinones
Mailing Address: 635 Boxcove Place
City: Diamond Bar State: CA Zip Code: 91765
FEC ID number of contributing federal political committee: C
Name of Employer: Alliance Nursing Centers Inc.
Occupation: CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03 / 11 / 2013
Transaction ID : C2287078
Amount of Each Receipt this Period: 500.00

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

FOR LINE NUMBER: (check only one)
[X] 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): Amber Richards
Mailing Address: 11844 Francesca Court
City: Romeo | State: MI | Zip Code: 48065
FEC ID number of contributing federal political committee: C
Name of Employer: Medlilodge of Southfield
Occupation: Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 / 31 / 2013
Transaction ID : C2298202
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial): Shari Richey
Mailing Address: 200 Southwood Drive
City: Henderson | State: TX | Zip Code: 75652
FEC ID number of contributing federal political committee: C
Name of Employer: Southwood Nursing & Rehab Center
Occupation: Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 03 / 13 / 2013
Transaction ID : C2288365
Amount of Each Receipt this Period: 400.00

C.
Full Name (Last, First, Middle Initial): Stacy Rotolo
Mailing Address: 17441 W Muirfield Dr
City: Baton Rouge | State: LA | Zip Code: 70810-5962
FEC ID number of contributing federal political committee: C
Name of Employer: Briarhill
Occupation: Owner
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 625.00
Date of Receipt: 03 / 04 / 2013
Transaction ID : C2282354
Amount of Each Receipt this Period: 625.00

SUBTOTAL of Receipts This Page (optional) ▶ 1275.00

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)
[X] 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): Julie Ryan
Mailing Address: 1718 Santa Fe Trail
City: Hartland State: MI Zip Code: 48353
FEC ID number of contributing federal political committee: C
Name of Employer: Medilodge of Howell
Occupation: Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 / 31 / 2013
Transaction ID : C2298204
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial): Lee Samson
Mailing Address: 9200 Sunset Boulevard #1100
City: West Hollywood State: CA Zip Code: 90069
FEC ID number of contributing federal political committee: C
Name of Employer: SNF Management/ Windsor
Occupation: President/ CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: 03 / 21 / 2013
Transaction ID : C2293718
Amount of Each Receipt this Period: 5000.00

C. Full Name (Last, First, Middle Initial): Laura Saull-Smith
Mailing Address: 4115 N. 18th Road
City: Arlington State: VA Zip Code: 22207
FEC ID number of contributing federal political committee: C
Name of Employer: Love Funding Corporation
Occupation: Mortgage Banking
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2000.00
Date of Receipt: 03 / 21 / 2013
Transaction ID : C2297005
Amount of Each Receipt this Period: 2000.00

SUBTOTAL of Receipts This Page (optional) ▶ 7250.00

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)
[X] 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): Philip Scalo
Mailing Address: 100 N County Line Rd.
City: Jackson State: NJ Zip Code: 08527-1264
FEC ID number of contributing federal political committee: C
Name of Employer: Bartley Healthcare
Occupation: President and CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: 03 / 11 / 2013
Transaction ID : C2287026
Amount of Each Receipt this Period: 2500.00

B. 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 ▼: 2500.00
Date of Receipt: 03 / 31 / 2013
Transaction ID : C2298207
Amount of Each Receipt this Period: 2500.00

C. Full Name (Last, First, Middle Initial): Ina 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: Special Operations
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 2500.00
Date of Receipt: 03 / 31 / 2013
Transaction ID : C2313696
Amount of Each Receipt this Period: 2500.00

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)
[X] 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): Gerald Schroer Jr.
Mailing Address: 1608 Muirfield NW
City: Canton State: OH Zip Code: 44708
FEC ID number of contributing federal political committee: C
Name of Employer: TSG Ancillaries
Occupation: Healthcare Executive
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1250.00
Date of Receipt: 03 / 07 / 2013
Transaction ID : C2282941
Amount of Each Receipt this Period: 1250.00

B. Full Name (Last, First, Middle Initial): Sam Scott
Mailing Address: 2407 St. Andrews Court
City: Muskogee State: OK Zip Code: 74403-3915
FEC ID number of contributing federal political committee: C
Name of Employer: Redwood Healthcare LLC
Occupation: Managing Member
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2500.00
Date of Receipt: 03 / 18 / 2013
Transaction ID : C2298956
Amount of Each Receipt this Period: 2500.00

C. Full Name (Last, First, Middle Initial): Trackea Scott
Mailing Address: 806 Nora Lane
City: DeSoto State: TX Zip Code: 75115
FEC ID number of contributing federal political committee: C
Name of Employer: Millbrook Healthcare and Rehab
Occupation: Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03 / 13 / 2013
Transaction ID : C2288372
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 4250.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 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): Linda Sechovec
Mailing Address: 2329 Wisconsin St NE, Ste B
City: Albuquerque State: NM Zip Code: 87110-4655
FEC ID number of contributing federal political committee: C
Name of Employer: New Mexico Health Care Association
Occupation: Executive Director
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03 / 21 / 2013
Transaction ID : C2297004
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): Robert Siebel
Mailing Address: 13185 W Green Mtn. Dr.
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: 1250.00
Date of Receipt: 03 / 28 / 2013
Transaction ID : C2295712
Amount of Each Receipt this Period: 1250.00

C. Full Name (Last, First, Middle Initial): Truman Smith
Mailing Address: PO Box 1468
City: Gladewater State: TX Zip Code: 75647-1468
FEC ID number of contributing federal political committee: C
Name of Employer: Truman W. Smith Care Centers
Occupation: Owner
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 325.00
Date of Receipt: 03 / 26 / 2013
Transaction ID : C2295842
Amount of Each Receipt this Period: 75.00

SUBTOTAL of Receipts This Page (optional) ▶ 1825.00

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)
[X] 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): Truman Smith
Mailing Address: PO Box 1468
City: Gladewater State: TX Zip Code: 75647-1468
FEC ID number of contributing federal political committee.: C
Name of Employer: Truman W. Smith Care Centers
Occupation: Owner
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 325.00
Date of Receipt: 03 / 26 / 2013
Transaction ID : C2295843
Amount of Each Receipt this Period: 150.00

B. Full Name (Last, First, Middle Initial): Jennifer Swim
Mailing Address: 8354 Chickamauga Trail
City: Shreveport State: LA Zip Code: 71107
FEC ID number of contributing federal political committee.: C
Name of Employer: Vivian Health Care Center
Occupation: Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 500.00
Date of Receipt: 03 / 04 / 2013
Transaction ID : C2282359
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial): Morris Tenenbaum
Mailing Address: 1524 53rd Street
City: Brooklyn State: NY Zip Code: 11219
FEC ID number of contributing federal political committee.: C
Name of Employer: Kings Harbor Multicare Center
Occupation: CEO
Receipt For: [ ] Primary [ ] General [ ] Other (specify) ▼
Aggregate Year-to-Date ▼: 5000.00
Date of Receipt: 03 / 28 / 2013
Transaction ID : C2295846
Amount of Each Receipt this Period: 5000.00

SUBTOTAL of Receipts This Page (optional) ▶ 5650.00

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)
[X] 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): Travis Tomlinson
Mailing Address: 3320 Thomas Road
City: Raleigh State: NC Zip Code: 27607
FEC ID number of contributing federal political committee: C
Name of Employer: UHS-Pruitt
Occupation: Nursing Home Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03 / 01 / 2013
Transaction ID : C2275821
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial): Trend Consultants
Mailing Address: 323 Highland Boulevard
City: Natchez State: MS Zip Code: 39120
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 312.50
Date of Receipt: 03 / 04 / 2013
Transaction ID : C2282362
Amount of Each Receipt this Period: 312.50
Parnership-- Partners do not reach itemization threshold

C. Full Name (Last, First, Middle Initial): Kim Vagnetti
Mailing Address: 413 Browning Dr
City: Howell State: MI Zip Code: 48843-2000
FEC ID number of contributing federal political committee: C
Name of Employer: Medilodge of Monroe
Occupation: Administrator
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 / 31 / 2013
Transaction ID : C2298208
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 1062.50

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

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

A. Full Name (Last, First, Middle Initial): Jim Walker
Mailing Address: PO Box 415
City: Centre State: AL Zip Code: 35960-0415
FEC ID number of contributing federal political committee: C
Name of Employer: Preston Health Services, Inc.
Occupation: President
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2500.00
Date of Receipt: 03 / 21 / 2013
Transaction ID : C2297006
Amount of Each Receipt this Period: 2500.00

B. Full Name (Last, First, Middle Initial): Alan Zuccari
Mailing Address: 7712 Carlton Place
City: McLean State: VA Zip Code: 22102
FEC ID number of contributing federal political committee: C
Name of Employer: Alan J. Zuccari Inc.
Occupation: Owner
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: 03 / 28 / 2013
Transaction ID : C2295816
Amount of Each Receipt this Period: 5000.00

C. Full Name (Last, First, Middle Initial): Bidwell Care Center, LLC
Mailing Address: 341 Bidwell St
City: Manchester State: CT Zip Code: 06040-6470
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: 03 / 13 / 2013
Transaction ID : C2288378
Amount of Each Receipt this Period: 250.00
PARTNERSHIP--partners below if itemized

SUBTOTAL of Receipts This Page (optional) ▶ 7750.00

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)
Chris S. Wright

Mailing Address 341 Bidwell Street

City: Manchester
State: CT
Zip Code: 06040-6470

FEC ID number of contributing federal political committee.: C

Name of Employer: Self Employed
Occupation: Nursing Home Owner

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 13 / 2013

Transaction ID : C2288379

Amount of Each Receipt this Period: 250.00

[MEMO ITEM]
*

B. Full Name (Last, First, Middle Initial)
Farmington Care Center, LLC

Mailing Address 341 Bidwell St

City: Manchester
State: CT
Zip Code: 06040-6470

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: 03 / 13 / 2013

Transaction ID : C2288380

Amount of Each Receipt this Period: 250.00

PARTNERSHIP--partners below if itemized

C. Full Name (Last, First, Middle Initial)
Chris S. Wright

Mailing Address 341 Bidwell Street

City: Manchester
State: CT
Zip Code: 06040-6470

FEC ID number of contributing federal political committee.: C

Name of Employer: Self Employed
Occupation: Nursing Home Owner

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 13 / 2013

Transaction ID : C2288381

Amount of Each Receipt this Period: 250.00

[MEMO ITEM]
*

SUBTOTAL of Receipts This Page (optional) ▶ 250.00

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

A. Full Name (Last, First, Middle Initial)
Meriden Care Center, LLC

Mailing Address 341 Bidwell St

City: Manchester
State: CT
Zip Code: 06040-6470

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
M M 03 / D D 13 / Y Y Y Y 2013

Transaction ID : C2288382

Amount of Each Receipt this Period
250.00

PARTNERSHIP--partners below if itemized

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

Mailing Address 341 Bidwell Street

City: Manchester
State: CT
Zip Code: 06040-6470

FEC ID number of contributing federal political committee: C

Name of Employer: Self Employed
Occupation: Nursing Home Owner

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M 03 / D D 13 / Y Y Y Y 2013

Transaction ID : C2288383

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
*

C. Full Name (Last, First, Middle Initial)
Westside Care Center, LLC

Mailing Address 341 Bidwell St

City: Manchester
State: CT
Zip Code: 06040-6470

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
M M 03 / D D 13 / Y Y Y Y 2013

Transaction ID : C2288384

Amount of Each Receipt this Period
250.00

PARTNERSHIP--partners below if itemized

SUBTOTAL of Receipts This Page (optional) ▶ 500.00

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

A. Full Name (Last, First, Middle Initial)
Chris S. Wright

Mailing Address 341 Bidwell Street

City: Manchester
State: CT
Zip Code: 06040-6470

FEC ID number of contributing federal political committee.: C

Name of Employer: Self Employed
Occupation: Nursing Home Owner

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 13 / 2013

Transaction ID : C2288385

Amount of Each Receipt this Period: 250.00

[MEMO ITEM]
*

B. Full Name (Last, First, Middle Initial)
Wintonbury Care Center, LLC

Mailing Address 341 Bidwell St

City: Manchester
State: CT
Zip Code: 06040-6470

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: 03 / 13 / 2013

Transaction ID : C2288386

Amount of Each Receipt this Period: 250.00

PARTNERSHIP--partners below if itemized

C. Full Name (Last, First, Middle Initial)
Chris S. Wright

Mailing Address 341 Bidwell Street

City: Manchester
State: CT
Zip Code: 06040-6470

FEC ID number of contributing federal political committee.: C

Name of Employer: Self Employed
Occupation: Nursing Home Owner

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 13 / 2013

Transaction ID : C2288387

Amount of Each Receipt this Period: 250.00

[MEMO ITEM]
*

SUBTOTAL of Receipts This Page (optional) ▶ 250.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
[X] 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)
Trinity Hill Care Center, LLC

Mailing Address 341 Bidwell St

City: Manchester
State: CT
Zip Code: 06040-6470

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
M M 03 / D D 13 / Y Y Y Y 2013

Transaction ID : C2288388

Amount of Each Receipt this Period
250.00

PARTNERSHIP--partners below if itemized

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

Mailing Address 341 Bidwell Street

City: Manchester
State: CT
Zip Code: 06040-6470

FEC ID number of contributing federal political committee.: C

Name of Employer: Self Employed
Occupation: Nursing Home Owner

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M 03 / D D 13 / Y Y Y Y 2013

Transaction ID : C2288390

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
*

C. Full Name (Last, First, Middle Initial)
Kettle Brook Care Center, LLC

Mailing Address 341 Bidwell St

City: Manchester
State: CT
Zip Code: 06040-6470

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
M M 03 / D D 13 / Y Y Y Y 2013

Transaction ID : C2288391

Amount of Each Receipt this Period
250.00

PARTNERSHIP--partners below if itemized

SUBTOTAL of Receipts This Page (optional) ▶ 500.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
[X] 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)
Chris S. Wright

Mailing Address 341 Bidwell Street

City: Manchester
State: CT
Zip Code: 06040-6470

FEC ID number of contributing federal political committee.: C

Name of Employer: Self Employed
Occupation: Nursing Home Owner

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 13 / 2013

Transaction ID : C2288392

Amount of Each Receipt this Period: 250.00

[MEMO ITEM]
*

B. Full Name (Last, First, Middle Initial)
Chestnut Point Care Center, LLC

Mailing Address 341 Bidwell St

City: Manchester
State: CT
Zip Code: 06040-6470

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: 03 / 13 / 2013

Transaction ID : C2288393

Amount of Each Receipt this Period: 250.00

PARTNERSHIP--partners below if itemized

C. Full Name (Last, First, Middle Initial)
Chris S. Wright

Mailing Address 341 Bidwell Street

City: Manchester
State: CT
Zip Code: 06040-6470

FEC ID number of contributing federal political committee.: C

Name of Employer: Self Employed
Occupation: Nursing Home Owner

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 13 / 2013

Transaction ID : C2288394

Amount of Each Receipt this Period: 250.00

[MEMO ITEM]
*

SUBTOTAL of Receipts This Page (optional) ▶ 250.00

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)
[X] 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)
Chelsea Place Care Center, LLC

Mailing Address 341 Bidwell St

City: Manchester
State: CT
Zip Code: 06040-6470

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
M M 03 / D D 13 / Y Y Y Y 2013

Transaction ID : C2288395

Amount of Each Receipt this Period
250.00

PARTNERSHIP--partners below if itemized

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

Mailing Address 341 Bidwell Street

City: Manchester
State: CT
Zip Code: 06040-6470

FEC ID number of contributing federal political committee. C

Name of Employer: Self Employed
Occupation: Nursing Home Owner

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M 03 / D D 13 / Y Y Y Y 2013

Transaction ID : C2288396

Amount of Each Receipt this Period
250.00

[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

SUBTOTAL of Receipts This Page (optional) ▶ 250.00

TOTAL This Period (last page this line number only) ▶ 105972.31

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): American Health Care Association
Mailing Address: 1201 L St. NW
City: Washington State: DC Zip Code: 20005
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 3137.38
Date of Receipt: M M 03 / D D 13 / Y Y Y Y 2013
Transaction ID : C2306083
Amount of Each Receipt this Period: 307.33
Refund of Bank Fees

B.
Full Name (Last, First, Middle Initial): American Health Care Association
Mailing Address: 1201 L St. NW
City: Washington State: DC Zip Code: 20005
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼
Aggregate Year-to-Date ▼: 3137.38
Date of Receipt: M M 03 / D D 13 / Y Y Y Y 2013
Transaction ID : C2306428
Amount of Each Receipt this Period: 1623.80
Refund of Credit Card 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 / D D / Y Y Y Y
Amount of Each Receipt this Period:

SUBTOTAL of Receipts This Page (optional) ▶ 1931.13

TOTAL This Period (last page this line number only) ▶ 1931.13

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: 03 / 04 / 2013
Transaction ID : D145080
Amount of Each Disbursement this Period: 200.00

B. 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: 03 / 07 / 2013
Transaction ID : D145081
Amount of Each Disbursement this Period: 40.00

C. 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: 03 / 11 / 2013
Transaction ID : D145082
Amount of Each Disbursement this Period: 37.60

SUBTOTAL of Disbursements This Page (optional) ▶ 277.60

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)
[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: 03 / 11 / 2013
Transaction ID : D145083
Amount of Each Disbursement this Period: 48.00

B. 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: 03 / 15 / 2013
Transaction ID : D145084
Amount of Each Disbursement this Period: 26.11

C. 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: 03 / 18 / 2013
Transaction ID : D145087
Amount of Each Disbursement this Period: 64.00

SUBTOTAL of Disbursements This Page (optional) ▶ 138.11

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)
[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 03 / D D 25 / Y Y Y Y 2013
Transaction ID : D145088
Amount of Each Disbursement this Period: 160.00

B. 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 03 / D D 25 / Y Y Y Y 2013
Transaction ID : D145089
Amount of Each Disbursement this Period: 161.60

C. 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 03 / D D 15 / Y Y Y Y 2013
Transaction ID : D145085
Amount of Each Disbursement this Period: 54.40

SUBTOTAL of Disbursements This Page (optional) ▶ 376.00

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)
[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): 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: 03 / 15 / 2013
Transaction ID : D145086
Amount of Each Disbursement this Period: 716.11

B. 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: 03 / 21 / 2013
Transaction ID : D145090
Amount of Each Disbursement this Period: 89.69

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: 03 / 21 / 2013
Transaction ID : D145091
Amount of Each Disbursement this Period: 358.48

SUBTOTAL of Disbursements This Page (optional) ▶ 1164.28

TOTAL This Period (last page this line number only) ▶ 1955.99

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)
AMERIPAC: THE FUND FOR A GREATER AMERICA

Mailing Address 499 S. CAPITOL ST. S.W. #414
--

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: 03 / 19 / 2013

Transaction ID : D144646

Amount of Each Disbursement this Period: 5000.00

B. Full Name (Last, First, Middle Initial)
BOEHNER FOR SPEAKER COMMITTEE

Mailing Address 631-B PENNSYLVANIA AVE., SE
BASEMENT UNIT

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: 03 / 25 / 2013

Transaction ID : D144760

Amount of Each Disbursement this Period: 10000.00

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

Mailing Address 499 S Capitol St SW
Ste 412

City: Washington State: DC Zip Code: 20003-4009

Purpose of Disbursement: Contribution

Candidate Name

Category/Type

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

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

Date of Disbursement: 03 / 19 / 2013

Transaction ID : D144645

Amount of Each Disbursement this Period: 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 20000.00

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)
Committee for Hispanic Causes/Building Our Leadership Diversity (BOLD) PAC

Mailing Address P.O. Box 70980

City: Washington State: DC Zip Code: 20024

Purpose of Disbursement: Contribution

Candidate Name:

Category/Type:

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

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

Date of Disbursement: 03 / 19 / 2013

Transaction ID : D144648

Amount of Each Disbursement this Period: 5000.00

B. Full Name (Last, First, Middle Initial)
FRIENDS OF PATRICK MURPHY

Mailing Address 4521 PGA BLVD. #412

City: Palm Beach Gardens State: FL Zip Code: 33418

Purpose of Disbursement: Contribution

Candidate Name: Patrick Murphy

Category/Type:

Office Sought: ☒ House ☐ Senate ☐ President
State: FL District: 18

Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)

Date of Disbursement: 03 / 11 / 2013

Transaction ID : D144433

Amount of Each Disbursement this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
M-PAC

Mailing Address 607 14th Street N.W.
Suite 800

City: Washington State: DC Zip Code: 20005

Purpose of Disbursement: Contribution

Candidate Name:

Category/Type:

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

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

Date of Disbursement: 03 / 22 / 2013

Transaction ID : D144727

Amount of Each Disbursement this Period: 1500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 7500.00

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 [X] 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): PAC TO THE FUTURE
Mailing Address: 430 S. Capitol St. SE 1st Flr.
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: 03 / 19 / 2013
Transaction ID : D144650
Amount of Each Disbursement this Period: 5000.00

B. Full Name (Last, First, Middle Initial): MCKINLEY FOR CONGRESS
Mailing Address: 32 20TH STREET
City: WHEELING State: WV Zip Code: 26003
Purpose of Disbursement: Contribution
Candidate Name: Rep. DAVID B. MCKINLEY
Category/Type:
Office Sought: [X] House / Senate / President
State: WV District: 01
Disbursement For: 2014 [X] Primary / General / Other (specify)
Date of Disbursement: 03 / 26 / 2013
Transaction ID : D144799
Amount of Each Disbursement this Period: 2000.00

C. Full Name (Last, First, Middle Initial): PALLONE FOR CONGRESS
Mailing Address: PO Box 3176
City: Long Branch State: NJ Zip Code: 07740
Purpose of Disbursement: Contribution
Candidate Name: Rep. Frank Pallone Jr.
Category/Type:
Office Sought: [X] House / Senate / President
State: NJ District: 06
Disbursement For: 2014 [X] Primary / General / Other (specify)
Date of Disbursement: 03 / 26 / 2013
Transaction ID : D144800
Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 9500.00

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): 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: 2014 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 19 / 2013
Transaction ID : D144653
Amount of Each Disbursement this Period: 5000.00

B. 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: 2014 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 04 / 2013
Transaction ID : D144321
Amount of Each Disbursement this Period: 250.00

C. Full Name (Last, First, Middle Initial): FRIENDS OF JOHN BARROW
Mailing Address: PO Box 8166
City: Savannah State: GA Zip Code: 31412
Purpose of Disbursement: Contribution
Candidate Name: Rep. John Barrow
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: GA District: 12
Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 25 / 2013
Transaction ID : D144758
Amount of Each Disbursement this Period: 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 7750.00

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): KEVIN MCCARTHY FOR CONGRESS
Mailing Address: PO Box 12667
City: Bakersfield State: CA Zip Code: 93389
Purpose of Disbursement: Contribution
Candidate Name: Rep. Kevin McCarthy
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 23
Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 19 / 2013
Transaction ID : D144651
Amount of Each Disbursement this Period: 2500.00

B. Full Name (Last, First, Middle Initial): TIBERI FOR CONGRESS
Mailing Address: 2931 E Dublin Granville Road
City: Columbus State: OH Zip Code: 43231
Purpose of Disbursement: Void of 11/16/2012 Contribution
Candidate Name: Rep. Pat Tiberi
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: OH District: 12
Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 26 / 2013
Transaction ID : D144801
Amount of Each Disbursement this Period: -1500.00

C. Full Name (Last, First, Middle Initial): TIBERI FOR CONGRESS
Mailing Address: 2931 E Dublin Granville Road
City: Columbus State: OH Zip Code: 43231
Purpose of Disbursement: Contribution
Candidate Name: Rep. Pat Tiberi
Category/Type:
Office Sought: ☒ House ☐ Senate ☐ President
State: OH District: 12
Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Date of Disbursement: 03 / 26 / 2013
Transaction ID : D144802
Amount of Each Disbursement this Period: 1500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 2500.00

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): LEVIN FOR CONGRESS
Mailing Address: PO Box 37
City: Roseville State: MI Zip Code: 48066
Purpose of Disbursement: Contribution
Candidate Name: Rep. Sander M. Levin
Office Sought: ☒ House ☐ Senate ☐ President
State: MI District: 09
Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Category/Type:
Date of Disbursement: 03 / 11 / 2013
Transaction ID : D144432
Amount of Each Disbursement this Period: 1000.00

B. Full Name (Last, First, Middle Initial): LATHAM FOR CONGRESS
Mailing Address: P.O. Box 71
City: Clarion State: IA Zip Code: 50525
Purpose of Disbursement: Contribution
Candidate Name: Rep. Tom Latham
Office Sought: ☒ House ☐ Senate ☐ President
State: IA District: 04
Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Category/Type:
Date of Disbursement: 03 / 04 / 2013
Transaction ID : D144320
Amount of Each Disbursement this Period: 2000.00

C. Full Name (Last, First, Middle Initial): VERN BUCHANAN FOR CONGRESS
Mailing Address: P. O. Box 48928
City: Sarasota State: FL Zip Code: 34230
Purpose of Disbursement: Contribution
Candidate Name: Rep. Vern Buchanan
Office Sought: ☒ House ☐ Senate ☐ President
State: FL District: 16
Disbursement For: 2014 ☒ Primary ☐ General ☐ Other (specify)
Category/Type:
Date of Disbursement: 03 / 25 / 2013
Transaction ID : D144756
Amount of Each Disbursement this Period: 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶ 8000.00

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 [X] 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): UDALL FOR COLORADO
Mailing Address: PO BOX 40158
City: DENVER State: CO Zip Code: 80204
Purpose of Disbursement: Contribution
Candidate Name: Sen. Mark Udall
Category/Type:
Office Sought: House [ ] Senate [X] President [ ] State: CO District:
Disbursement For: 2014 Primary [X] General [ ] Other (specify) ▼
Date of Disbursement: 03 / 19 / 2013
Transaction ID : D144642
Amount of Each Disbursement this Period: 4000.00

B. Full Name (Last, First, Middle Initial): PEOPLE FOR PATTY MURRAY
Mailing Address: PO BOX 3662
City: SEATTLE State: WA Zip Code: 98124
Purpose of Disbursement: Contribution
Candidate Name: Sen. Patty Murray
Category/Type:
Office Sought: House [ ] Senate [X] President [ ] State: WA District:
Disbursement For: 2016 Primary [X] General [ ] Other (specify) ▼
Date of Disbursement: 03 / 22 / 2013
Transaction ID : D144726
Amount of Each Disbursement this Period: 1000.00

C. Full Name (Last, First, Middle Initial): Tim Scott for Senate
Mailing Address: 1405 Ashley River Rd
City: Charleston State: SC Zip Code: 29407-5305
Purpose of Disbursement: Contribution
Candidate Name: Tim Scott
Category/Type:
Office Sought: House [ ] Senate [X] President [ ] State: SC District:
Disbursement For: 2014 Primary [X] General [ ] Other (specify) ▼
Date of Disbursement: 03 / 19 / 2013
Transaction ID : D144654
Amount of Each Disbursement this Period: 3500.00

SUBTOTAL of Disbursements This Page (optional) ▶ 8500.00

TOTAL This Period (last page this line number only) ▶ 63750.00

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): American Health Care Association
Mailing Address: 1201 L St. NW
City: Washington State: DC Zip Code: 20005
Purpose of Disbursement: Refund of Misdeposited Funds
Candidate Name:
Category/Type:
Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)
Date of Disbursement: M M 03 / D D 20 / Y Y Y Y 2013
Transaction ID : D144674
Amount of Each Disbursement this Period: 1206.25

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:

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:

SUBTOTAL of Disbursements This Page (optional) ▶ 1206.25

TOTAL This Period (last page this line number only) ▶ 1206.25