

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
Advocat Inc. Political Action Committee

ADDRESS (number and street) 1621 Galleria Blvd  
 Check if different than previously reported. (ACC)  
Brentwood TN 37027

2. **FEC IDENTIFICATION NUMBER** C00421735  
**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 Quarterly 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 (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 07 01 2008 through 07 31 2008

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 Will Council  
Signature of Treasurer Electronically Filed by Will Council Date 08 15 2008

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 **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Advocat Inc. Political Action Committee

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 0 | 7 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

 To: 

|   |   |
|---|---|
| M | M |
| 0 | 7 |

|   |   |
|---|---|
| D | D |
| 3 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

|   | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |   |   |   |   |   |   |  |         |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|---------|
| 6. (a) Cash on Hand<br>January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> | Y                       | Y                                 | Y | Y | 2 | 0 | 0 | 8 |  | 6039.53 |
| Y   | Y                       | Y                                 | Y |   |   |   |   |   |  |         |
| 2   | 0                       | 0                                 | 8 |   |   |   |   |   |  |         |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....  | 5761.64                 |                                   |   |   |   |   |   |   |  |         |
| (c) Total Receipts (from Line 19) .....   | 3922.00                 | 51432.11                          |   |   |   |   |   |   |  |         |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....  | 9683.64                 | 57471.64                          |   |   |   |   |   |   |  |         |
| 7. Total Disbursements (from Line 31) .....   | 5000.00                 | 52788.00                          |   |   |   |   |   |   |  |         |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....   | 4683.64                 | 4683.64                           |   |   |   |   |   |   |  |         |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....   | 0.00                    |                                   |   |   |   |   |   |   |  |         |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>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**

Write or Type Committee Name  
Advocat Inc. Political Action Committee

Report Covering the Period: From: 

|   |   |
|---|---|
| M | M |
| 0 | 7 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

 To: 

|   |   |
|---|---|
| M | M |
| 0 | 7 |

|   |   |
|---|---|
| D | D |
| 3 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 8 |

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees  | 3131.16                       | 40045.91                          |
| (i) Itemized (use Schedule A) .....  |                               |                                   |
| (ii) Unitemized .....  | 790.84                        | 11098.20                          |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) .....   | 3922.00                       | 51144.11                          |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs) .....  | 0.00                          | 0.00                              |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....     | 3922.00                       | 51144.11                          |
| 12. Transfers From Affiliated/Other Party Committees .....   | 0.00                          | 0.00                              |
| 13. All Loans Received .....   | 0.00                          | 0.00                              |
| 14. Loan Repayments Received .....   | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) ..... | 0.00                          | 288.00                            |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....           | 0.00                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.) .....   | 0.00                          | 0.00                              |
| 18. Transfers from Non-Federal and Levin Funds   |                               |                                   |
| (a) Non-Federal Account (from Schedule H3) .....   | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....   | 0.00                          | 0.00                              |
| (c) Total Transfer (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)) .....                          | 3922.00                       | 51432.11                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 3922.00                       | 51432.11                          |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| <b>II. DISBURSEMENTS</b>   | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|--|---------------------------------------|---|
| 21. Operating Expenditures:  |                                       |   |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4)                                     |                                       |   |
| (i) Federal Share.....   | 0.00                                  | 0.00                                      |
| (ii) Non-Federal Share.....  | 0.00                                  | 0.00                                      |
| (b) Other Federal Operating Expenditures.....  | 0.00                                  | 288.00                                    |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....                          | 0.00                                  | 288.00                                    |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                                  | 0.00                                      |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 5000.00                               | 52500.00                                  |
| 24. Independent Expenditure (use Schedule E) .....   | 0.00                                  | 0.00                                      |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00                                  | 0.00                                      |
| 26. Loan Repayments Made.....  | 0.00                                  | 0.00                                      |
| 27. Loans Made.....  | 0.00                                  | 0.00                                      |
| 28. Refunds of Contributions To:   |                                       |   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                                  | 0.00                                      |
| (b) Political Party Committees .....   | 0.00                                  | 0.00                                      |
| (c) Other Political Committees (such as PACs) .....  | 0.00                                  | 0.00                                      |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....                           | 0.00                                  | 0.00                                      |
| 29. Other Disbursements.....   | 0.00                                  | 0.00                                      |
| 30. Federal Election Activity (2 U.S.C 431(20))  |                                       |   |
| (a) Shared 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))..       | 5000.00                               | 52788.00                                  |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 5000.00                               | 52788.00                                  |

**DETAILED SUMMARY PAGE**  
of Disbursements

| III. Net Contributions/Operating Expenditures                                    | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) from Line 11(d), page 3) .....        | 3922.00                       | 51144.11                          |
| 34. Total Contribution Refunds (from Line 28(d)) .....                           | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....   | 3922.00                       | 51144.11                          |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 0.00                          | 288.00                            |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) .....               | 0.00                          | 288.00                            |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) .....             | 0.00                          | 0.00                              |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 21  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

NAME OF COMMITTEE (In Full)  
 Advocat Inc. Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
 Benita Adkins  
 Mailing Address P.O. Box 112  
 City State Zip Code  
 Sandy Hook KY 41171  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Diversicare Leasing C Admin Administ  
 Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼  
 452.70  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 7 / 0 3 / 2 0 0 8  
**Transaction ID:** 80808.C5091  
 Amount of Each Receipt this Period  
 85.50  
 Receipt  
 Payroll Deduction: (28.50- /Pay Period )

**B.** Full Name (Last, First, Middle Initial)  
 David Barker  
 Mailing Address 12 Lakeview Lane  
 City State Zip Code  
 Cabot AR 72023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Advocat Arkansas RVP  
 Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼  
 786.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 7 / 1 1 / 2 0 0 8  
**Transaction ID:** 80808.C5044  
 Amount of Each Receipt this Period  
 104.80  
 Receipt  
 Payroll Deduction: (52.40- /Pay Period )

**C.** Full Name (Last, First, Middle Initial)  
 Barry Bell  
 Mailing Address 6107 Co Rd 122  
 City State Zip Code  
 Pisgah AL 35765  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Advocat AL/TN Executiv  
 Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼  
 584.10  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 7 / 1 1 / 2 0 0 8  
**Transaction ID:** 80808.C5045  
 Amount of Each Receipt this Period  
 77.88  
 Receipt  
 Payroll Deduction: (38.94- /Pay Period )

**SUBTOTAL** of Receipts This Page (optional) ..... ► **268.18**  
**TOTAL** This Period (last page this line number only) ..... ►

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

|   |   |             |
|---|---|-------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 7 / 21 |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12               |             |
|   | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |             |

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NAME OF COMMITTEE (In Full)  
Advocat Inc. Political Action Committee

|   |  |   |   |
|---|--|---|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Bice Bobbie |   | Date of Receipt<br>MM / DD / YYYY<br>07 / 10 / 2008 |
|   | Mailing Address 1310 Dove Ln                           |   | <b>Transaction ID:</b> 80808.C5039                  |
|   | City State Zip Code<br>Lockhart TX 78644               | FEC ID number of contributing federal political committee.<br>C | Amount of Each Receipt this Period<br>57.70         |
|   | Name of Employer<br>Diversicare Leasing C              | Occupation<br>Nursing Admin                                     | Receipt   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>416.55                              | Payroll Deduction: (28.85- /Pay Period )            |

|   |  |   |   |
|---|--|---|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Elizabeth Carroll |   | Date of Receipt<br>MM / DD / YYYY<br>07 / 03 / 2008 |
|   | Mailing Address 3540 Calais Ci                               |   | <b>Transaction ID:</b> 80808.C5094                  |
|   | City State Zip Code<br>Antioch TN 37013                      | FEC ID number of contributing federal political committee.<br>C | Amount of Each Receipt this Period<br>90.57         |
|   | Name of Employer<br>Diversicare Leasing C                    | Occupation<br>Admin Administ                                    | Receipt   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>480.40                              | Payroll Deduction: (30.19- /Pay Period )            |

|   |   |   |   |
|---|---|---|---|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Maryann Cook |   | Date of Receipt<br>MM / DD / YYYY<br>07 / 11 / 2008 |
|   | Mailing Address 155 E Foster Court                      |   | <b>Transaction ID:</b> 80808.C5046                  |
|   | City State Zip Code<br>Lecanto FL 34461                 | FEC ID number of contributing federal political committee.<br>C | Amount of Each Receipt this Period<br>104.24        |
|   | Name of Employer<br>Advocat                             | Occupation<br>Florida RVP                                       | Receipt   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼<br>781.80                              | Payroll Deduction: (52.12- /Pay Period )            |

|  |   |        |
|--|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 252.51 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |        |

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

|   |   |             |
|---|---|-------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 8 / 21 |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12               |             |
|   | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |             |

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NAME OF COMMITTEE (In Full)  
Advocat Inc. Political Action Committee

|   |  |   |
|---|--|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Pam Diggs                   | Date of Receipt<br>MM / DD / YYYY<br>07 / 03 / 2008 |
|   | Mailing Address 1122 Oakmeadow Dr                                      | <b>Transaction ID:</b> 80808.C5082                  |
|   | City State Zip Code<br>Paragould AR 72450                              | Amount of Each Receipt this Period<br>60.00         |
|   | FEC ID number of contributing federal political committee.<br><b>C</b> | Receipt<br>Payroll Deduction: (30.00- /Pay Period ) |
| Name of Employer<br>Diversicare Leasing Co  | Occupation<br>Admin Administ   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>422.50                                     |   |

|   |  |   |
|---|--|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Peggy Everman               | Date of Receipt<br>MM / DD / YYYY<br>07 / 03 / 2008 |
|   | Mailing Address Po Box 820   | <b>Transaction ID:</b> 80808.C5097                  |
|   | City State Zip Code<br>Grayson KY 41143                                | Amount of Each Receipt this Period<br>74.16         |
|   | FEC ID number of contributing federal political committee.<br><b>C</b> | Receipt<br>Payroll Deduction: (24.72- /Pay Period ) |
| Name of Employer<br>Diversicare Leasing C   | Occupation<br>Nursing Admin  |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>395.52                                     |   |

|   |  |   |
|---|--|---|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Jennie Goss                 | Date of Receipt<br>MM / DD / YYYY<br>07 / 03 / 2008 |
|   | Mailing Address 240 Matthews D Apt D54                                 | <b>Transaction ID:</b> 80808.C5077                  |
|   | City State Zip Code<br>Hot Springs AR 71901                            | Amount of Each Receipt this Period<br>75.00         |
|   | FEC ID number of contributing federal political committee.<br><b>C</b> | Receipt<br>Payroll Deduction: (25.00- /Pay Period ) |
| Name of Employer<br>Diversicare Leasing C   | Occupation<br>Admin Administ   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>300.00                                     |   |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>209.16</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |               |



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 21  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Advocat Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Vicki Hampton

Mailing Address Po Box 123

City State Zip Code  
Delaplaine AR 72425

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

Name of Employer Occupation  
Diversicare Leasing C Nursing Admin

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 392.92

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 7 / 0 3 / 2 0 0 8

**Transaction ID:** 80808.C5083

Amount of Each Receipt this Period  
74.46

Receipt

Payroll Deduction: (24.82- /Pay Period )

**B.**

Full Name (Last, First, Middle Initial)  
Edward Heenan

Mailing Address 2005 Boxwood Drive

City State Zip Code  
Franklin TN 37069

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

Name of Employer Occupation  
Advocat Training & Edu

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 474.75

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 7 / 1 1 / 2 0 0 8

**Transaction ID:** 80808.C5051

Amount of Each Receipt this Period  
63.30

Receipt

Payroll Deduction: (31.65- /Pay Period )

**C.**

Full Name (Last, First, Middle Initial)  
Danielle Higdon

Mailing Address 377 Hutchens R

City State Zip Code  
Martin TN 38237

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

Name of Employer Occupation  
Diversicare Leasing C Nursing Admin

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 386.72

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 7 / 0 3 / 2 0 0 8

**Transaction ID:** 80808.C5095

Amount of Each Receipt this Period  
72.51

Receipt

Payroll Deduction: (24.17- /Pay Period )

**SUBTOTAL** of Receipts This Page (optional) ..... ► **210.27**

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

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 10 / 21                 |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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NAME OF COMMITTEE (In Full)  
Advocat Inc. Political Action Committee

|   |   |                                    |   |
|---|---|------------------------------------|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Pamela Higgins           |                                    | Date of Receipt   |
|   | Mailing Address 115 Polk 109  |                                    | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y<br>07 / 03 / 2008 |
|   | City  | State                              | Zip Code  |
|   | Mena  | AR                                 | 71953   |
|   | FEC ID number of contributing federal political committee. <b>C</b> |                                    | <b>Transaction ID:</b> 80808.C5093  |
| Name of Employer<br>Diversicare Leasing C   |   | Occupation<br>Admin Administ       | Amount of Each Receipt this Period  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼<br>215.15 | <input type="text"/><br>40.56   |
|   |   |                                    | Receipt   |
|   |   |                                    | Payroll Deduction: (13.52- /Pay Period )  |

|   |   |                                    |   |
|---|---|------------------------------------|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Horton Janice            |                                    | Date of Receipt   |
|   | Mailing Address 4527 Se Hwy 70                                      |                                    | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y<br>07 / 10 / 2008 |
|   | City  | State                              | Zip Code  |
|   | Arcadia   | FL                                 | 34266   |
|   | FEC ID number of contributing federal political committee. <b>C</b> |                                    | <b>Transaction ID:</b> 80808.C5037  |
| Name of Employer<br>Diversicare Leasing C   |   | Occupation<br>Admin Administ       | Amount of Each Receipt this Period  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼<br>429.90 | <input type="text"/><br>57.32   |
|   |   |                                    | Receipt   |
|   |   |                                    | Payroll Deduction: (28.66- /Pay Period )  |

|   |   |                                    |   |
|---|---|------------------------------------|---|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Karen Johnson            |                                    | Date of Receipt   |
|   | Mailing Address 6437 Wexley Lane                                    |                                    | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y<br>07 / 11 / 2008 |
|   | City  | State                              | Zip Code  |
|   | The Colony  | TX                                 | 75056   |
|   | FEC ID number of contributing federal political committee. <b>C</b> |                                    | <b>Transaction ID:</b> 80808.C5052  |
| Name of Employer<br>Advocat   |   | Occupation<br>Texas RVP            | Amount of Each Receipt this Period  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼<br>692.28 | <input type="text"/><br>115.38  |
|   |   |                                    | Receipt   |
|   |   |                                    | Payroll Deduction: (57.69- /Pay Period )  |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>213.26</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |               |

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

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

FOR LINE NUMBER: PAGE 11 / 21  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
 Advocat Inc. Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
 Robin Jones  
 Mailing Address 4674 Riverbend Road  
 City Trussville State AL Zip Code 35173  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Advocat Occupation: AL & TN RVP  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 899.55  
 Date of Receipt: 07 / 11 / 2008  
**Transaction ID:** 80808.C5054  
 Amount of Each Receipt this Period: 119.94  
 Receipt  
 Payroll Deduction: (59.97- /Pay Period)

**B.** Full Name (Last, First, Middle Initial)  
 Randi Kiphen  
 Mailing Address 10880 Gallia P  
 City Wheelersburg State OH Zip Code 45694  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Diversicare Leasing C Occupation: Admin Administ  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 564.24  
 Date of Receipt: 07 / 03 / 2008  
**Transaction ID:** 80808.C5098  
 Amount of Each Receipt this Period: 106.47  
 Receipt  
 Payroll Deduction: (35.49- /Pay Period)

**C.** Full Name (Last, First, Middle Initial)  
 Roberson Larry  
 Mailing Address 805 Merritt Drive  
 City Lockhart State TX Zip Code 78644  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer: Diversicare Leasing C Occupation: Admin Administ  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 425.40  
 Date of Receipt: 07 / 10 / 2008  
**Transaction ID:** 80808.C5040  
 Amount of Each Receipt this Period: 59.24  
 Receipt  
 Payroll Deduction: (29.62- /Pay Period)

**SUBTOTAL** of Receipts This Page (optional) ..... **285.65**  
**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 21  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Advocat Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Steven Levato

Mailing Address 306 Cliftwood

City State Zip Code  
Hot Springs AR 71901

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

Name of Employer Occupation  
Diversicare Leasing C Admin Administ

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 529.60

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 7 / 0 3 / 2 0 0 8

**Transaction ID:** 80808.C5087

Amount of Each Receipt this Period  
100.38

Receipt

Payroll Deduction: (33.46- /Pay Period )

**B.**

Full Name (Last, First, Middle Initial)  
Sandra Loperfido

Mailing Address 270 Highland A

City State Zip Code  
Raceland KY 41169

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

Name of Employer Occupation  
Diversicare Leasing C Admin Administ

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 304.80

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 7 / 0 3 / 2 0 0 8

**Transaction ID:** 80808.C5085

Amount of Each Receipt this Period  
76.20

Receipt

Payroll Deduction: (25.40- /Pay Period )

**C.**

Full Name (Last, First, Middle Initial)  
Lorey Lowe

Mailing Address P O Box 1813

City State Zip Code  
Olive Hill KY 41164

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

Name of Employer Occupation  
Advocat Kentucky CQI

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 492.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 7 / 1 1 / 2 0 0 8

**Transaction ID:** 80808.C5055

Amount of Each Receipt this Period  
65.60

Receipt

Payroll Deduction: (32.80- /Pay Period )

**SUBTOTAL** of Receipts This Page (optional) ..... ► **242.18**

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

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

|   |   |              |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 13 / 21 |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |              |

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NAME OF COMMITTEE (In Full)  
Advocat Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Deborah Mack

Mailing Address 81 Walnut Road

City State Zip Code  
Glenwood AR 71943

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

Name of Employer Occupat  
Advocat Arkansas CQI D

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 231.75

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 11 / 2008

**Transaction ID:** 80808.C5057

Amount of Each Receipt this Period  
30.90

Receipt

Payroll Deduction: (15.45- /Pay Period )

**B.**

Full Name (Last, First, Middle Initial)  
Tschudy Mark

Mailing Address 28219 Madelin Manor Lan

City State Zip Code  
Spring TX 77386

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

Name of Employer Occupat  
Diversicare Leasing C Admin Administ

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 504.84

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 10 / 2008

**Transaction ID:** 80808.C5041

Amount of Each Receipt this Period  
84.14

Receipt

Payroll Deduction: (42.07- /Pay Period )

**C.**

Full Name (Last, First, Middle Initial)  
Wanda Meade

Mailing Address 15939 Lone Oak Drive

City State Zip Code  
Catlettsburg KY 41129

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

Name of Employer Occupat  
Advocat Kentucky RVP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 11 / 2008

**Transaction ID:** 80808.C5059

Amount of Each Receipt this Period  
120.00

Receipt

Payroll Deduction: (60.00- /Pay Period )

**SUBTOTAL** of Receipts This Page (optional) ..... ► **235.04**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 21  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Advocat Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Sherri Miller

Mailing Address 303 Chestnut

City Summersville State WV Zip Code 26651

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

Name of Employer Diversicare Leasing C Occupation Admin Administ

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 430.72

Date of Receipt 07 / 03 / 2008

Transaction ID: 80808.C5092

Amount of Each Receipt this Period 80.76

Receipt

Payroll Deduction: (26.92- /Pay Period )

**B.**

Full Name (Last, First, Middle Initial)  
Kelli Montelongo

Mailing Address 421 Big Timber Drive

City Temple State TX Zip Code 76502

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

Name of Employer Advocat Occupation Texas REBOC

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 314.40

Date of Receipt 07 / 11 / 2008

Transaction ID: 80808.C5060

Amount of Each Receipt this Period 41.92

Receipt

Payroll Deduction: (20.96- /Pay Period )

**C.**

Full Name (Last, First, Middle Initial)  
Nita Morris

Mailing Address P O Box 275

City Norman State AR Zip Code 71960

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

Name of Employer Advocat Occupation Arkansas CQI D

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 461.55

Date of Receipt 07 / 11 / 2008

Transaction ID: 80808.C5061

Amount of Each Receipt this Period 61.54

Receipt

Payroll Deduction: (30.77- /Pay Period )

**SUBTOTAL** of Receipts This Page (optional) ..... ► **184.22**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 21  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Advocat Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Brenda Mosbey

Mailing Address P O Box 170

City State Zip Code  
Olive Hill KY 41164

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

Name of Employer Occupat  
Advocat Kentucky MDS S

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 324.45

Date of Receipt  
MM / DD / YYYY  
07 / 11 / 2008

**Transaction ID:** 80808.C5062

Amount of Each Receipt this Period  
43.26

Receipt

Payroll Deduction: (21.63- /Pay Period )

**B.**

Full Name (Last, First, Middle Initial)  
Treieva Oakley

Mailing Address 901 Camellia Road

City State Zip Code  
Oneonta AL 35121

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

Name of Employer Occupat  
Advocat DMS Training C

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 401.55

Date of Receipt  
MM / DD / YYYY  
07 / 11 / 2008

**Transaction ID:** 80808.C5063

Amount of Each Receipt this Period  
53.54

Receipt

Payroll Deduction: (26.77- /Pay Period )

**C.**

Full Name (Last, First, Middle Initial)  
Diane Patterson

Mailing Address 310 Welchwood

City State Zip Code  
Clarksville TN 37040

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

Name of Employer Occupat  
Diversicare Leasing C Admin Administ

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 212.20

Date of Receipt  
MM / DD / YYYY  
07 / 03 / 2008

**Transaction ID:** 80808.C5084

Amount of Each Receipt this Period  
40.17

Receipt

Payroll Deduction: (13.39- /Pay Period )

**SUBTOTAL** of Receipts This Page (optional) ..... ► **136.97**

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

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

|   |   |              |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 16 / 21 |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12               |              |
|   | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |              |

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NAME OF COMMITTEE (In Full)  
Advocat Inc. Political Action Committee

|   |   |   |
|---|---|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Marlies Sarrett          | Date of Receipt<br>MM / DD / YYYY<br>07 / 11 / 2008 |
|   | Mailing Address 3450 East Lake Drive                                | <b>Transaction ID:</b> 80808.C5066                  |
|   | City State Zip Code<br>Land O Lakes FL 34639                        | Amount of Each Receipt this Period<br>63.84         |
|   | FEC ID number of contributing federal political committee. <b>C</b> | Receipt   |
| Name of Employer<br>Advocat   | Occupation<br>Florida CQI   | Payroll Deduction: (31.92- /Pay Period )            |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>478.80                                  |   |

|   |   |   |
|---|---|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Kenneth Smith            | Date of Receipt<br>MM / DD / YYYY<br>07 / 11 / 2008 |
|   | Mailing Address 4909 Walnut Hills Drive                             | <b>Transaction ID:</b> 80808.C5067                  |
|   | City State Zip Code<br>Louisville KY 40299                          | Amount of Each Receipt this Period<br>82.40         |
|   | FEC ID number of contributing federal political committee. <b>C</b> | Receipt   |
| Name of Employer<br>Advocat   | Occupation<br>Regional HR Di  | Payroll Deduction: (41.20- /Pay Period )            |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>618.00                                  |   |

|   |   |   |
|---|---|---|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Gary Snyder              | Date of Receipt<br>MM / DD / YYYY<br>07 / 03 / 2008 |
|   | Mailing Address PO Box 30   | <b>Transaction ID:</b> 80808.C5096                  |
|   | City State Zip Code<br>Martin TN 38237                              | Amount of Each Receipt this Period<br>90.42         |
|   | FEC ID number of contributing federal political committee. <b>C</b> | Receipt   |
| Name of Employer<br>Diversicare Leasing C   | Occupation<br>Admin Administ  | Payroll Deduction: (30.14- /Pay Period )            |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>358.20                                  |   |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>236.66</b> |
| <b>TOTAL</b> This Period (last page this line number only) ..... |               |



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

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

FOR LINE NUMBER: PAGE 17 / 21  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Advocat Inc. Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Anna Sorrell

Mailing Address 3519 Wolf Creek Road

City State Zip Code  
Huntington WV 25704

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

Name of Employer: Advocat   Occupation: Kentucky ReboC

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt: 07 / 11 / 2008  
**Transaction ID:** 80808.C5068  
 Amount of Each Receipt this Period: 64.00  
 Receipt  
 Payroll Deduction: (32.00- /Pay Period )

**B.** Full Name (Last, First, Middle Initial)  
Rhonda Stout

Mailing Address PO Box 1032

City State Zip Code  
Perryville AR 72126

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

Name of Employer: Diversicare Leasing C   Occupation: Admin Administ

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 323.04

Date of Receipt: 07 / 03 / 2008  
**Transaction ID:** 80808.C5079  
 Amount of Each Receipt this Period: 80.76  
 Receipt  
 Payroll Deduction: (26.92- /Pay Period )

**C.** Full Name (Last, First, Middle Initial)  
Kathie Sullivan

Mailing Address 2469 AR 115

City State Zip Code  
Smithville AR 72466

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

Name of Employer: Advocat   Occupation: Arkansas CQI D

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 442.95

Date of Receipt: 07 / 11 / 2008  
**Transaction ID:** 80808.C5069  
 Amount of Each Receipt this Period: 59.06  
 Receipt  
 Payroll Deduction: (29.53- /Pay Period )

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **203.82**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 21  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Advocat Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
E Kim Tirronen

Mailing Address 16701 Richloam Lane

City State Zip Code  
Spring Hill FL 34610

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

Name of Employer: Advocat Occupation: RAI Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 554.25

Date of Receipt: 07 / 11 / 2008

Transaction ID: 80808.C5070

Amount of Each Receipt this Period: 73.90

Receipt

Payroll Deduction: (36.95- /Pay Period)

**B.**

Full Name (Last, First, Middle Initial)  
Ann Trimble

Mailing Address 5174 Danbury Court

City State Zip Code  
Rockvale TN 37153

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

Name of Employer: Advocat Occupation: AR Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 497.55

Date of Receipt: 07 / 11 / 2008

Transaction ID: 80808.C5071

Amount of Each Receipt this Period: 66.34

Receipt

Payroll Deduction: (33.17- /Pay Period)

**C.**

Full Name (Last, First, Middle Initial)  
Roger Walls

Mailing Address P O Box 572

City State Zip Code  
Falkville AL 35622

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

Name of Employer: Advocat Occupation: AL Reboc

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 409.65

Date of Receipt: 07 / 11 / 2008

Transaction ID: 80808.C5074

Amount of Each Receipt this Period: 54.62

Receipt

Payroll Deduction: (27.31- /Pay Period)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **194.86**

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

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

|   |   |              |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 19 / 21 |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 |              |

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NAME OF COMMITTEE (In Full)  
Advocat Inc. Political Action Committee

|   |  |   |
|---|--|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>Charles Wheeler             | Date of Receipt<br>MM / DD / YYYY<br>07 / 11 / 2008 |
|   | Mailing Address P O Box 201682   | <b>Transaction ID:</b> 80808.C5075                  |
|   | City State Zip Code<br>Austin TX 78720                                 | Amount of Each Receipt this Period<br>84.62         |
|   | FEC ID number of contributing federal political committee.<br><b>C</b> | Receipt<br>Payroll Deduction: (42.31- /Pay Period ) |
| Name of Employer<br>Advocat   | Occupation<br>Texas Executiv   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>465.41                                     |   |

|   |  |   |
|---|--|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>Chyra Worthington           | Date of Receipt<br>MM / DD / YYYY<br>07 / 03 / 2008 |
|   | Mailing Address 1723 Royal Oak   | <b>Transaction ID:</b> 80808.C5080                  |
|   | City State Zip Code<br>Malvern AR 72104                                | Amount of Each Receipt this Period<br>77.76         |
|   | FEC ID number of contributing federal political committee.<br><b>C</b> | Receipt<br>Payroll Deduction: (25.92- /Pay Period ) |
| Name of Employer<br>Diversicare Leasing C   | Occupation<br>Admin Administ   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>414.72                                     |   |

|   |  |   |
|---|--|---|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>Samuel Wright               | Date of Receipt<br>MM / DD / YYYY<br>07 / 03 / 2008 |
|   | Mailing Address 7863 Hwy 828   | <b>Transaction ID:</b> 80808.C5090                  |
|   | City State Zip Code<br>Louisa KY 41230                                 | Amount of Each Receipt this Period<br>96.00         |
|   | FEC ID number of contributing federal political committee.<br><b>C</b> | Receipt<br>Payroll Deduction: (32.00- /Pay Period ) |
| Name of Employer<br>Diversicare Leasing C   | Occupation<br>Admin Administ   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>512.00                                     |   |

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>258.38</b>  |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <b>3131.16</b> |

**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)

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

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NAME OF COMMITTEE (In Full)  
Advocat Inc. Political Action Committee

|   |  |
|---|--|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>Bright for Congress.Com</p> <p>Mailing Address PO Box 2106</p> <p>City Montgomery State AL Zip Code 36102-2106</p> <p>Purpose of Disbursement<br/>AL-02 US HOUSE</p> <p>Candidate Name<br/>BOBBY NEAL BRIGHT, SR</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: AL District: 02</p> <p>Disbursement For: 2008<br/><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p> | <p><b>Transaction ID:</b> 80808.E169</p> <p>Date of Disbursement<br/>07 / 22 / 2008</p> <p>Amount of Each Disbursement this Period<br/>1000.00</p> <p>AL-02 US HOUSE</p> |
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>John Bocchieri for Congress</p> <p>Mailing Address PO Box 3016</p> <p>City Alliance State OH Zip Code 44601-7016</p> <p>Purpose of Disbursement<br/>OH-16 US HOUSE</p> <p>Candidate Name<br/>JOHN A BOCCIERI</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: OH District: 16</p> <p>Disbursement For: 2008<br/><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p>     | <p><b>Transaction ID:</b> 80808.E168</p> <p>Date of Disbursement<br/>07 / 22 / 2008</p> <p>Amount of Each Disbursement this Period<br/>1000.00</p> <p>OH-16 US HOUSE</p> |
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>Kirkpatrick for Arizona</p> <p>Mailing Address PO Box 993</p> <p>City Prescott State AZ Zip Code 86302-0993</p> <p>Purpose of Disbursement<br/>AZ-01 US HOUSE</p> <p>Candidate Name<br/>ANN KIRKPATRICK</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br/>State: AZ District: 01</p> <p>Disbursement For: 2008<br/><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (specify) ▼</p>          | <p><b>Transaction ID:</b> 80808.E170</p> <p>Date of Disbursement<br/>07 / 22 / 2008</p> <p>Amount of Each Disbursement this Period<br/>1000.00</p> <p>AZ-01 US HOUSE</p> |

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

3000.00

**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)

PAGE 21 / 21

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

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NAME OF COMMITTEE (In Full)  
Advocat Inc. Political Action Committee

|   |  |
|---|--|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>Madia for US Congress<br>Mailing Address PO Box 2459<br>City Maple Grove State MN Zip Code 55311-7459<br>Purpose of Disbursement MN-03 US HOUSE<br>Candidate Name JIGAR ASHWIN MADIA<br>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: MN District: 03<br>Disbursement For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼               | Transaction ID: 80808.E171<br>Date of Disbursement<br>07 / 22 / 2008             |
|   | Amount of Each Disbursement this Period<br>1000.00<br>MN-03 US HOUSE             |
| <b>B.</b><br>Full Name (Last, First, Middle Initial)<br>Udall for Us All<br>Mailing Address 3311 Candelaria Rd NE Ste A<br>City Albuquerque State NM Zip Code 87107-1952<br>Purpose of Disbursement 8/6/08 EVENT; NM US SENATE<br>Candidate Name TOM UDALL<br>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President<br>State: NM District: 00<br>Disbursement For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Transaction ID: 80808.E172<br>Date of Disbursement<br>07 / 22 / 2008             |
|   | Amount of Each Disbursement this Period<br>1000.00<br>8/6/08 EVENT; NM US SENATE |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional) .....      | 2000.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | 5000.00 |