

**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

American Seniors Housing Association (Seniors Housing PAC)

ADDRESS (number and street)

5100 Wisconsin Ave., NW

Suite 307

☐Check if different
than previously
reported. (ACC)

Washington

DC

20016

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00325332

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 (12S)

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

06

01

2010

through

06

30

2010

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

David Schless

Signature of Treasurer

Electronically Filed by David Schless

Date

07

09

2010

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)

2 / 20

Write or Type Committee Name

American Seniors Housing Association (Seniors Housing PAC)

Report Covering the Period:

From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	750300.26
(b) Cash on Hand at Beginning of Reporting Period	725830.26	
(c) Total Receipts (from Line 19)	51220.00	188795.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	777050.26	939095.26
7. Total Disbursements (from Line 31)	14500.00	176545.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	762550.26	762550.26
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)

3 / 20

Write or Type Committee Name

American Seniors Housing Association (Seniors Housing PAC)

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	6	0	1	2	0	1	0

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	1	0

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	41950.00	170300.00
(i) Itemized (use Schedule A)	3270.00	9495.00
(ii) Unitemized	45220.00	179795.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	5000.00	8000.00
(c) Other Political Committees (such as PACs)	50220.00	187795.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	1000.00	1000.00
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))	51220.00	188795.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	51220.00	188795.00

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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	0.00	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	0.00	0.00	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	14500.00	176500.00	
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	45.00	
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))..	14500.00	176545.00	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	14500.00	176545.00	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 20

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)	50220.00	187795.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	50220.00	187795.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
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 / 20

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

A.

Full Name (Last, First, Middle Initial)

Tim Wesley

Mailing Address 9510 Ormsby Station Rd.
Suite 101

City State Zip Code
Louisville KY 40223-4081

FEC ID number of contributing
federal political committee.

C

Name of Employer
SeniorCare

Occupation
EVP, CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 1 / 2 0 1 0

Transaction ID: 35145728

Amount of Each Receipt this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

Chris N Cummings

Mailing Address 10350 Ormsby Park Place
Suite 300

City State Zip Code
Louisville KY 40223-6178

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ventas Healthcare Propert-
ies

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 1 / 2 0 1 0

Transaction ID: 35145729

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Nicholas W Jacoby

Mailing Address 10350 Ormsby Park Place
Suite 300

City State Zip Code
Louisville KY 40223-6178

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ventas Healthcare Propert-
ies

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 1 / 2 0 1 0

Transaction ID: 35145730

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 7 / 20

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

A.

Full Name (Last, First, Middle Initial)

James L. Andrews

Mailing Address 111 S. Wacker Dr.
48th Floor

City State Zip Code
Chicago IL 60606-4302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ventas Healthcare Properti-
es

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 1 / 2 0 1 0

Transaction ID: 35145731

Amount of Each Receipt this Period

1600.00

B.

Full Name (Last, First, Middle Initial)

Joseph D Lambert

Mailing Address 111 S. Wacker Dr.
Suite 4800

City State Zip Code
Chicago IL 60606-4302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ventas Healthcare Properti-
es

Occupation

Senior Transactions Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 1 / 2 0 1 0

Transaction ID: 35145732

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Vince M. Cozzi

Mailing Address 111 S. Wacker Dr.
Suite 4800

City State Zip Code
Chicago IL 60606-4302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ventas Healthcare Properti-
es

Occupation

VP, Acquisitions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 1 / 2 0 1 0

Transaction ID: 35145733

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

3600.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 8 / 20

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

A.

Full Name (Last, First, Middle Initial)

Philip J Kayden

Mailing Address 111 S. Wacker Dr
Suite 4800

City State Zip Code
Chicago IL 60606-4302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ventas Healthcare Propert-
ies

Occupation
Manager, Real Estate Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 1 / 2 0 1 0

Transaction ID: 35145734

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Tim A. Doman

Mailing Address 111 S. Wacker Dr.
Suite 4800

City State Zip Code
Chicago IL 60606-4302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ventas Healthcare Propert-
ies

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 1 / 2 0 1 0

Transaction ID: 35145735

Amount of Each Receipt this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

Debra A. Cafaro

Mailing Address 111 S. Wacker Drive
Suite 4800

City State Zip Code
Chicago IL 60606-4302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ventas Healthcare Propert-
ies

Occupation
CEO, Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 1 / 2 0 1 0

Transaction ID: 35145736

Amount of Each Receipt this Period

3000.00

SUBTOTAL of Receipts This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 9 / 20

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

A.

Full Name (Last, First, Middle Initial)

Michael G. Yutkin

Mailing Address 111 S. Wacker Dr.
48th Floor

City State Zip Code
Chicago IL 60606-4302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ventas Healthcare Propert-
ies

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 1 / 2 0 1 0

Transaction ID: 35145792

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Joy L Butora

Mailing Address 111 S. Wacker Dr.
Suite 4800

City State Zip Code
Chicago IL 60606-4302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ventas Healthcare Propert-
ies

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 1 / 2 0 1 0

Transaction ID: 35145793

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

David J Smith

Mailing Address 111 S. Wacker Dr.
Suite 4800

City State Zip Code
Chicago IL 60606-4302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ventas Healthcare Propert-
ies

Occupation

Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 1 / 2 0 1 0

Transaction ID: 35145799

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

900.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 10 / 20

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

A.

Full Name (Last, First, Middle Initial)

Brian L Tilton

Mailing Address 111 S. Wacker Dr.
Suite 4800

City State Zip Code
Chicago IL 60606-4302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ventas Healthcare Propert-
ies

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 1 / 2 0 1 0

Transaction ID: 35145800

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Jeffrey Sands

Mailing Address 3530 Post Rd
Suite 301

City State Zip Code
Southport CT 06890-1169

FEC ID number of contributing
federal political committee.

C

Name of Employer
Herbert J. Sims & Co.

Occupation
Executive VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 1 / 2 0 1 0

Transaction ID: 35145801

Amount of Each Receipt this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

David Rey Salinas

Mailing Address 6801 Energy Ct.
Suite 200

City State Zip Code
Sarasota FL 34240-8523

FEC ID number of contributing
federal political committee.

C

Name of Employer
HealthTrust LLC

Occupation
Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 1 / 2 0 1 0

Transaction ID: 35145818

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

2800.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 20

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

A.

Full Name (Last, First, Middle Initial)

Alan C Plush

Mailing Address 6801 Energy Ct.
Suite 200

City State Zip Code
Sarasota FL 34240-8523

FEC ID number of contributing
federal political committee.

C

Name of Employer
HealthTrust LLC

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 1 / 2 0 1 0

Transaction ID: 35145819

Amount of Each Receipt this Period

3000.00

B.

Full Name (Last, First, Middle Initial)

Carl Johnson

Mailing Address 9510 Ormsby Station Rd.
Suite 101

City State Zip Code
Louisville KY 40223-4081

FEC ID number of contributing
federal political committee.

C

Name of Employer
SeniorCare

Occupation
EVP & COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 1 0

Transaction ID: 35164897

Amount of Each Receipt this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

Ryan Saul

Mailing Address 429 Duane St.

City State Zip Code
Glen Ellyn IL 60137-4528

FEC ID number of contributing
federal political committee.

C

Name of Employer
Senior Living Investment
Brokerage

Occupation
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 1 0

Transaction ID: 35164898

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 12 / 20

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

A.

Full Name (Last, First, Middle Initial)

Gayle L. Michel

Mailing Address 111 E. Wacker Dr.
Suite 2200

City State Zip Code
Chicago IL 60601-3757

FEC ID number of contributing
federal political committee.

C

Name of Employer
Senior Lifestyle Corporat-
ion

Occupation
Director of Employment and Recruiting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 1 0

Transaction ID: 35166745

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Alida J Calaway

Mailing Address 111 E. Wacker Dr.
Suite 2200

City State Zip Code
Chicago IL 60601-3757

FEC ID number of contributing
federal political committee.

C

Name of Employer
Senior Lifestyle Corporat-
ion

Occupation
Regional Director of Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 1 0

Transaction ID: 35166841

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Teresa L Fay

Mailing Address 111 E. Wacker Drive
Suite 2200

City State Zip Code
Chicago IL 60601-3757

FEC ID number of contributing
federal political committee.

C

Name of Employer
Senior Lifestyle Corporat-
ion

Occupation
Director of Resident Programs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 1 0

Transaction ID: 35166842

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 13 / 20

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

A.

Full Name (Last, First, Middle Initial)

Justin I. Robins

Mailing Address 111 E. Wacker Drive
Suite 2200

City State Zip Code
Chicago IL 60601-3757

FEC ID number of contributing
federal political committee.

C

Name of Employer
Senior Lifestyle Corporat-
ion

Occupation
Director of Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 1 0

Transaction ID: 35166843

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

William P. Blouin

Mailing Address 111 E. Wacker Drive
Suite 2200

City State Zip Code
Chicago IL 60601-3757

FEC ID number of contributing
federal political committee.

C

Name of Employer
Senior Lifestyle Corporat-
ion

Occupation
VP, Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 1 0

Transaction ID: 35166844

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Adam J. Kaplan

Mailing Address 111 E. Wacker Dr.
Suite 2200

City State Zip Code
Chicago IL 60601-3757

FEC ID number of contributing
federal political committee.

C

Name of Employer
Senior Lifestyle Corporat-
ion

Occupation
Operations Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 1 0

Transaction ID: 35166845

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

900.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 14 / 20

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

A.

Full Name (Last, First, Middle Initial)

Patrick M. Lee

Mailing Address 111 E. Wacker Drive
Suite 2200

City State Zip Code
Chicago IL 60601-3757

FEC ID number of contributing
federal political committee.

C

Name of Employer
Senior Lifestyle Corporat-
ion

Occupation
Vice President, Acquisitions

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 1 0

Transaction ID: 35166948

Amount of Each Receipt this Period

750.00

B.

Full Name (Last, First, Middle Initial)

Robert M. Gawronski

Mailing Address 111 E. Wacker Drive
Suite 2200

City State Zip Code
Chicago IL 60601-3757

FEC ID number of contributing
federal political committee.

C

Name of Employer
Senior Lifestyle Corporat-
ion

Occupation
Vice President, Development & Acquisi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 1 0

Transaction ID: 35166949

Amount of Each Receipt this Period

750.00

C.

Full Name (Last, First, Middle Initial)

Stephen J. Levy

Mailing Address 111 E. Wacker Drive
Suite 2200

City State Zip Code
Chicago IL 60601-3757

FEC ID number of contributing
federal political committee.

C

Name of Employer
Senior Lifestyle Corporat-
ion

Occupation
General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 1 0

Transaction ID: 35166950

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 15 / 20

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

A.

Full Name (Last, First, Middle Initial)

John D. Cobb

Mailing Address 111 E. Wacker Dr.
Suite 2200

City State Zip Code
Chicago IL 60601-3757

FEC ID number of contributing
federal political committee.

C

Name of Employer
Senior Lifestyle Corporat-
ion

Occupation
President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 1 0

Transaction ID: 35166951

Amount of Each Receipt this Period

3000.00

B.

Full Name (Last, First, Middle Initial)

Jerrold H. Frumm

Mailing Address 111 E. Wacker Drive
Suite 2200

City State Zip Code
Chicago IL 60601

FEC ID number of contributing
federal political committee.

C

Name of Employer
Senior Lifestyle Corporat-
ion

Occupation
Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 1 0

Transaction ID: 35166952

Amount of Each Receipt this Period

3000.00

C.

Full Name (Last, First, Middle Initial)

William B. Kaplan

Mailing Address 111 E. Wacker Dr.
Suite 2200

City State Zip Code
Chicago IL 60601

FEC ID number of contributing
federal political committee.

C

Name of Employer
Senior Lifestyle Corporat-
ion

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 1 0

Transaction ID: 35166975

Amount of Each Receipt this Period

3500.00

SUBTOTAL of Receipts This Page (optional)

9500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 16 / 20

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

A.

Full Name (Last, First, Middle Initial)

James B. Klutznick

Mailing Address 111 E. Wacker Drive
Suite 2200

City State Zip Code
Chicago IL 60601-3757

FEC ID number of contributing
federal political committee.

C

Name of Employer
Senior Lifestyle Corporat-
ion

Occupation
Vice Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 2 / 2 0 1 0

Transaction ID: 35436875

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Kenneth R Assiran

Mailing Address 2 West Baltimore Ave.
Suite 350

City State Zip Code
Media PA 19063-3702

FEC ID number of contributing
federal political committee.

C

Name of Employer
Capital Health Group, LLC

Occupation
Managing Principal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 2 / 2 0 1 0

Transaction ID: 35436876

Amount of Each Receipt this Period

3000.00

SUBTOTAL of Receipts This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

41950.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 20

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)

American Seniors Housing Association (Seniors Housing PAC)

A.

Full Name (Last, First, Middle Initial)

Senior Care Inc. Federal PAC

Mailing Address 9510 Ormsby Station Rd.
Suite 101

City	State	Zip Code
Louisville	KY	40223

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
 ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	1	0

Transaction ID: 35168451

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 20

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

A.

Full Name (Last, First, Middle Initial)

Friends Of Byron Dorgan

Mailing Address 420 C St. NE

City

Washington

State

DC

Zip Code

20002

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

C00143438

Name of Employer

Occupation

Receipt For: 2010

☐

☐

Primary

☒

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	1	0

Transaction ID: 35168492

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

1000.00

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)

PAGE 19 / 20

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

A. Full Name (Last, First, Middle Initial) Judy Biggert For Congress	Transaction ID: 35099476 Date of Disbursement
Mailing Address P.O. Box 637	<div> <div>06</div> <div>07</div> <div>2010</div> </div>
City Hinsdale State IL Zip Code 60522	Amount of Each Disbursement this Period
Purpose of Disbursement	<div>2000.00</div>
Candidate Name Rep. Judy Biggert	<div>011</div> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 13	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Mikulski for Senate	Transaction ID: 35154237 Date of Disbursement
Mailing Address 10 G St NE Suite 570	<div> <div>06</div> <div>14</div> <div>2010</div> </div>
City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
Purpose of Disbursement	<div>2500.00</div>
Candidate Name Sen. Barbara Mikulski	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Grassley Committee Inc	Transaction ID: 35154238 Date of Disbursement
Mailing Address PO Box 1000	<div> <div>06</div> <div>14</div> <div>2010</div> </div>
City Des Moines State IA Zip Code 50304	Amount of Each Disbursement this Period
Purpose of Disbursement	<div>2000.00</div>
Candidate Name Sen. Charles E. Grassley	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

6500.00

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 20 / 20

<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)

American Seniors Housing Association (Seniors Housing PAC)

A.

Full Name (Last, First, Middle Initial)

Charles Boustany Jr Md For Congress Inc

Mailing Address 2501 Wisconsin Ave, NW
Suite 304

City Washington State DC Zip Code 20007

Purpose of Disbursement

011
Category/
Type

Candidate Name
Rep. Charles Boustany, Jr.

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: LA District: 07

Transaction ID: 35154239

Date of Disbursement

06 / 14 / 2010

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Grassley Committee Inc

Mailing Address PO Box 1000

City Des Moines State IA Zip Code 50304

Purpose of Disbursement

011
Category/
Type

Candidate Name
Sen. Charles E. Grassley

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: IA District:

Transaction ID: 35447476

Date of Disbursement

06 / 23 / 2010

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional)

8000.00

TOTAL This Period (last page this line number only)

14500.00