Image# 14961552121					PAGE 1 / 18
FEC FORM 3X	REPORT OF AND DISBUR For Other Than An Auth	SEMENT	s		
				Office U	se Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typin over the lines.	ng, type 121	FE4M5	
Advocat Inc. Political	Action Committee				
ADDRESS (number and street)	1621 Galleria Blvd				
Check if different					
than previously reported. (ACC)	Brentwood			37027	
2. FEC IDENTIFICATION N		A lateral states and states an	STAT	E	ZIP CODE
C C00421735	3. IS RE	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	NEW N) OR	AMENDED (A)	
 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (X July 15 Quarterly Report (October 15 Quarterly Report (January 31 Year-End Report ((Q1) (Q2) (Q3) (Q2) (Q3) (Q2) (Q3) (Q2) (Q3) (Q3) (Q2) (Q3) (Q3) (Q3) (Q4) (Q4) (Q4) (Q4) (Q4) (Q4) (Q4) (Q4	20 (M3)	(12C)	Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) General (12G) Special (12S)	In the State of
July 31 Mid-Year Report (Non-electi Year Only) (MY) Termination Report	ion (d) 30-Day POST-Election Report for the:	General (300	G)	Runoff (30R)	Special (30S)
(TER)	Election	n on		YYY	in the State of
5. Covering Period	04 / D D / Y Y Y 01 2014	Y through		30 / Y Y 30 20	Y Y 14
I certify that I have examined Type or Print Name of Treasur	this Report and to the best of r rer Kelly J. Gill	my knowledge and	belief it is true, co	prrect and comple	te.
	lly J. Gill	[Electronicall	y Filed] Date	07/ D	D / Y Y Y Y 2014
NOTE: Submission of false. erro	neous, or incomplete information	may subject the per	son signing this Re	port to the penalti	es of 2 U.S.C. 8437a
,		, , , , , , , , , , , , , , , , , , ,		, p	5 - 5 -

07/11/2014 15 : 29

SUMMARY PAGE

I	FEC Form 3X (Rev. 02/2003)	OF RECEIPTS AND DISBURSEMENTS	Page 2
W	Vrite or Type Committee Name		
4	Advocat Inc. Political Action Com	nittee	
R	Peport Covering the Period: From:	04 / D D / Y Y Y Y 01 2014	To: 06 / 0 / 10 / 2014
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2014		38860.17
	(b) Cash on Hand at Beginning of Reporting Period	51201.41	1
	(c) Total Receipts (from Line 19)	5811.72	18152.96
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	57013.13	57013.13
7.	Total Disbursements (from Line 31)	19549.59	19549.59
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	37463.54	37463.54
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

Page 3

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Advocat Inc. Political Action Committee

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A)	5415.79	11116.05
(ii) Unitemized	346.34	1987.32
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	5762.13	13103.37
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	0.00	0.0
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)▶	5762.13	13103.37
2. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
4. Loan Repayments Received	0.00	0.0
5. Offsets To Operating Expenditures	7 7 7	
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	49.59	49.59
6. Refunds of Contributions Made	1 1	
to Federal Candidates and Other		
Political Committees	0.00	5000.00
7. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
3. Transfers from Non-Federal and Levin Funds	7 7	7 7
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.0
	7 7	7 7
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
	7 7 7	
 Total Receipts (add Lines 11(d), 		10170.0
12, 13, 14, 15, 16, 17, and 18(c)) ►	5811.72	18152.9
0. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	5811.72	18152.9

DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements Operating Expenditures:	COLUMN A Total This Period	COLUMN B
(a) Allocated Federal/Non-Federal		Calendar Year-to-Date
Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	49.59	49.59
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii), and (b))► Transfers to Affiliated/Other Party	49.59	49.59
Committees	0.00	0.00
Federal Candidates/Committees and Other Political Committees	20000.00	20000.00
Independent Expenditures (use Schedule E)	0.00	0.00
(use Schedule E) Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
	0.00	
Loan Repayments Made	0.00	0.00
Loans Made Refunds of Contributions To:	0.00	0.00
(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
Other Disbursements	-500.00	-500.00
Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity		
(from Schedule H6) (i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely	0.00	0.00
(c) Total Federal Election Activity (add	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b)) ►	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	19549.59	19549.59
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)►	19549.59	19549.59

L

DETAILED SUMMARY PAGE

of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
 Total Contributions (other than loans) (from Line 11(d), page 3) 	5762.13	13103.37
 Total Contribution Refunds (from Line 28(d)) 	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5762.13	13103.37
 Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) 	49.59	49.59
 Offsets to Operating Expenditures (from Line 15, page 3) 	49.59	49.59
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

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••			Detailed Summary Page		X 11a		11b	11c		12	
	ny information copied from such Reports and for commercial purposes, other than using the										
	NAME OF COMMITTEE (In Full)		duress of any pointear commute					TOTTI SUCI	1 00		
$\left \right\rangle$	Advocat Inc. Political Action Co	ommittee									
Α.	Full Name (Last, First, Middle Initial) Beverly Cox				Date of	f Re	eceipt				
	Mailing Address 1017 Riverchase Rd SE				м м 05	/	22) / Y		014	Y
	City	State	Zip Code		Trans	act	ion ID :	A694146	;9D6	605B4	136AA2
	Huntsville	AL	35803-2327		Amount	t of	Each R	leceipt th	is P	'eriod	
	FEC ID number of contributing federal political committee.	С					7		_	119.	.40
	Name of Employer	Occupation	1		Payroll [Ded	uction: \$	29.85/Bi	-We	ekly	
	Diversicare Leasing Corporation	Admin Adm	iinistrator-exemp								
	Receipt For:		Year-to-Date ▼								
	Primary General	riggrogato		11							
	Other (specify)		328.35	4							
В.	Full Name (Last, First, Middle Initial) Beverly Cox	•			Date of	f Re	eceipt				
	Mailing Address 1017 Riverchase Rd SE				м м 06		19	/ Y)14	Y
	City	State	Zip Code			act		A439A3			40AD800
	Huntsville	AL	35803-2327					leceipt th			
	FEC ID number of contributing federal political committee.	C							_	69.	24
	Name of Employer	Occupation	1		Payroll D	Ded	uction: \$	34.62/Bi-	Wee	эkly	
	Diversicare Leasing Corporation	Admin Adm	inistrator-exemp								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General	33 - 3		11							
	Other (specify)		397.59	4							
с.	Full Name (Last, First, Middle Initial) Joseph A. Deans				Date of	f Re	eceipt				
	Mailing Address 1030 Sunset Rd				м м 06	1	20) / Y		y 014	Y
	City	State	Zip Code		Trans	sact	ion ID :	AE6CCE	:5C	8E901	4FA0B65
	Brentwood	TN	37027-8276		Amount	t of	Each R	leceipt th	is P	'eriod	
	FEC ID number of contributing federal political committee.	С							_	311	.52
	Name of Employer	Occupation	1		Payroll [Ded	uction: \$	\$51.92/Bi	-We	ekly	
	Diversicare Management Services	VP, Bd and	I Acquisition								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General	riggrogato		11							
	Other (specify)		674.96								
s	UBTOTAL of Receipts This Page (optional)	I					7	7	_	500.	16

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Cor	nmittee	
Full Name (Last, First, Middle Initial) Kathi B. Duke Mailing Address 35 Barlow Rd City Equality FEC ID number of contributing federal political committee. Name of Employer Diversicare Management Services Receipt For: Primary General Other (specify) ▼	State Zip Code AL 36026-2765 C Occupation Alabama CQI Director Aggregate Year-to-Date ▼ 347.49	Date of Receipt 04 25 2014 Transaction ID : A324CE348B77E497490B Amount of Each Receipt this Period 77.22 Payroll Deduction: \$38.61/Bi-Weekly
Full Name (Last, First, Middle Initial) Kathi B. Duke Mailing Address 35 Barlow Rd City Equality FEC ID number of contributing federal political committee. Name of Employer Diversicare Management Services Receipt For: Primary General Other (specify) ▼	State Zip Code AL 36026-2765 C Occupation Alabama CQI Director Aggregate Year-to-Date ▼ 503.45	Date of Receipt
Full Name (Last, First, Middle Initial) Danielle P. Galey Mailing Address 377 Hutchens Rd City Martin FEC ID number of contributing federal political committee. Name of Employer Diversicare Leasing Corporation Receipt For: Primary General Other (specify) ▼	State Zip Code TN 38237-5377 C Occupation Occupation Nursing Admin Don-exempt Aggregate Year-to-Date ▼ 375.27	Date of Receipt 06 26 2014 Transaction ID : A4356AD8339F140E2BDC Amount of Each Receipt this Period 188.58 Payroll Deduction: \$26.94/Bi-Weekly
SUBTOTAL of Receipts This Page (optional)	•••••	421.76

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

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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			Detailed Summary Page		X 11a		11b		11c	12						
Ar	y information copied from such Reports and S	Statements ma	I ay not be sold or used by any pe	erson	13 for the	pur	14 pose o	of soli	15 iciting c	16 ontribu	17 tions					
or	for commercial purposes, other than using the	e name and a	ddress of any political committee	to s	olicit co	ntrik	outions	from	such o	committ	ee.					
$\left \right\rangle$	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Co	ommittee														
<u> </u>	Full Name (Last, First, Middle Initial)															
Α.	Kelly J. Gill				Date o	f Re	eceipt									
	Mailing Address 1621 Galleria Blvd			06 20 2014												
	City	State	Zip Code			sact					488B8A7					
	Brentwood	TN	37027-2926	Amount of Each Receipt this Period												
	FEC ID number of contributing federal political committee.	С					7			1153	.86					
	Name of Employer	Occupation	1		Payroll	Ded	uction:	\$192	2.31/Bi-\	Neekly						
	Diversicare Management Services	CEO/Presid	dent													
	Receipt For:	Aggregate	Year-to-Date V													
	Primary General Other (specify) ▼		2500.03													
_	Full Name (Last, First, Middle Initial) Joyce D. Griffith				Data	4 0.	:									
D.	Mailing Address PO Box 62			_	Date o				1		1					
	Walling Address PO Box 62				06		20			2014	Y					
	City	State	Zip Code			sact					43698C5					
	Grayson	KY	41143-0062		Amoun	t of	Each	Rece	pipt this	Period						
	FEC ID number of contributing federal political committee.	С	120.00													
	Name of Employer Diversicare Management Services	Occupation Kentucky R		Payroll Deduction: \$20.00/Bi-Weekly												
	Receipt For:	,	Year-to-Date ▼	_												
	Primary General Other (specify) ▼		260.00													
<u> </u>	Full Name (Last, First, Middle Initial)				Date o	f Re	eceipt									
	Mailing Address 6151 US Highway 278 E				06	/	D 19			y y 2014	Y					
	City	State	Zip Code			sact					4B81A7I					
	Gadsden	AL	35903-7001		Amoun	t of	Each	Rece	pipt this	Period						
	FEC ID number of contributing federal political committee.	С					7		7	181	.86					
	Name of Employer	Occupation	1	_	Payroll	Ded	luction:	\$30.	31/Bi-W	/eekly						
	Diversicare Leasing Corporation	Nursing Ad	min Don-exempt													
	Receipt For:	Aggregate	Year-to-Date V													
	Primary General Other (specify) ▼		394.03													
s	UBTOTAL of Receipts This Page (optional)			 ►			7		7	1455	72					

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

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Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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		Detailed Summary Page		-		11b	110	;	12		
Any information copied from such Reports and	Statements m	av not be sold or used by any n	erson f	13 or the	Durr	14 Dose of	15 solicit		16 Intribut	17 tions	
or for commercial purposes, other than using th											
NAME OF COMMITTEE (In Full)											
angle Advocat Inc. Political Action Co	ommittee										
Full Name (Last, First, Middle Initial) A. Janice L. Horton			Г	Date of	Re	ceint					
Mailing Address 4527 SE Highway 70				M M		D	0 /	Y	Y Y	Y	
				05		22			2014		
City	State	Zip Code		Trans	acti	on ID :	A2D6	4DDD	063CA	4117A1	
Arcadia	FL	34266-7787	A	Amount	of	Each F	Receipt	this I	Period		
FEC ID number of contributing federal political committee.	С					y			122	.84	
Name of Employer	Occupation			ayroll D	Dedu	uction: S	\$30.71	/Bi-We	eekly		
Diversicare Leasing Corporation	Admin Adm	inistrator-exemp									
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General			11								
Other (specify)		337.81									
Full Name (Last, First, Middle Initial) B. Janice L. Horton			ſ	Date of	Ro	coint					
Mailing Address 4527 SE Highway 70			- '		110			V	(Y	V	
Maning Address 4527 SE Highway 70				06	Ĺ	19			014	T	
City	State	Zip Code			acti					4FB3BA	
Arcadia	FL	34266-7787	A	Amount	of	Each F	Receipt	this I	Period		
FEC ID number of contributing federal political committee.	С										
Name of Employer	Occupation	1	- Pa	ayroll D	edu	ction: \$	531.02/	Bi-We	ekly		
Diversicare Leasing Corporation		inistrator-exemp									
Receipt For:		Year-to-Date ▼									
Primary General	riggrogato		11.								
Other (specify)		399.85	4								
Full Name (Last, First, Middle Initial) C. Thomas Killingsworth				Date of	Re	ceipt					
Mailing Address 2667 Vista Del Arroyo Dr				м м 06	/	19			014	Y	
City	State	Zip Code			acti					44F181C	
San Angelo	ТΧ	76904-6212	A	Amount	of	Each F	Receipt	this I	Period		
FEC ID number of contributing	\mathbf{C}		11						199	26	
federal political committee.	С		P	ayroll [)edi	,	\$33.21	/Ri-W/		.20	
Name of Employer	Occupation		'		Jul		ψ00.2 I		CONTY		
Diversicare Leasing Corporation	Admin Adm	ninistrator-exemp									
	Aggregate	Year-to-Date ▼									
Primary General Other (specify)		430.17	11								
		7									
	I			-	-		-				
SUBTOTAL of Receipts This Page (optional)					_	7	7		384.	14	

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

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Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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			Detailed Summary Page	2	X 11a		11b	11c	12					
Δ-	w information conied from such Poports and S	tatomente m	av not be sold or used by any m		13		14	15	16	utions				
or	y information copied from such Reports and S for commercial purposes, other than using the	name and a	ddress of any political committee	to s	olicit co	ntrib	puse of outions f	rom suc	h commi	ttee.				
\setminus	NAME OF COMMITTEE (In Full)													
	Advocat Inc. Political Action Co	mmittee												
Α.	Full Name (Last, First, Middle Initial) Randi M. Kiphen				Date of	Re	eceipt							
	Mailing Address 10880 Gallia Pike Rd			06 26 _ 2014 _										
	City	State	Zip Code			act		A64894		54F56A33				
	Wheelersburg	OH	45694-8443	_	Amount	t of	Each R	leceipt th	nis Perio	d				
	FEC ID number of contributing federal political committee.	С					7	7		8.80				
	Name of Employer	Occupation	I		Payroll [Ded	uction: \$	38.40/Bi	i-Weekly					
	Diversicare Leasing Corporation	Admin Adm	inistrator-exemp											
	Receipt For:	Aggregate	Year-to-Date ▼											
	Other (specify)		537.60											
— В.	Full Name (Last, First, Middle Initial) Randy L. McChristian				Date of	Re	eceipt							
	Mailing Address 921 Charmont Dr				M	_	DD	/ Y	YY	Y				
					06	L.	06		2014					
	City Charleston	State AR	Zip Code 72933-9083							D477E8F9				
	FEC ID number of contributing	_	72000 0000		Amoun		Each R	leceipt tr	nis Perio	u				
	federal political committee.	С			L		7	7		3.85				
	Name of Employer	Occupation			Payroll D)edu	uction: \$	30.77/Bi	-Weekly					
	Diversicare Management Services	Arkansas D	irector Ops											
	Receipt For: Primary General	Aggregate	Year-to-Date ▼											
	Other (specify)		369.24											
с.	Full Name (Last, First, Middle Initial) Randy L. McChristian				Date of	Re	eceipt							
	Mailing Address 921 Charmont Dr				м м 06	/	20	/ Y	y y 2014	Y				
	City	State	Zip Code		Trans	act	ion ID :	A9E51F	0FC5CF	040118A6				
	Charleston	AR	72933-9083		Amount	of	Each R	leceipt th	nis Perio	d				
	FEC ID number of contributing federal political committee.	С					,	7		1.08				
	Name of Employer	Occupation	I		Payroll [Ded	uction: \$	\$31.08/B	i-Weekly					
	Diversicare Management Services	Arkansas D	Pirector Ops											
	Receipt For:	Aggregate	Year-to-Date ▼											
	Other (specify)		400.32											
s	UBTOTAL of Receipts This Page (optional)		•	 -			1		45	3.73				

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

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Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

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		Detailed Summary Page	×	11a 13	\mid	11b 14	11		12 16	17
Any information copied from such Reports and Sta or for commercial purposes, other than using the r				for the p		pose of	f solic	citing c	contributi	ions
NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Com						<u> </u>				
Full Name (Last, First, Middle Initial) A. James R. McKnight Jr.				Date of	Red	ceipt				
Mailing Address 1621 Galleria Blvd				M M 06		20			y y 2014	Y
City	State	Zip Code	1		actio					250A36
Brentwood	TN	37027-2926	A	Amount						
FEC ID number of contributing federal political committee.	С								634.	62
Name of Employer	Occupation			ayroll D	Jedu	uction: \	\$105.	77/Bi-\	Weekly	
Advocat, Inc.	CFO		_							
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General Other (specify) ▼		1278.86								
Full Name (Last, First, Middle Initial) B. Wanda C. Meade			Г	Date of	Reg	ceipt				
Mailing Address 3728 State Route 3			i	04	_	25			2014	Y
City	State	Zip Code	┤╹		actio					691A28
Catlettsburg	KY	41129-9340		Amount						
FEC ID number of contributing federal political committee.	C								138.4	46
Name of Employer	Occupation		Ρε	ayroll D	edu	ction: \$	\$69.23	3/Bi-We	eekly	
Diversions Management Convision	Kentucky Rv									
Receipt For:	-	Year-to-Date ▼	\neg							
Primary General	JJ. Sydio									
Other (specify) ▼	<u> </u>	, 623.07			_					
Full Name (Last, First, Middle Initial) C. Wanda C. Meade				Date of	Red	ceipt				
Mailing Address 3728 State Route 3				м м 06	1	20			2014	Y
City	State	Zip Code		Trans	acti	ion ID :	: A03I			420DB7
Catlettsburg	KY	41129-9340	/	Amount	of	Each F	Receip	ot this	Period	
FEC ID number of contributing federal political committee.	С					,	¢60.0		279.	68
Name of Employer	Occupation		_	Payroll D	Jedu	uction:	 ф69.9	∠/Bi-W	veekly	
Diversicare Management Services	Kentucky R	vp								
Receipt For:	-	Year-to-Date ▼	7							
Primary General Other (specify) ▼		902.75								
SUBTOTAL of Receipts This Page (optional)		·····•	:	-	=	7	-	3	1052.7	76

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

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Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

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TEMIZED RECEIPTS		Detailed Summary Page		-		11		11c		12	<u> </u>		
Any information copied from such Report or for commercial purposes, other than u	s and Statements ma sing the name and a	L ay not be sold or used by any p ddress of any political committe	erson f e to sol	13 or the licit cor	pur ntrib	14 rpos butic	se of s	15 oliciting m sucl	للے cor ا h co	16 ntribut mmitte	ions ee.		
NAME OF COMMITTEE (In Full) Advocat Inc. Political Action	-												
Full Name (Last, First, Middle Initial) A. Glenda Nelson				Date of	f Re	ecei	ipt						
Mailing Address 2600 Cole Ave Apt 112			06 20 _2014 _										
City	State	Zip Code			act	lion		60B / E			17FAB2		
Dallas	ТХ	75204-4040	A										
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 83.5											
Name of Employer	Occupation		— P	ayroll [Ded	luction	on: \$2	0.88/Bi	-Wee	ekly			
Diversicare Management Services	Texas CQI	Director											
Receipt For:	Aggregate	Year-to-Date ▼											
Primary General	, iggi oguto		1										
Other (specify)		269.55											
Full Name (Last, First, Middle Initial) B. Treieva Oakley	·		[Date of	f Re	ecei	ipt						
Mailing Address 901 Camellia Rd				м м 04	/		25	/ Y	_ 20		Y		
City	State	Zip Code		Trans	acti	ion		A8F1D			B2F8F		
Oneonta	AL	35121-1902	A					ceipt th					
FEC ID number of contributing federal political committee.	C					7		7	_	62.	16		
Name of Employer	Occupation		- Pa	ayroll D	Dedu	uctio	on: \$3′	1.08/Bi-	Wee	∍kly			
Diversicare Management Services	DMS Traini	ng Coordinator											
Receipt For:	Aggregate	Year-to-Date ▼											
Primary General		279.72	11										
Other (specify)		, , , , , , , , , , , , , , , , , , , ,											
Full Name (Last, First, Middle Initial) C. Treieva Oakley				Date of	f Re	ecei	ipt						
Mailing Address 901 Camellia Rd				м м 06	/		20	/ Y) 14	Y		
City	State	Zip Code		Trans	sact	tion	ID : A	F22F7	F29E	EACD	4EB48		
Oneonta	AL	35121-1902	/	Amount	t of	Ead	ch Re	ceipt th	is P	eriod			
FEC ID number of contributing federal political committee.	С					7		,	_	125	.56		
Name of Employer	Occupation		P	ayroll [Jed	lucti	ion: \$3	1.39/Bi	-Wee	ekly			
Diversicare Management Services	DMS Traini	ng Coordinator											
Receipt For: Primary General	Aggregate	Year-to-Date ▼											
Other (specify)		405.28											
SUBTOTAL of Receipts This Page (opti	onal)					7		7		271.	24		

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

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

(check only one)

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		Detailed Summary Page		11a		11b	11c	12							
				13		14	15	16	17						
Any information copied from such Reports a or for commercial purposes, other than usir															
NAME OF COMMITTEE (In Full)	•														
Advocat Inc. Political Action	Committee														
Full Name (Last, First, Middle Initial) A. Laura A. Saxon				Date of Receipt											
Mailing Address 3055 Michele Dr				06 19 / Y Y Y Y Y Y											
City	State	Zip Code		Trans	act	ion ID : /	A5977D	54DC37C	437FB9F						
Mobile	AL	36605-4462		Amount	t of	Each Re	eceipt th	is Period							
FEC ID number of contributing federal political committee.	С		228.12												
Name of Employer	Occupation	— P	ayroll [Ded	uction: \$	38.02/Bi	-Weekly								
Diversicare Leasing Corporation															
Receipt For:															
Other (specify)	1														
Full Name (Last, First, Middle Initial) B. Trescha A. Snyder	Date of Receipt														
Mailing Address 1124 Craig Rd		04 25 _2014 _													
City	State	Zip Code		Trans	02C05B96	64B67B7									
Knoxville	TN	37919-8238		Amount of Each Receipt this Period											
FEC ID number of contributing federal political committee.	С			87.18											
Name of Employer	Occupation	1	- P	ayroll D)ed(uction: \$4	13.59/Bi-	Weekly							
Diversicare Management Services	Director, Di	etary Service													
Receipt For:		Year-to-Date ▼													
Primary General			11.												
Other (specify)		392.31	4												
Full Name (Last, First, Middle Initial) C. Trescha A. Snyder				Date of	f Re	eceipt									
Mailing Address 1124 Craig Rd															
City	State	Zip Code		Trans	act	ion ID :	A71CBC	8ADA26	B4E9A85						
Knoxville	TN	37919-8238	/	Amount	t of	Each Re	eceipt th	is Period							
FEC ID number of contributing federal political committee.	С					uction: \$		176	.08						
Name of Employer	Name of Employer Occupation														
Diversicare Management Services	Director, D	ietary Service													
Receipt For:	· · · · · · · · · · · · · · · · · · ·														
Primary General Other (specify) ▼	Primary General General														
SUBTOTAL of Receipts This Page (option	al)					л. Л.		491.	38						

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

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Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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18

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Cc	ommittee	
Full Name (Last, First, Middle Initial) Matthew J. Weishaar Mailing Address 1621 Galleria Blvd City Brentwood FEC ID number of contributing federal political committee. Name of Employer Diversicare Management Services Receipt For: Primary General Other (specify) ▼	State Zip Code TN 37027-2926 C Occupation VP Finance & Controller Aggregate Year-to-Date ▼ 555.21	Date of Receipt 04 25 2014 Transaction ID : AC1ABF14306764131B80 Amount of Each Receipt this Period 123.38 Payroll Deduction: \$61.69/Bi-Weekly
Full Name (Last, First, Middle Initial) Matthew J. Weishaar Mailing Address 1621 Galleria Blvd City Brentwood FEC ID number of contributing federal political committee. Name of Employer Diversicare Management Services Receipt For: Primary General Other (specify) ▼	State Zip Code TN 37027-2926 C Occupation VP Finance & Controller Aggregate Year-to-Date ▼ 816.73	Date of Receipt 06 20 2014 Transaction ID : A4F374B2F9F074412A86 Amount of Each Receipt this Period 261.52 Payroll Deduction: \$65.38/Bi-Weekly
Full Name (Last, First, Middle Initial) C. Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) ▼	State Zip Code C Occupation Aggregate Year-to-Date ▼	Date of Receipt
SUBTOTAL of Receipts This Page (optional)		384.90 5415.79

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

- J

Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER:

 (check only one)

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18

			Detailed Summary Page		11a 13		11b 14	11c X 15	12	17						
Ar or	ny information copied from such Reports and Sta for commercial purposes, other than using the	atements ma name and a	ay not be sold or used by any pe ddress of any political committee	rson f to so	or the	purp ntrib	oose o	of soliciting	g contrib	utions						
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Con	nmittee														
A.	Full Name (Last, First, Middle Initial) Advocat, Inc.			Date of Receipt												
	Mailing Address 1621 Galleria Blvd				05 19 2014											
	City	State	Zip Code		Trans	acti	on ID	: A74BCE		764EFC9DI						
	Brentwood	TN	37027-2926	_ /	Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С		49.59												
	Name of Employer	Occupation		 Offset to Operating Expenditure 												
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 49.59													
в.	Full Name (Last, First, Middle Initial)				Date of	f Ro	ceint									
υ.	Mailing Address				Date of Receipt											
	City	State Zip Code						Amount of Each Dessite this Di								
	FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period											
	Name of Employer	Occupation														
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼													
c.	Full Name (Last, First, Middle Initial)				Date of	f Re	ceipt									
	Mailing Address				M = M	/	D	D / Y	Y Y	Y						
	City	State	Zip Code		Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С														
	Name of Employer	Occupation														
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼													
s	UBTOTAL of Receipts This Page (optional)		•			_	7		49	9.59						

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

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		B (FEC Form 3X)	Use separate schedule(s)	-		NE NUMBER: PAGE 16 OF 1												
	emized di	SBURSEMENTS	for each category of the Detailed Summary Page	(check	c only 21b 27	one) 22 28a		23 28b	24 28c		25 29	26 30b						
Ar or	ny information con for commercial p	pied from such Reports and Sta purposes, other than using the	tements may not be sold or use name and address of any politic	ed by any al commit	perso tee to	on for the solicit cor	purp htribu	ose o utions	f solicitin from suc	g cor h cor	ntribut mmitte	ons ee.						
\setminus	NAME OF COM	MITTEE (In Full)																
	Advocat In	c. Political Action Con	mittee															
Δ.	Full Name (Last Harland Cl	, First, Middle Initial)		Date of	Dist	burser	ment											
										Date of Disbursement								
	Mailing Address	10931 Laureate Drive							05 13 2014									
	City San Antonio		State Zip Code TX 78249-3312			Trans	actio	on ID :	: B43731	7313C813E446BA983								
	Purpose of Disb Check Stock Or			_														
	Candidate Name					Amount of Each Disbursement this Period												
				Categor Type	у/			,			49	59						
	Office Sought:	House Disbur Senate President	sement For: Primary General Other (specify)															
	State:	District:																
B.	Full Name (Last	, First, Middle Initial)				Date of	_			V	V	V						
	Mailing Address			M M / D D / Y Y Y Y														
	City		State Zip Code															
	Purpose of Disb	ursement				Amount of Each Disbursement this Period												
	Candidate Name	9		Categor Type	y/													
	Office Sought:	House Disbur Senate President	sement For: Primary General Other (specify)															
	State:	District:																
C.	Full Name (Last	, First, Middle Initial)				Date of	Disl	burser		V	Y	Y						
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	Candidate Name	9		Category/ Type														
	Office Sought: State:	House Disbur Senate President District:	sement For: Primary General Other (specify)						,									
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SCHEDULE	B (FEC Form 3X))			UMBER:			PA	GE 1	7 OF	18						
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		Detailed Summary F		21b 27	22 28a	Ľ	23 28b	24 28c		5 9	26 30b						
		Statements may not be sold he name and address of any															
	IMITTEE (In Full)																
Advocat In	c. Political Action C	ommittee															
	t, First, Middle Initial)		Data														
A. Boehner fo		Date of	r Dist														
Mailing Address	631-B Pennsylvania Ave SE		06 12 2014														
City Washington		Transaction ID : B452F204851C0477582															
Purpose of Dist Political Contrib					Amount of Each Disbursement this Period												
Candidate Nam	e		Categor Type	y/	15000.00												
Office Sought:	House Dia Senate President	sbursement For: 2014 Primary Gen X Other (specify) ▼	eral														
State:	District:	Other	2014														
Full Name (Las	t, First, Middle Initial)																
B. National R	epublican Senatoria	al Cmte			Date of Disbursement												
Mailing Address	425 2nd St NE			04 02 2014													
City Washington		State Zip Code DC 20002			Transaction ID : B4396E0073CE14					E1490	19C7872						
Purpose of Disk Political Contril					Amount of Each Disbursement this Period												
Candidate Nam	e		Categor		Amount of Each Dispursement this Period												
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Full Name (Las C.	t, First, Middle Initial)				Date of	f Dist	ourse	ment									
Mailing Address	Mailing Address																
City		State Zip Code															
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Office Sought:	Senate President	sbursement For: Primary Gen Other (specify) ▼				7		7									
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SUBTOTAL of Di	sbursements This Page (opt	ional)				,		- 7	20	000.00							
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SCH	EDULE B (FEC Form 3X)		FC	DR I		NUMBER	AGE 18	OF 18								
ITEN	IZED DISBURSEMENTS	Use separate schedule(s) for each category of the			c only	one)		200								
		Detailed Summary Page		\vdash	21b 27	22 28a	\vdash	23 28b	24 28c	25 X 29	26 30b					
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	dvocat Inc. Political Action Comm	littee														
	II Name (Last, First, Middle Initial)		Data	4 D:												
A . S [.]	teve Riggs for State Representati	ve				Date c	_			v v v	V					
Ма	iling Address Post Office Box 24586					06 / D / Y Y Y Y 2014										
Cit	y sville	State Zip Code KY 40224-0586				Transaction ID : B25FA1A4BCE5646DAB5										
Pu	rpose of Disbursement	40224-0300	_													
	OID - Political Contribution					Amour	t of	Each	Disburse	ement this	Period					
Ca	ndidate Name		Cate T\	egor /pe	у/	-500.00										
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	Senate X	Primary General Other (specify)														
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