Image# 14961654137 PAGE 1 / 41

FEC FORM 3Y

REPORT OF RECEIPTS AND DISBURSEMENTS

TORIWI 3X	For Other Than An A	Authorized Committe	ee		Office Use Only	
1. NAME OF	TYPE OR PRINT ▼	Example: If typir	na. tvpe	100004345	James 300 Omy	
COMMITTEE (in full)		over the lines.	.g, .ypo	12FE4M5		
American Health Care	Association Politic	cal Action Committ	ee 	<u> </u>		
ADDRESS (number and street)	1201 L Street, NW					
Check if different						
than previously reported. (ACC)	Washington			DC	20005	
2. FEC IDENTIFICATION N	UMBER ▼	CITY A	8	STATE A	ZIP COI	DE 🛦
C C00006080	3.		IEW N) OR	AM (A)	IENDED	
4. TYPE OF REPORT (Choose One)	Report	Feb 20 (M2)	May 20 (M5)	Aug	20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due On:	Mar 20 (M3)	lun 20 (M6)	Sep	20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (0	21)	Apr 20 (M4) X	lul 20 (M7)	Oct 2	20 (M10)	Jan 31 (YE)
July 15 Quarterly Report ((C) 12-Day	Primary (12P)	General	(12G)	Runoff (12R)
October 15 Quarterly Report (0	Report for the	e: Convention (12C)	Special (12S)	
January 31 Year-End Report (YE) Ele	ection on	D D /	Y Y Y Y	in the State of	
July 31 Mid-Year Report (Non-election Year Only) (MY)	on (d) 30-Day POST-Election Report for the		à)	Runoff (3	0R)	Special (30S)
Termination Report (TER)	i	ection on	D D /	Y	in the State of	
5. Covering Period 0		through	M M M	/ 30 /	2014	
I certify that I have examined the	his Report and to the bes	t of my knowledge and b	pelief it is true	e, correct and	d complete.	
Type or Print Name of Treasure	er Ms. Robin Hillier					
Signature of Treasurer Ms.	Robin Hillier	[Electronically	Filed] D	ate 07	/ 18 /	2014
NOTE: Submission of false, error	neous, or incomplete information	ation may subject the pers	son signing th	is Report to th	ne penalties of 2 U	J.S.C. §437g.
Office Use					FEC FOR Rev. 12/20	
Only					nev. 12/20	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)
Page 2

Write or Type Committee Name

American Health Care Association Political Action Committee

Report Covering the Period: From: 06 01 2014 To: 06 30 2014

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2014		433429.72
	(b) Cash on Hand at Beginning of Reporting Period	381630.09	
	(c) Total Receipts (from Line 19)	51188.58	376053.13
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	432818.67	809482.85
	Total Disbursements (from Line 31)	111910.50	488574.68
	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	320908.17	320908.17
-	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
0.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American Health Care Association Political Action Committee

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		205074.04					
(i) Itemized (use Schedule A)	49169.94	335674.34					
(ii) Unitemized(iii) TOTAL (add	2018.64	16878.79					
Lines 11(a)(i) and (ii)	51188.58	352553.13					
(b) Political Party Committees	0.00	0.00					
(c) Other Political Committees	0.00	5000.00					
(such as PACs)	0.00	3000.00					
(d) Total Contributions (add Lines							
11(a)(iii), (b), and (c)) (Carry	E1100 E0	357553.13					
Totals to Line 33, page 5)▶	51188.58	337333.13					
Transfers From Affiliated/Other		0.00					
Party Committees	0.00	0.00					
All Lance Booking	0.00	0.00					
All Loans Received	0.00	0.00					
Loan Repayments Received	0.00	0.00					
Offsets To Operating Expenditures							
(Refunds, Rebates, etc.)	0.00						
(Carry Totals to Line 37, page 5)	0.00	0.00					
Refunds of Contributions Made							
to Federal Candidates and Other		47500.00					
Political Committees	0.00	17500.00					
Other Federal Receipts		1000.00					
(Dividends, Interest, etc.)	0.00	1000.00					
Transfers from Non-Federal and Levin Funds							
(a) Non-Federal Account (from Schedule H3)	0.00	0.00					
(IIOIII Scriedule H3)	0.00	0.00					
	0.00	0.00					
(b) Levin Funds (from Schedule H5)	0.00	0.00					
(a) Tatal Transfers (add 40(a) and 40(b))	0.00	0.00					
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00					
Total Receipts (add Lines 11(d),							
12, 13, 14, 15, 16, 17, and 18(c))▶	51188.58	376053.13					
Total Federal Receipts							
(subtract Line 18(c) from Line 19)▶	51188.58	376053.13					

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: Allocated Endors!(Non Endors)	10.001 11110 1 01100	Calelidai Teal-IO-Date
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
	000	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	910.50	7874.68
(c) Total Operating Expenditures	310.00	7074.00
(add 21(a)(i), (a)(ii), and (b))▶	910.50	7874.68
. Transfers to Affiliated/Other Party		
Committees	0.00	0.00
Contributions to Federal Candidates/Committees and Other Political Committees	111000.00	470500.00
. Independent Expenditures	0.00	
(use Schedule E)	0.00	0.00
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
(use scriedule r)	7	0.00
S. Loan Repayments Made	0.00	0.00
7. Loans Made	0.00	0.00
3. Refunds of Contributions To:	5.00	
(a) Individuals/Persons Other Than Political Committees	0.00	200.00
-		
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		0.00
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))▶	0.00	200.00
. Other Disbursements	0.00	10000.00
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	2.22	0.00
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
Lines 30(a)(i), 30(a)(ii) and 30(0))	5.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	111910.50	488574.68
	7	7
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)	111010 50	400574.00
from Line 31)	111910.50	488574.68

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	51188.58	357553.13
4. Total Contribution Refunds (from Line 28(d))	0.00	200.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	51188.58	357353.13
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	910.50	7874.68
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	910.50	7874.68

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

FOR LINE NUMBER:					PAGE	6	OF	41
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	Statements may not be sold or used by any pers ne name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
angle American Health Care Associa	ation Political Action Committee	
Full Name (Last, First, Middle Initial) Linda Austin		Date of Receipt
Mailing Address 405 Times Avenue		06 18 2014
City	State Zip Code	Transaction ID : C2776489
Lafayette	TN 37083-1247	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Knollwood Manor	Administrator/ Owner	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) 3. Cecil Barcelo	ı	Date of Receipt
Mailing Address 411 Alabama Ave		06 02 2014
City	State Zip Code	Transaction ID : C2745993
League City	TX 77573-2615	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	
Baywind Village	Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) C. Harry Baum		Date of Receipt
Mailing Address 10315 Johnson Drive		06 20 2014
City	State Zip Code	Transaction ID : C2757036
Shawnee	KS 66203	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	625.00
Name of Employer	Occupation	
Sharon Lane Health Services	Owner	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1250.00	
SUBTOTAL of Receipts This Page (optional)	>	1175.00
TOTAL This Period (last page this line numbe	<u>-</u>	
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Use separate schedule(s) for each category of the Detailed Summary Page

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	Statements may not be sold or used by any person ename and address of any political committee to	
NAME OF COMMITTEE (In Full) American Health Care Associa	tion Political Action Committee	
Full Name (Last, First, Middle Initial) Lyn C. Bentley Mailing Address 2212 Hidden Valley Ln		Date of Receipt 06 16 2014
City Silver Spring	State Zip Code MD 20904-5240	Transaction ID : C2776120 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	83.32
Name of Employer American Health Care Association Receipt For: Primary General Other (specify) ▼	Occupation Senior Director, Regulatory Services Aggregate Year-to-Date ▼ 374.94	* Payroll Deduction: \$41.66 Bi-Weekly
Full Name (Last, First, Middle Initial) William Biggs Mailing Address 8 Justice Lane		Date of Receipt 06 16 _2014 _
City Anderson	State Zip Code SC 29621	Transaction ID : C2776117 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5000.00
Name of Employer HMR Veterans Services	Occupation CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Initial) C. Heath Boddy		Date of Receipt
Mailing Address 2201 N 98th Street		06 12 2014
City Lincoln	State Zip Code NE 68505	Transaction ID : C2754265 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	85.00
Name of Employer Nebraska Health Care Association	Occupation State Executive	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 510.00	
SUBTOTAL of Receipts This Page (optional)	····	5168.32
TOTAL This Period (last page this line number	r only)	

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

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Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold or used by any pers he name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Health Care Associa	ation Political Action Committee	
Full Name (Last, First, Middle Initial) Douglas Burr Mailing Address 11851 Wilde Run Court		Date of Receipt
City	State Zip Code	06 25 2014 Transaction ID : C2761351
Roswell	GA 30075	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	325.00
Name of Employer Health Care Navigator LLC	Occupation Health Care Finance, Reimbursement, &	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) 3. Donald Chensvold Mailing Address 4000 4st Ave NE		Date of Receipt
Mailing Address 4080 1st Ave NE		06 02 2014
City	State Zip Code	Transaction ID : C2745991
Cedar Rapids FEC ID number of contributing federal political committee.	IA 52402-3160	Amount of Each Receipt this Period 500.00
Name of Employer Healthcare of Iowa, Inc.	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) C. Robert M. Chur	'	Date of Receipt
Mailing Address 7 Limestone Dr		06 02 2014
City Williamsville	State Zip Code NY 14221-7051	Transaction ID : C2745987 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2500.00
Name of Employer	Occupation	-
Elderwood Senior Care	President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	
SUBTOTAL of Receipts This Page (optional).		3325.00
TOTAL This Period (last page this line number	` _	

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

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	nd Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Health Care Assoc	iation Political Action Committee	
Full Name (Last, First, Middle Initial) A. Gerald Cox Mailing Address BO By 7700		Date of Receipt
Mailing Address PO Box 7728		06 06 2014
City Rocky Mount	State Zip Code NC 27804-0728	Transaction ID : C2776106 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2500.00
Name of Employer Autumn Corp Receipt For: Primary General Other (specify) ▼	Occupation President Aggregate Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Initial) Veronica Damesyn Sharpe Mailing Address 102 Oakford Avenue		Date of Receipt
City Edgewater FEC ID number of contributing federal political committee.	State Zip Code MD 21037	06 06 2014 Transaction ID : C2750875 Amount of Each Receipt this Period 500.00
Name of Employer Verandas Management inc Receipt For: □ Primary □ General □ Other (specify) ▼	Occupation Health Care Executive Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Joanne E Erickson Mailing Address 911 S Randolph St City Arlington	State Zip Code VA 22204-1564	Date of Receipt 06 16 2014 Transaction ID : C2776301 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	86.96
Name of Employer American Health Care Association Receipt For: Primary General Other (specify) ▼	Occupation Editor in Chief, Provider Magazine Aggregate Year-to-Date ▼ 347.84	* Payroll Deduction: \$43.48 Bi-Weekly
SUBTOTAL of Receipts This Page (optional)	3086.96
	per only)	

FOR LINE NUMBER: PAGE (check only one) X 11a 11b 11c

10 OF Use separate schedule(s) for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Norman Estes Date of Receipt Mailing Address 931 Fairfax Park 02 2014 06 City State Zip Code Transaction ID: C2745988 35406-2805 Tuscaloosa AL Amount of Each Receipt this Period FEC ID number of contributing C 5000.00 federal political committee. Name of Employer Occupation NHS Management President Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Rebecca Estes Date of Receipt Mailing Address 931 Fairfax Park 06 02 2014 City State Zip Code Transaction ID: C2745989 ΑL Tuscaloosa 35406-2805 Amount of Each Receipt this Period FEC ID number of contributing 5000.00 federal political committee. Name of Employer Occupation N/A Homemaker Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Patrick Fairbanks Date of Receipt Mailing Address 19915 Nina St. 2014 06 25 City State Zip Code Transaction ID: C2761352 NF Omaha 68130 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation COO Vetter Health Services Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 10250.00 SUBTOTAL of Receipts This Page (optional).....

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any information copied from such Reports or for commercial purposes, other than using	and Statements may not be sold or used by any persong the name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Health Care Asso	ociation Political Action Committee	
Full Name (Last, First, Middle Initial) Ben Griffin Jr Mailing Address 522 Rawls Street		Date of Receipt
waining Address 522 Rawls Street		06 02 2014
City	State Zip Code	Transaction ID : C2745990
Hawkinsville	GA 31036-1954	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	-
Community Health Systems	Administrator	
Receipt For: Primary General Other (consist)	Aggregate Year-to-Date ▼	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Jennifer S Hahs		Date of Receipt
Mailing Address 12423 Flint Street		06 16 _2014 _
City	State Zip Code	Transaction ID : C2776303
Overland Park	KS 66213	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	86.96
Name of Employer American Health Care Association	Occupation Senior Director, Political Affairs	-
Receipt For:	· · · · · · · · · · · · · · · · · · ·	-
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 347.84	* Payroll Deduction: \$43.48 Bi-Weekly
Full Name (Last, First, Middle Initial) Richard Herrick		Date of Receipt
Mailing Address 33 Elk Street		06 07 2014
City	State Zip Code NY 12207	Transaction ID : C2750889
Albany	NY 12207	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
NYS Health Facilities Association	President	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (option	nal)	836.96
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TOTAL This Period (last page this line nu	mber only)	

FOR LINE NUMBER: PAGE 12 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Robin L. Hillier Date of Receipt Mailing Address 4433 Pebble Creek Ln 20 2014 06 City State Zip Code Transaction ID: C2757032 Long Grove IL 60047-5283 Amount of Each Receipt this Period FEC ID number of contributing C 1250.00 federal political committee. Name of Employer Occupation Lake Point Rehab and Nursing Center Owner Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jon Howell Date of Receipt Mailing Address 334 Fountainhead Dr 06 30 2014 City State Zip Code Transaction ID: C2765692 GA Jefferson 30549 Amount of Each Receipt this Period FEC ID number of contributing 5000.00 federal political committee. Name of Employer Occupation Georgia Health Care Association President & CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Elizabeth Johnson Date of Receipt Mailing Address 719 Bullock Place 2014 06 21 City State Zip Code Transaction ID: C2759145 KY Lexington 40508 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Kentucky Association of Health Care Fa President Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 6500.00 SUBTOTAL of Receipts This Page (optional).....

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

FOR LINE NUMBER: PAGE 13 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Sonya Kemp Date of Receipt Mailing Address 438 North Water Avenue 2014 06 16 City State Zip Code Transaction ID: C2755756 TN 37066-2306 Gallatin Amount of Each Receipt this Period FEC ID number of contributing C 1250.00 federal political committee. Name of Employer Occupation Administrator Gallatin Health Care Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Evan Lansing Kolb Date of Receipt Mailing Address 2701 Marye Street 06 02 2014 City State Zip Code Transaction ID: C2745984 LA Alexandria 71301 Amount of Each Receipt this Period FEC ID number of contributing 265.00 federal political committee. Name of Employer Occupation Magnolia Management Corporation Executive Receipt For: Aggregate Year-to-Date ▼ Primary General 265.00 Other (specify) Full Name (Last, First, Middle Initial) c. David A Kyllo Date of Receipt Mailing Address 4621 28th Road South 2014 06 16 City Zip Code State Transaction ID: C2776305 Arlington VA 22206 Amount of Each Receipt this Period FEC ID number of contributing 217.40 С federal political committee. Name of Employer Occupation National Center for Assisted Living **Executive Director** Receipt For: Aggregate Year-to-Date ▼ Primary General * Payroll Deduction: \$108.70 Bi-Weekly 869.60 Other (specify) 1732.40 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) David LaLumia Date of Receipt Mailing Address 12761 South Wacousta Road 2014 06 City State Zip Code Transaction ID: C2776115 Eagle MI 48822 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation Health Care Association of Michigan President Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Larry F. Lane Date of Receipt Mailing Address 1616 Stephens Dr 06 02 2014 City State Zip Code Transaction ID: C2745994 PA Wayne 19087-1023 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Genesis Sr VP, Regulatory Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mary Ellen Lantis Date of Receipt Mailing Address PO Box 699 06 2014 06 City Zip Code State Transaction ID: C2776104 SD Spearfish 57783-0699 Amount of Each Receipt this Period FEC ID number of contributing 110.00 С federal political committee. Name of Employer Occupation President Lantis Enterprises Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) 2110.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 15 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Bethany R Martino Date of Receipt Mailing Address 8559 Window Latch Way 2014 06 16 City Zip Code State Transaction ID: C2776481 MD Columbia 21045 Amount of Each Receipt this Period FEC ID number of contributing C 90.90 federal political committee. Name of Employer Occupation Vice President, Public Affairs American Health Care Association Receipt For: Aggregate Year-to-Date ▼ Primary General * Payroll Deduction: \$45.45 Bi-Weekly 318.15 Other (specify) Full Name (Last, First, Middle Initial) B. W. Russell McDaid Date of Receipt Mailing Address 1819 Creston Drive 06 2014 11 City State Zip Code Transaction ID: C2754152 PA Lebanon 17046 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation PA Health Care Association Exec VP & COO Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Richard Mendlen Date of Receipt Mailing Address 2151 Calle Poco 2014 06 06 City State Zip Code Transaction ID: C2776112 CA San Diego 92019 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation COO Kennon S. Shea & Associates Receipt For: Aggregate Year-to-Date ▼ Primary General 583.00 Other (specify) 840.90 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 16 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Abraham Morse Date of Receipt Mailing Address 21 Sagamore Road 02 2014 06 City Zip Code State Transaction ID: C2745986 MA **Newton Highlands** 02461 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation Massachusetts Senior Care Association President Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Hari Namboodiri Date of Receipt Mailing Address 1301 E Quebec 06 26 2014 City State Zip Code Transaction ID: C2762120 TX McAllen 78503 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Sava Senior Care Senior Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kathleen C. Pagels Date of Receipt Mailing Address 9035 E. Lupine Ave. 2014 06 16 City State Zip Code Transaction ID: C2754613 ΑZ Scottsdale 85260 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation State Executive AZ Health Care Association Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 2000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Gary Porter Date of Receipt Mailing Address PO Box 128 20 2014 06 City State Zip Code Transaction ID: C2757034 OK Ardmore 73402 Amount of Each Receipt this Period FEC ID number of contributing C 1250.00 federal political committee. Name of Employer Occupation Premier Health Care, LLC Owner Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Martin Porter Date of Receipt Mailing Address PO Box 128 06 20 2014 City State Zip Code Transaction ID: C2757033 OK Ardmore 73402-0128 Amount of Each Receipt this Period FEC ID number of contributing 1250.00 federal political committee. Name of Employer Occupation Premier Health Care, LLC COO Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Sally Rapp Date of Receipt Mailing Address 1301 E Quebec 03 2014 06 City State Zip Code Transaction ID: C2745929 CA Coronoa Del Mar 92625 Amount of Each Receipt this Period FEC ID number of contributing 1250.00 С federal political committee. Name of Employer Occupation CEO Sr Administrative Services Inc Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify)

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any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any per he name and address of any political committee to	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Health Care Associa	ation Political Action Committee	
Full Name (Last, First, Middle Initial) James Romano Mailing Address 61 Summer Street		Date of Receipt
Mailing Address 61 Summer Street		06 27 2014
City	State Zip Code	Transaction ID : C2764755
Rowley	MA 01969	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	-
Essex Group Management, Corp	Attorney	
Receipt For: Primary General Other (specify) —	Aggregate Year-to-Date ▼ 500.00	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Martin Sbriglio		Date of Receipt
Mailing Address 88 Ryders Ln Ste 208		06 25 2014
City	State Zip Code	Transaction ID : C2776495
Stratford	CT 06614-1666	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Ryders Health Management	Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Russell Schwartz		Date of Receipt
Mailing Address 60 Cassandra Blvd., Unit 10		06 01 2014
City	State Zip Code CT 06107	Transaction ID : C2745238
West Hartford	CT 06107	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	1
Avon Health Center & West Hartford Hea	VP/Director of Operations	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional)		2000.00
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19 OF Use separate schedule(s) for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Shawn Scott Date of Receipt Mailing Address One Medline Place 2014 06 21 City State Zip Code Transaction ID: C2759128 Mundelein IL 60060 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation Senior VP HC Corporate Sales Medline Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jennifer S Shimer Date of Receipt Mailing Address 9507 Shelly Krasnow Ln 06 16 2014 City State Zip Code Transaction ID: C2776487 VA Fairfax 22031-4720 Amount of Each Receipt this Period FEC ID number of contributing 90.90 federal political committee. Name of Employer Occupation American Health Care Association COO Receipt For: Aggregate Year-to-Date ▼ Primary General * Payroll Deduction: \$45.45 Bi-Weekly 318.15 Other (specify) Full Name (Last, First, Middle Initial) c. Harry D. Shuford Date of Receipt Mailing Address 103 Club Ct 06 18 2014 City Zip Code State Transaction ID: C2776490 GA Warner Robins 31088-7534 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation **Executive VP** Ethica Health & Retirement Communities Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 840.90 SUBTOTAL of Receipts This Page (optional).....

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

FOR LINE NUMBER: PAGE 20 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Peter Van Runkle Date of Receipt Mailing Address 55 Green Meadows Drive S. 2014 06 20 City Zip Code State Transaction ID: C2757035 OH Lewis Center 43035 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation Associate Executive Ohio Health Care Association Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. John Vrba Date of Receipt Mailing Address 5801 S Cass Ave 06 03 2014 City State Zip Code Transaction ID: C2745926 SC Westmont 60559 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation **Burgess Square Healthcare** CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Jennifer Watson Date of Receipt Mailing Address 539 Ten Point Lane 30 2014 06 City State Zip Code Transaction ID: C2767046 PΑ Cranberry Twp 16066 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Regional Director, Operations Extendicare Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Robert Wehner Date of Receipt Mailing Address 5155 North High Street 2014 06 18 City Zip Code State Transaction ID: C2776488 OH Columbus 43214 Amount of Each Receipt this Period FEC ID number of contributing C 137.50 federal political committee. Name of Employer Occupation Chief Financial Officer Wesley Glen Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) Full Name (Last, First, Middle Initial) B. Harmony House LLC Date of Receipt Mailing Address PO Box 829 06 06 2014 City State Zip Code Transaction ID: C2776102 WA **Brewster** 98812 Amount of Each Receipt this Period FEC ID number of contributing 166.00 federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General PARTNERSHIP--partners below if itemized 291.00 Other (specify) Full Name (Last, First, Middle Initial) Jerry R. Tretwold Date of Receipt Mailing Address PO Box 829 06 2014 06 City Zip Code State Transaction ID: C2776103 WA Brewster 98812-0829 Amount of Each Receipt this Period FEC ID number of contributing 166.00 С federal political committee. Name of Employer Occupation Harmony House Health Care Center Owner/ Administrator Receipt For: Aggregate Year-to-Date ▼ [MEMO ITEM] Primary General 291.00 Other (specify) 303.50 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 -9

FOR LINE NUMBER: PAGE 22 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) LAG Associates LP Managers Date of Receipt Mailing Address 8028 Ritchie Hwy Ste 210 06 2014 City Zip Code State Transaction ID: C2776110 MD Pasadena 21122-1075 Amount of Each Receipt this Period FEC ID number of contributing C 1250.00 federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General PARTNERSHIP--partners below if itemized 3750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Gary Attman Date of Receipt Mailing Address 8028 Ritchie Highway 06 06 2014 City State Zip Code Transaction ID: C2776111 MD Pasadena 21122-1069 Amount of Each Receipt this Period FEC ID number of contributing 1250.00 federal political committee. Name of Employer Occupation LAG Associates LP Managers Owner Receipt For: Aggregate Year-to-Date ▼ [MEMO ITEM] Primary General 3750.00 Other (specify) Full Name (Last, First, Middle Initial) c. Peachtree Mena, LLC Date of Receipt Mailing Address 1803 Cordie Drive 2014 06 16 City State Zip Code Transaction ID: C2776118 AR Mena 71953 Amount of Each Receipt this Period FEC ID number of contributing 1250.00 С federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General PARTNERSHIP--partners below if itemized 4250.00 Other (specify) 2500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 23 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Michael Shepard Date of Receipt Mailing Address 1803 Cordie Dr PO Box 125 2014 06 16 City State Zip Code Transaction ID: C2776119 AR Mena 71953-9340 Amount of Each Receipt this Period FEC ID number of contributing C 1250.00 federal political committee. Name of Employer Occupation **Shepard Group** President Receipt For: Aggregate Year-to-Date ▼ [MEMO ITEM] Primary General 4250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Peachtree Mena, LLC Date of Receipt Mailing Address 1803 Cordie Drive 06 25 2014 City State Zip Code Transaction ID: C2776492 AR Mena 71953 Amount of Each Receipt this Period FEC ID number of contributing C 1750.00 federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General PARTNERSHIP--partners below if itemized 4250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Michael Shepard Date of Receipt Mailing Address 1803 Cordie Dr 2014 06 25 PO Box 125 City State Zip Code Transaction ID: C2776493 AR Mena 71953-9340 Amount of Each Receipt this Period FEC ID number of contributing 1750.00 С federal political committee. Name of Employer Occupation President **Shepard Group** Receipt For: Aggregate Year-to-Date ▼ [MEMO ITEM] Primary General 4250.00 Other (specify) 1750.00 SUBTOTAL of Receipts This Page (optional)..... 49169.94 TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 24 OF 41
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
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or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full)			
American Health Care Association	on Political Action Con	nmittee	
Full Name (Last, First, Middle Initial)			
A. American Express			Date of Disbursement
Mailing Address PO Box 53773			06 02 2014
City	State Zip Code		Transaction ID : D159650
Phoenix Purpose of Disbursement	AZ 85072-3773		11411546461112 1 2 100000
Credit Card Processing Fees			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	3.20
Senate	sement For: Primary General		
State: District:	Other (specify)		
Full Name (Last, First, Middle Initial) B. American Express			Date of Disbursement
2. American Express			M M / D D / Y Y Y Y
Mailing Address PO Box 53773			06 09 2014
City Phoenix	State Zip Code AZ 85072-3773		Transaction ID : D159651
Purpose of Disbursement Credit Card Processing Fees			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	56.00
Office Sought: House Disbur Senate President	sement For: Primary General Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) C. American Express			Date of Disbursement
Mailing Address PO Box 53773			06 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code		Transaction ID : D159652
Phoenix Purpose of Disbursement	AZ 85072-3773		
Credit Card Processing Fees			Assessment of Foods Biolesians and this Boston
Candidate Name		Category/ Type	Amount of Each Disbursement this Period 16.00
Office Sought: House Disbur	sement For:	.,,,,	
Senate	Primary General		
President	Other (specify) ▼		
State: District:			
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SCHEDULE B (FEC Form 3X)					PAGE 25	OF 41
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(CITCON OI	(check only one)			
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NAME OF COMMITTEE (In Full)						
American Health Care Association	Political Action Co	mmittee				
Full Name (Last, First, Middle Initial)						
A. American Express			Date of	Disbursem	ent	Y
Mailing Address PO Box 53773			06	20	2014	
City	State Zip Code		Trans	action ID : I	D159653	
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Credit Card Processing Fees			Amount	of Each Di	sbursement this	Period
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State: District:	Other (specify) ▼					
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2. American Express			M M	/ D D	7	V
Mailing Address PO Box 53773			06	24	2014	
City Phoenix	State Zip Code AZ 85072-3773		Trans	action ID :	D159654	
Purpose of Disbursement	AZ 65072-3773		\dashv			
Credit Card Processing Fees			Amount	of Each Di	sbursement this	Period
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	ment For:					
Senate President	Primary General Other (specify) ▼					
State: District:	Other (specify)					
Full Name (Last, First, Middle Initial)						
C. American Express			Date of	Disburseme	ent	
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Mailing Address PO Box 53773			06	25	2014	
City	State Zip Code		_			
Phoenix	AZ 85072-3773		Trans	action ID : I	D159655	
Purpose of Disbursement Credit Card Processing Fees						
Candidate Name			Amount	of Each Di	sbursement this	Period
Candidate Manie		Category/ Type			1	2.52
Office Sought: House Disburse	ment For:	1,900	_			
Senate	Primary General					
President	Other (specify) ▼					
State: District:						
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	for commercial purposes, other than using the nam												
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^	Full Name (Last, First, Middle Initial)						Dir	(F:	le				
A.	American Express						Date o						
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	City	State	Zip Code				Trans	acti	on ID	: D15	0656		
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υ.	BB&T Merchant Services						M = M		Duise		V	Y Y	V
	Mailing Address PO Box 200						06		1			2014	
	City S Wilson	State NC	Zip Code 27894-0200				Transaction ID : D159649						
	Purpose of Disbursement Credit Card Processing Fees			Г		7	Amoun	t of	Each	Disbu	rseme	nt this	Period
	Candidate Name				tegory Type	//		Ξ	,		,	38	1.44
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U.	BB&T						M M		burse		V	Y Y	V
	Mailing Address 1099 New York Ave NW Ste 100						06		2:			2014	
	City	State DC	Zip Code 20001-4452				Trans	sacti	on ID	: D15	9647		
	Purpose of Disbursement	-	20001 1702		_	\dashv							
	Bank Fees Candidate Name				tegor			Disbu	rseme		Period 7.48		
	Office Sought: House Disbursen	nent Eor:		Т	Гуре			-	7		7		
		Primary	General										
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SCHEDULE B (FEC Form 3X)		T 500 : :::=	PAGE 27 OF 41							
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NAME OF COMMITTEE (In Full)										
American Health Care Association	Political Action Com	mittee								
/ American ricann Gare Accordance	1 Olitical Action Com	iiiittoo								
Full Name (Last, First, Middle Initial)										
A. BB&T			Date of Disburseme	nt						
			M M / D D	/ Y Y Y Y Y						
Mailing Address 1099 New York Ave NW			06 23	2014						
Ste 100 City	State Zip Code									
Washington	DC 20001-4452		Transaction ID : D	159648						
Purpose of Disbursement	20001 4402									
Bank Fees			Amount of Each Dis	bursement this Period						
Candidate Name		Category/								
		Type		16.66						
Office Sought: House Disburser										
Senate	Primary General									
President	Other (specify) ▼									
State: District:										
Full Name (Last, First, Middle Initial) B.			Data of Dishuras	nt						
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Office Sought: House Disburser	ment For:	Type		7						
Senate Senate	Primary General									
President	Other (specify)									
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City	State Zip Code									
Purpose of Disbursement										
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		Type								
Office Sought: House Disburser	ment For:									
Senate	Primary General									
President	Other (specify) ▼									
State: District:										
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				910.50						
TOTAL This Period (last page this line number only)				0.000						

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
	Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b	
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Any information copied from such Reports and Stater or for commercial purposes, other than using the nan				
NAME OF COMMITTEE (In Full)				
American Health Care Association	Political Action Con	nmittee		
Full Name (Last, First, Middle Initial)				
A. BEATTY FOR CONGRESS			Date of Disbursement	
Mailing Address PO Box 172			06 10 2014	
City	State Zip Code		Transaction ID : D158841	
Columbus	OH 43216-0172		Transaction ID: D156641	
Purpose of Disbursement Contribution			Amount of Each Disbursement this Period	
Candidate Name		Category/	2500.00	
Rep. JOYCE BEATTY Office Sought: House Disburser	ment For: 2014	Туре	200.00	
Senate President	Primary			
State: OH District: 03				
Full Name (Last, First, Middle Initial)			Data of Dishamanant	
B. BEN SASSE FOR US SENATE IN	C.		Date of Disbursement	
Mailing Address 105 E. 6th Street			06 27 2014	
City Series Seri	State Zip Code NE 68025		Transaction ID : D159405	
Purpose of Disbursement Contribution			Amount of Each Disbursement this Period	
Candidate Name		Category/	5000.00	
BENJAMIN E SASSE		Type	5000.00	
Office Sought: House Disburser Senate	nent For: 2014			
President	Primary			
State: NE District:	Caron (opcomy)			
Full Name (Last, First, Middle Initial)				
C. BOEHNER FOR SPEAKER COMM	/ITTEE		Date of Disbursement	
W. W. A. I			M M / D D / Y Y Y Y	
Mailing Address 320 First Street, SE			06 13 2014	
City	State Zip Code		Transaction ID D450000	
WASHINGTON	DC 20003		Transaction ID : D158992	
Purpose of Disbursement Contribution				
Candidate Name		Category/ Type	Amount of Each Disbursement this Period 10000.00	
Office Sought: House Disburser	ment For:	21		
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
SUBTOTAL of Disbursements This Page (optional)		······	17500.00	
TOTAL This Period (last page this line number only)				

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 29 OF	F 4'
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only		_
	Detailed Summary Page	27	28a 28b 28c 29	3
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full)	le and address of any politi	car committee to	solicit contributions from such committee	e.
American Health Care Association	Political Action Cor	mmittee		
	- Onlical Action Col	mmacc		
Full Name (Last, First, Middle Initial)	20		Date of Disbursement	
- BUDDY CARTER FOR CONGRES	58		Date of Disbursement	v
Mailing Address 200 E. St. Julian Street			06 13 2014	'
Suite 603				
•	State Zip Code GA 31401		Transaction ID : D158988	
Purpose of Disbursement	31401			
Contribution			Amount of Each Disbursement this Pe	eriod
Candidate Name		Category/	1500.0	00
Earl LeRoy Carter	ant Fam. 2211	Type	1300.0	JU
	nent For: 2014 Primary			
	Other (specify)			
State: GA District: 01	√1 /= 3 // ▼			
Full Name (Last, First, Middle Initial)				
BUDDY CARTER FOR CONGRES	SS		Date of Disbursement	V
Mailing Address 200 E. St. Julian Street Suite 603			06 10 2014	
,	State Zip Code		Transaction ID : D158847	
Savannah Purpose of Disbursement	GA 31401			
Contribution			Amount of Each Disbursement this Pe	eriod
Candidate Name		Category/	4000	00
Earl LeRoy Carter		Type	1000.0	00
	nent For: 2014			
	Primary			
State: GA District: 01	Other (specify)			
Full Name (Last, First, Middle Initial)				
EMPIRE POLITICAL ACTION CON	<i>I</i> MITTEE		Date of Disbursement	
Mailing Address PO BOX 15033			06 13 2014	Y
,	State Zip Code DC 20003		Transaction ID : D158986	
Purpose of Disbursement	20003			
Contribution			Amount of Each Disbursement this Pe	eriod
Candidate Name		Category/	5000 (00
000		Туре	5000.0	UU
Office Sought: House Disburser Senate				
	Primary General Other (specify) ▼			
State: District:				
				_
SUBTOTAL of Disbursements This Page (optional)		·····	7500.0	00
TOTAL This Period (last page this line number only).				

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 30 OF 41		
ITEMIZED DISBURSEMENTS	Use separate schedule(s	(check only one)		
	for each category of the Detailed Summary Page	`	22 🗙 23 24 25 26	
		27	28a 28b 28c 29 30k	
Any information copied from such Reports and Sta				
or for commercial purposes, other than using the	name and address of any poli	tical committee to	solicit contributions from such committee.	
NAME OF COMMITTEE (In Full)		_		
$ \; angle$ American Health Care Association	on Political Action Co	mmittee		
Full Name (Last, First, Middle Initial)		1		
A. FRIENDS OF RENTERIA			Date of Disbursement	
			M M / D D / Y Y Y Y	
Mailing Address P.O. BOX 655			06 10 2014	
City	Otata 7:a Cada			
City Sanger	State Zip Code CA 93657		Transaction ID : D158846	
Purpose of Disbursement	93037			
Contribution			Amount of Each Disbursement this Period	
Candidate Name		Category/	500.00	
Amanda Renteria		Type	500.00	
	sement For: 2014			
Senate	Primary General			
State: CA District: 21	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
B. McConnell Victory Kentucky			Date of Disbursement	
Wedenien victory Kentucky			M = M / D = D / Y = Y = Y	
Mailing Address 228 S. Washington Street			06 02 2014	
Suite 115				
City	State Zip Code		Transaction ID : D158618	
Alexandria Purpose of Disbursement	VA 22314			
Contribution			Amount of Each Disbursement this Period	
Candidate Name		Category/		
		Type	5000.00	
Office Sought: House Disbur	sement For:	-		
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)			Date of Disbursement	
C. Andy Tobin for Congress				
Mailing Address 2532 N. 4th Street			06 17 2014	
#528				
City	State Zip Code		Transaction ID : D159048	
Flagstaff Purpose of Disbursement	AZ 86004			
Contribution				
Candidate Name		0.1	Amount of Each Disbursement this Period	
Andrew M Tobin		Category/ Type	1000.00	
Office Sought: House Disbur	sement For: 2014	, ,,		
Senate	Y Primary General			
President	Other (specify) ▼			
State: AZ District: 01				
			2502.00	
SUBTOTAL of Disbursements This Page (optional	l)	·····	6500.00	
TOTAL This Desired (leaf see a life line of	al. A			
TOTAL This Period (last page this line number or	11y)			

	LE B (FEC Form 3X)	Hoo concrete set	odula(s)	FOR LINE I	-	PAGE 31 OF 41
ITEMIZED	DISBURSEMENTS	Use separate sche for each category	of the	(check only		23 24 25 26
		Detailed Summary		27		28b 28c 29 30b
Any information	on copied from such Reports and State	nents may not be so	old or used	by any perso	n for the purpo	ose of soliciting contributions
or for comme	rcial purposes, other than using the nar					
I \	COMMITTEE (In Full)	Dalle LA e		100		
Americ	an Health Care Association	Political Actio	n Comr ——	mittee		
_	(Last, First, Middle Initial)				Data of Diah	
A. MURPI	HPAC				Date of Disk	
Mailing Add	dress 50 E St SE				06	27 2014
	Ste 1					
City Washingtor		State Zip Coo DC 20003-			Transactio	n ID : D159385
•	f Disbursement	20000	2020			
Contribution				: :	Amount of E	ach Disbursement this Period
Candidate	Name			Category/		5000.00
Office Sou	ght: House Disburse	ment For:		Туре		000.00
Office Gody	Senate		eneral			
	President	Other (specify)				
State:	District:					
	(Last, First, Middle Initial)					
B. New Pi	ioneers PAC				Date of Disk	
Mailing Add	dress 228 S WASHINGTON ST STE 11	 5			06	26 2014
City Alexandria		State Zip Coo VA 22314			Transactio	on ID : D159384
	f Disbursement	22314				
Contributi					Amount of E	ach Disbursement this Period
Candidate	Name			Category/		5000.00
Office Sou	ght: House Disburse	ment For:		Туре	,	
Omoc oou	Senate		eneral			
	President	Other (specify)				
State:	District:					
	(Last, First, Middle Initial)				Data of Dial	
C. PAC 10	O THE FUTURE				Date of Disk	
Mailing Add	dress 430 S. Capitol St. SE 1st Flr.				M M /	17 2014
City		State Zip Coo DC 20003	de		Transactio	on ID : D159052
Washington Purpose of	f Disbursement	20003				
Contribution	on				Amount of E	each Disbursement this Period
Candidate	Name			Category/		5000.00
O#: C	plate Distance			Туре		3000.00
Office Sou	ght: House Disburse	ment For: Primary Ge	eneral			
	President	Other (specify)	onorai			
State:	District:					
SUBTOTAL	of Disbursements This Page (optional)			······		15000.00
TOTAL This	Poriod (lost page this line number and	.				
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SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 32 OF	41
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
	Detailed Summary Page	21b	22 X 23 24 25	26
		27	28a 28b 28c 29	30b
Any information copied from such Reports and Staten or for commercial purposes, other than using the name				3
NAME OF COMMITTEE (In Full)				
American Health Care Association	Political Action Cor	nmittee		
Full Name (Last, First, Middle Initial)			D (D)	
A. PAT MURPHY FOR IOWA			Date of Disbursement	
Mailing Address P.O. BOX 692			06 10 2014	
City	State Zip Code		Transaction ID - D450045	
DUBUQUE	IA 52004		Transaction ID: D158845	
Purpose of Disbursement Contribution			Amount of Each Disbursement this Period	bc
Candidate Name		Category/	1000.00	\neg
Patrick J. Murphy		Type	1000.00	_
Senate President	nent For: 2014 Primary			
State: IA District: 01				
Full Name (Last, First, Middle Initial)			D (D)	
B. FRIENDS OF BENNIE THOMPSO	N		Date of Disbursement	
Mailing Address P.O. Box 100			06 10 2014	
Bolton	State Zip Code MS 39041		Transaction ID: D158836	
Purpose of Disbursement Contribution			Amount of Each Disbursement this Period	od
Candidate Name		Category/	2500.00	
Rep. Bennie Thompson		Туре	2300.00	_
Senate	nent For: 2014 Primary			
State: MS District: 02				
Full Name (Last, First, Middle Initial) C. CITIZENS FOR RUSH			Date of Disbursement	
Mailing Address P. O. BOX 7292			06 13 / 2014	
City S	State Zip Code IL 60680		Transaction ID : D158990	
Purpose of Disbursement Contribution				
Candidate Name			Amount of Each Disbursement this Period	bd
Rep. BOBBY L. RUSH		Category/ Type	2500.00	
Office Sought: House Disburser	nent For: 2014 Primary General Other (specify)	.,,,,,		
State: IL District: 01				
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)			6000.00	7

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 33 OF 41
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	v one)
	Detailed Summary Page	21b	22 X 23 24 25 26 28a 28b 28c 29 30
		27	
Any information copied from such Reports and State or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full)			
American Health Care Association	n Political Action Cor	nmittee	
/			
Full Name (Last, First, Middle Initial)			Data of Dishursomert
A. RICHMOND FOR CONGRESS			Date of Disbursement
Mailing Address 1631 ELYSIAN FIELDS SUITE 1	50		06 13 2014
City	State Zip Code		Transaction ID : D158989
NEW ORLEANS Purpose of Disbursement	LA 70126		Transaction is 1 5 tooses
Contribution			Amount of Each Disbursement this Period
Candidate Name		Category	31100
Rep. CEDRIC L. RICHMOND		Category/ Type	2500.00
	ement For: 2014		
Senate	Primary General		
State: LA District: 02	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
B. FRIENDS FOR CHRIS STEWAR	T INC		Date of Disbursement
TRIENDO FOR OFFICE OFEWAR	1, 1140.		M = M / D = D / Y = Y = Y
Mailing Address 542 E LAKEVIEW WAY			06 27 2014
City FARMINGTON	State Zip Code UT 84025		Transaction ID : D159407
Purpose of Disbursement	04020		
Contribution			Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Rep. Chris Stewart		Type	1000.00
Office Sought: House Disburse Senate	ement For: 2014 Primary General		
President	Primary		
State: UT District: 02	Canon (opcomy)		
Full Name (Last, First, Middle Initial)			
C. FRIENDS OF DAN MAFFEI			Date of Disbursement
			M = M / D = D / Y = Y = Y
Mailing Address PO Box 230			06 10 2014
City	State Zip Code		
Syracuse	NY 13201		Transaction ID : D158848
Purpose of Disbursement Contribution			
Candidate Name			Amount of Each Disbursement this Period
Rep. Dan B. Maffei		Category/ Type	1000.00
	ement For: 2014	туре	7
Senate	Primary General		
President	Other (specify) ▼		
State: NY District: 24			
			4500.00
SUBTOTAL of Disbursements This Page (optional)		·····•	4500.00
TOTAL This Period (last page this line number onl	w)		
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SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PA	GE 34 OF 41
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
	Detailed Summary Page	21b	22 🗙 23 24	25 26
[27	28a 28b 28c	29 30b
Any information copied from such Reports and Stater or for commercial purposes, other than using the nar				
NAME OF COMMITTEE (In Full)	, po			
American Health Care Association	Political Action Con	nmittee		
V				
Full Name (Last, First, Middle Initial)	0.05.5.11.05		Data of District	
A. DAVIS FOR CONGRESS/FRIEND	S OF DAVIS		Date of Disbursement	
Mailing Address 5956 W. RACE AVENUE			M M / D D / D D / D D / D D / D D D / D	2014
maning reasons occorving to the control of the control occording to the				
,	State Zip Code		Transaction ID : D15883	ta
CHICAGO	IL 60644		Transaction ib . D13003	
Purpose of Disbursement Contribution			Amount of Each Disburse	ment this Period
Candidate Name			Amount of Lacif Disburse	ment this renou
Rep. Danny K. Davis		Category/ Type		2500.00
	nent For: 2014			
Senate	Primary General			
President	Other (specify) ▼			
State: IL District: 07				
Full Name (Last, First, Middle Initial) B. DENNY HECK FOR CONGRESS			Date of Disbursement	
b. DENNY HECK FOR CONGRESS				/ • Y • Y • Y
Mailing Address PO BOX 235			06 17	2014
•	State Zip Code		Transaction ID : D15904	19
OLYMPIA Purpose of Disbursement	WA 98507			
Contribution			Amount of Each Disburse	ment this Period
Candidate Name		Category/		
Rep. Denny Heck		Type		2000.00
	nent For: 2014			
Senate President	Primary General			
State: WA District: 10	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
C. DONALD M PAYNE JR FOR CON	GRESS		Date of Disbursement	
			M M / D D /	YYY
Mailing Address PO Box 2406			06 10	2014
City	State Zip Code			
City Newark	NJ 07114-0406		Transaction ID: D15884	14
Purpose of Disbursement				
Contribution		L II	Amount of Each Disburse	ment this Period
Candidate Name		Category/		2500.00
Rep. Donald M. Payne Jr. Office Sought:	ment For: 2014	Туре		2000.00
Senate Dispurser	Primary Seneral			
President	Other (specify)			
State: NJ District: 10	· · · · · · · · · · · · · · · · · · ·			
<u> </u>				
SUBTOTAL of Disbursements This Page (optional)			7	7000.00
TOTAL This Period (last page this line number only)				

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 35 OF
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the Detailed Summary Page	(check only	one) 22 X 23 24 25
Any information copied from such Reports and State or for commercial purposes, other than using the nar		sed by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			zama de la companione d
American Health Care Association	Political Action Co	mmittee	
Full Name (Last, First, Middle Initial)	A		Data of Dishuranment
L. CUMMINGS FOR CONGRESS CA	AMPAIGN COMMII	IEE	Date of Disbursement
Mailing Address PO BOX 1631			06 10 2014
•	State Zip Code		Transaction ID : D158850
BALTIMORE Purpose of Disbursement	MD 21203		
Contribution			Amount of Each Disbursement this Period
Candidate Name		Category/	2500.00
Rep. Elijah E. Cummings		Type	2500.00
Office Sought: House Disburse Senate President	ment For: 2014 Primary		
State: MD District: 07			
Full Name (Last, First, Middle Initial) 3. CLEAVER FOR CONGRESS			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address 4801 MAIN STREET, SUITE 1000)		06 10 2014
City KANSAS CITY	State Zip Code MO 64112		Transaction ID : D158842
Purpose of Disbursement Contribution	01112		Amount of Each Disbursement this Perio
Candidate Name		البسبا	Amount of Each dispursement this Pend
Rep. Emanuel Cleaver II		Category/ Type	2500.00
Office Sought: House Disburse	ment For: 2014 Primary General Other (specify)	7,12	
Full Name (Last, First, Middle Initial) FRIENDS OF FRANK GUINTA			Date of Disbursement
FRIENDS OF FRANK GUINTA			M M / D D / Y Y Y Y Y
Mailing Address P.O. Box 877			06 27 2014
City Manchester	State Zip Code NH 03105		Transaction ID : D159406
Purpose of Disbursement	03103		
Contribution			Amount of Each Disbursement this Perio
Candidate Name		Category/	2500.00
Rep. Frank Guinta	want Fam. sa:	Type	2500.00
Senate President	ment For: 2014 Primary General Other (specify)		
State: NH District: 01			
SUBTOTAL of Disbursements This Page (optional)			7500.00
TOTAL This Period (last page this line number only	1		
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SCHEDULE B (FEC Form 3X)		EOD LINE	NUMBER: PAGE 36 OF 41
ITEMIZED DISBURSEMENTS	Use separate schedule(s		NOMBER:
	for each category of the Detailed Summary Page	`	22 🗙 23 24 25 26
		27	28a 28b 28c 29 30l
Any information copied from such Reports and Stat			
or for commercial purposes, other than using the na	ame and address of any poli	tical committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		•	
American Health Care Association	n Political Action Co	mmittee	
Full Name (Last, First, Middle Initial)		1	
A. BUTTERFIELD FOR CONGRESS	3		Date of Disbursement
DOTTERNILED FOR CONCREC	5		M M / D D / Y Y Y Y
Mailing Address PO Box 2571			06 10 2014
0.4	Otata 7'- Oada		
City Wilson	State Zip Code NC 27894		Transaction ID : D158835
Purpose of Disbursement	21034		
Contribution			Amount of Each Disbursement this Period
Candidate Name		Category/	2502.22
G.K. Butterfield		Type	2500.00
	ement For: 2014		
Senate	Primary General		
State: NC District: 01	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
B. WALDEN FOR CONGRESS			Date of Disbursement
WALDENT ON CONCRESS			M = M / D = D / Y = Y = Y
Mailing Address PO Box 1091			06 26 2014
City	State Zip Code OR 97031		Transaction ID : D159383
Hood River Purpose of Disbursement	OR 97031	I	
Contribution			Amount of Each Disbursement this Period
Candidate Name		Category/	
Rep. Greg Walden		Type	4000.00
	ement For: 2014		
Senate	Primary General		
President President	Other (specify) ▼		
State: OR District: 02			
Full Name (Last, First, Middle Initial) C. JOHN LEWIS FOR CONGRESS			Date of Disbursement
o. JOHN LEWIS FOR CONGRESS			M M / D D / Y Y Y Y
Mailing Address P.O. BOX 2323			06 10 2014
City	State Zip Code		Transaction ID : D158838
ATLANTA Purpose of Disbursement	GA 30301		
Contribution			Amount of Each Disbursement this Period
Candidate Name		Catagony	Amount of Each disbursement this Period
Rep. John Lewis		Category/ Type	2500.00
Office Sought: House Disburs	ement For: 2014	1	
Senate	Primary		
President	Other (specify) ▼		
State: GA District: 05			
			9000.00
SUBTOTAL of Disbursements This Page (optional)		·····•	3000.00
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SCHEDULE B (FEC Form 3X)		EOD LINE	NUMBER: PAGE 37 OF 41	
ITEMIZED DISBURSEMENTS	Use separate schedule(s			
TEMILED DISDONSEIVIENTS	for each category of the Detailed Summary Page	21b	22 🗙 23 24 25 26	
	Detailed Summary rage	27	28a 28b 28c 29 30	
Any information copied from such Reports and Stater				
or for commercial purposes, other than using the nar	ne and address of any polit	ical committee to	solicit contributions from such committee.	
NAME OF COMMITTEE (In Full)				
American Health Care Association	Political Action Co	mmittee		
/ Full Name (Last, First, Middle Initial)		Т		
A. MARCIA FUDGE FOR CONGRES	3		Date of Disbursement	
WINTER TO BOLL FOR CONGRES	.0		M M / D D / Y Y Y Y	
Mailing Address 3729 SILSBY RD			06 10 2014	
0:	O			
City UNIVERSITY HEIGHTS	State Zip Code OH 44118		Transaction ID : D158840	
Purpose of Disbursement	44116			
Contribution			Amount of Each Disbursement this Period	
Candidate Name		Category/		
Rep. Marcia L. Fudge		Type	2500.00	
Office Sought: House Disburser	ment For: 2014			
Senate	Primary General			
State: OH District: 11	Other (specify) ▼			
Full Name (Last, First, Middle Initial) B. POMPEO FOR CONGRESS INC			Date of Disbursement	
B. POMPEO FOR CONGRESS INC				
Mailing Address PO BOX 780146			06 17 2014	
a g va va re Bentreerie				
•	State Zip Code		Transaction ID : D159047	
WICHITA Purpose of Disbursement	KS 67212			
Contribution			Amount of Each Disbursement this Period	
Candidate Name			Attribute of Edot Biobardement this Forest	
Rep. Mike Pompeo		Category/ Type	4000.00	
	ment For: 2014	71		
Senate	Primary General			
President	Other (specify) ▼			
State: KS District: 04				
Full Name (Last, First, Middle Initial)			Data of Diabura	
C. CRAWFORD FOR CONGRESS			Date of Disbursement	
Mailing Address PO BOX 16956			06 02 2014	
Maining Address 1 O BOX 10930			32 2011	
City	State Zip Code		Transaction ID : D158643	
JONESBORO	AR 72403		Transaction iD . D130043	
Purpose of Disbursement Voided Check-Orig Issued on 4/28/2014				
Candidate Name			Amount of Each Disbursement this Period	
Rep. Rick Crawford		Category/ Type	-1000.00	
•	ment For: 2014	туре		
Senate	Primary General			
President	Other (specify) ▼			
State: AR District: 01				
SUBTOTAL of Disbursements This Page (optional)			5500.00	
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TOTAL This Period (last page this line number only)				

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 38 OF 41
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	21b	22 X 23 24 25 26
Г		27	28a 28b 28c 29 30b
Any information copied from such Reports and State or for commercial purposes, other than using the nar			
NAME OF COMMITTEE (In Full)			
American Health Care Association	Political Action Con	nmittee	
Full Name (Last, First, Middle Initial)			
A. KIND FOR CONGRESS COMMIT	TEE		Date of Disbursement
Mailing Address 205 5th Avenue South			06 25 2014
City	State Zip Code		Transaction ID - D450005
La Crosse	WI 54601		Transaction ID : D159295
Purpose of Disbursement Contribution			Amount of Each Disbursement this Period
Candidate Name		Category/	5000.00
Rep. Ronald J. Kind Office Sought: House Disburse		Туре	3000.00
Office Sought: House Disburse Senate President	ment For: 2014 Primary		
State: WI District: 03			
Full Name (Last, First, Middle Initial)			
B. KIND FOR CONGRESS COMMIT	TEE		Date of Disbursement
Mailing Address 205 5th Avenue South			06 17 2014
City La Crosse	State Zip Code WI 54601		Transaction ID : D159051
Purpose of Disbursement Contribution			Amount of Each Disbursement this Period
Candidate Name		Category/	
Rep. Ronald J. Kind		Type	5000.00
	ment For: 2014		
	Primary General		
President State: WI District: 03	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
C. SANFORD BISHOP FOR CONGR	ESS		Date of Disbursement
CANA CAS BIOLICI I CA CONCIN	ALOO		M M / D D / Y Y Y Y
Mailing Address P. O. Box 909			06 13 2014
City	State Zip Code		Transaction ID : D158991
Columbus	GA 31902		1141154611011 10 . 0130331
Purpose of Disbursement Contribution			
Candidate Name			Amount of Each Disbursement this Period
Rep. Sanford D. Bishop Jr.		Category/ Type	2500.00
	ment For: 2014	Турс	7
Senate	Primary General		
President	Other (specify) ▼		
State: GA District: 02			
			1000000
SUBTOTAL of Disbursements This Page (optional)		·····•	12500.00
TOTAL This David (last many this the mount	1		
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 39 OF 41		
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only one)		
	for each category of the Detailed Summary Page	21b	22 🗙 23 24 25 26	
	Dotailed Cultilliary 1 age	27	28a 28b 28c 29 30k	
Any information copied from such Reports and Staten				
or for commercial purposes, other than using the nam	e and address of any politication	al committee to	solicit contributions from such committee.	
NAME OF COMMITTEE (In Full)		•		
American Health Care Association	Political Action Com	ımittee		
Full Name (Last, First, Middle Initial)				
A. HOYER FOR CONGRESS			Date of Disbursement	
			M M / D D / Y Y Y	
Mailing Address 700 13th Street, NW			06 17 2014	
City	tata Zin Codo			
City S Washington	State Zip Code DC 20005		Transaction ID: D159050	
Purpose of Disbursement	20000			
Contribution			Amount of Each Disbursement this Period	
Candidate Name		Category/	5000.00	
Rep. Steny H. Hoyer		Type	5000.00	
	nent For: 2014			
	Primary General			
State: MD District: 05	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
B. WOMACK FOR CONGRESS COM	IMITTEE		Date of Disbursement	
WOW, LORT ON CONCREGO CON			M M / D D / Y Y Y Y	
Mailing Address PO BOX 508			06 02 2014	
City S ROGERS	State Zip Code AR 72757		Transaction ID : D158641	
Purpose of Disbursement	AK /2/5/			
Voided Check-Orig Issued 4/28/2014			Amount of Each Disbursement this Period	
Candidate Name		Category/		
Rep. Steve Womack		Type	-3000.00	
	nent For: 2014			
	Primary General			
President State: AR District: 03	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
C. HORSFORD FOR CONGRESS			Date of Disbursement	
TIONOLOND LONG CONCINEDO			M M / D D / Y Y Y Y	
Mailing Address 6100 ELTON AVE.			06 10 2014	
	State Zip Code		Transaction ID : D158837	
LAS VEGAS Purpose of Disbursement	NV 89107			
Contribution			Amount of Each Disbursement this Period	
Candidate Name		Category/	Amount of Each Disbursement this Feriod	
Rep. Steven A. Horsford		Type	2500.00	
	nent For: 2014			
	Primary General			
President	Other (specify) ▼			
State: NV District: 04				
CURTOTAL of Distance and Time S			4500.00	
SUBTOTAL of Disbursements This Page (optional)		······	1000.00	
 				

SCHEDULE B (FEC Form 3X)		EOD LINE	NUMBER: PAGE 40 OF 41		
ITEMIZED DISBURSEMENTS	Use separate schedule(s	(check only	EINE NOMBEN.		
TILIMELD DIODOROLIVILITIO	for each category of the Detailed Summary Page	1 \ \ \ \ 21h	22 🗙 23 24 25 26		
	Dotailed Cultillary 1 age	27	28a 28b 28c 29 30k		
Any information copied from such Reports and State					
or for commercial purposes, other than using the na	me and address of any poli	tical committee to	solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)					
$ \; angle$ American Health Care Association	n Political Action Co	mmittee			
Full Name (Last, First, Middle Initial)					
A. BONAMICI FOR CONGRESS			Date of Disbursement		
			M M / D D / Y Y Y Y		
Mailing Address 2236 SE 10TH AVE			06 13 2014		
City	State Zip Code				
PORTLAND	OR 97214		Transaction ID : D158987		
Purpose of Disbursement					
Contribution			Amount of Each Disbursement this Period		
Candidate Name		Category/	1500.00		
Rep. Suzanne Bonamici		Type	1300.00		
Office Sought: House Disburse Senate	ement For: 2014 Primary General				
President	Other (specify)				
State: OR District: 01	cuio (opcony) •				
Full Name (Last, First, Middle Initial)					
B. TERRI SEWELL FOR CONGRES	S		Date of Disbursement		
			M M / D D / Y Y Y Y		
Mailing Address P.O. BOX 1964			06 10 2014		
City	State Zip Code				
BIRMINGHAM	AL 35201		Transaction ID : D158843		
Purpose of Disbursement					
Contribution			Amount of Each Disbursement this Period		
Candidate Name		Category/	2500.00		
Rep. Terri A. Sewell Office Sought: House Disburse	week Fam. 2011	Туре	2000.00		
Office Sought: House Disburse Senate	ement For: 2014 Primary General				
President	Other (specify)				
State: AL District: 07	Caron (openin)				
Full Name (Last, First, Middle Initial)					
C. RYAN COSTELLO FOR CONGR	ESS		Date of Disbursement		
			M M / D D / Y Y Y Y		
Mailing Address PO BOX 89			06 02 2014		
City	State Zip Code				
PHOENIXVILLE	PA 19460		Transaction ID : D158642		
Purpose of Disbursement					
Voided Check-Orig Issued on 3/18/2014			Amount of Each Disbursement this Period		
Candidate Name RYAN A COSTELLO		Category/	-1000.00		
	ement For: 2014	Туре	7 7		
Senate	Primary General				
President	Other (specify)				
State: PA District: 06	」				
<u> </u>					
SUBTOTAL of Disbursements This Page (optional)		·····	3000.00		
TOTAL This Period (last page this line number only	/)				

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER:	PAGE 41 OF 41	
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	(check only one)		
	Detailed Summary Page	21b 27	22 X 23 28b	24 25 26 28c 29 30b	
Any information copied from such Reports and Stater	nents may not be sold or use				
or for commercial purposes, other than using the name	ne and address of any politica	al committee to	solicit contributions f	from such committee.	
NAME OF COMMITTEE (In Full)	_				
American Health Care Association	Political Action Com	mittee			
Full Name (Last, First, Middle Initial)			Data of Dishamous		
- CITIZENS FOR COCHRAN			Date of Disbursement		
Mailing Address PO BOX 7183			06 10	2014	
City	State Zip Code		Transaction ID :	D159940	
TUPELO	MS 38802		Transaction iD .	D130049	
Purpose of Disbursement Contribution			Amount of Each D	Disbursement this Period	
Candidate Name		Category/		5000.00	
Sen. Thad Cochran Office Sought: House Disburser		Туре		000.00	
Office Sought: House Disburser	ment For: 2014 Primary General				
President	Other (specify)				
State: MS District:	Runoff				
Full Name (Last, First, Middle Initial)					
3.			Date of Disbursem	nent	
			M = M / D = D	/	
Mailing Address					
City	State Zip Code				
Purpose of Disbursement					
Ossal' Jata Nassa			Amount of Each D	Disbursement this Period	
Candidate Name		Category/ Type			
Office Sought: House Disburser	ment For:	туре	,		
Senate	Primary General				
President	Other (specify) ▼				
State: District:					
Full Name (Last, First, Middle Initial)			D . (D)		
>.			Date of Disbursem		
Mailing Address			M M / D D	/	
City	State Zip Code				
Purpose of Disbursement					
			Amount of Each Disbursement this Period		
Candidate Name		Category/ Type			
Office Sought: House Disburser	ment For:	i ype		7	
Senate	Primary General				
President	Other (specify) ▼				
State: District:					
				5000.00	
$\textbf{SUBTOTAL} \ \ \text{of Disbursements This Page (optional)}$		·····•		5000.00	
TOTAL TIL D. 1.17				111000.00	
TOTAL This Period (last page this line number only))				