

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

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

American Seniors Housing Association (Seniors Housing PAC)

ADDRESS (number and street)

5100 Wisconsin Ave., NW

Suite 307

☐ Check if different  
than previously  
reported. (ACC)

Washington

DC

20016

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00325332

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

- ☐ April 15  
Quarterly Report(Q1)
- ☐ July 15  
Quarterly Report(Q2)
- ☐ October 15  
Quarterly Report(Q3)
- ☐ January 31  
Quarterly Report(YE)
- ☐ July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)
- ☐ Termination Report  
(TER)

(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☒

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

04

01

2009

through

04

30

2009

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

Type or Print Name of Treasurer

David Schless

Signature of Treasurer

Electronically Filed by David Schless

Date

05

11

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

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

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American Seniors Housing Association (Seniors Housing PAC)

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	4	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	Y	Y
0	4	3	0	2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2009</span>		641568.36
(b) Cash on Hand at Beginning of Reporting Period .....	701978.36	
(c) Total Receipts (from Line 19) .....	56015.00	155425.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	757993.36	796993.36
7. Total Disbursements (from Line 31) .....	29000.00	68000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	728993.36	728993.36
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> 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)

Page 3

Write or Type Committee Name

American Seniors Housing Association (Seniors Housing PAC)

Report Covering the Period:

From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	52300.00	147700.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	3715.00	4725.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	56015.00	152425.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	3000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	56015.00	155425.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	56015.00	155425.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	56015.00	155425.00

**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
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	29000.00	68000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	29000.00	68000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	29000.00	68000.00

**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
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	56015.00	155425.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	56015.00	155425.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

FOR LINE NUMBER: PAGE 6 / 21

(check only one)

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

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 Seniors Housing Association (Seniors Housing PAC)

**A.**

Full Name (Last, First, Middle Initial)

Judy W Boyette

Mailing Address 425 Market St.  
26th FloorCity State Zip Code  
San Francisco CA 94105-2499FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hanson Bridgett LLPOccupation  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	0	9

Transaction ID: 29353001

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Kurt A Franklin

Mailing Address 425 Market St.  
26th FloorCity State Zip Code  
San Francisco CA 94105-2499FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hanson BridgettOccupation  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	0	9

Transaction ID: 29353004

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

James F Geary

Mailing Address 425 Market St.  
26th FloorCity State Zip Code  
San Francisco CA 94105-2499FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hanson Bridgett LLPOccupation  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	0	9

Transaction ID: 29353007

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

1050.00

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

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

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

FOR LINE NUMBER: PAGE 7 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

**A.**

Full Name (Last, First, Middle Initial)

Andrew G Giacomini

Mailing Address 425 Market St.  
26th Floor

City State Zip Code  
San Francisco CA 94105-2499

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Hanson Bridgett

Occupation  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 6 / 2 0 0 9

Transaction ID: 29353008

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Paul A. Gordon

Mailing Address 425 Market Street  
26th Floor

City State Zip Code  
San Francisco CA 94105-2499

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Hanson Bridgett

Occupation  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 6 / 2 0 0 9

Transaction ID: 29353010

Amount of Each Receipt this Period

3000.00

**C.**

Full Name (Last, First, Middle Initial)

Allan D. Jergesen

Mailing Address 425 Market Street  
26th Floor

City State Zip Code  
San Francisco CA 94105-2499

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Hanson Bridgett

Occupation  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 6 / 2 0 0 9

Transaction ID: 29353011

Amount of Each Receipt this Period

1500.00

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

5000.00

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

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

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

FOR LINE NUMBER: PAGE 8 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

**A.**

Full Name (Last, First, Middle Initial)

Glenda M Zarbock

Mailing Address 425 Market St  
26th Floor

City State Zip Code  
San Francisco CA 94105

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Hanson Bridgett

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 6 / 2 0 0 9

Transaction ID: 29353022

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Robert W. Gillette

Mailing Address 6755 Telegraph Road  
Suite 330

City State Zip Code  
Bloomfield Hills MI 48301-3180

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American House

Occupation  
Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 6 / 2 0 0 9

Transaction ID: 29353027

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Joseph E Schwartz

Mailing Address 6755 Telegraph Rd.  
Suite 330

City State Zip Code  
Bloomfield Hills MI 48301-3180

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American House

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 6 / 2 0 0 9

Transaction ID: 29353028

Amount of Each Receipt this Period

500.00

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

1250.00

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



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

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

FOR LINE NUMBER: PAGE 9 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

**A.**

Full Name (Last, First, Middle Initial)

J. Robert Gillette

Mailing Address 6755 Telegraph Rd.  
Suite 330

City State Zip Code  
Bloomfield Hills MI 48301-3180

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American House

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 6 / 2 0 0 9

Transaction ID: 29353029

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

David J. Hegarty

Mailing Address 400 Centre Street

City State Zip Code  
Newton MA 02458-2094

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Senior Housing Properties  
Trust

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 6 / 2 0 0 9

Transaction ID: 29353030

Amount of Each Receipt this Period

3000.00

**C.**

Full Name (Last, First, Middle Initial)

Robert G Noonan

Mailing Address 661 Washington St.  
Suite 308

City State Zip Code  
Norwood MA 02062-3579

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Nationwide Health Propert-  
ies, Inc.

Occupation  
VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 6 / 2 0 0 9

Transaction ID: 29353031

Amount of Each Receipt this Period

1000.00

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

4500.00

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

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

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

FOR LINE NUMBER: PAGE 10 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

**A.**

Full Name (Last, First, Middle Initial)

Doug S Schiffer

Mailing Address 1050 Crown Pointe Pkwy  
Suite 960

City State Zip Code  
Atlanta GA 30338-7700

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Hallmark Holdings LLC

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 6 / 2 0 0 9

Transaction ID: 29353272

Amount of Each Receipt this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)

Lisa M Brush

Mailing Address 3560 Pine Grove Ave.  
Suite 368

City State Zip Code  
Port Huron MI 48060-1994

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Symphony Senior Living

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 6 / 2 0 0 9

Transaction ID: 29353276

Amount of Each Receipt this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

John Kusmiersky

Mailing Address 2101 Rosecrans Ave.  
Suite 5252

City State Zip Code  
El Segundo CA 90245-4749

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
U.S. Managers Realty, Inc.

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 6 / 2 0 0 9

Transaction ID: 29353278

Amount of Each Receipt this Period

2000.00

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

6000.00

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

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

FOR LINE NUMBER: PAGE 11 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

**A.**

Full Name (Last, First, Middle Initial)

Dale Watchowski

Mailing Address One Town Square  
Suite 1600City State Zip Code  
Southfield MI 48076FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American House

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	0	9

Transaction ID: 29353280

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Retirement Companies of America

Mailing Address 6465 N. Quail Hollow Rd  
Suite 400City State Zip Code  
Memphis TN 38120FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	0	9

Transaction ID: 29359313

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Charles S. Trammell, Jr.

Mailing Address 6465 N. Quail Hollow Road, Suite 4

City State Zip Code  
Memphis TN 38120FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retirement Companies of  
AmericaOccupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	0	9

Transaction ID: 29359314

Amount of Each Receipt this Period

500.00

Memo entry related to Retirement Companies of America partnership contribution

SUBTOTAL of Receipts This Page (optional) .....

1500.00

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

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

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

FOR LINE NUMBER: PAGE 12 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

**A.**

Full Name (Last, First, Middle Initial)

Todd J. Miller

Mailing Address 2500 Indigo Lane

City

Glenview

State

IL

Zip Code

60026-7797

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Classic Residence by Hyatt

Occupation

Executive Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 0 / 2 0 0 9

Transaction ID: 29474680

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

William B. Kaplan

Mailing Address 111 E. Wacker Dr.  
Suite 2200

City

Chicago

State

IL

Zip Code

60601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Senior Lifestyle Corporat-  
ion

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 0 / 2 0 0 9

Transaction ID: 29474681

Amount of Each Receipt this Period

3000.00

**C.**

Full Name (Last, First, Middle Initial)

Donald D Bradley

Mailing Address 610 Newport Center Drive  
Suite 1150

City

Newport Beach

State

CA

Zip Code

92660-6423

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Nationwide Health Propert-  
ies, Inc.

Occupation

Chief Investment Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 0 / 2 0 0 9

Transaction ID: 29474682

Amount of Each Receipt this Period

2000.00

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

5250.00

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

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

FOR LINE NUMBER: PAGE 13 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

**A.**

Full Name (Last, First, Middle Initial)

Richard L Seibert

Mailing Address 400 Locust Street  
Suite 820City State Zip Code  
Des Moines IA 50309-2312FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Life Care Services LLCOccupation  
Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	0	9

Transaction ID: 29487711

Amount of Each Receipt this Period

400.00

**B.**

Full Name (Last, First, Middle Initial)

Randall L. Corwin

Mailing Address 525 SW Umatilla Ave.  
Suite 210City State Zip Code  
Redmond OR 97756-7176FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Hawthorn Retirement Group  
LLCOccupation  
Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	0	9

Transaction ID: 29487715

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Brad A. Colson

Mailing Address 9310 NE Vancouver Mall Dr.  
Suite 200City State Zip Code  
Vancouver WA 98662-8202FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Hawthorn Retirement Group  
LLC

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	0	9

Transaction ID: 29487718

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional) .....

3400.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

**A.**

Full Name (Last, First, Middle Initial)

Norman L. Brenden

Mailing Address 9310 NE Vancouver Mall  
Suite 200

City State Zip Code  
Vancouver WA 98662-8202

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Hawthorn Retirement Group  
LLC

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 4 / 2 0 0 9

Transaction ID: 29487719

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

Susan L. Haider

Mailing Address 9310 NE Vancouver Mall Dr.  
Suite 200

City State Zip Code  
Vancouver WA 98662-8202

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Hawthorn Retirement Group  
LLC

Occupation  
CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 4 / 2 0 0 9

Transaction ID: 29487720

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

David R Ford

Mailing Address 2126 Connecticut Ave, NW  
Apt. 52

City State Zip Code  
Washington DC 20008-1701

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
AegisLiving

Occupation  
Vice Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 1 / 2 0 0 9

Transaction ID: 29538902

Amount of Each Receipt this Period

2500.00

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

8500.00

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

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

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

FOR LINE NUMBER: PAGE 15 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

**A.**

Full Name (Last, First, Middle Initial)

Joel D Nelson

Mailing Address 400 Locust St.  
Suite 820

City State Zip Code  
Des Moines IA 50309-2312

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Life Care Services LLC

Occupation  
Executive Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 1 / 2 0 0 9

Transaction ID: 29538903

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Jean M. Solomon

Mailing Address 71 S. Wacker Dr.  
Suite 900

City State Zip Code  
Chicago IL 60606-4637

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Classic Residence by Hyatt

Occupation  
SVP Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 1 / 2 0 0 9

Transaction ID: 29539029

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Randy J Richardson

Mailing Address 71 South Wacker Drive  
Suite 900

City State Zip Code  
Chicago IL 60606-4637

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Classic Residence by Hyatt

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 1 / 2 0 0 9

Transaction ID: 29539030

Amount of Each Receipt this Period

2500.00

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

4000.00

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

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

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

FOR LINE NUMBER: PAGE 16 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

**A.**

Full Name (Last, First, Middle Initial)

David M Coluzzi

Mailing Address 71 S. Wacker Dr.  
Suite 900

City State Zip Code  
Chicago IL 60606-4637

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Classic Residence by Hyatt

Occupation  
VP Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 1 / 2 0 0 9

Transaction ID: 29539311

Amount of Each Receipt this Period

600.00

**B.**

Full Name (Last, First, Middle Initial)

Kenneth R Assiran

Mailing Address 2 West Baltimore Ave.  
Suite 350

City State Zip Code  
Media PA 19063-3702

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Capital Health Group, LLC

Occupation  
Managing Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 1 / 2 0 0 9

Transaction ID: 29539312

Amount of Each Receipt this Period

3000.00

**C.**

Full Name (Last, First, Middle Initial)

William S. Sciortino

Mailing Address 71 South Wacker Drive  
Suite 900

City State Zip Code  
Chicago IL 60606-4637

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Classic Residence by Hyatt

Occupation  
Senior VP of Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 7 / 2 0 0 9

Transaction ID: 29671229

Amount of Each Receipt this Period

1000.00

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

4600.00

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



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

FOR LINE NUMBER: PAGE 17 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

**A.**

Full Name (Last, First, Middle Initial)

Gary Smith

Mailing Address 71 South Wacker Drive  
Suite 900City  
ChicagoState  
ILZip Code  
60606-4637FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Classic Residence by HyattOccupation  
Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 7 / 2 0 0 9

Transaction ID: 29671231

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

William R. Henry

Mailing Address 32065 Castle Court  
Suite 225City  
EvergreenState  
COZip Code  
80439-9487FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Nationwide Health Propert-  
ies, Inc.Occupation  
Senior Investment Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 7 / 2 0 0 9

Transaction ID: 29671234

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Brent R. Covey

Mailing Address 1303 Calle Christopher

City  
EncinitasState  
CAZip Code  
92024-5510FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Belmont Village Senior Li-  
vingOccupation  
Development Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 7 / 2 0 0 9

Transaction ID: 29671235

Amount of Each Receipt this Period

250.00

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

1750.00

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

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

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

FOR LINE NUMBER: PAGE 18 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

**A.**

Full Name (Last, First, Middle Initial)

Tom B. Daly

Mailing Address 8554 Katy Freeway  
Suite 200

City State Zip Code  
Houston TX 77024-1834

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Belmont Village Senior Li-  
ving

Occupation  
SVP, Architecture

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 7 / 2 0 0 9

Transaction ID: 29671236

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Phil M Anderson

Mailing Address 2020 Fawsett Rd.

City State Zip Code  
Winter Park FL 32789

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
The Genova Company

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 9

Transaction ID: 29683262

Amount of Each Receipt this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

Brian S Beckwith

Mailing Address 500 West Monroe St.

City State Zip Code  
Chicago IL 60661-3671

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
GE Healthcare Financial  
Services

Occupation  
Senior Managing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 9 / 2 0 0 9

Transaction ID: 29683263

Amount of Each Receipt this Period

2000.00

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

4250.00

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

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

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

FOR LINE NUMBER: PAGE 19 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

**A.**

Full Name (Last, First, Middle Initial)

Richard D Kamminga

Mailing Address 8228 Bridgeway Dr.

City

Dexter

State

MI

Zip Code

48130-9393

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Freshwater Group/Wate-  
rmark Retirem

Occupation  
COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 0 9

Transaction ID: 29683264

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Colleen H Blumenthal

Mailing Address 6801 Energy Court  
Suite 200

City

Sarasota

State

FL

Zip Code

34240-8523

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HealthTrust LLC

Occupation  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 0 9

Transaction ID: 29683278

Amount of Each Receipt this Period

750.00

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

1250.00

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

52300.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 21

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

**A.** Full Name (Last, First, Middle Initial)  
National Republican Senatorial Committee

Mailing Address 425 Second St. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: 29325181

Date of Disbursement

04 / 01 / 2009

Amount of Each Disbursement this Period

15000.00

**B.** Full Name (Last, First, Middle Initial)  
Citizens For Altmire

Mailing Address 499 S. Capitol St., SW  
Suite 404

City Washington State DC Zip Code 20003

Purpose of Disbursement

Candidate Name  
Rep. Jason Altmire

Office Sought: ☒ House  
☐ Senate  
☐ President

State: PA District: 04

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

Transaction ID: 29540974

Date of Disbursement

04 / 21 / 2009

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
Nelson For U S Senate

Mailing Address PO Box 8666

City Omaha State NE Zip Code 68108

Purpose of Disbursement

Candidate Name  
Sen. Ben Nelson

Office Sought: ☐ House  
☒ Senate  
☐ President

State: NE District:

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 29541297

Date of Disbursement

04 / 21 / 2009

Amount of Each Disbursement this Period

1000.00

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

17000.00

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

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 21

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

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 Seniors Housing Association (Seniors Housing PAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Friends Of Sam Johnson	<b>Transaction ID:</b> 29671402 <b>Date of Disbursement</b>																				
Mailing Address 1611 Avenue K	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	7		2	0	0	9												
City Plano State TX Zip Code 75074	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement	<table border="1"> <tr> <td>5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Candidate Name Rep. Samuel Robert Johnson	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 03	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Mike Crapo For US Senate	<b>Transaction ID:</b> 29684589 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 1948	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	9		2	0	0	9												
City Boise State ID Zip Code 83701	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement	<table border="1"> <tr> <td>2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Candidate Name Sen. Mike Crapo	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
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Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ID District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Crowley For Congress	<b>Transaction ID:</b> 29696558 <b>Date of Disbursement</b>																				
Mailing Address 422 C St., NE Lower Level	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	9		2	0	0	9												
City Washington State DC Zip Code 20002	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement	<table border="1"> <tr> <td>5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Candidate Name Rep. Joseph Crowley	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 07	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

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

12000.00

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

29000.00