

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

2. **FEC IDENTIFICATION NUMBER** C00421735
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 01 01 2010 through 03 31 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer William R. Council III
Signature of Treasurer Electronically Filed by William R. Council III Date 04 12 2010

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

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Advocat Inc. Political Action Committee

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 1 |

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

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

 To:

| | |
|---|---|
| M | M |
| 0 | 3 |

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

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date | | | | | | | | |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|---------|
| 6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> | Y | Y | Y | Y | 2 | 0 | 1 | 0 | | 4772.71 |
| Y | Y | Y | Y | | | | | | | |
| 2 | 0 | 1 | 0 | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | 4772.71 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 12350.00 | 12350.00 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 17122.71 | 17122.71 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 11500.00 | 11500.00 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 5622.71 | 5622.71 | | | | | | | | |
| 9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | | | | | | | |
| 10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | | | | | | | |

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

For further information contact:

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Advocat Inc. Political Action Committee

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 1 |

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

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

 To:

| | |
|---|---|
| M | M |
| 0 | 3 |

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

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A) | 4300.78 | 4300.78 |
| (ii) Unitemized | 8049.22 | 8049.22 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 12350.00 | 12350.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | 12350.00 | 12350.00 |
| 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)) | 12350.00 | 12350.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 12350.00 | 12350.00 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---|
| 21. Operating Expenditures: | | |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share..... | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures..... | 0.00 | 0.00 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶ | 0.00 | 0.00 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 11500.00 | 11500.00 |
| 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)).. | 11500.00 | 11500.00 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 11500.00 | 11500.00 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

| 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) | 12350.00 | 12350.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 12350.00 | 12350.00 |
| 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: (check only one) | PAGE 6 / 28 |
| | <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)
Advocat Inc. Political Action Committee

| | | |
|-----------|--|---|
| A. | Full Name (Last, First, Middle Initial) David T. Barker | Date of Receipt MM / DD / YYYY 02 / 19 / 2010 |
| | Mailing Address 4512 Austin Drive | Transaction ID: A24ACBD4254CE4EB5AA7 |
| | City State Zip Code North Little Rock AR 72116-7018 | Amount of Each Receipt this Period 54.23 |
| | FEC ID number of contributing federal political committee. C | |
| | Name of Employer: Diversicare Management Services Occupation: Arkansas Rvp Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 216.92 | |

| | | |
|-----------|--|---|
| B. | Full Name (Last, First, Middle Initial) David T. Barker | Date of Receipt MM / DD / YYYY 03 / 08 / 2010 |
| | Mailing Address 4512 Austin Drive | Transaction ID: A58EA182E96354531BCD |
| | City State Zip Code North Little Rock AR 72116-7018 | Amount of Each Receipt this Period 54.23 |
| | FEC ID number of contributing federal political committee. C | |
| | Name of Employer: Diversicare Management Services Occupation: Arkansas Rvp Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 271.15 | |

| | | |
|-----------|--|---|
| C. | Full Name (Last, First, Middle Initial) David T. Barker | Date of Receipt MM / DD / YYYY 03 / 22 / 2010 |
| | Mailing Address 4512 Austin Drive | Transaction ID: A6AC8A3728AB148CCA8F |
| | City State Zip Code North Little Rock AR 72116-7018 | Amount of Each Receipt this Period 54.23 |
| | FEC ID number of contributing federal political committee. C | |
| | Name of Employer: Diversicare Management Services Occupation: Arkansas Rvp Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.38 | |

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 162.69 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 / 28 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

| | | | |
|---|---|--|--|
| A. | Full Name (Last, First, Middle Initial) Barry C. Bell | | Date of Receipt |
| | Mailing Address 6107 Co Rd 122 | | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 08 / 2010 |
| | City | State | Zip Code |
| | Pisgah | AL | 35765-9371 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: A4C89E2344A3F49D5AA6 |
| Name of Employer Diversicare Management Services | | Occupation AL/TN Executive Director | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | <input type="text"/> 40.50 |
| | | <input type="text"/> 202.50 | |

| | | | |
|---|---|--|--|
| B. | Full Name (Last, First, Middle Initial) Barry C. Bell | | Date of Receipt |
| | Mailing Address 6107 Co Rd 122 | | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 22 / 2010 |
| | City | State | Zip Code |
| | Pisgah | AL | 35765-9371 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: A18EFE56A9E804911888 |
| Name of Employer Diversicare Management Services | | Occupation AL/TN Executive Director | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | <input type="text"/> 40.50 |
| | | <input type="text"/> 243.00 | |

| | | | |
|---|---|--------------------------------------|--|
| C. | Full Name (Last, First, Middle Initial) Michael P. Bonner | | Date of Receipt |
| | Mailing Address 4919 Darlington Drive | | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 08 / 2010 |
| | City | State | Zip Code |
| | Nashville | TN | 37211-5106 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: AD314764C09F24C15A16 |
| Name of Employer Diversicare Management Services | | Occupation VP Financial Reporting | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | <input type="text"/> 46.15 |
| | | <input type="text"/> 230.75 | |

| | |
|--|-----------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text"/> 127.15 |
| TOTAL This Period (last page this line number only) | <input type="text"/> |

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

| | | |
|---|---|-------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 / 28 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 | |
| | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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

A. Full Name (Last, First, Middle Initial)
 Michael P. Bonner

Mailing Address 4919 Darlington Drive

City Nashville State TN Zip Code 37211-5106

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

Name of Employer Diversicare Management Services Occupation VP Financial Reporting

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 276.90

Date of Receipt 03 / 22 / 2010

Transaction ID: AF87DCD0F3169408CB74

Amount of Each Receipt this Period 46.15

B. Full Name (Last, First, Middle Initial)
 Elizabeth A. Carroll

Mailing Address 103 Connors Place

City Oak Ridge State TN Zip Code 37830-7635

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

Name of Employer Diversicare Leasing Corp Occupation Admin Administrator-exemp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 219.73

Date of Receipt 03 / 29 / 2010

Transaction ID: A0EFF434B575A4695B9B

Amount of Each Receipt this Period 31.39

C. Full Name (Last, First, Middle Initial)
 William R. Council III

Mailing Address 9533 Thoroughbred Way

City Brentwood State TN Zip Code 37027-8922

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

Name of Employer Diversicare Management Services Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 384.60

Date of Receipt 01 / 22 / 2010

Transaction ID: A147F3CA9B4524586BF4

Amount of Each Receipt this Period 192.30

SUBTOTAL of Receipts This Page (optional) ► 269.84

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 / 28
(check only one)

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

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

A.

| | | | |
|---|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) William R. Council III | | Date of Receipt MM / DD / YYYY 02 / 05 / 2010 | |
| Mailing Address 9533 Thoroughbred Way | | Transaction ID: A16E8F11560BF49D49FB | |
| City Brentwood | State TN | Zip Code 37027-8922 | Amount of Each Receipt this Period 192.30 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Diversicare Management Services | Occupation CEO | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 576.90 | | |

B.

| | | | |
|---|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) William R. Council III | | Date of Receipt MM / DD / YYYY 02 / 19 / 2010 | |
| Mailing Address 9533 Thoroughbred Way | | Transaction ID: AE72E73847D76457C8DE | |
| City Brentwood | State TN | Zip Code 37027-8922 | Amount of Each Receipt this Period 192.30 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Diversicare Management Services | Occupation CEO | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 769.20 | | |

C.

| | | | |
|---|------------------------------------|---|--|
| Full Name (Last, First, Middle Initial) William R. Council III | | Date of Receipt MM / DD / YYYY 03 / 08 / 2010 | |
| Mailing Address 9533 Thoroughbred Way | | Transaction ID: ACE7BA99FC01A48819E9 | |
| City Brentwood | State TN | Zip Code 37027-8922 | Amount of Each Receipt this Period 192.30 |
| FEC ID number of contributing federal political committee. C | | | |
| Name of Employer Diversicare Management Services | Occupation CEO | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 961.50 | | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) | 576.90 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 10 / 28 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 | |
| | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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

| | | |
|---|---|---|
| A. | Full Name (Last, First, Middle Initial) William R. Council III | Date of Receipt MM / DD / YYYY 03 / 22 / 2010 |
| | Mailing Address 9533 Thoroughbred Way | Transaction ID: AF79FBD9031384340B06 |
| | City State Zip Code Brentwood TN 37027-8922 | Amount of Each Receipt this Period 192.30 |
| | FEC ID number of contributing federal political committee. C | |
| Name of Employer Diversicare Management Services | Occupation CEO | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1153.80 | |

| | | |
|---|---|---|
| B. | Full Name (Last, First, Middle Initial) John E. Dugan | Date of Receipt MM / DD / YYYY 03 / 22 / 2010 |
| | Mailing Address 1206 Lochness Ln | Transaction ID: A483BAD6B422E4C8EAD7 |
| | City State Zip Code Garland TX 75044-3426 | Amount of Each Receipt this Period 38.06 |
| | FEC ID number of contributing federal political committee. C | |
| Name of Employer Diversicare Leasing Corporation | Occupation Admin Administrator-exemp | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 228.36 | |

| | | |
|---|---|---|
| C. | Full Name (Last, First, Middle Initial) David R. Hickman | Date of Receipt MM / DD / YYYY 02 / 19 / 2010 |
| | Mailing Address 801 Brownstone Court | Transaction ID: A3F97C16FB78A43B08A3 |
| | City State Zip Code Nolensville TN 37135-9720 | Amount of Each Receipt this Period 66.41 |
| | FEC ID number of contributing federal political committee. C | |
| Name of Employer Diversicare Management Services | Occupation VP Human Resources | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 265.64 | |

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 296.77 |
| 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 / 28
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
David R. Hickman

Mailing Address 801 Brownstone Court

City Nolensville State TN Zip Code 37135-9720

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

Name of Employer Diversicare Management Services Occupation VP Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 332.05

Date of Receipt
MM / DD / YYYY
03 / 08 / 2010

Transaction ID: A58A47B72EF704C26B98

Amount of Each Receipt this Period
66.41

B.

Full Name (Last, First, Middle Initial)
David R. Hickman

Mailing Address 801 Brownstone Court

City Nolensville State TN Zip Code 37135-9720

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

Name of Employer Diversicare Management Services Occupation VP Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 398.46

Date of Receipt
MM / DD / YYYY
03 / 22 / 2010

Transaction ID: A943071A65D0E48B91B

Amount of Each Receipt this Period
66.41

C.

Full Name (Last, First, Middle Initial)
Karen L. Johnson

Mailing Address 6437 Wexley Lane

City The Colony State TX Zip Code 75056-7121

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

Name of Employer Diversicare Management Services Occupation Texas Rvp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.76

Date of Receipt
MM / DD / YYYY
02 / 19 / 2010

Transaction ID: AB63A3EE4CA8647B295A

Amount of Each Receipt this Period
57.69

SUBTOTAL of Receipts This Page (optional) ► **190.51**

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

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 / 28 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. Full Name (Last, First, Middle Initial)
 Karen L. Johnson

Mailing Address 6437 Wexley Lane

City State Zip Code
 The Colony TX 75056-7121

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

Name of Employer: Diversicare Management Services
 Occupation: Texas Rvp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 288.45

Date of Receipt: MM / DD / YYYY
 03 / 08 / 2010

Transaction ID: A38D755A597934FDC8F3

Amount of Each Receipt this Period
 57.69

B. Full Name (Last, First, Middle Initial)
 Karen L. Johnson

Mailing Address 6437 Wexley Lane

City State Zip Code
 The Colony TX 75056-7121

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

Name of Employer: Diversicare Management Services
 Occupation: Texas Rvp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 346.14

Date of Receipt: MM / DD / YYYY
 03 / 22 / 2010

Transaction ID: A9F2F23FB380F44B6AAD

Amount of Each Receipt this Period
 57.69

C. Full Name (Last, First, Middle Initial)
 Robin Jones

Mailing Address 4674 Riverbend Road

City State Zip Code
 Trussville AL 35173-3506

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

Name of Employer: Diversicare Management Services
 Occupation: AI & Tn Rvp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 239.88

Date of Receipt: MM / DD / YYYY
 02 / 19 / 2010

Transaction ID: A8F69D8E1D8CE4241935

Amount of Each Receipt this Period
 59.97

SUBTOTAL of Receipts This Page (optional) ► **175.35**

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 / 28
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Robin Jones

Mailing Address 4674 Riverbend Road

City Trussville State AL Zip Code 35173-3506

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

Name of Employer Diversicare Management Services Occupation AI & Tn Rvp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 299.85

Date of Receipt 03 / 08 / 2010

Transaction ID: A4A0B66D600484D6391C

Amount of Each Receipt this Period 59.97

B.

Full Name (Last, First, Middle Initial)
Robin Jones

Mailing Address 4674 Riverbend Road

City Trussville State AL Zip Code 35173-3506

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

Name of Employer Diversicare Management Services Occupation AI & Tn Rvp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 359.82

Date of Receipt 03 / 22 / 2010

Transaction ID: A8517AC0AC3A24A06A25

Amount of Each Receipt this Period 59.97

C.

Full Name (Last, First, Middle Initial)
Randi M. Kiphen

Mailing Address 10880 Gallia Pike

City Wheelersburg State OH Zip Code 45694-8443

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

Name of Employer Diversicare Leasing Corp Occupation Admin Administrator-exemp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 219.24

Date of Receipt 03 / 11 / 2010

Transaction ID: AEA2A293D44814948A53

Amount of Each Receipt this Period 36.54

SUBTOTAL of Receipts This Page (optional) ► 156.48

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

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

| | | |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 14 / 28 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 | |
| | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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

A.

Full Name (Last, First, Middle Initial)
Randi M. Kiphen

Mailing Address 10880 Gallia Pike

City State Zip Code
Wheelersburg OH 45694-8443

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

Name of Employer Occupation
Diversicare Leasing Corp Admin Administrator-exemp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.78

Date of Receipt
MM / DD / YYYY
03 / 29 / 2010

Transaction ID: ACB43CEAEBBA242359F1

Amount of Each Receipt this Period
36.54

B.

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

Mailing Address 306 Cliftwood Loop

City State Zip Code
Hot Springs AR 71901-8735

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

Name of Employer Occupation
Diversicare Leasing Corp Admin Administrator-exemp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 208.86

Date of Receipt
MM / DD / YYYY
03 / 11 / 2010

Transaction ID: A31A513FFA7F8409CABE

Amount of Each Receipt this Period
34.81

C.

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

Mailing Address 306 Cliftwood Loop

City State Zip Code
Hot Springs AR 71901-8735

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

Name of Employer Occupation
Diversicare Leasing Corp Admin Administrator-exemp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 243.67

Date of Receipt
MM / DD / YYYY
03 / 29 / 2010

Transaction ID: A319E61FB42C2434EAC6

Amount of Each Receipt this Period
34.81

SUBTOTAL of Receipts This Page (optional) ► **106.16**

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 / 28
(check only one)

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

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

A.

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

Mailing Address P O Box 1813

City State Zip Code
Olive Hill KY 41164-1813

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

Name of Employer Occupation
Diversicare Management Se- Kentucky Cqi
rvices

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 208.74

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 22 / 2010

Transaction ID: AE054BABD034442B4B63

Amount of Each Receipt this Period
34.79

B.

Full Name (Last, First, Middle Initial)
Jimmie D. Manning

Mailing Address 149 Riverwood Drive

City State Zip Code
Franklin TN 37069-4181

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

Name of Employer Occupation
Diversicare Management Se- VP Purchasing & Property
rvices

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 230.76

Date of Receipt
M M / D D / Y Y Y Y Y
02 / 19 / 2010

Transaction ID: A2FB5EA2CB2B24E37BFD

Amount of Each Receipt this Period
57.69

C.

Full Name (Last, First, Middle Initial)
Jimmie D. Manning

Mailing Address 149 Riverwood Drive

City State Zip Code
Franklin TN 37069-4181

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

Name of Employer Occupation
Diversicare Management Se- VP Purchasing & Property
rvices

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 288.45

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 08 / 2010

Transaction ID: A644BA622643C4E4DBF1

Amount of Each Receipt this Period
57.69

SUBTOTAL of Receipts This Page (optional) ► **150.17**

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 / 28
(check only one)

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

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

A. Full Name (Last, First, Middle Initial)
Jimmie D. Manning

Mailing Address 149 Riverwood Drive

City Franklin State TN Zip Code 37069-4181

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

Name of Employer Diversicare Management Services Occupation VP Purchasing & Property

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 346.14

Date of Receipt 03 / 22 / 2010

Transaction ID: A9D87079B009F4765B26

Amount of Each Receipt this Period 57.69

B. Full Name (Last, First, Middle Initial)
Lisa A. Martens

Mailing Address 1339 Buckingham Circle

City Franklin State TN Zip Code 37064-5420

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

Name of Employer Diversicare Management Services Occupation VP Quality Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 227.68

Date of Receipt 02 / 19 / 2010

Transaction ID: A41E962A50FB04930A37

Amount of Each Receipt this Period 56.92

C. Full Name (Last, First, Middle Initial)
Lisa A. Martens

Mailing Address 1339 Buckingham Circle

City Franklin State TN Zip Code 37064-5420

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

Name of Employer Diversicare Management Services Occupation VP Quality Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 284.60

Date of Receipt 03 / 08 / 2010

Transaction ID: ABAA63E9AF48244D1A4F

Amount of Each Receipt this Period 56.92

SUBTOTAL of Receipts This Page (optional) ► 171.53

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

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

| | | |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 17 / 28 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 | |
| | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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

A. Full Name (Last, First, Middle Initial)
 Lisa A. Martens

Mailing Address 1339 Buckingham Circle

City Franklin State TN Zip Code 37064-5420

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

Name of Employer Diversicare Management Services Occupation VP Quality Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 341.52

Date of Receipt 03 / 22 / 2010

Transaction ID: A0ABE5798DF444489803

Amount of Each Receipt this Period 56.92

B. Full Name (Last, First, Middle Initial)
 Wanda C. Meade

Mailing Address 15939 Lone Oak Drive

City Catlettsburg State KY Zip Code 41129-9290

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

Name of Employer Diversicare Management Services Occupation Kentucky Rvp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 02 / 19 / 2010

Transaction ID: ABD0BD5DF85C34321BDC

Amount of Each Receipt this Period 60.00

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

Mailing Address 15939 Lone Oak Drive

City Catlettsburg State KY Zip Code 41129-9290

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

Name of Employer Diversicare Management Services Occupation Kentucky Rvp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 08 / 2010

Transaction ID: ABE7D774F32E642A58BA

Amount of Each Receipt this Period 60.00

SUBTOTAL of Receipts This Page (optional) ► 176.92

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 / 28

(check only one)

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

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

A.

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

Mailing Address 15939 Lone Oak Drive

City State Zip Code
Catlettsburg KY 41129-9290

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

Name of Employer Occupation
Diversicare Management Services Kentucky Rvp

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 2 / 2 0 1 0

Transaction ID: A889C70D83D2540D997A

Amount of Each Receipt this Period
60.00

B.

Full Name (Last, First, Middle Initial)
Jeffery A. Merry

Mailing Address 1152 Rock Creek Dr

City State Zip Code
Garland TX 75040-6941

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

Name of Employer Occupation
Diversicare Leasing Corporation Nursing Admin Don-exempt

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 214.62

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 2 / 2 0 1 0

Transaction ID: A23A022534C4C4164BF1

Amount of Each Receipt this Period
35.77

C.

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

Mailing Address P O Box 275

City State Zip Code
Norman AR 71960-0275

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

Name of Employer Occupation
Diversicare Management Services Arkansas Cqi Director

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 201.90

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 2 / 2 0 1 0

Transaction ID: AD2D6BA03022440CAA31

Amount of Each Receipt this Period
33.65

SUBTOTAL of Receipts This Page (optional)

129.42

TOTAL This Period (last page this line number only)

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

| | | |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 19 / 28 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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

| | | |
|-----------|---|---|
| A. | Full Name (Last, First, Middle Initial) Terena M. Raidt | Date of Receipt MM / DD / YYYY 03 / 08 / 2010 |
| | Mailing Address 7233 Althorp Way #S10 | Transaction ID: A09CE8F992E8240ACA93 |
| | City State Zip Code Nashville TN 37211-7156 | Amount of Each Receipt this Period 45.76 |
| | FEC ID number of contributing federal political committee. C | |
| | Name of Employer: Diversicare Management Services Occupation: VP of Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 228.80 | |

| | | |
|-----------|---|---|
| B. | Full Name (Last, First, Middle Initial) Terena M. Raidt | Date of Receipt MM / DD / YYYY 03 / 22 / 2010 |
| | Mailing Address 7233 Althorp Way #S10 | Transaction ID: AD606BB99625D45F4888 |
| | City State Zip Code Nashville TN 37211-7156 | Amount of Each Receipt this Period 45.76 |
| | FEC ID number of contributing federal political committee. C | |
| | Name of Employer: Diversicare Management Services Occupation: VP of Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 274.56 | |

| | | |
|-----------|---|---|
| C. | Full Name (Last, First, Middle Initial) Robert Rice | Date of Receipt MM / DD / YYYY 03 / 08 / 2010 |
| | Mailing Address 7147 Riverfront Drive | Transaction ID: A64D89407E1F149A5883 |
| | City State Zip Code Nashville TN 37221-6585 | Amount of Each Receipt this Period 45.06 |
| | FEC ID number of contributing federal political committee. C | |
| | Name of Employer: Diversicare Management Services Occupation: VP of Risk Management Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.30 | |

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 136.58 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 20 / 28 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A.

| | |
|---|---|
| Full Name (Last, First, Middle Initial) Robert Rice | Date of Receipt MM / DD / YYYY 03 / 22 / 2010 |
| Mailing Address 7147 Riverfront Drive | Transaction ID: A09570013E1DA4951A45 |
| City Nashville State TN Zip Code 37221-6585 | Amount of Each Receipt this Period 45.06 |
| FEC ID number of contributing federal political committee. C | |
| Name of Employer Diversicare Management Services Occupation VP of Risk Management | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 270.36 |

B.

| | |
|---|---|
| Full Name (Last, First, Middle Initial) Louis G. Riddle | Date of Receipt MM / DD / YYYY 01 / 22 / 2010 |
| Mailing Address 1203 Signature Court | Transaction ID: A5742AA30738C4438B72 |
| City Franklin State TN Zip Code 37064-9663 | Amount of Each Receipt this Period 192.30 |
| FEC ID number of contributing federal political committee. C | |
| Name of Employer Diversicare Management Services Occupation CFO,EVP, Secretary | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 384.60 |

C.

| | |
|---|---|
| Full Name (Last, First, Middle Initial) Louis G. Riddle | Date of Receipt MM / DD / YYYY 02 / 05 / 2010 |
| Mailing Address 1203 Signature Court | Transaction ID: A267B5989C04B4FE4B5E |
| City Franklin State TN Zip Code 37064-9663 | Amount of Each Receipt this Period 192.30 |
| FEC ID number of contributing federal political committee. C | |
| Name of Employer Diversicare Management Services Occupation CFO,EVP, Secretary | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 576.90 |

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 429.66 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 21 / 28 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

| | | | |
|-----------|--|----------------------------------|---|
| A. | Full Name (Last, First, Middle Initial) Louis G. Riddle | | Date of Receipt MM / DD / YYYY 02 / 19 / 2010 |
| | Mailing Address 1203 Signature Court | | Transaction ID: ACDC07A27BA324362B69 |
| | City Franklin | State TN | Zip Code 37064-9663 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 192.30 |
| | Name of Employer Diversicare Management Services | Occupation CFO,EVP, Secretary | Aggregate Year-to-Date 769.20 |

| | | | |
|-----------|--|----------------------------------|---|
| B. | Full Name (Last, First, Middle Initial) Louis G. Riddle | | Date of Receipt MM / DD / YYYY 03 / 08 / 2010 |
| | Mailing Address 1203 Signature Court | | Transaction ID: A7CF180285E344771B2C |
| | City Franklin | State TN | Zip Code 37064-9663 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 192.30 |
| | Name of Employer Diversicare Management Services | Occupation CFO,EVP, Secretary | Aggregate Year-to-Date 961.50 |

| | | | |
|-----------|--|----------------------------------|---|
| C. | Full Name (Last, First, Middle Initial) Louis G. Riddle | | Date of Receipt MM / DD / YYYY 03 / 22 / 2010 |
| | Mailing Address 1203 Signature Court | | Transaction ID: ACBE062A183954D83AB8 |
| | City Franklin | State TN | Zip Code 37064-9663 |
| | FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 192.30 |
| | Name of Employer Diversicare Management Services | Occupation CFO,EVP, Secretary | Aggregate Year-to-Date 1153.80 |

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 576.90 |
| 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 22 / 28
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Kenneth K. Smith

Mailing Address 4909 Walnut Hills Drive

City State Zip Code
Louisville KY 40299-1044

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

Name of Employer: Diversicare Management Services
Occupation: Regional Hr Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
213.20

Date of Receipt
MM / DD / YYYY
03 / 08 / 2010

Transaction ID: A2139DB626CDD4A9C834

Amount of Each Receipt this Period
42.64

B.

Full Name (Last, First, Middle Initial)
Kenneth K. Smith

Mailing Address 4909 Walnut Hills Drive

City State Zip Code
Louisville KY 40299-1044

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

Name of Employer: Diversicare Management Services
Occupation: Regional Hr Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.84

Date of Receipt
MM / DD / YYYY
03 / 22 / 2010

Transaction ID: A341B66AC41C8446EA0F

Amount of Each Receipt this Period
42.64

C.

Full Name (Last, First, Middle Initial)
Gary K. Snyder

Mailing Address PO Box 30

City State Zip Code
Martin TN 38237-0030

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

Name of Employer: Diversicare Leasing Corp
Occupation: Admin Administrator-exemp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.25

Date of Receipt
MM / DD / YYYY
03 / 29 / 2010

Transaction ID: A038B5863BD3F43DBB74

Amount of Each Receipt this Period
30.75

SUBTOTAL of Receipts This Page (optional) ► **116.03**

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

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

| | | |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 23 / 28 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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

| | | |
|---|---|---|
| A. | Full Name (Last, First, Middle Initial) E Kim Tirronen | Date of Receipt MM / DD / YYYY 03 / 22 / 2010 |
| | Mailing Address 16701 Richloam Lane | Transaction ID: A7824BE7BCFB44A07A3F |
| | City State Zip Code Spring Hill FL 34610-1657 | Amount of Each Receipt this Period 38.43 |
| | FEC ID number of contributing federal political committee. C | |
| Name of Employer Advocat | Occupation Rai Director | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 230.58 | |

| | | |
|---|---|---|
| B. | Full Name (Last, First, Middle Initial) Mark Tschudy | Date of Receipt MM / DD / YYYY 03 / 04 / 2010 |
| | Mailing Address 28219 Madelin Manor Lane | Transaction ID: A9A323B535BE74F688F3 |
| | City State Zip Code Spring TX 77386-3087 | Amount of Each Receipt this Period 43.76 |
| | FEC ID number of contributing federal political committee. C | |
| Name of Employer Diversicare Leasing Corporation | Occupation Admin Administrator-exemp | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 218.80 | |

| | | |
|---|---|---|
| C. | Full Name (Last, First, Middle Initial) Mark Tschudy | Date of Receipt MM / DD / YYYY 03 / 22 / 2010 |
| | Mailing Address 28219 Madelin Manor Lane | Transaction ID: A2F61C810B7B442E4BEA |
| | City State Zip Code Spring TX 77386-3087 | Amount of Each Receipt this Period 43.76 |
| | FEC ID number of contributing federal political committee. C | |
| Name of Employer Diversicare Leasing Corporation | Occupation Admin Administrator-exemp | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 262.56 | |

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 125.95 |
| 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 24 / 28
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Matthew J. Weishaar

Mailing Address 376 Sandcastle Road

City Franklin State TN Zip Code 37069-7186

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

Name of Employer: Diversicare Management Services
Occupation: VP Finance & Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 218.20

Date of Receipt: 02 / 19 / 2010
Transaction ID: AA0CBF9922B894AAC92D
Amount of Each Receipt this Period: 54.55

B.

Full Name (Last, First, Middle Initial)
Matthew J. Weishaar

Mailing Address 376 Sandcastle Road

City Franklin State TN Zip Code 37069-7186

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

Name of Employer: Diversicare Management Services
Occupation: VP Finance & Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 272.75

Date of Receipt: 03 / 08 / 2010
Transaction ID: AD3308E881178432DBBD
Amount of Each Receipt this Period: 54.55

C.

Full Name (Last, First, Middle Initial)
Matthew J. Weishaar

Mailing Address 376 Sandcastle Road

City Franklin State TN Zip Code 37069-7186

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

Name of Employer: Diversicare Management Services
Occupation: VP Finance & Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 327.30

Date of Receipt: 03 / 22 / 2010
Transaction ID: AE3776431AC994AF1923
Amount of Each Receipt this Period: 54.55

SUBTOTAL of Receipts This Page (optional) ► **163.65**

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

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

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

FOR LINE NUMBER: PAGE 25 / 28
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Chyra D. Worthington

Mailing Address 1723 Royal Oaks

City Malvern State AR Zip Code 72104-5752

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

Name of Employer Diversicare Leasing Corp Occupation Admin Administrator-exemp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.95

Date of Receipt 03 / 29 / 2010
Transaction ID: A5C1FBE62A164495B959
 Amount of Each Receipt this Period 28.85

B. Full Name (Last, First, Middle Initial)
Samuel R. Wright II

Mailing Address 7863 Hwy 828

City Louisa State KY Zip Code 41230-5525

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

Name of Employer Diversicare Leasing Corp Occupation Admin Administrator-exemp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 232.89

Date of Receipt 03 / 29 / 2010
Transaction ID: ADF1B2FC6C90941E4B93
 Amount of Each Receipt this Period 33.27

SUBTOTAL of Receipts This Page (optional) ► **62.12**

TOTAL This Period (last page this line number only) ► **4300.78**

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)

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

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

| | |
|--|--|
| <p>A. Full Name (Last, First, Middle Initial) Arcuri for Congress</p> <p>Mailing Address P.O. Box 8508</p> <p>City Utica State NY Zip Code 13505</p> <p>Purpose of Disbursement NY 24 US House</p> <p>Candidate Name Rep. Michael A. Arcuri</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B6D43FB32F7CA42358AF</p> <p>Date of Disbursement 02 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> |
| <p>B. Full Name (Last, First, Middle Initial) Bennet for Colorado</p> <p>Mailing Address 426 C. Street, NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement CO US Senate</p> <p>Candidate Name Sen. Michael F. Bennet</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B56D357F474364946A44</p> <p>Date of Disbursement 02 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p> |
| <p>C. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Cmte.</p> <p>Mailing Address 430 South Capitol Street SE; 2nd F</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement PAC to PAC</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other2010</p> | <p>Transaction ID: BD1902CB59A504CDAA4C</p> <p>Date of Disbursement 03 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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 27 / 28

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

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

| | |
|--|--|
| <p>A. Full Name (Last, First, Middle Initial) Friends For Harry Reid</p> <p>Mailing Address 426 C Street, NE, Rear Building</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement NV US Senate</p> <p>Candidate Name Sen. Harry Reid</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B3476B663527F45E08A2</p> <p>Date of Disbursement 02 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p> |
| <p>B. Full Name (Last, First, Middle Initial) Friends For Harry Reid</p> <p>Mailing Address 426 C Street, NE, Rear Building</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement NV US Senate</p> <p>Candidate Name Sen. Harry Reid</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: B8767BDB7D573474DBA6</p> <p>Date of Disbursement 03 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p> |
| <p>C. Full Name (Last, First, Middle Initial) Harry Teague for Congress</p> <p>Mailing Address P.O. Box 5153</p> <p>City Hobbs State NM Zip Code 88241</p> <p>Purpose of Disbursement NM US House</p> <p>Candidate Name Rep. Harry Teague</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: BF50A4632E6984EFCB24</p> <p>Date of Disbursement 02 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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 28 / 28

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

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

| | | | | |
|----|---|--|--|--|
| A. | Full Name (Last, First, Middle Initial) Wyden for Senate | | Transaction ID: B4FF789FB12414145B0C | |
| | Mailing Address P.O. Box 3498 | | Date of Disbursement MM / DD / YYYY 03 / 23 / 2010 | |
| | City Portland | State OR | Zip Code 97208 | Amount of Each Disbursement this Period 2000.00 |
| | Purpose of Disbursement Political Contribution | | Category/ Type | |
| | Candidate Name Sen. Ron Wyden | | | |
| | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| | State: OR | District: | | |

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

11500.00