

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

12FE4M5

American Seniors Housing Association (Seniors Housing PAC)

ADDRESS (number and street)

5225 Wisconsin Ave., NW

Suite 502

Check if different than previously reported. (ACC)

Washington

DC

20015

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 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- | | | | |
|--------------------------------------|-------------------------------------------------|---------------------------------------|----------------------------------------------------------------|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input checked="" type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

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

- | | | |
|-------------------------------------------|----------------------------------------|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on

MM / DD / YYYY

in the State of

(d) 30-Day POST-Election Report for the:

- | | | |
|----------------------------------------|---------------------------------------|----------------------------------------|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|----------------------------------------|---------------------------------------|----------------------------------------|

Election on

MM / DD / YYYY

in the State of

5. Covering Period

MM / DD / YYYY 05 / 01 / 2015

through

MM / DD / YYYY 05 / 31 / 2015

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

David Schless

[Electronically Filed]

Date

MM / DD / YYYY 06 / 10 / 2015

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							
-----------------	--	--	--	--	--	--	--

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

American Seniors Housing Association (Seniors Housing PAC)

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		851520.26
(b) Cash on Hand at Beginning of Reporting Period.....	952951.26	
(c) Total Receipts (from Line 19)	35013.00	187468.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	987964.26	1038988.26
7. Total Disbursements (from Line 31).....	38000.00	89024.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	949964.26	949964.26
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American Seniors Housing Association (Seniors Housing PAC)

Report Covering the Period: From: / / To: / /

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).....	33750.00	174450.00
(ii) Unitemized	1263.00	8018.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	35013.00	182468.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	35013.00	187468.00
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 Transfers (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))..... ▶	35013.00	187468.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	35013.00	187468.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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.....	38000.00	89000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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	24.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely 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)) ..	38000.00	89024.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	38000.00	89024.00

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)	35013.00	187468.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	35013.00	187468.00
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 OF 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)

Full Name (Last, First, Middle Initial)
A. Avi Lev

Mailing Address 1750 East Golf Road

City State Zip Code
 Schaumburg IL 60173-5835

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

Name of Employer Occupation
 Assurance Agency Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2015
Transaction ID : 65585758

Amount of Each Receipt this Period
 2500.00

Full Name (Last, First, Middle Initial)
B. Fred Moon

Mailing Address 1275 Pennsylvania Avenue, NW
 2nd Floor

City State Zip Code
 Washington DC 20004-2428

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

Name of Employer Occupation
 Capitol Seniors Housing Principal, Acquisitions

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 06 / 2015
Transaction ID : 65585760

Amount of Each Receipt this Period
 500.00

Full Name (Last, First, Middle Initial)
C. Jason Dopoulos

Mailing Address 620 Newport Center Drive
 Suite 690

City State Zip Code
 Newport Beach CA 92660-8057

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

Name of Employer Occupation
 Lancaster Pollard Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 19 / 2015
Transaction ID : 65837572

Amount of Each Receipt this Period
 2000.00

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: (check only one)	PAGE 7 OF 16
	<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	

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. Patrick F. Kennedy
Full Name (Last, First, Middle Initial)

Mailing Address 111 3rd Ave.
Suite 3400

City Seattle State WA Zip Code 98104-2605

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

Name of Employer Hawthorn Retirement Group LLC Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
05 / 19 / 2015
Transaction ID : 65837573

Amount of Each Receipt this Period
5000.00

B. Allison A. Holland
Full Name (Last, First, Middle Initial)

Mailing Address 8115 Preston Rd.
Suite 500

City Dallas State TX Zip Code 75225-6334

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

Name of Employer Key Bank Real Estate Capital Occupation SVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
05 / 19 / 2015
Transaction ID : 65837574

Amount of Each Receipt this Period
2000.00

C. Kathryn M. Burton-Gray
Full Name (Last, First, Middle Initial)

Mailing Address 500 Newport Center Dr.
Suite 930

City Newport Beach State CA Zip Code 92660-7018

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

Name of Employer Red Capital Group Occupation Managing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
05 / 19 / 2015
Transaction ID : 65837575

Amount of Each Receipt this Period
3000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 10000.00

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: (check only one)	PAGE 8 OF 16
<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. Noah R. Levy
Full Name (Last, First, Middle Initial)

Mailing Address 7 Giralda Farms
4th Floor

City Madison State NJ Zip Code 07940-1051

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

Name of Employer Prudential Real Estate Investors Occupation Managing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
05 / 19 / 2015
Transaction ID : 65837576

Amount of Each Receipt this Period
3000.00

B. Alice Katz
Full Name (Last, First, Middle Initial)

Mailing Address 10085 Red Run Blvd.

City Owings Mills State MD Zip Code 21117-4836

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

Name of Employer The Vinca Group LLC Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
05 / 19 / 2015
Transaction ID : 65837630

Amount of Each Receipt this Period
1000.00

C. Debra A. Cafaro
Full Name (Last, First, Middle Initial)

Mailing Address 353 N. Clark St.
Suite 3300

City Chicago State IL Zip Code 60654-4708

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

Name of Employer Ventas Healthcare Properties Occupation CEO, Chairman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
05 / 19 / 2015
Transaction ID : 65837631

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 9000.00

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 OF 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)

Full Name (Last, First, Middle Initial)
A. Kelly N. Meissner

Mailing Address 353 North Clark St.
 Suite 3300

City Chicago State IL Zip Code 60654-4708

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

Name of Employer Ventas Healthcare Properties Inc. Occupation Manager, Investments

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 19 / 2015

Transaction ID : 65837632

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Matthew Robinson

Mailing Address 3710 N. Greenview Avenue

City Chicago State IL Zip Code 60613-3610

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

Name of Employer Ventas Healthcare Properties, Inc. Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 19 / 2015

Transaction ID : 65837633

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Ankit Patel

Mailing Address 353 N. Clark St.
 Suite 3300

City Chicago State IL Zip Code 60654-4708

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

Name of Employer Ventas Healthcare Properties Inc. Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 19 / 2015

Transaction ID : 65837635

Amount of Each Receipt this Period
750.00

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: (check only one)	PAGE 10 OF 16
	<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	

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)

Full Name (Last, First, Middle Initial) A. Jordyn Berger		Date of Receipt MM / DD / YYYY 05 / 19 / 2015 Transaction ID : 65837636
Mailing Address 353 N Clark Street Suite 3300		Amount of Each Receipt this Period 250.00
City Chicago	State IL Zip Code 60654-4708	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 250.00
Name of Employer Ventas Healthcare Properties, Inc.	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Chris N. Cummings		Date of Receipt MM / DD / YYYY 05 / 19 / 2015 Transaction ID : 65837637
Mailing Address 10350 Ormsby Park Place Suite 300		Amount of Each Receipt this Period 750.00
City Louisville	State KY Zip Code 40223-6178	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 750.00
Name of Employer Ventas Healthcare Properties, Inc.	Occupation VP, Asset Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Nicholas W. Jacoby		Date of Receipt MM / DD / YYYY 05 / 19 / 2015 Transaction ID : 65837638
Mailing Address 2050 Main St. Suite 800		Amount of Each Receipt this Period 750.00
City Irvine	State CA Zip Code 92614-8260	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 750.00
Name of Employer Ventas Healthcare Properties, Inc.	Occupation VP, Asset Mgt.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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 11 OF 16
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<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. Thomas S. Blasco
Full Name (Last, First, Middle Initial)

Mailing Address 353 North Clark St.
Suite 3300

City Chicago State IL Zip Code 60654-4708

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

Name of Employer Ventas Healthcare Properties, Inc. Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 19 / 2015

Transaction ID : 65837639

Amount of Each Receipt this Period
250.00

B. Tim Sanders
Full Name (Last, First, Middle Initial)

Mailing Address 3 Bethesda Metro Center
Suite 700

City Bethesda State MD Zip Code 20814

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

Name of Employer Marathon Asset Management Occupation Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 19 / 2015

Transaction ID : 65837642

Amount of Each Receipt this Period
3000.00

C. Kyle M Henderson
Full Name (Last, First, Middle Initial)

Mailing Address 1275 Pennsylvania Avenue, NW
2nd Floor

City Washington State DC Zip Code 20004-2428

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

Name of Employer Capitol Seniors Housing Occupation Principal - Asset Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2015

Transaction ID : 65855780

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....▶	3750.00
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 OF 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 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. David N. Barnes
 Full Name (Last, First, Middle Initial)
 Mailing Address 2020 W. Rudasill Road
 City Tucson State AZ Zip Code 85704-7800
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Watermark Retirement Communities Occupation President & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2015
Transaction ID : 65855799
 Amount of Each Receipt this Period
 2500.00

B.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	33750.00

**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)

<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)

Full Name (Last, First, Middle Initial)

A. Ben Cardin For Senate

Mailing Address P.O. Box 21093

City State Zip Code
Catonsville MD 21228

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mr. Benjamin Cardin

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MD District:

Date of Disbursement

MM / DD / YYYY
05 / 07 / 2015

Transaction ID : 65593769

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Van Hollen For Congress

Mailing Address 10537 St. Paul Street

City State Zip Code
Kensington MD 20895

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Chris Van Hollen

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MD District: 08

Date of Disbursement

MM / DD / YYYY
05 / 07 / 2015

Transaction ID : 65593771

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Vern Buchanan For Congress

Mailing Address P. O. Box 48928

City State Zip Code
Sarasota FL 34230

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Vern Buchanan

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: FL District: 13

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2015

Transaction ID : 65649814

Amount of Each Disbursement this Period

5000.00

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

7000.00

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)

<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)

Full Name (Last, First, Middle Initial)

A. Hatch Election Committee Inc

Mailing Address P O Box 1480

City Washington State DC Zip Code 20013

Purpose of Disbursement

011

Category/
Type

Candidate Name

Sen. Orrin Hatch

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: UT District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	1	5

Transaction ID : 66010473

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. Tom Reed For Congress

Mailing Address PO Box 450

City Victor State NY Zip Code 14564

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Tom Reed

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: NY District: 29

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	1	5

Transaction ID : 66011828

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. Grassley Committee

Mailing Address P. O. Box 1000

City Des Moines State IA Zip Code 50304

Purpose of Disbursement

011

Category/
Type

Candidate Name

Charles Grassley

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: IA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	1	5

Transaction ID : 66012663

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0

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

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

8	5	0	0	0	0	0	0	0	0

0	0	0	0	0	0	0	0	0	0

**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

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)

Full Name (Last, First, Middle Initial)

A. Kline For Congress

Mailing Address 101 W Burnsville Pkwy Suite 104
Suite 104

City Burnsville State MN Zip Code 55337

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. John Kline

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MN District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	1	5

Transaction ID : 66013798

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Friends Of Sam Johnson

Mailing Address 1611 Avenue K

City Plano State TX Zip Code 75074

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Samuel Robert Johnson

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: TX District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	1	5

Transaction ID : 66014659

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Boehner for Speaker

Mailing Address 320 First St. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	1	5

Transaction ID : 66015493

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

1	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**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

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)

Full Name (Last, First, Middle Initial)

A. Grassley Committee

Mailing Address P. O. Box 1000

City State Zip Code
Des Moines IA 50304

Purpose of Disbursement

011

Candidate Name

Charles Grassley

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: IA District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 28 / 2015

Transaction ID : 66023534

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Adrian Smith For Congress

Mailing Address 3321 Avenue I
Suite 6

City State Zip Code
Scottsbluff NE 69361

Purpose of Disbursement

011

Candidate Name

Rep. Adrian Smith

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NE District: 03

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 28 / 2015

Transaction ID : 66023826

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

7500.00

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

38000.00