PAGE 1 / 197

Image# 12970305314

# **FEC** FORM 3X

# **REPORT OF RECEIPTS AND DISBURSEMENTS**

TOTAL OX	or Other Than An	Authorized Commit	tee		Office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typover the lines.	oing, type	12FE4M5	
Harden Healthcare LLC	Federal PAC				
ADDRESS (number and street)	1703 W. 5th Street				
Check if different	Suite 700				
than previously reported. (ACC)	Austin			TX _	78703
2. FEC IDENTIFICATION NU	MBER ▼	CITY ▲		STATE A	ZIP CODE ▲
C C00489740		3. IS THIS REPORT	NEW (N) <b>OR</b>	AM (A)	ENDED
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)  Mar 20 (M3)	May 20 (M5) Jun 20 (M6)		20 (M8) Nov 20 (M11) (Non-Election Year Only)  Dec 20 (M12) (Non-Election
(a) Quarterly Reports:		Apr 20 (M4)	Jul 20 (M7)	Oct 2	Year Only) 20 (M10) Jan 31 (YE)
April 15 Quarterly Report (Q	1) (c) 12-Day	Primary (12		General (	12G) Runoff (12R)
July 15 Quarterly Report (Q2	PRF-Flection	n 📙		Special (1	
October 15 Quarterly Report (Q	3)			1	
X January 31 Year-End Report (YE	<u></u> E	Election on	/ D D /	Y   Y   Y   Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Electi Report for the	,	OG)	Runoff (36	OR) Special (30S)
Termination Report (TER)	E	Election on	/ D D /	Y W Y W Y	in the State of
5. Covering Period 07		011 through	M M 12	31	2011
I certify that I have examined this	s Report and to the be	st of my knowledge and	belief it is tru	e, correct and	complete.
Type or Print Name of Treasurer	Thomas Lloyd Wilson				
Signature of Treasurer Thoma	as Lloyd Wilson	[Electronica	!ly Filed] □	ate 01	/ 31 / Y Y Y Y Y Y 2011
NOTE: Submission of false, errone	ous, or incomplete inforr	mation may subject the pe	erson signing th	is Report to th	e penalties of 2 U.S.C. §437g.
Office Use					FEC FORM 3X Rev. 12/2004
l Only I	ı ,	ı I	1	1 1	

# SHMMARY DAGE

FEC Form 3X (Rev. 02/2003)	OF RECEIPTS AND DISBURSEMENTS	Page <b>2</b>
Write or Type Committee Name		i ago 🚣
Harden Healthcare LLC Federal	PAC	
Report Covering the Period: From:	07 01 / Y Y Y Y Y Y TO	: 12 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2011		10823.00
(b) Cash on Hand at Beginning of Reporting Period	26506.00	
(c) Total Receipts (from Line 19)	58751.50	90434.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	85257.50	101257.50
7. Total Disbursements (from Line 31)	28142.00	44142.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	57115.50	57115.50
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
Debts and Obligations Owed BY     the Committee (Itemize all on     Schedule C and/or Schedule D)	0.00	
This committee has qualified as a mul	ticandidate 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

# Harden Healthcare LLC Federal PAC

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
I. Co	ntributions (other than loans) From:		
(a)	Individuals/Persons Other		
	Than Political Committees	40455 50	CC005 F0
	(i) Itemized (use Schedule A)	43155.50	66085.50
	(ii) Unitemized	15596.00	24349.00
	(iii) TOTAL (add		
	Lines 11(a)(i) and (ii)▶	58751.50	90434.50
(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	50754 50	00424.50
	Totals to Line 33, page 5)▶	58751.50	90434.50
	nsfers From Affiliated/Other		0.00
Pai	ty Committees	0.00	0.00
. All	Loans Received	0.00	0.00
اما	on Denouments Dessived	0.00	0.00
	an Repayments Receivedsets To Operating Expenditures	0.00	0.00
	efunds, Rebates, etc.)		
	arry Totals to Line 37, page 5)	0.00	0.00
	funds of Contributions Made		
	Federal Candidates and Other		
Pol	itical Committees	0.00	0.00
. Oth	ner Federal Receipts		
(Di	vidends, Interest, etc.)	0.00	0.00
. Tra	nsfers from Non-Federal and Levin Funds		
(a)	Non-Federal Account		
	(from Schedule H3)	0.00	0.00
(h)	Lovin Funds (from Schodula UE)	0.00	0.00
(D)	Levin Funds (from Schedule H5)	7	0.00
(0)	Total Transfers (add 18(a) and 18(b))	0.00	0.00

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	Total This Period			
21. Operating Expenditures:  (a) Allocated Federal/Non-Federal  Activity (from Schedule H4)		Calendar Year-to-Date		
(i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating				
Expenditures	605.00	605.00		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	605.00	605.00		
22. Transfers to Affiliated/Other Party		7		
Committees	0.00	0.00		
Federal Candidates/Committees and Other Political Committees	18287.00	34287.00		
4. Independent Expenditures	0.00	0.00		
(use Schedule E)				
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
26. Loan Repayments Made	0.00	0.00		
27 June 14 J	0.00	0.00		
27. Loans Made	0.00	0.00		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00		
	0.00	0.00		
(b) Political Party Committees	0.00	0.00		
(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	9250.00	9250.00		
20. Fodoval Floation Activity (2.11.5.C. \$421/20))				
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(c) Total Federal Election Activity (add	0.00	0.00		
(c) Iotal 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))	28142.00	44142.00		
32. Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii)	28142.00	44142.00		
from Line 31)	28142.00	44142.		

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	58751.50	90434.50
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	58751.50	90434.50
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	605.00	605.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	605.00	605.00

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

FOR LINE	NUMBER	:	PAGE		6	OF		197
(check only one)								
<b>X</b> 11a	11b		11c		12			
13	14		15		16			17

	and Statements may not be sold or used by any pering the name and address of any political committee	
NAME OF COMMITTEE (In Full)  Harden Healthcare LLC Fed	deral PAC	
	JEIAI PAC	
Full Name (Last, First, Middle Initial)  Cecilia Abbott		Date of Receipt
Mailing Address 2601 Wooldridge		09 30 _ 2011 _
City	State Zip Code	Transaction ID : SA11AI.6045
Austin	TX 78703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	1
Harden Healthcare Services	Managing Dir of Community Rel	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)  Cecilia Abbott		Date of Receipt
Mailing Address 2601 Wooldridge		10 14 2011
City	State Zip Code	Transaction ID : SA11AI.6307
Austin	TX 78703	Amount of Each Receipt this Period
FEC ID number of contributing	0	
federal political committee.	C	50.00
Name of Employer	Occupation	
Harden Healthcare Services	Managing Dir of Community Rel	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	200.00	
Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial)  Cecilia Abbott		Date of Receipt
Mailing Address 2601 Wooldridge		10 31 2011
City	State Zip Code	Transaction ID : SA11AI.6564
Austin	TX 78703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	
Harden Healthcare Services	Managing Dir of Community Rel	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Other (Specify)	330.00	
SUBTOTAL of Receipts This Page (options	al)	150.00
TOTAL This Period (last page this line nur	mber only)	

FOR LINE NUMBER: **PAGE** 7 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Cecilia Abbott Date of Receipt Mailing Address 2601 Wooldridge 2011 11 15 City State Zip Code Transaction ID: SA11AI.6819 TX 78703 Austin Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Harden Healthcare Services Managing Dir of Community Rel Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Cecilia Abbott Date of Receipt Mailing Address 2601 Wooldridge 11 30 2011 City State Zip Code Transaction ID: SA11AI.7083 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Harden Healthcare Services Managing Dir of Community Rel Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name (Last, First, Middle Initial) c. Cecilia Abbott Date of Receipt Mailing Address 2601 Wooldridge M = M 12 15 2011 City State Zip Code Transaction ID: SA11AI.7331 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Harden Healthcare Services Managing Dir of Community Rel Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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

FOR LINE NUMBER:			PAGE		8	OF	197		
(check only one)									
X	11a		11b		11c		12	2	
	13		14		15		16	6	17

	nd Statements may not be sold or used by any pell the name and address of any political committee	
NAME OF COMMITTEE (In Full)	aral DAC	
Harden Healthcare LLC Fede	arai PAC	
Full Name (Last, First, Middle Initial)  A. Cecilia Abbott		Date of Receipt
Mailing Address 2601 Wooldridge		12 302011 _
City	State Zip Code	Transaction ID : SA11AI.7575
Austin	TX 78703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	_
Harden Healthcare Services	Managing Dir of Community Rel	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	550.00	
Full Name (Last, First, Middle Initial)  Clifford Chris Anderson		Date of Receipt
Mailing Address 202 Fortune Dr		11 15 2011
City	State Zip Code	Transaction ID : SA11AI.7797
Corpus Christi	TX 78405	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	500.00
Name of Employer	Occupation	
TRISUN Healthcare	Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)  2. JoEllen A Andrews		Date of Receipt
Mailing Address 2270 Orchid Ln		12 30 2011
City	State Zip Code	Transaction ID : SA11AI.7803
Beaumont	TX 77713	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	313.00
Name of Employer	Occupation	-
TRISUN Healthcare	Administrator	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	2/2.22	
Other (specify) ▼	313.00	
SURTOTAL of Receipts This Dags (anticand	)	863.00
ODITINE OF NECESPES THIS Page (optional	<u></u>	
TOTAL This Period (last page this line number	ber only)	

FOR LINE NUMBER: **PAGE** 9 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Brianna B Braden Date of Receipt Mailing Address 18821 Golddust Pass 2011 07 15 City State Zip Code Transaction ID: SA11AI.5121 TX Pflugerville 78660 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Harden Healthcare Services Senior Vice President, Human Resources Receipt For: Aggregate Year-to-Date ▼ Primary General 1300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Brianna B Braden Date of Receipt Mailing Address 18821 Golddust Pass 07 29 2011 City State Zip Code Transaction ID: SA11AI.5197 Pflugerville TX 78660 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Harden Healthcare Services Senior Vice President, Human Resources Receipt For: Aggregate Year-to-Date ▼ Primary General 1400.00 Other (specify) Full Name (Last, First, Middle Initial) c. Brianna B Braden Date of Receipt Mailing Address 18821 Golddust Pass 80 15 2011 City Zip Code State Transaction ID: SA11AI.5292 TX Pflugerville 78660 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Senior Vice President, Human Resources Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page	X	11a		11b		11c		12		
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or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  Harden Healthcare LLC Feder	ne name and address of any political committee to al PAC	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  A. Brianna B Braden  Mailing Address 18821 Golddust Pass  City  Pflugerville  FEC ID number of contributing federal political committee.  Name of Employer  Harden Healthcare Services  Receipt For:  Primary  General  Other (specify)	State Zip Code TX 78660  C  Occupation Senior Vice President, Human Resources  Aggregate Year-to-Date ▼  1600.00	Date of Receipt  08 31 2011  Transaction ID: SA11AI.5453  Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial)  Brianna B Braden  Mailing Address 18821 Golddust Pass  City  Pflugerville  FEC ID number of contributing federal political committee.  Name of Employer Harden Healthcare Services  Receipt For:  Primary General  Other (specify)   Other (specify)	State Zip Code TX 78660  C  Occupation Senior Vice President, Human Resources  Aggregate Year-to-Date ▼  1700.00	Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  Brianna B Braden  Mailing Address 18821 Golddust Pass  City  Pflugerville  FEC ID number of contributing federal political committee.  Name of Employer  Harden Healthcare Services  Receipt For:  Primary  General  Other (specify)	State Zip Code TX 78660  C  Occupation Senior Vice President, Human Resources  Aggregate Year-to-Date ▼  1800.00	Date of Receipt    M
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number		300.00

FOR LINE NUMBER: PAGE 11 OF 197 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Brianna B Braden Date of Receipt Mailing Address 18821 Golddust Pass 2011 10 City State Zip Code Transaction ID: SA11AI.6315 TX Pflugerville 78660 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Harden Healthcare Services Senior Vice President, Human Resources Receipt For: Aggregate Year-to-Date ▼ Primary General 1900.00 Other (specify) Full Name (Last, First, Middle Initial) B. Brianna B Braden Date of Receipt Mailing Address 18821 Golddust Pass 10 31 2011 City State Zip Code Transaction ID: SA11AI.6572 Pflugerville TX 78660 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Harden Healthcare Services Senior Vice President, Human Resources Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Brianna B Braden Date of Receipt Mailing Address 18821 Golddust Pass M M / 11 15 2011 City Zip Code State Transaction ID: SA11AI.6827 TX Pflugerville 78660 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Senior Vice President, Human Resources Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 2100.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

# SCHEDULE A (FEC Form 3X) IT

FOR LINE NUMBER: PAGE 12 OF 197

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TEMIZED RECEIPTS	Use separate schedule(s) for each category of the	(check only one)							
LIMIZED RECEIPTS	Detailed Summary Page	X 11a 11b	11c	12	_				
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ny information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions r 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)									

Harden Healthcare LLC Federa	al PAC	
Full Name (Last, First, Middle Initial)  A. Brianna B Braden		Date of Receipt
Mailing Address 18821 Golddust Pass		1.1 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Pflugerville	State Zip Code TX 78660	Transaction ID : SA11AI.7090  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer  Harden Healthcare Services  Receipt For:  Primary General  Other (specify) ▼	Occupation Senior Vice President, Human Resources  Aggregate Year-to-Date ▼  2200.00	
Full Name (Last, First, Middle Initial)  Brianna B Braden  Mailing Address 18821 Golddust Pass		Date of Receipt
City Pflugerville FEC ID number of contributing	State Zip Code TX 78660	12 15 2011  Transaction ID : SA11AI.7338  Amount of Each Receipt this Period  100.00
Receipt For:  Primary  Other (specify) ▼  Name of Employer  Harden Healthcare Services  General  Other (specify) ▼	Occupation Senior Vice President, Human Resources  Aggregate Year-to-Date ▼  2300.00	100.00
Full Name (Last, First, Middle Initial)  Brianna B Braden  Mailing Address 18821 Golddust Pass  City Pflugerville	State Zip Code TX 78660	Date of Receipt  12 30 2011  Transaction ID: SA11AI.7582  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer  Harden Healthcare Services  Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation Senior Vice President, Human Resources Aggregate Year-to-Date ▼  2400.00	100.00
SUBTOTAL of Receipts This Page (optional)		300.00
TOTAL This Period (last page this line number	only)	

	FOR LINE I	NUMBER:	PAGE	E 13 OF	19
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for each category of the Detailed Summary Page	X 11a	11b	11c	12	
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	he name and address of any political committee t	
NAME OF COMMITTEE (In Full)  Harden Healthcare LLC Feder	al PAC	
Full Name (Last, First, Middle Initial) Wendi Bray		Date of Receipt
Mailing Address 15705 Edenderry Dr		07 15 2011
City	State Zip Code	Transaction ID : SA11AI.5122
Austin	TX 78717	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	+
Harden Healthcare Services	Senior Vice President, Finance	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General	00 0	
Other (specify) ▼	1300.00	
Full Name (Last, First, Middle Initial)  Wendi Bray		Date of Receipt
Mailing Address 15705 Edenderry Dr		07 29 2011
City	State Zip Code	07 29 2011 Transaction ID : SA11AI.5198
Austin	TX 78717	Amount of Each Receipt this Period
FEC ID number of contributing		1
federal political committee.	C	100.00
Name of Employer	Occupation	†
Harden Healthcare Services	Senior Vice President, Finance	j
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	1400.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 15705 Edenderry Dr		M = M / D = D / Y = Y = Y
City	State Zip Code	08
Austin	TX 78717	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	-
Harden Healthcare Services	Senior Vice President, Finance	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1500.00	
Strict (opeolity) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional)		300.00
ODE OF THE OF THE PAGE (OPTIONAL)	<b>&gt;</b>	
TOTAL This Period (last page this line number	r only)	

FOR LINE NUMBER: PAGE 14 OF 197 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Wendi Bray Date of Receipt Mailing Address 15705 Edenderry Dr 80 2011 31 City State Zip Code Transaction ID: SA11AI.5454 TX 78717 Austin Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Senior Vice President, Finance Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 1600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Wendi Bray Date of Receipt Mailing Address 15705 Edenderry Dr 09 15 2011 City State Zip Code Transaction ID: SA11AI.5737 TX Austin 78717 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Harden Healthcare Services Senior Vice President, Finance Receipt For: Aggregate Year-to-Date ▼ Primary General 1700.00 Other (specify) Full Name (Last, First, Middle Initial) c. Wendi Bray Date of Receipt Mailing Address 15705 Edenderry Dr 30 09 2011 City State Zip Code Transaction ID: SA11AI.6054 TX Austin 78717 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Senior Vice President, Finance Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 1800.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Wendi Bray Date of Receipt Mailing Address 15705 Edenderry Dr 2011 10 City State Zip Code Transaction ID: SA11AI.6316 TX 78717 Austin Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Senior Vice President, Finance Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 1900.00 Other (specify) Full Name (Last, First, Middle Initial) B. Wendi Bray Date of Receipt Mailing Address 15705 Edenderry Dr 10 31 2011 City State Zip Code Transaction ID: SA11AI.6573 TX Austin 78717 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Harden Healthcare Services Senior Vice President, Finance Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Wendi Bray Date of Receipt Mailing Address 15705 Edenderry Dr 11 15 2011 City State Zip Code Transaction ID: SA11AI.6828 TX Austin 78717 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Senior Vice President, Finance Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 2100.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

197

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Wendi Bray Date of Receipt Mailing Address 15705 Edenderry Dr 30 2011 11 City State Zip Code Transaction ID: SA11AI.7091 TX 78717 Austin Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Senior Vice President, Finance Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 2200.00 Other (specify) Full Name (Last, First, Middle Initial) B. Wendi Bray Date of Receipt Mailing Address 15705 Edenderry Dr 12 15 2011 City State Zip Code Transaction ID: SA11AI.7339 TX Austin 78717 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Harden Healthcare Services Senior Vice President, Finance Receipt For: Aggregate Year-to-Date ▼ Primary General 2300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Wendi Bray Date of Receipt Mailing Address 15705 Edenderry Dr M = M 30 12 2011 City State Zip Code Transaction ID: SA11AI.7583 TX Austin 78717 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Senior Vice President, Finance Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 2400.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 17 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Richard W Breuss III Date of Receipt Mailing Address 6175 Colt Dr 07 2011 11 City Zip Code State Transaction ID: SA11AI.6715 West Des Noines IΑ 50131 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Regional VP Voyager Hospice Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Richard W Breuss III Date of Receipt Mailing Address 6175 Colt Dr 11 22 2011 City State Zip Code Transaction ID: SA11AI.6972 West Des Noines IΑ 50131 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Voyager Hospice Regional VP Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Richard W Breuss III Date of Receipt Mailing Address 6175 Colt Dr 12 07 2011 City State Zip Code Transaction ID: SA11AI.7227 IΑ West Des Noines 50131 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Regional VP Voyager Hospice Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 18 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Richard W Breuss III Date of Receipt Mailing Address 6175 Colt Dr 2011 12 22 City State Zip Code Transaction ID: SA11AI.7477 West Des Noines IΑ 50131 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Regional VP Voyager Hospice Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Timothy R Brittingham Date of Receipt Mailing Address 2807 S Gary Avenue 07 13 2011 City State Zip Code Transaction ID: SA11AI.5117 OK Tulsa 74114 Amount of Each Receipt this Period FEC ID number of contributing C 60.00 federal political committee. Name of Employer Occupation Girling Community Care Regional Manager, Oklahoma Receipt For: Aggregate Year-to-Date ▼ Primary General 670.00 Other (specify) Full Name (Last, First, Middle Initial) c. Timothy R Brittingham Date of Receipt Mailing Address 2807 S Gary Avenue 28 07 2011 City State Zip Code Transaction ID: SA11AI.5191 OK Tulsa 74114 Amount of Each Receipt this Period FEC ID number of contributing 60.00 С federal political committee. Name of Employer Occupation Girling Community Care Regional Manager, Oklahoma Receipt For: Aggregate Year-to-Date ▼ Primary General 730.00 Other (specify) 170.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and or for commercial purposes, other than using the such as	I Statements may not be sold or used by any per- the name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Fede	ral PAC	
Full Name (Last, First, Middle Initial)  1. Timothy R Brittingham		Date of Receipt
Mailing Address 2807 S Gary Avenue		08 12 2011
City	State Zip Code	Transaction ID : SA11AI.5281
Tulsa	OK 74114	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	60.00
Name of Employer	Occupation	
Girling Community Care	Regional Manager, Oklahoma	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	790.00	
Full Name (Last, First, Middle Initial)  Timothy R Brittingham		Date of Receipt
Mailing Address 2807 S Gary Avenue		08 26 2011
City	State Zip Code	Transaction ID : SA11AI.5441
Tulsa	OK 74114	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	60.00
Name of Employer	Occupation	1
Girling Community Care	Regional Manager, Oklahoma	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify) ▼	850.00	
Full Name (Last, First, Middle Initial)  C. Timothy R Brittingham	<u>'</u>	Date of Receipt
Mailing Address 2807 S Gary Avenue		09 13 2011
City	State Zip Code OK 74114	Transaction ID : SA11AI.5712
Tulsa	OK 74114	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	60.00
Name of Employer	Occupation	
Girling Community Care	Regional Manager, Oklahoma	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify) ▼	910.00	
SUBTOTAL of Receipts This Page (optional).		180.00
TOTAL This Period (last page this line numb	er only)	

FOR LINE NUMBER: PAGE 20 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Timothy R Brittingham Date of Receipt Mailing Address 2807 S Gary Avenue 2011 09 28 City Zip Code State Transaction ID: SA11AI.6030 OK Tulsa 74114 Amount of Each Receipt this Period FEC ID number of contributing C 60.00 federal political committee. Name of Employer Occupation Regional Manager, Oklahoma Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 970.00 Other (specify) Full Name (Last, First, Middle Initial) B. Timothy R Brittingham Date of Receipt Mailing Address 2807 S Gary Avenue 10 13 2011 City State Zip Code Transaction ID: SA11AI.6298 OK Tulsa 74114 Amount of Each Receipt this Period FEC ID number of contributing 60.00 federal political committee. Name of Employer Occupation Girling Community Care Regional Manager, Oklahoma Receipt For: Aggregate Year-to-Date ▼ Primary General 1030.00 Other (specify) Full Name (Last, First, Middle Initial) c. Timothy R Brittingham Date of Receipt Mailing Address 2807 S Gary Avenue 10 28 2011 City State Zip Code Transaction ID: SA11AI.6556 OK Tulsa 74114 Amount of Each Receipt this Period FEC ID number of contributing 60.00 С federal political committee. Name of Employer Occupation Girling Community Care Regional Manager, Oklahoma Receipt For: Aggregate Year-to-Date ▼ Primary General 1090.00 Other (specify) 180.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 21 OF Use separate schedule(s) for each category of the (check only one) X 11a 11b 11c 12 Detailed Summary Page 13 16 14 15

	tatements may not be sold or used by any personame and address of any political committee to	
NAME OF COMMITTEE (In Full)		
Harden Healthcare LLC Federa	IPAC	
Full Name (Last, First, Middle Initial)  1. Timothy R Brittingham		Date of Receipt
Mailing Address 2807 S Gary Avenue		11 10 2011
City	State Zip Code	Transaction ID : SA11AI.6809
Tulsa	OK 74114	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer	Occupation	
Girling Community Care	Regional Manager, Oklahoma	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1150.00	
Full Name (Last, First, Middle Initial)  Timothy R Brittingham		Date of Receipt
Mailing Address 2807 S Gary Avenue		11 28 2011
City	State Zip Code	Transaction ID : SA11AI.7075
Tulsa	OK 74114	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	60.00
Name of Employer	Occupation	
Girling Community Care	Regional Manager, Oklahoma	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1210.00	
Full Name (Last, First, Middle Initial)  C. Timothy R Brittingham		Date of Receipt
Mailing Address 2807 S Gary Avenue		M = M / D = D / Y = Y = Y
City	State Zip Code	12 13 2011 Transaction ID : SA11AI.7323
Tulsa	OK 74114	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	60.00
Name of Employer	Occupation	
Girling Community Care	Regional Manager, Oklahoma	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1270.00	
SUBTOTAL of Receipts This Page (optional)		180.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 22 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Timothy R Brittingham Date of Receipt Mailing Address 2807 S Gary Avenue 2011 12 28 City State Zip Code Transaction ID: SA11AI.7567 OK Tulsa 74114 Amount of Each Receipt this Period FEC ID number of contributing C 60.00 federal political committee. Name of Employer Occupation Regional Manager, Oklahoma Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 1330.00 Other (specify) Full Name (Last, First, Middle Initial) B. Stefanie L Cavanaugh Date of Receipt Mailing Address 12512 Deer Falls Dr 09 15 2011 City State Zip Code Transaction ID: SA11AI.5742 TX Austin 78729 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Name of Employer Occupation Harden Helathcare Services Finance Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) c. Stefanie L Cavanaugh Date of Receipt Mailing Address 12512 Deer Falls Dr 30 09 2011 City State Zip Code Transaction ID: SA11AI.6059 TX Austin 78729 Amount of Each Receipt this Period FEC ID number of contributing 200.00 С federal political committee. Name of Employer Occupation Harden Helathcare Services Finance Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 460.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

FOR LINE NUMBER: PAGE 23 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Stefanie L Cavanaugh Date of Receipt Mailing Address 12512 Deer Falls Dr 2011 10 City State Zip Code Transaction ID: SA11AI.6321 TX Austin 78729 Amount of Each Receipt this Period FEC ID number of contributing C 200.00 federal political committee. Name of Employer Occupation Harden Helathcare Services **Finance** Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name (Last, First, Middle Initial) B. Stefanie L Cavanaugh Date of Receipt Mailing Address 12512 Deer Falls Dr 10 31 2011 City State Zip Code Transaction ID: SA11AI.6578 TX Austin 78729 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Name of Employer Occupation Harden Helathcare Services Finance Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Stefanie L Cavanaugh Date of Receipt Mailing Address 12512 Deer Falls Dr 11 15 2011 City State Zip Code Transaction ID: SA11AI.6833 TX Austin 78729 Amount of Each Receipt this Period FEC ID number of contributing 200.00 С federal political committee. Name of Employer Occupation Harden Helathcare Services Finance Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) 600.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

FOR LINE NUMBER: PAGE 24 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

197

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Stefanie L Cavanaugh Date of Receipt Mailing Address 12512 Deer Falls Dr 30 2011 11 City State Zip Code Transaction ID: SA11AI.7096 TX Austin 78729 Amount of Each Receipt this Period FEC ID number of contributing C 200.00 federal political committee. Name of Employer Occupation Harden Helathcare Services **Finance** Receipt For: Aggregate Year-to-Date ▼ Primary General 1400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Stefanie L Cavanaugh Date of Receipt Mailing Address 12512 Deer Falls Dr 12 15 2011 City State Zip Code Transaction ID: SA11AI.7344 TX Austin 78729 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Name of Employer Occupation Harden Helathcare Services Finance Receipt For: Aggregate Year-to-Date ▼ Primary General 1600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Stefanie L Cavanaugh Date of Receipt Mailing Address 12512 Deer Falls Dr M = M 30 12 2011 City State Zip Code Transaction ID: SA11AI.7587 TX Austin 78729 Amount of Each Receipt this Period FEC ID number of contributing 200.00 С federal political committee. Name of Employer Occupation Harden Helathcare Services Finance Receipt For: Aggregate Year-to-Date ▼ Primary General 1800.00 Other (specify) 600.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

FOR LINE NUMBER: PAGE 25 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Maryann M Choi Date of Receipt Mailing Address 501 S Austin Ave 2011 10 31 City State Zip Code Transaction ID: SA11AI.6581 TX Georgetown 78626 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Chief Medical Officer Harden Helathcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Maryann M Choi Date of Receipt Mailing Address 501 S Austin Ave 11 15 2011 City State Zip Code Transaction ID: SA11AI.6836 TX Georgetown 78626 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Harden Helathcare Services Chief Medical Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Maryann M Choi Date of Receipt Mailing Address 501 S Austin Ave 30 11 2011 City State Zip Code Transaction ID: SA11AI.7099 TX Georgetown 78626 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Chief Medical Officer Harden Helathcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 26 OF 197 Use for e Detai

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NAME OF COMMITTEE (In Full)	DAC	
Harden Healthcare LLC Federal	PAC	
Full Name (Last, First, Middle Initial)  A. Maryann M Choi		Date of Receipt
Mailing Address 501 S Austin Ave		12 15 2011
City	State Zip Code	Transaction ID : SA11AI.7347
Georgetown	TX 78626	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	
Harden Helathcare Services	Chief Medical Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial)  3. Maryann M Choi		Date of Receipt
Mailing Address 501 S Austin Ave		M M / D D / Y Y Y Y Y
City	State Zip Code	12 30 2011 Transaction ID : SA11AI.7590
Georgetown	TX 78626	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer	Occupation	
Harden Helathcare Services	Chief Medical Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial)  Catherine Clark		Date of Receipt
Mailing Address 5155 Denmans Loop		09 01 _2011 _
City	State Zip Code	Transaction ID : SA11AI.7718
Belton	TX 76513	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Rosewood	Assistant Living Director	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		350.00
TOTAL This Period (last page this line number of	<u> </u>	

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NAME OF COMMITTEE (In Full)	lavel DAC	
Harden Healthcare LLC Fed	erai PAC	
Full Name (Last, First, Middle Initial)  A. Catherine Clark		Date of Receipt
Mailing Address 5155 Denmans Loop		1,1 10 2011
City	State Zip Code	Transaction ID : SA11AI.7788
Belton	TX 76513	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	210.00
Name of Employer	Occupation	†
Rosewood	Assistant Living Director	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	, agregate real to bate v	
Other (specify) ▼	460.00	
Full Name (Last, First, Middle Initial)  Catherine Clark		Date of Receipt
Mailing Address 5155 Denmans Loop		11 10 2011
City	State Zip Code	Transaction ID : SA11AI.7792
Belton	TX 76513	Amount of Each Receipt this Period
FEC ID number of contributing	C	150.00
federal political committee.		
Name of Employer	Occupation	1
Rosewood	Assistant Living Director	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	00 0	
Other (specify) ▼	610.00	
Full Name (Last, First, Middle Initial)  C. Cathi Coney		Date of Receipt
Mailing Address 7207 Nine Oaks Cove		07 07 2011
City	State Zip Code	Transaction ID : SA11AI.5105
Austin	TX 78759	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	-
MBS Pharmacy	Vice President, Operations	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	050.00	
Other (specify) ▼	650.00	
SUBTOTAL of Receipts This Page (optional	al)	410.00
TOTAL This Period (last page this line num	nber only)	

FOR LINE NUMBER: PAGE 28 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Cathi Coney Date of Receipt Mailing Address 7207 Nine Oaks Cove 2011 07 22 City State Zip Code Transaction ID: SA11AI.5178 TX 78759 Austin Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Vice President, Operations MBS Pharmacv Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) B. Cathi Coney Date of Receipt Mailing Address 7207 Nine Oaks Cove 80 80 2011 City State Zip Code Transaction ID: SA11AI.5263 TX Austin 78759 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation **MBS Pharmacy** Vice President, Operations Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) c. Cathi Coney Date of Receipt Mailing Address 7207 Nine Oaks Cove 80 22 2011 City Zip Code State Transaction ID: SA11AI.5415 TX Austin 78759 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation MBS Pharmacy Vice President, Operations Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 29 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Cathi Coney Date of Receipt Mailing Address 7207 Nine Oaks Cove 07 2011 City State Zip Code Transaction ID: SA11AI.5587 TX 78759 Austin Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Vice President, Operations MBS Pharmacv Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) Full Name (Last, First, Middle Initial) B. Cathi Coney Date of Receipt Mailing Address 7207 Nine Oaks Cove 09 22 2011 City State Zip Code Transaction ID: SA11AI.5936 TX Austin 78759 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation **MBS Pharmacy** Vice President, Operations Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) Full Name (Last, First, Middle Initial) c. Cathi Coney Date of Receipt Mailing Address 7207 Nine Oaks Cove 10 07 2011 City Zip Code State Transaction ID: SA11AI.6213 TX Austin 78759 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation MBS Pharmacy Vice President, Operations Receipt For: Aggregate Year-to-Date ▼ Primary General 950.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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Any information copied from sor for commercial purposes, or	such Reports and Statements may not be sold or used by a other than using the name and address of any political common than the common such as the	ny person for the purpose of soliciting contributions mittee to solicit contributions from such committee.
NAME OF COMMITTEE (I Harden Healthcard	n Full) e LLC Federal PAC	
Full Name (Last, First, Mic Cathi Coney  Mailing Address 7207 Nine		Date of Receipt
City Austin	State Zip Code TX 78759	Transaction ID : SA11Al.6470  Amount of Each Receipt this Period
FEC ID number of contributed federal political committee.	uting	50.00
Name of Employer  MBS Pharmacy  Receipt For:  Primary Ge  Other (specify) ▼	Occupation Vice President, Operations  Aggregate Year-to-Date ▼  1000.00	0
Full Name (Last, First, Mic B. Cathi Coney Mailing Address 7207 Nine		Date of Receipt
City	State Zip Code TX 78759	11 07 2011 Transaction ID : SA11AI.6726
Austin  FEC ID number of contributed rederal political committee.		Amount of Each Receipt this Period  50.00
Name of Employer MBS Pharmacy	Occupation Vice President, Operations	
Receipt For:  Primary Ge  Other (specify) ▼	neral Aggregate Year-to-Date ▼ 1050.00	
Full Name (Last, First, Mic C. Cathi Coney	Idle Initial)	Date of Receipt
Mailing Address 7207 Nine		11 22 2011
City Austin	State Zip Code TX 78759	Transaction ID : SA11AI.6984  Amount of Each Receipt this Period
FEC ID number of contributed federal political committee.	C	50.00
Name of Employer  MBS Pharmacy	Occupation Vice President, Operations	
Receipt For:  Primary Ge  Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	0
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	Statements may not be sold or used by any persite name and address of any political committee to	
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Feder	ral PAC	
Full Name (Last, First, Middle Initial) Cathi Coney  Mailing Address 7207 Nine Oaks Cove  City Austin	State Zip Code TX 78759	Date of Receipt  12 07 2011  Transaction ID: SA11AI.7238
FEC ID number of contributing federal political committee.  Name of Employer  MBS Pharmacy  Receipt For:  Primary General  Other (specify)	Occupation Vice President, Operations  Aggregate Year-to-Date ▼  1150.00	Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial)  Cathi Coney  Mailing Address 7207 Nine Oaks Cove  City  Austin	State Zip Code TX 78759	Date of Receipt  12 22 2011  Transaction ID : SA11AI.7487  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer MBS Pharmacy  Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation Vice President, Operations  Aggregate Year-to-Date   1200.00	50.00
Full Name (Last, First, Middle Initial) Sherrie Corso  Mailing Address 533 Lavina Drive  City Bolingbrook  FEC ID number of contributing federal political committee.  Name of Employer Harden Healthcare Services Receipt For:  Primary General Other (specify)   Other (specify)	State Zip Code IL 60440  C  Occupation Vice President, Compliance  Aggregate Year-to-Date ▼  650.00	Date of Receipt  07
	<b>&gt;</b>	150.00
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 32 OF Use separate schedule(s) for each category of the Detailed Summary Page (check only one) X 11a 11b 11c

197

Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Feder	al PAC	
Full Name (Last, First, Middle Initial) Sherrie Corso Mailing Address 533 Lavina Drive		Date of Receipt
City	State Zip Code	07 29 2011 Transaction ID : SA11AI.5200
Bolingbrook	IL 60440	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Harden Healthcare Services	Occupation Vice President, Compliance	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  700.00	
Full Name (Last, First, Middle Initial)  3. Sherrie Corso	'	Date of Receipt
Mailing Address 533 Lavina Drive		08 15 2011
City Bolingbrook	State Zip Code IL 60440	Transaction ID : SA11AI.5307  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Harden Healthcare Services	Occupation Vice President, Compliance	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 533 Lavina Drive		08 31 2011
City Bolingbrook	State Zip Code IL 60440	Transaction ID : SA11AI.5469  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	
Harden Healthcare Services Receipt For:	Vice President, Compliance	
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  800.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number	<u> </u>	

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	d Statements may not be sold or used by any per the name and address of any political committee to	
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Fede	ral PAC	
Full Name (Last, First, Middle Initial)  Sherrie Corso  Mailing Address 533 Lavina Drive		Date of Receipt
		09 15 2011
City	State Zip Code	Transaction ID : SA11AI.5751
Bolingbrook	IL 60440	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	1
Harden Healthcare Services	Vice President, Compliance	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	850.00	
Full Name (Last, First, Middle Initial)  Sherrie Corso		Date of Receipt
Mailing Address 533 Lavina Drive		09 30 2011
City	State Zip Code IL 60440	Transaction ID : SA11AI.6067
Bolingbrook		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Harden Healthcare Services	Occupation	7
Receipt For:	Vice President, Compliance	-
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	900.00	
Full Name (Last, First, Middle Initial)  C. Sherrie Corso	·	Date of Receipt
Mailing Address 533 Lavina Drive		10 14 2011
City Bolingbrook	State Zip Code IL 60440	Transaction ID : SA11Al.6329  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	-
Harden Healthcare Services	Vice President, Compliance	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General  Other (specify) ▼	950.00	
SUBTOTAL of Receipts This Page (optional).	····	150.00
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FOR LINE NUMBER: PAGE 34 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Sherrie Corso Date of Receipt Mailing Address 533 Lavina Drive 2011 10 31 City State Zip Code Transaction ID: SA11AI.6586 Bolingbrook IL 60440 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Vice President, Compliance Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Sherrie Corso Date of Receipt Mailing Address 533 Lavina Drive 11 15 2011 City State Zip Code Transaction ID: SA11AI.6841 Bolingbrook IL 60440 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Harden Healthcare Services Vice President, Compliance Receipt For: Aggregate Year-to-Date ▼ Primary General 1050.00 Other (specify) Full Name (Last, First, Middle Initial) c. Gloria R Crawford Date of Receipt Mailing Address 6013 Forest Shadow 07 15 2011 City State Zip Code Transaction ID: SA11AI.5125 TX San Antonio 78240 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation Regional Director Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 390.00 Other (specify) 130.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 35 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Gloria R Crawford Date of Receipt Mailing Address 6013 Forest Shadow 2011 07 29 City State Zip Code Transaction ID: SA11AI.5201 TX 78240 San Antonio Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation Regional Director Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 420.00 Other (specify) Full Name (Last, First, Middle Initial) B. Gloria R Crawford Date of Receipt Mailing Address 6013 Forest Shadow 08 15 2011 City State Zip Code Transaction ID: SA11AI.5308 TX San Antonio 78240 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation Girling Community Care Regional Director Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name (Last, First, Middle Initial) c. Gloria R Crawford Date of Receipt Mailing Address 6013 Forest Shadow 80 31 2011 City State Zip Code Transaction ID: SA11AI.5472 TX San Antonio 78240 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation Regional Director Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 480.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 36 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Gloria R Crawford Date of Receipt Mailing Address 6013 Forest Shadow 2011 15 City State Zip Code Transaction ID: SA11AI.5753 TX 78240 San Antonio Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation Regional Director Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 510.00 Other (specify) Full Name (Last, First, Middle Initial) B. Gloria R Crawford Date of Receipt Mailing Address 6013 Forest Shadow 09 30 2011 City State Zip Code Transaction ID: SA11AI.6069 TX San Antonio 78240 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation Girling Community Care Regional Director Receipt For: Aggregate Year-to-Date ▼ Primary General 540.00 Other (specify) Full Name (Last, First, Middle Initial) c. Gloria R Crawford Date of Receipt Mailing Address 6013 Forest Shadow 10 14 2011 City State Zip Code Transaction ID: SA11AI.6330 TX San Antonio 78240 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation Regional Director Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 570.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 37 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Gloria R Crawford Date of Receipt Mailing Address 6013 Forest Shadow 2011 10 31 City State Zip Code Transaction ID: SA11AI.6587 TX 78240 San Antonio Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation Regional Director Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Gloria R Crawford Date of Receipt Mailing Address 6013 Forest Shadow 11 15 2011 City State Zip Code Transaction ID: SA11AI.6842 TX San Antonio 78240 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation Girling Community Care Regional Director Receipt For: Aggregate Year-to-Date ▼ Primary General 630.00 Other (specify) Full Name (Last, First, Middle Initial) c. Gloria R Crawford Date of Receipt Mailing Address 6013 Forest Shadow 30 11 2011 City State Zip Code Transaction ID: SA11AI.7104 TX San Antonio 78240 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation Regional Director Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 660.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

FOR LINE NUMBER: PAGE 38 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Gloria R Crawford Date of Receipt Mailing Address 6013 Forest Shadow 2011 12 15 City State Zip Code Transaction ID: SA11AI.7352 TX 78240 San Antonio Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation Regional Director Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 690.00 Other (specify) Full Name (Last, First, Middle Initial) B. Gloria R Crawford Date of Receipt Mailing Address 6013 Forest Shadow 12 30 2011 City State Zip Code Transaction ID: SA11AI.7595 TX San Antonio 78240 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation Girling Community Care Regional Director Receipt For: Aggregate Year-to-Date ▼ Primary General 720.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mark Culver Date of Receipt Mailing Address 515 Pin Oak Dr 30 12 2011 City Zip Code State Transaction ID: SA11AI.7805 TX Terrell 75161 Amount of Each Receipt this Period FEC ID number of contributing 300.00 С federal political committee. Name of Employer Occupation Administrator TRISUN Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 360.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

9

FOR LINE NUMBER: PAGE 39 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

197

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Lisa Lynn Cupps Date of Receipt Mailing Address 2450 CR 253 2011 07 15 City State Zip Code Transaction ID: SA11AI.5126 TX Comanche 76442 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Regional Director, West Texas Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lisa Lynn Cupps Date of Receipt Mailing Address 2450 CR 253 07 29 2011 City State Zip Code Transaction ID: SA11AI.5202 TX Comanche 76442 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Girling Community Care Regional Director, West Texas Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) c. Lisa Lynn Cupps Date of Receipt Mailing Address 2450 CR 253 80 15 2011 City Zip Code State Transaction ID: SA11AI.5309 TX Comanche 76442 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Regional Director, West Texas Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 40 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Lisa Lynn Cupps Date of Receipt Mailing Address 2450 CR 253 2011 31 City Zip Code State Transaction ID: SA11AI.5473 TX Comanche 76442 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Regional Director, West Texas Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lisa Lynn Cupps Date of Receipt Mailing Address 2450 CR 253 09 15 2011 City State Zip Code Transaction ID: SA11AI.5756 TX Comanche 76442 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Girling Community Care Regional Director, West Texas Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) Full Name (Last, First, Middle Initial) c. Lisa Lynn Cupps Date of Receipt Mailing Address 2450 CR 253 M M / 30 09 2011 City Zip Code State Transaction ID: SA11AI.6071 TX Comanche 76442 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee.

Other (specify)	900.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	150.00
TOTAL This Period (last page this line numb	er only)	7

Occupation

Regional Director, West Texas

Aggregate Year-to-Date ▼

Name of Employer

Receipt For:

Girling Community Care

FOR LINE NUMBER: PAGE 41 OF 197 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Lisa Lynn Cupps Date of Receipt Mailing Address 2450 CR 253 2011 10 City State Zip Code Transaction ID: SA11AI.6332 TX Comanche 76442 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Regional Director, West Texas Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 950.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lisa Lynn Cupps Date of Receipt Mailing Address 2450 CR 253 10 31 2011 City State Zip Code Transaction ID: SA11AI.6589 TX Comanche 76442 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Girling Community Care Regional Director, West Texas Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Lisa Lynn Cupps Date of Receipt Mailing Address 2450 CR 253 M M / 11 15 2011 City Zip Code State Transaction ID: SA11AI.6844 TX Comanche 76442 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Regional Director, West Texas Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 1050.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

FOR LINE NUMBER: PAGE 42 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

197

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Lisa Lynn Cupps Date of Receipt Mailing Address 2450 CR 253 30 2011 11 City State Zip Code Transaction ID: SA11AI.7106 TX Comanche 76442 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Regional Director, West Texas Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lisa Lynn Cupps Date of Receipt Mailing Address 2450 CR 253 12 15 2011 City State Zip Code Transaction ID: SA11AI.7354 TX Comanche 76442 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Girling Community Care Regional Director, West Texas Receipt For: Aggregate Year-to-Date ▼ Primary General 1150.00 Other (specify) Full Name (Last, First, Middle Initial) c. Lisa Lynn Cupps Date of Receipt Mailing Address 2450 CR 253 M M 30 12 2011 City Zip Code State Transaction ID: SA11AI.7597 TX Comanche 76442 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Regional Director, West Texas Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

- 9

9

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FOR LINE NUMBER: PAGE 43 OF

197

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	g the name and address of any political committee t	
Full Name (Last, First, Middle Initial)  James N Davidson  Mailing Address 820 Longleaf St  City Vidor  FEC ID number of contributing federal political committee.  Name of Employer  TRISUN Heathcare  Receipt For:  Primary  General  Other (specify)	State Zip Code TX 77662  C  Occupation Administrator  Aggregate Year-to-Date ▼  800.00	Date of Receipt  09 01 2011  Transaction ID: SA11AI.7731  Amount of Each Receipt this Period  800.00
Full Name (Last, First, Middle Initial)  Wendy L Day  Mailing Address 4809 Sinclair Ave  City Austin  FEC ID number of contributing federal political committee.  Name of Employer TRISUN Healthcare  Receipt For:  Primary  General  Other (specify)	State Zip Code TX 78756  C  Occupation Administrator  Aggregate Year-to-Date ▼  250.00	Date of Receipt  11 22 2011  Transaction ID : SA11Al.6988  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial)  Wendy L Day  Mailing Address 4809 Sinclair Ave  City Austin  FEC ID number of contributing federal political committee.  Name of Employer  TRISUN Healthcare  Receipt For:  Primary  Other (specify)	State Zip Code TX 78756  C  Occupation Administrator  Aggregate Year-to-Date ▼  300.00	Date of Receipt  12 07 2011  Transaction ID: SA11AI.7242  Amount of Each Receipt this Period  50.00
SUBTOTAL of Receipts This Page (optional	il) <b>&gt;</b>	900.00
TOTAL This Period (last page this line num	nber only)	

FOR LINE NUMBER: PAGE 44 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Wendy L Day Date of Receipt Mailing Address 4809 Sinclair Ave 2011 12 22 City State Zip Code Transaction ID: SA11AI.7491 TX Austin 78756 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. James Wayne Douglas Date of Receipt Mailing Address 4701 Circle Oak Cove 07 15 2011 City State Zip Code Transaction ID: SA11AI.5128 TX Austin 78749 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Girling Community Care President Receipt For: Aggregate Year-to-Date ▼ Primary General 1300.00 Other (specify) Full Name (Last, First, Middle Initial) c. James Wayne Douglas Date of Receipt Mailing Address 4701 Circle Oak Cove 29 07 2011 City State Zip Code Transaction ID: SA11AI.5204 TX Austin 78749 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation President Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 1400.00 Other (specify) 250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

FOR LINE NUMBER: PAGE 45 OF 197 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) James Wayne Douglas Date of Receipt Mailing Address 4701 Circle Oak Cove 15 2011 08 City State Zip Code Transaction ID: SA11AI.5318 TX 78749 Austin Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Girling Community Care President Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) Full Name (Last, First, Middle Initial) B. James Wayne Douglas Date of Receipt Mailing Address 4701 Circle Oak Cove 80 31 2011 City State Zip Code Transaction ID: SA11AI.5477 TX Austin 78749 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Girling Community Care President Receipt For: Aggregate Year-to-Date ▼ Primary General 1600.00 Other (specify) Full Name (Last, First, Middle Initial) c. James Wayne Douglas Date of Receipt Mailing Address 4701 Circle Oak Cove 09 15 2011 City State Zip Code Transaction ID: SA11AI.5761 TX Austin 78749 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation President Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 1700.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

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	the name and address of any political committee t	
NAME OF COMMITTEE (In Full)		
Harden Healthcare LLC Fede	eral PAC	
Full Name (Last, First, Middle Initial)  1. James Wayne Douglas		Date of Receipt
Mailing Address 4701 Circle Oak Cove		09 30 2011
City	State Zip Code	Transaction ID : SA11AI.6075
Austin	TX 78749	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	†
Girling Community Care	President	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General	00 0	
Other (specify) ▼	1800.00	
Full Name (Last, First, Middle Initial)  James Wayne Douglas		Date of Receipt
Mailing Address 4701 Circle Oak Cove		10 14 _2011 _
City	State Zip Code	Transaction ID : SA11AI.6336
Austin	TX 78749	Amount of Each Receipt this Period
FEC ID number of contributing		1
federal political committee.	C	100.00
Name of Employer	Occupation	
Girling Community Care	President	Ţ
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	1900.00	
Full Name (Last, First, Middle Initial)  C. James Wayne Douglas		Date of Receipt
Mailing Address 4701 Circle Oak Cove		10 31 2011
City	State Zip Code	Transaction ID : SA11AI.6593
Austin	TX 78749	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	-
Girling Community Care	President	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	2002.00	
Other (specify) ▼	2000.00	
SURTOTAL of Descripto This Descriptors		300.00
SUBTUTAL OF RECEIPTS This Page (optional	) <b>&gt;</b>	333.53
TOTAL This Period (last page this line numb	per only)	

FOR LINE NUMBER: PAGE 47 OF Use separate schedule(s) (check only one) X 11a 11b 11c

197

for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) James Wayne Douglas Date of Receipt Mailing Address 4701 Circle Oak Cove 2011 11 15 City State Zip Code Transaction ID: SA11AI.6849 TX 78749 Austin Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Girling Community Care President Receipt For: Aggregate Year-to-Date ▼ Primary General 2100.00 Other (specify) Full Name (Last, First, Middle Initial) B. James Wayne Douglas Date of Receipt Mailing Address 4701 Circle Oak Cove 11 30 2011 City State Zip Code Transaction ID: SA11AI.7110 TX Austin 78749 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Girling Community Care President Receipt For: Aggregate Year-to-Date ▼ Primary General 2200.00 Other (specify) Full Name (Last, First, Middle Initial) c. James Wayne Douglas Date of Receipt Mailing Address 4701 Circle Oak Cove 12 15 2011 City State Zip Code Transaction ID: SA11AI.7358 TX Austin 78749 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation President Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 2300.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 48 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) James Wayne Douglas Date of Receipt Mailing Address 4701 Circle Oak Cove 30 2011 12 City State Zip Code Transaction ID: SA11AI.7600 TX 78749 Austin Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Girling Community Care President Receipt For: Aggregate Year-to-Date ▼ Primary General 2400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mark Duncan Date of Receipt Mailing Address 799 W Bartlett 07 15 2011 City State Zip Code Transaction ID: SA11AI.5129 TX Buda 78610 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Operations, North Receipt For: Aggregate Year-to-Date ▼ Primary General 975.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mark Duncan Date of Receipt Mailing Address 799 W Bartlett 07 29 2011 City Zip Code State Transaction ID: SA11AI.5205 TX Buda 78610 Amount of Each Receipt this Period FEC ID number of contributing 75.00 С federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Operations, North Receipt For: Aggregate Year-to-Date ▼ Primary General 1050.00 Other (specify) 250.00 SUBTOTAL of Receipts This Page (optional).....

- 9

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

FOR LINE NUMBER: PAGE 49 OF 197

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Mark Duncan  Mailing Address 799 W Bartlett  City State Zip Code TX 78610  FEC ID number of contributing clearly compared with the period of the receipt from	NAME OF COMMITTEE (In Full)  Harden Healthcare LLC Fede	the name and address of any political committee eral PAC	to solicit contributions from such committee.
Mark Duncan  Mailing Address 799 W Bartlett  City State Zip Code TX 78610  FEC ID number of contributing federal political committee.  Name of Employer TRISUN Healthcare Primary General Other (specify) ▼	Full Name (Last, First, Middle Initial)  Mark Duncan  Mailing Address 799 W Bartlett  City  Buda  FEC ID number of contributing federal political committee.  Name of Employer  TRISUN Healthcare  Receipt For:  Primary  General  Other (specify)	State Zip Code TX 78610  C  Occupation Vice President, Operations, North  Aggregate Year-to-Date ▼	08 15 2011  Transaction ID: SA11AI.5321  Amount of Each Receipt this Period
Mailing Address 799 W Bartlett  City Buda  FEC ID number of contributing federal political committee.  Name of Employer TRISUN Healthcare Receipt For:  Primary Other (specify)   Date of Receipt  M M M M O 9 15 2011  Transaction ID : SA11AI.5763  Amount of Each Receipt this Period  75.00  75.00	Mark Duncan  Mailing Address 799 W Bartlett  City Buda  FEC ID number of contributing federal political committee.  Name of Employer TRISUN Healthcare  Receipt For:  Primary General Other (specify)	TX 78610  C  Occupation  Vice President, Operations, North  Aggregate Year-to-Date ▼	08 31 2011  Transaction ID: SA11AI.5479  Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)	Mark Duncan  Mailing Address 799 W Bartlett  City Buda  FEC ID number of contributing federal political committee.  Name of Employer  TRISUN Healthcare  Receipt For:  Primary  General	TX 78610  C  Occupation  Vice President, Operations, North  Aggregate Year-to-Date ▼	09 15 2011  Transaction ID : SA11AI.5763  Amount of Each Receipt this Period
	SUBTOTAL of Receipts This Page (optional	)	225.00

Other (specify)

Primary

Other (specify)

General

197

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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Mark Duncan Date of Receipt Mailing Address 799 W Bartlett 30 2011 09 City State Zip Code Transaction ID: SA11AI.6077 TX 78610 Buda Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Operations, North Receipt For: Aggregate Year-to-Date ▼ Primary General 1350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mark Duncan Date of Receipt Mailing Address 799 W Bartlett 10 14 2011 City State Zip Code Transaction ID: SA11AI.6338 TX Buda 78610 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Operations, North Receipt For: Aggregate Year-to-Date ▼ Primary General

Full Name (Last, First, Middle Initial) c. Mark Duncan Date of Receipt Mailing Address 799 W Bartlett 10 31 2011 Zip Code City State Transaction ID: SA11AI.6595 TX Buda 78610 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Operations, North Receipt For: Aggregate Year-to-Date ▼

1425.00

1500.00

SUBTOTAL of Receipts This Page (optional)			7		7	225	5.00	
TOTAL This Period (last page this line number only)	_	_	7	_	7			$\Box$

FOR LINE NUMBER: PAGE 51 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Mark Duncan Date of Receipt Mailing Address 799 W Bartlett 2011 11 15 City Zip Code State Transaction ID: SA11AI.6851 TX 78610 Buda Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Operations, North Receipt For: Aggregate Year-to-Date ▼ Primary General 1575.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mark Duncan Date of Receipt Mailing Address 799 W Bartlett 11 15 2011 City State Zip Code Transaction ID: SA11AI.7799 TX Buda 78610 Amount of Each Receipt this Period FEC ID number of contributing 383.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Operations, North Receipt For: Aggregate Year-to-Date ▼ Primary General 1958.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mark Duncan Date of Receipt Mailing Address 799 W Bartlett 30 11 2011 City Zip Code State Transaction ID: SA11AI.7112 TX Buda 78610 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Operations, North Receipt For: Aggregate Year-to-Date ▼ Primary General 2033.00 Other (specify) 533.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

FOR LINE NUMBER: PAGE 52 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Mark Duncan Date of Receipt Mailing Address 799 W Bartlett 2011 12 15 City State Zip Code Transaction ID: SA11AI.7360 TX 78610 Buda Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Operations, North Receipt For: Aggregate Year-to-Date ▼ Primary General 2108.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mark Duncan Date of Receipt Mailing Address 799 W Bartlett 30 12 2011 City State Zip Code Transaction ID: SA11AI.7602 TX Buda 78610 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Operations, North Receipt For: Aggregate Year-to-Date ▼ Primary General 2183.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dianne B Edwards Date of Receipt Mailing Address 6600 Lands End M = M 30 12 2011 City Zip Code State Transaction ID: SA11AI.7604 TX Fort Worth 76116 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation **Nurse Consultant** TRISUN Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) 175.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

FOR LINE NUMBER: PAGE 53 OF 197 Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)	loral BAC	
Harden Healthcare LLC Fed	leiai FAC	
Full Name (Last, First, Middle Initial)  A. Scott Ellyson		Date of Receipt
Mailing Address 824 Stonewall Ridge		07 15 2011
City	State Zip Code	Transaction ID : SA11AI.5132
Austin	TX 78746	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	-
Harden Healthcare	Chief Financial Officer	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	1300.00	
Full Name (Last, First, Middle Initial)  Scott Ellyson		Date of Receipt
Mailing Address 824 Stonewall Ridge		M = M / D = D / Y = Y = Y
City	State Zip Code	07 29 2011
Austin	TX 78746	Transaction ID : SA11AI.5207
	177 10140	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	7
Harden Healthcare	Chief Financial Officer	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General Other (specify) ▼	1400.00	
Full Name (Last, First, Middle Initial)  C. Scott Ellyson	·	Date of Receipt
Mailing Address 824 Stonewall Ridge		08 15 _ 2011 _
City	State Zip Code	Transaction ID : SA11AI.5325
Austin	TX 78746	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	1
Harden Healthcare	Chief Financial Officer	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General	00 0	
Other (specify) ▼	1500.00	
SUBTOTAL of Receipts This Page (ontions	al)	300.00
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TOTAL This Period (last page this line nur	nber only)	

FOR LINE NUMBER: PAGE 54 OF Use separate schedule(s) (check only one) X 11a 11b 11c

197

for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Scott Ellyson Date of Receipt Mailing Address 824 Stonewall Ridge 80 2011 31 City State Zip Code Transaction ID: SA11AI.5484 TX 78746 Austin Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Chief Financial Officer Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 1600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Scott Ellyson Date of Receipt Mailing Address 824 Stonewall Ridge 09 15 2011 City State Zip Code Transaction ID: SA11AI.5769 TX Austin 78746 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Harden Healthcare Chief Financial Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 1700.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Scott Ellyson Date of Receipt Mailing Address 824 Stonewall Ridge 30 09 2011 City State Zip Code Transaction ID: SA11AI.6082 TX Austin 78746 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Chief Financial Officer Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 1800.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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

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	nd Statements may not be sold or used by any person the name and address of any political committee to					
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Feder	eral PAC					
Full Name (Last, First, Middle Initial)  Scott Ellyson  Mailing Address 824 Stoppwall Bidge	Ellyson					
Mailing Address 824 Stonewall Ridge		10 14 2011				
City	State Zip Code	Transaction ID : SA11AI.6343				
Austin	TX 78746	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	100.00				
Name of Employer	Occupation	1				
Harden Healthcare	Chief Financial Officer					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1900.00					
Full Name (Last, First, Middle Initial)  Scott Ellyson  Mailing Address 824 Stangual Bidge		Date of Receipt				
Mailing Address 824 Stonewall Ridge		10 31 _2011 _				
City	State Zip Code	Transaction ID : SA11AI.6600				
Austin	TX 78746	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	100.00				
Name of Employer	Occupation	1				
Harden Healthcare	Chief Financial Officer	_				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00					
Full Name (Last, First, Middle Initial)  C. Scott Ellyson		Date of Possint				
Mailing Address 824 Stonewall Ridge		Date of Receipt  11 15 2011				
City Austin	State Zip Code TX 78746	Transaction ID : SA11AI.6856  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	100.00				
Name of Employer	Occupation	1				
Harden Healthcare	Chief Financial Officer					
Receipt For:	Aggregate Year-to-Date ▼	1				
Primary General Other (specify) ▼	2100.00					
SUBTOTAL of Receipts This Page (optional	l) <b>&gt;</b>	300.00				
TOTAL This Period (last page this line num	ber only)					

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	Statements may not be sold or used by any pers ne name and address of any political committee to	
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federa	al PAC	
Full Name (Last, First, Middle Initial) Scott Ellyson Mailing Address 824 Stonewall Ridge		Date of Receipt
City Austin	State Zip Code TX 78746	11 30 2011  Transaction ID : SA11AI.7117  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer  Harden Healthcare  Receipt For:  Primary General  Other (specify) ▼	Occupation Chief Financial Officer  Aggregate Year-to-Date ▼  2200.00	
Full Name (Last, First, Middle Initial)  3. Scott Ellyson  Mailing Address 824 Stonewall Ridge		Date of Receipt
City Austin  FEC ID number of contributing federal political committee.	State Zip Code TX 78746	12 15 2011  Transaction ID : SA11AI.7365  Amount of Each Receipt this Period  100.00
Name of Employer Harden Healthcare  Receipt For:  Primary General  Other (specify) ▼	Occupation Chief Financial Officer  Aggregate Year-to-Date ▼  2300.00	
Full Name (Last, First, Middle Initial) Scott Ellyson Mailing Address 824 Stonewall Ridge City	State Zip Code	Date of Receipt  12 30 2011  Transaction ID: SA11AI.7607
Austin  FEC ID number of contributing federal political committee.  Name of Employer	TX 78746  C Occupation	Amount of Each Receipt this Period 100.00
Harden Healthcare  Receipt For:  □ Primary □ General  □ Other (specify) ▼	Chief Financial Officer  Aggregate Year-to-Date ▼  2400.00	
SUBTOTAL of Receipts This Page (optional)	•	300.00
TOTAL This Period (last page this line number	r only)	7 7 7

FOR LINE NUMBER: PAGE 57 OF Use separate schedule(s) (check only one) X 11a 11b 11c

197

for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Bradford W Evans Date of Receipt Mailing Address 400 E Red Bridge 07 2011 11 City Zip Code State Transaction ID: SA11AI.6734 MO Kansas City 67131 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Hospice Care of Kansas Director Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Bradford W Evans Date of Receipt Mailing Address 400 E Red Bridge 11 22 2011 City State Zip Code Transaction ID: SA11AI.6992 Kansas City MO 67131 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Hospice Care of Kansas Director Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Bradford W Evans Date of Receipt Mailing Address 400 E Red Bridge M = M 12 07 2011 City Zip Code State Transaction ID: SA11AI.7246 MO Kansas City 67131 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Hospice Care of Kansas Director Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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

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FOR LINE NUMBER:				PAGE		58	OF	197	
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NAME OF COMMITTEE (In Full)	Gorol BAC	
Harden Healthcare LLC Fed		
Full Name (Last, First, Middle Initial)  Bradford W Evans		Date of Receipt
Mailing Address 400 E Red Bridge		12 22 2011
City	State Zip Code	Transaction ID : SA11AI.7495
Kansas City	MO 67131	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	†
Hospice Care of Kansas	Director	
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General		
Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial)  Benjamin Fells		Date of Receipt
Mailing Address 12042 Bitter Hollow Dr		M = M / D = D / Y = Y = Y
City	State Zip Code	09 15 2011
Austin	TX 78758	Transaction ID : SA11AI.7737
	70130	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	7
TRISUN Healthcare	Gracy Woods/Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	0.0	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)  C. Tricia Fox		Date of Receipt
Mailing Address P O Box 190		07 15 2011
City	State Zip Code	Transaction ID : SA11AI.5133
Florence	TX 76527	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	+
Girling Home Health	Vice President, Rehab	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	650.00	
SUBTOTAL of Receipts This Page (ontions	al)	600.00
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197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Tricia Fox Date of Receipt Mailing Address P O Box 190 2011 07 29 City State Zip Code Transaction ID: SA11AI.5208 TX Florence 76527 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Vice President, Rehab Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Tricia Fox Date of Receipt Mailing Address P O Box 190 08 15 2011 City State Zip Code Transaction ID: SA11AI.5330 TX Florence 76527 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Girling Home Health Vice President, Rehab Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) c. Tricia Fox Date of Receipt Mailing Address P O Box 190 80 31 2011 City State Zip Code Transaction ID: SA11AI.5489 TX Florence 76527 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Vice President, Rehab Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

9

FOR LINE NUMBER: PAGE 60 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Tricia Fox Date of Receipt Mailing Address P O Box 190 2011 15 City State Zip Code Transaction ID: SA11AI.5775 TX Florence 76527 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Vice President, Rehab Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Tricia Fox Date of Receipt Mailing Address P O Box 190 09 30 2011 City State Zip Code Transaction ID: SA11AI.6089 TX Florence 76527 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Girling Home Health Vice President, Rehab Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) Full Name (Last, First, Middle Initial) c. Tricia Fox Date of Receipt Mailing Address P O Box 190 10 14 2011 City State Zip Code Transaction ID: SA11AI.6349 TX Florence 76527 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Vice President, Rehab Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 950.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

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Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any pers the name and address of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Fede	eral PAC	
Full Name (Last, First, Middle Initial)  Tricia Fox  Mailing Address B O Rev 100		Date of Receipt
Mailing Address P O Box 190		10 31 2011
City	State Zip Code	Transaction ID : SA11AI.6606
Florence	TX 76527	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	1
Girling Home Health	Vice President, Rehab	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial)  3. Tricia Fox		Date of Receipt
Mailing Address P O Box 190		11 15 2011
City	State Zip Code	Transaction ID : SA11AI.6862
Florence	TX 76527	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Girling Home Health	Occupation Vice President, Rehab	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  1050.00	
Full Name (Last, First, Middle Initial)  C. Tricia Fox		Date of Receipt
Mailing Address P O Box 190		11 30 2011
City Florence	State Zip Code TX 76527	Transaction ID : SA11AI.7123  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	1
Girling Home Health	Vice President, Rehab	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	1100.00	
SUBTOTAL of Receipts This Page (optional)	) <b>&gt;</b>	150.00
TOTAL This Period (last page this line numb	ner only)	

## SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 62 OF 197

ITEMIZED RECEIPTS  Any information copied from such Reports and Statements m			
or	for commercial purposes, other than using the name and NAME OF COMMITTEE (In Full)  Harden Healthcare LLC Federal PAC	address of any political committee	to solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) Tricia Fox Mailing Address P O Box 190		Date of Receipt    M = M   / D = D   / Y = Y = Y = Y
	City State Florence TX  FEC ID number of contributing federal political committee.	Zip Code 76527	Transaction ID : SA11AI.7371  Amount of Each Receipt this Period  50.00
	Name of Employer Occupati Girling Home Health Vice Pres	on sident, Rehab te Year-to-Date ▼ 1150.00	
	Receipt For:  Primary  General  Other (specify) ▼  Aggrega	Zip Code 76527 on sident, Rehab te Year-to-Date ▼	Date of Receipt  12 30 2011  Transaction ID: SA11AI.7613  Amount of Each Receipt this Period  50.00
_	Full Name (Last, First, Middle Initial)		

**c.** James W Gilliam Date of Receipt Mailing Address 1200 Baylor St #103 09 30 2011 City State Zip Code Transaction ID: SA11AI.6090  $\mathsf{TX}$ Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation President Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)		Ξ	7	Ξ	Ξ	7	Ξ	20	00.00	ס	
TOTAL This Period (last page this line number only)		I	7	_	_	7	_	Ξ	<u>.                                    </u>		

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	and Statements may not be sold or used by any per- g the name and address of any political committee t	
NAME OF COMMITTEE (In Full)	loral BAC	
Harden Healthcare LLC Fed	ierai PAC	
Full Name (Last, First, Middle Initial)  James W Gilliam		Date of Receipt
Mailing Address 1200 Baylor St #103		10 14 2011
City	State Zip Code	Transaction ID : SA11AI.6350
Austin	TX 78703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	1
Harden Healthcare	President	
Receipt For:	Aggregate Year-to-Date ▼	-
Primary General		
Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial)  James W Gilliam		Date of Receipt
Mailing Address 1200 Baylor St #103		M = M / D = D / Y = Y = Y
City	State Zip Code	10 31 2011
City Austin	State Zip Code TX 78703	Transaction ID : SA11AI.6607
Austin	10 /8/03	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	1
Harden Healthcare	President	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)  C. James W Gilliam		Date of Receipt
Mailing Address 1200 Baylor St #103		11 15 2011
City	State Zip Code	Transaction ID : SA11AI.6863
Austin	TX 78703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	1
Harden Healthcare	President	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	600.00	
SUBTOTAL of Receipts This Page (optional	al)	300.00
TOTAL This Period (last page this line nur	nber only)	

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

FOR LINE	NOMREK:	PAGE	: 64 OF	197			
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Any information copied from such Reports and Si or for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address of any political committee to	
NAME OF COMMITTEE (In Full)	DAG.	
Harden Healthcare LLC Federal	PAC	
Full Name (Last, First, Middle Initial)  James W Gilliam		Date of Receipt
Mailing Address 1200 Baylor St #103		11 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.7124
Austin	TX 78703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
Harden Healthcare	President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	700.00	
Full Name (Last, First, Middle Initial)  James W Gilliam		Date of Receipt
Mailing Address 1200 Baylor St #103		M M / D D / Y Y Y Y Y
City	State Zip Code	12 15 2011 Transaction ID : SA11AI.7372
Austin	TX 78703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
Harden Healthcare	President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  800.00	
Full Name (Last, First, Middle Initial)  . James W Gilliam		Date of Receipt
Mailing Address 1200 Baylor St #103		12 30 2011
City	State Zip Code	Transaction ID : SA11AI.7614
Austin	TX 78703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
Harden Healthcare	President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	900.00	
SUBTOTAL of Receipts This Page (optional)	<b></b>	300.00
TOTAL This Period (last page this line number of	only)	

FOR LINE NUMBER: PAGE 65 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Brittany Golden Date of Receipt Mailing Address 325 SW CR 3140 2011 11 10 City State Zip Code Transaction ID: SA11AI.7757 TX 76679 Purdon Amount of Each Receipt this Period FEC ID number of contributing C 300.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Brittany Golden Date of Receipt Mailing Address 325 SW CR 3140 11 10 2011 City State Zip Code Transaction ID: SA11AI.7759 TX Purdon 76679 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name (Last, First, Middle Initial) c. Lori Don McNamee Gregory Date of Receipt Mailing Address 555 E 5th St #2819 30 12 2011 City State Zip Code Transaction ID: SA11AI.7618 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Chief Compliance Officer Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) 825.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: 197 PAGE 66 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) A. Olga Guerra Date of Receipt Mailing Address 2201 North 25 and 1/2 Street 2011 12 15 City State Zip Code Transaction ID: SA11AI.7378 TX McAllen 78501 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation **Branch Director** Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) Full Name (Last, First, Middle Initial) B. Olga Guerra Date of Receipt Mailing Address 2201 North 25 and 1/2 Street M M / D D / Y Y

2201 North 23 and 1/2 office		12 30 _ 2011 _
City	State Zip Code	Transaction ID : SA11AI.7620
McAllen	TX 78501	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	
Girling Community Care	Branch Director	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial) Benjamin Hanson		Date of Receipt
Mailing Address 2211 Sunny Slope Drive		07 15 2011
City	State Zip Code	Transaction ID : SA11AI.5134
Austin	TX 78703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer	Occupation	
Harden Healthcare	Sr Vice President & General Counsel	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	975.00	

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

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

125.00

FOR LINE NUMBER: PAGE 67 OF Use separate schedule(s) for each category of the (check only one) X 11a 11b 11c

197

12 Detailed Summary Page 13 16 14 15

Any information copied from such Reports and Si or for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
Harden Healthcare LLC Federal		
Full Name (Last, First, Middle Initial)  A. Benjamin Hanson		Date of Receipt
Mailing Address 2211 Sunny Slope Drive		07 29 2011
City	State Zip Code	Transaction ID : SA11AI.5209
Austin	TX 78703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	75.00
Name of Employer	Occupation	
Harden Healthcare	Sr Vice President & General Counsel	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	55 5	
Other (specify) ▼	1050.00	
Full Name (Last, First, Middle Initial)  Benjamin Hanson		Date of Receipt
Mailing Address 2211 Sunny Slope Drive		08 15 2011
City	State Zip Code	Transaction ID : SA11AI.5335
Austin	TX 78703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	75.00
Name of Employer	Occupation	
Harden Healthcare	Sr Vice President & General Counsel	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	1125.00	
Full Name (Last, First, Middle Initial)  C. Benjamin Hanson		Date of Receipt
Mailing Address 2211 Sunny Slope Drive		08 31 2011
City	State Zip Code	Transaction ID : SA11AI.5496
Austin	TX 78703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer	Occupation	
Harden Healthcare	Sr Vice President & General Counsel	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	1200.00	
SUBTOTAL of Receipts This Page (optional)		225.00
TOTAL This Period (last page this line number of	only)	

## SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 68 OF Use separate schedule(s) (check only one)

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Any information copied from such Reports and or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federa	al PAC		
Full Name (Last, First, Middle Initial)  Benjamin Hanson  Mailing Address 2211 Sunny Slope Drive  City Austin  FEC ID number of contributing federal political committee.  Name of Employer  Harden Healthcare  Receipt For:  Primary  General  Other (specify)	State Zip Co TX 78703  C  Occupation Sr Vice President & Ge Aggregate Year-to-Date	eneral Counsel	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  Benjamin Hanson  Mailing Address 2211 Sunny Slope Drive  City  Austin  FEC ID number of contributing federal political committee.  Name of Employer Harden Healthcare  Receipt For:  Primary  General  Other (specify)	State Zip Co TX 78703  C  Occupation Sr Vice President & Ge Aggregate Year-to-Date	eneral Counsel	Date of Receipt  9 30 2011  Transaction ID: SA11Al.6100  Amount of Each Receipt this Period  200.00
Full Name (Last, First, Middle Initial)  Benjamin Hanson  Mailing Address 2211 Sunny Slope Drive  City  Austin  FEC ID number of contributing federal political committee.  Name of Employer  Harden Healthcare  Receipt For:  Primary  General  Other (specify)	State Zip Co TX 78703  C  Occupation Sr Vice President & Ge Aggregate Year-to-Date	eneral Counsel	Date of Receipt  10 14 2011  Transaction ID: SA11AI.6360  Amount of Each Receipt this Period  200.00
SUBTOTAL of Receipts This Page (optional)			600.00
TOTAL This Period (last page this line number	only)		

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NAME OF COMMITTEE (In Full)	DAC	
Harden Healthcare LLC Federa		
Full Name (Last, First, Middle Initial)  A. Benjamin Hanson		Date of Receipt
Mailing Address 2211 Sunny Slope Drive		10 31 2011
City	State Zip Code	Transaction ID : SA11AI.6617
Austin	TX 78703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer	Occupation	
Harden Healthcare	Sr Vice President & General Counsel	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	2000.00	
Other (specify) ▼	2000.00	
Full Name (Last, First, Middle Initial)  Benjamin Hanson		Date of Receipt
Mailing Address 2211 Sunny Slope Drive		11 15 2011
City	State Zip Code	Transaction ID : SA11AI.6872
Austin	TX 78703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	200.00
Name of Employer	Occupation	
Harden Healthcare	Sr Vice President & General Counsel	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	2200.00	
Full Name (Last, First, Middle Initial)  C. Benjamin Hanson		Date of Receipt
Mailing Address 2211 Sunny Slope Drive		11 30 _ 2011 _
City	State Zip Code	Transaction ID : SA11AI.7133
Austin	TX 78703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer	Occupation	
Harden Healthcare	Sr Vice President & General Counsel	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify)	2400.00	
SUBTOTAL of Receipts This Page (optional)		600.00
TOTAL This Period (last page this line number of	only)	

FOR LINE NUMBER: PAGE 70 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Benjamin Hanson Date of Receipt Mailing Address 2211 Sunny Slope Drive 2011 12 15 City State Zip Code Transaction ID: SA11AI.7381 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing C 200.00 federal political committee. Name of Employer Occupation Sr Vice President & General Counsel Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 2600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Benjamin Hanson Date of Receipt Mailing Address 2211 Sunny Slope Drive 12 30 2011 City State Zip Code Transaction ID: SA11AI.7623 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Name of Employer Occupation Harden Healthcare Sr Vice President & General Counsel Receipt For: Aggregate Year-to-Date ▼ Primary General 2800.00 Other (specify) Full Name (Last, First, Middle Initial) c. Eric J Hansum Date of Receipt Mailing Address 3005 Chantelaine Dr 09 15 2011 City State Zip Code Transaction ID: SA11AI.5793 TX Austin 78746 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Harden Healthcare Legal Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 450.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

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	d Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Fede	eral PAC	
Full Name (Last, First, Middle Initial)  A. Eric J Hansum  Mailing Address 3005 Chantelaine Dr		Date of Receipt
		09 30 2011
City	State Zip Code TX 78746	Transaction ID : SA11AI.6101
Austin	17 76740	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	
Harden Healthcare	Legal	
Receipt For:  Primary General  Other (specify)   ■	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial)		
Address 3005 Chantelaine Dr		Date of Receipt  10 14 2011
City	State Zip Code	Transaction ID : SA11AI.6361
Austin	TX 78746	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Harden Healthcare	Occupation Legal	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 3005 Chantelaine Dr		10 31 2011
City Austin	State Zip Code TX 78746	Transaction ID : SA11AI.6618  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	-
Harden Healthcare	Legal	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	400.00	
SUBTOTAL of Receipts This Page (optional)	) <b>&gt;</b>	150.00
TOTAL This Period (last page this line numb	per only)	

FOR LINE NUMBER: PAGE 72 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Eric J Hansum Date of Receipt Mailing Address 3005 Chantelaine Dr 2011 11 15 City State Zip Code Transaction ID: SA11AI.6873 TX 78746 Austin Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Harden Healthcare Legal Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name (Last, First, Middle Initial) B. Eric J Hansum Date of Receipt Mailing Address 3005 Chantelaine Dr 2011 11 30 City State Zip Code Transaction ID: SA11AI.7134 TX Austin 78746 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Harden Healthcare Legal Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Eric J Hansum Date of Receipt Mailing Address 3005 Chantelaine Dr M M / 12 15 2011 City State Zip Code Transaction ID: SA11AI.7382 TX Austin 78746 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Harden Healthcare Legal Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

FOR LINE NUMBER: PAGE 73 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Eric J Hansum Date of Receipt Mailing Address 3005 Chantelaine Dr 30 2011 12 City State Zip Code Transaction ID: SA11AI.7624 TX 78746 Austin Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Harden Healthcare Legal Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. James Hardee Date of Receipt Mailing Address 5925 West Lake Drive 07 15 2011 City State Zip Code Transaction ID: SA11AI.5137 TX Sandia 78383 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Chief Operations Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 1300.00 Other (specify) Full Name (Last, First, Middle Initial) c. James Hardee Date of Receipt Mailing Address 5925 West Lake Drive 07 29 2011 City Zip Code State Transaction ID: SA11AI.5211 TX Sandia 78383 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Chief Operations Officer TRISUN Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 1400.00 Other (specify) 250.00 SUBTOTAL of Receipts This Page (optional).....

- 9

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

FOR LINE NUMBER: PAGE 74 OF Use separate schedule(s) (check only one) X 11a 11b 11c

197

for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) James Hardee Date of Receipt Mailing Address 5925 West Lake Drive 2011 08 15 City State Zip Code Transaction ID: SA11AI.5337 TX Sandia 78383 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Chief Operations Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Dana Marie Hasley Date of Receipt Mailing Address 11855 N 207 E Avenue 07 13 2011 City State Zip Code Transaction ID: SA11AI.5118 OK Claremore 74019 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Girling Community Care Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dana Marie Hasley Date of Receipt Mailing Address 11855 N 207 E Avenue 28 07 2011 City State Zip Code Transaction ID: SA11AI.5194 OK Claremore 74019 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Regional Vice President Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) 200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 75 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Dana Marie Hasley Date of Receipt Mailing Address 11855 N 207 E Avenue 2011 08 City Zip Code State Transaction ID: SA11AI.5283 OK Claremore 74019 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Girling Community Care Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Dana Marie Hasley Date of Receipt Mailing Address 11855 N 207 E Avenue 08 2011 26 City State Zip Code Transaction ID: SA11AI.5443 OK Claremore 74019 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Girling Community Care Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name (Last, First, Middle Initial) c. Robin J Hayes Date of Receipt Mailing Address 6112 Jumano Lane 07 15 2011 City State Zip Code Transaction ID: SA11AI.5138 TX Austin 78749 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Professional Services Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

FOR LINE NUMBER: PAGE 76 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Robin J Hayes Date of Receipt Mailing Address 6112 Jumano Lane 2011 07 29 City State Zip Code Transaction ID: SA11AI.5212 TX 78749 Austin Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Professional Services Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Robin J Hayes Date of Receipt Mailing Address 6112 Jumano Lane 08 15 2011 City State Zip Code Transaction ID: SA11AI.5338 TX Austin 78749 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Professional Services Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) c. Robin J Hayes Date of Receipt Mailing Address 6112 Jumano Lane 80 31 2011 City Zip Code State Transaction ID: SA11AI.5498 TX Austin 78749 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Professional Services Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

- 9

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Any information copied from such Reports and sor for commercial purposes, other than using the	Statements may not be sold or used by any pers e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federa	al PAC	
Full Name (Last, First, Middle Initial)  Robin J Hayes		Date of Receipt
Mailing Address 6112 Jumano Lane		09 15 2011
City	State Zip Code	Transaction ID : SA11AI.5796
Austin	TX 78749	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	1
TRISUN Healthcare	Vice President, Professional Services	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	850.00	
Full Name (Last, First, Middle Initial)  Robin J Hayes		Date of Receipt
Mailing Address 6112 Jumano Lane		09 30 / Y = Y = Y = Y
City	State Zip Code	Transaction ID : SA11AI.6103
Austin	TX 78749	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	
TRISUN Healthcare	Vice President, Professional Services	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	900.00	
Full Name (Last, First, Middle Initial)  C. Robin J Hayes		Date of Receipt
Mailing Address 6112 Jumano Lane		10 14 2011
City	State Zip Code	Transaction ID : SA11AI.6363
Austin	TX 78749	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	•
TRISUN Healthcare	Vice President, Professional Services	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	950.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number		

FOR LINE NUMBER: PAGE 78 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

197

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Robin J Hayes Date of Receipt Mailing Address 6112 Jumano Lane 2011 10 31 City State Zip Code Transaction ID: SA11AI.6620 TX 78749 Austin Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Professional Services Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Robin J Hayes Date of Receipt Mailing Address 6112 Jumano Lane 11 15 2011 City State Zip Code Transaction ID: SA11AI.6875 TX Austin 78749 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Professional Services Receipt For: Aggregate Year-to-Date ▼ Primary General 1050.00 Other (specify) Full Name (Last, First, Middle Initial) c. Robin J Hayes Date of Receipt Mailing Address 6112 Jumano Lane 30 11 2011 City Zip Code State Transaction ID: SA11AI.7136 TX Austin 78749 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Professional Services Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

# SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 79 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

ITEMIZED RECEIPTS 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Robin J Hayes Date of Receipt Mailing Address 6112 Jumano Lane 2011 12 15 City State Zip Code Transaction ID: SA11AI.7384 TX Austin 78749 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Professional Services Receipt For: Aggregate Year-to-Date ▼ Primary General 1150.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Robin J Hayes Date of Receipt Mailing Address 6112 Jumano Lane 12 30 2011 City State Zip Code Transaction ID: SA11AI.7626 TX Austin 78749 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Professional Services Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) c. Janelle B Hesselsweet Date of Receipt Mailing Address 2709 Barton's Bluff Ln 11 15 2011 City State Zip Code Transaction ID: SA11AI.6878 TX Austin 78746 Amount of Each Receipt this Period FEC ID number of contributing 10.00 С federal political committee. Name of Employer Occupation Harden Healthcare Services Regional HR Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) 110.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 80 OF 197 Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using	g the name and address of any political committee	
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Fed	eral PAC	
Full Name (Last, First, Middle Initial)  Janelle B Hesselsweet		Date of Receipt
Mailing Address 2709 Barton's Bluff Ln		11 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.7139
Austin	TX 78746	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer	Occupation	
Harden Healthcare Services	Regional HR Manager	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	220.00	
Full Name (Last, First, Middle Initial)  3. Janelle B Hesselsweet	'	Date of Receipt
Mailing Address 2709 Barton's Bluff Ln		M = M / D = D / Y = Y = Y
City	State Zip Code	12 15 2011
Austin	TX 78746	Transaction ID : SA11AI.7387  Amount of Each Receipt this Period
FEC ID number of contributing		Amount of Lacin neceipt this Period
federal political committee.	C	10.00
Name of Employer	Occupation	
Harden Healthcare Services	Regional HR Manager	
Receipt For:  Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	230.00	
Full Name (Last, First, Middle Initial)  Janelle B Hesselsweet	ı	Date of Receipt
Mailing Address 2709 Barton's Bluff Ln		12 30 2011
City	State Zip Code	Transaction ID : SA11AI.7629
Austin	TX 78746	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer	Occupation	$\dashv$
Harden Healthcare Services	Regional HR Manager	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	240.00	
SURTOTAL of Receipts This Page (ontions	l)	30.00
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TOTAL This Period (last page this line num	nber only)	

FOR LINE NUMBER: PAGE 81 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Chelsea M Holden Date of Receipt Mailing Address 4000 Dunning Lane 07 2011 15 City State Zip Code Transaction ID: SA11AI.5141 TX 78746 Austin Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer Occupation Harden Healthcare Services Government Relations Liaison Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) Full Name (Last, First, Middle Initial) B. Chelsea M Holden Date of Receipt Mailing Address 4000 Dunning Lane 07 29 2011 City State Zip Code Transaction ID: SA11AI.5215 TX Austin 78746 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Harden Healthcare Services Government Relations Liaison Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) c. Chelsea M Holden Date of Receipt Mailing Address 4000 Dunning Lane 80 15 2011 City Zip Code State Transaction ID: SA11AI.5345 TX Austin 78746 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation Government Relations Liaison Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) 60.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

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	nd Statements may not be sold or used by any pers g the name and address of any political committee t	
NAME OF COMMITTEE (In Full)		
Harden Healthcare LLC Fede	erai PAC	
Full Name (Last, First, Middle Initial)  Chelsea M Holden		Date of Receipt
Mailing Address 4000 Dunning Lane		08 31 2011
City	State Zip Code	Transaction ID : SA11AI.5503
Austin	TX 78746	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	†
Harden Healthcare Services	Government Relations Liaison	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	280.00	
Full Name (Last, First, Middle Initial)  Chelsea M Holden		Date of Receipt
Mailing Address 4000 Dunning Lane		09 15 _2011 _
City	State Zip Code	Transaction ID : SA11AI.5801
Austin	TX 78746	Amount of Each Receipt this Period
FEC ID number of contributing		1
federal political committee.	[C]	25.00
Name of Employer	Occupation	7
Harden Healthcare Services	Government Relations Liaison	1
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	305.00	
Full Name (Last, First, Middle Initial)  Chelsea M Holden		Date of Receipt
Mailing Address 4000 Dunning Lane		09 30 2011
City	State Zip Code	7 Transaction ID : SA11Al.6108
Austin	TX 78746	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	25.00
Name of Employer	Occupation	-
Harden Healthcare Services	Government Relations Liaison	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	330.00	
Other (specify) ▼	330.00	
SUBTOTAL of Receipts This Page (optional	1)	70.00
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TOTAL This Period (last page this line num	ber only)	

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Full Name (Last, First, Middle Initial)  A. Chelsea M Holden  Mailing Address 4000 Dunning Lane  City  Austin  TX  78746  City  Austin  Date of Receipt  Transaction ID: SA11Al.6388  Amount of Each Receipt this Period  Transaction ID: SA11Al.6388  Amount of Each Receipt this Period  Transaction ID: SA11Al.6388  Amount of Each Receipt this Period  Transaction ID: SA11Al.6388  Amount of Each Receipt this Period  Transaction ID: SA11Al.6388  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: SA11Al.6388  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: SA11Al.6388  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: SA11Al.6388  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: SA11Al.6388  Amount of Each Receipt  Date of Receipt  Transaction ID: SA11Al.6388  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: SA11Al.6388  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: SA11Al.6388  Amount of Each Receipt this Period  Transaction ID: SA11Al.6388  Amount of Each Receipt this Period  Transaction ID: SA11Al.6388  Amount of Each Receipt this Period	or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  Harden Healthcare LLC Fede	the name and address of any political committee	to solicit contributions from such committee.
Austin Tx 78746  FEC ID number of contributing federal political committee.  City Austin Tx 78746  Name of Employer Harden Healthcare Services Receipt For:  Primary General Other (specify) ▼ State Zip Code Tx 78746  FEC ID number of contributing federal political committee.  Cocupation Government Relations Liaison  Receipt For:  Primary General Other (specify) ▼ State Zip Code Tx 78746  FEC ID number of contributing federal political committee.  City State Zip Code Tx 78746  FEC ID number of contributing federal political committee.  Cocupation Tx 78746  Cocupation Tx 78746  FEC ID number of contributing federal political committee.  Name of Employer Argeneral Government Relations Liaison  Receipt For:  Aggregate Year-to-Date ▼ Transaction ID: SA11AI.6880  Amount of Each Receipt this Period Fec Primary General Government Relations Liaison  Receipt For:  Aggregate Year-to-Date ▼ Transaction ID: SA11AI.6880  Amount of Each Receipt this Period Fec Primary General Government Relations Liaison  Aggregate Year-to-Date ▼ Transaction ID: SA11AI.6880	City Austin  FEC ID number of contributing federal political committee.  Name of Employer Harden Healthcare Services  Receipt For:  Primary General	TX 78746  C  Occupation Government Relations Liaison  Aggregate Year-to-Date ▼  355.00	10 14 2011 Transaction ID : SA11Al.6368
Chelsea M Holden  Mailing Address 4000 Dunning Lane  City Austin  FEC ID number of contributing federal political committee.  Name of Employer Harden Healthcare Services  Receipt For:  Primary  General  Other (specify) ▼  Date of Receipt  Transaction ID: SA11AI.6880  Amount of Each Receipt this Period  C  25.	Chelsea M Holden  Mailing Address 4000 Dunning Lane  City Austin  FEC ID number of contributing federal political committee.  Name of Employer Harden Healthcare Services  Receipt For:  Primary General	TX 78746  C  Occupation Government Relations Liaison  Aggregate Year-to-Date ▼	10 31 2011 Transaction ID : SA11AI.6625
	Chelsea M Holden  Mailing Address 4000 Dunning Lane  City Austin  FEC ID number of contributing federal political committee.  Name of Employer Harden Healthcare Services  Receipt For:  Primary General	TX 78746  C  Occupation Government Relations Liaison  Aggregate Year-to-Date ▼  405.00	11 15 2011 Transaction ID : SA11AI.6880
SUBTOTAL of Receipts This Page (optional)	SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	75.00

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0 NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) A. Chelsea M Holden Date of Receipt Mailing Address 4000 Dunning Lane 11 30 2011 City State Zip Code Transaction ID: SA11AI.7141 78746 TX Austin Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Harden Healthcare Services Government Relations Liaison Receipt For: Aggregate Year-to-Date ▼ Primary General 430.00 Other (specify) Full Name (Last, First, Middle Initial) B. Chelsea M Holden Date of Receipt Mailing Address 4000 Dunning Lane 2011 12 15 City State Zip Code Transaction ID: SA11AI.7389 TX Austin 78746 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Harden Healthcare Services Government Relations Liaison Receipt For: Aggregate Year-to-Date ▼ Primary General 455.00 Other (specify) Full Name (Last, First, Middle Initial) c. Chelsea M Holden Date of Receipt Mailing Address 4000 Dunning Lane 30 2011 12 Zip Code City State Transaction ID: SA11AI.7631 TX Austin 78746 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Occupation Name of Employer Government Relations Liaison Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 480.00 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 85 OF 197 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Kelly Ann Jalowiec Date of Receipt Mailing Address 1410 W Fillmore St 2011 07 15 City State Zip Code Transaction ID: SA11AI.5145 Chicago IL 60607 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Vice President, Operations Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kelly Ann Jalowiec Date of Receipt Mailing Address 1410 W Fillmore St 07 29 2011 City State Zip Code Transaction ID: SA11AI.5217 IL Chicago 60607 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Girling Home Health Vice President, Operations Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kelly Ann Jalowiec Date of Receipt Mailing Address 1410 W Fillmore St 80 15 2011 City State Zip Code Transaction ID: SA11AI.5347 IL Chicago 60607 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Girling Home Health Vice President, Operations Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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86 OF

197

for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Kelly Ann Jalowiec Date of Receipt Mailing Address 1410 W Fillmore St 2011 08 31 City State Zip Code Transaction ID: SA11AI.5505 Chicago IL 60607 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Vice President, Operations Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kelly Ann Jalowiec Date of Receipt Mailing Address 1410 W Fillmore St 09 15 2011 City State Zip Code Transaction ID: SA11AI.5811 IL Chicago 60607 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Name of Employer Occupation Girling Home Health Vice President, Operations Receipt For: Aggregate Year-to-Date ▼ Primary General 875.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kelly Ann Jalowiec Date of Receipt Mailing Address 1410 W Fillmore St 30 09 2011 City State Zip Code Transaction ID: SA11AI.6114 IL Chicago 60607 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Name of Employer Occupation Girling Home Health Vice President, Operations Receipt For: Aggregate Year-to-Date ▼ Primary General 950.00 Other (specify) 200.00 SUBTOTAL of Receipts This Page (optional).....

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# SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 87 OF

197

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Any information copied from such Reports and sor for commercial purposes, other than using the	Statements may not be sold or used by any per ename and address of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federa	al PAC	
Full Name (Last, First, Middle Initial) Kelly Ann Jalowiec  Mailing Address 1410 W Fillmore St  City Chicago  FEC ID number of contributing federal political committee.  Name of Employer Girling Home Health Receipt For:  Primary General Other (specify)	State Zip Code IL 60607  C  Occupation Vice President, Operations  Aggregate Year-to-Date ▼  1025.00	Date of Receipt  10 14 2011  Transaction ID: SA11AI.6374  Amount of Each Receipt this Period  75.00
Full Name (Last, First, Middle Initial)  Kelly Ann Jalowiec  Mailing Address 1410 W Fillmore St  City Chicago  FEC ID number of contributing federal political committee.  Name of Employer Girling Home Health  Receipt For:  Primary General Other (specify)	State Zip Code IL 60607  C  Occupation Vice President, Operations  Aggregate Year-to-Date ▼  1100.00	Date of Receipt  10 31 2011  Transaction ID: SA11Al.6633  Amount of Each Receipt this Period  75.00
Full Name (Last, First, Middle Initial) Kelly Ann Jalowiec Mailing Address 1410 W Fillmore St  City Chicago FEC ID number of contributing federal political committee.  Name of Employer Girling Home Health Receipt For: Primary General Other (specify)	State Zip Code IL 60607  C  Occupation Vice President, Operations  Aggregate Year-to-Date ▼  1175.00	Date of Receipt  11
SUBTOTAL of Receipts This Page (optional)		225.00
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NAME OF COMMITTEE (In Full)	oval DAC	
Harden Healthcare LLC Fed	erai PAC	
Full Name (Last, First, Middle Initial)  . Kelly Ann Jalowiec		Date of Receipt
Mailing Address 1410 W Fillmore St		1,1 30 2011
City	State Zip Code	Transaction ID : SA11AI.7148
Chicago	IL 60607	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer	Occupation	1
Girling Home Health	Vice President, Operations	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1250.00	
Full Name (Last, First, Middle Initial)  Left Kelly Ann Jalowiec	·	Date of Receipt
Mailing Address 1410 W Fillmore St		12 15 2011
City	State Zip Code	Transaction ID : SA11AI.7396
Chicago	IL 60607	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	75.00
Name of Employer	Occupation	-
Girling Home Health	Vice President, Operations	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  1325.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 1410 W Fillmore St		12 30 2011
City	State Zip Code	Transaction ID : SA11AI.7638
Chicago	IL 60607	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer	Occupation	-
Girling Home Health	Vice President, Operations	
Receipt For:	Aggregate Year-to-Date ▼	]
Primary General		
Other (specify) ▼	1400.00	
SURTOTAL of Receipts This Page (entions	I)	225.00
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89 OF 197 Use separate schedule(s) for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Lakishia Lanette Jawdjee Date of Receipt Mailing Address 5735 Tioger Lilly Way 2011 12 15 City State Zip Code Transaction ID: SA11AI.7397 TX Houston 77085 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Regional Director Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lakishia Lanette Jawdjee Date of Receipt Mailing Address 5735 Tioger Lilly Way 12 30 2011 City State Zip Code Transaction ID: SA11AI.7639 TX Houston 77085 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation Girling Community Care Regional Director Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Tammy Johnson Date of Receipt Mailing Address 2869 Pilgrim Ln 20 12 2011 City State Zip Code Transaction ID: SA11AI.7802 TX Lorena 76655 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Administrator TRISUN Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 535.00 Other (specify)

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550.00

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Detailed Summary Page	X 1	1a	11b		11c	1	2	
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	d Statements may not be sold or used by any pers the name and address of any political committee t	
NAME OF COMMITTEE (In Full)		
Harden Healthcare LLC Feder	rai PAC	
Full Name (Last, First, Middle Initial)  Tammy Johnson		Date of Receipt
Mailing Address 2869 Pilgrim Ln	12 22 2011	
City	State Zip Code	Transaction ID : SA11AI.7510
Lorena	TX 76655	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	5.00
Name of Employer	Occupation	
TRISUN Healthcare	Administrator	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General		
Other (specify) ▼	540.00	
Full Name (Last, First, Middle Initial)  3. Cindy K Keim		Date of Receipt
Mailing Address 11512 Ballentine St		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	11 07 2011 Transaction ID : SA11AI 6751
Overland Park	KS 66210	Transaction ID : SA11AI.6751  Amount of Each Receipt this Period
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FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	]
Hospice Care of Kansas	Regional VP	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)		Date of Ressirt
Cindy K Keim  Mailing Address 11512 Pallanting St		Date of Receipt
Mailing Address 11512 Ballentine St		11 22 2011
City	State Zip Code	Transaction ID : SA11AI.7013
Overland Park	KS 66210	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	-
Hospice Care of Kansas	Regional VP	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (optional).		105.00
TOTAL This Period (last page this line number	er only)	

# SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 91 (check only one) X 11a 11b 11c

OF 197 Use separate schedule(s) ITEMIZED RECEIPTS for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Cindy K Keim Date of Receipt Mailing Address 11512 Ballentine St 07 2011 12 City State Zip Code Transaction ID: SA11AI.7268 KS Overland Park 66210 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Regional VP Hospice Care of Kansas Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Cindy K Keim Date of Receipt Mailing Address 11512 Ballentine St 2011 12 22 City State Zip Code Transaction ID: SA11AI.7514 Overland Park KS 66210 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Hospice Care of Kansas Regional VP Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) c. Diane Kenyon Date of Receipt Mailing Address 285 E Summit Dr 07 15 2011 City Zip Code State Transaction ID: SA11AI.5151 TX Wimberley 78676 Amount of Each Receipt this Period FEC ID number of contributing 125.00 С federal political committee. Name of Employer Occupation Senior Vice President, IT Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) 225.00 SUBTOTAL of Receipts This Page (optional).....

- 9

9

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

# SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 92 OF Use separate schedule(s) (check only one) X 11a 11b 11c

197

ITEMIZED RECEIPTS for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Diane Kenyon Date of Receipt Mailing Address 285 E Summit Dr 2011 07 29 City State Zip Code Transaction ID: SA11AI.5221 TX 78676 Wimberley Amount of Each Receipt this Period FEC ID number of contributing C 125.00 federal political committee. Name of Employer Occupation Senior Vice President, IT Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 1625.00 Other (specify) Full Name (Last, First, Middle Initial) B. Diane Kenyon Date of Receipt Mailing Address 285 E Summit Dr 08 15 2011 City State Zip Code Transaction ID: SA11AI.5355 TX Wimberley 78676 Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Name of Employer Occupation Harden Healthcare Services Senior Vice President, IT Receipt For: Aggregate Year-to-Date ▼ Primary General 1750.00 Other (specify) Full Name (Last, First, Middle Initial) c. Diane Kenyon Date of Receipt Mailing Address 285 E Summit Dr 80 31 2011 City Zip Code State Transaction ID: SA11AI.5511 TX Wimberley 78676 Amount of Each Receipt this Period FEC ID number of contributing 125.00 С federal political committee. Name of Employer Occupation Senior Vice President, IT Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 1875.00 Other (specify) 375.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

FOR LINE NUMBER: PAGE 93 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Diane Kenyon Date of Receipt Mailing Address 285 E Summit Dr 2011 15 City State Zip Code Transaction ID: SA11AI.5819 TX 78676 Wimberley Amount of Each Receipt this Period FEC ID number of contributing C 125.00 federal political committee. Name of Employer Occupation Senior Vice President, IT Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Diane Kenyon Date of Receipt Mailing Address 285 E Summit Dr 09 30 2011 City State Zip Code Transaction ID: SA11AI.6121 TX Wimberley 78676 Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Name of Employer Occupation Harden Healthcare Services Senior Vice President, IT Receipt For: Aggregate Year-to-Date ▼ Primary General 2125.00 Other (specify) Full Name (Last, First, Middle Initial) c. Diane Kenyon Date of Receipt Mailing Address 285 E Summit Dr M = M 10 14 2011 City Zip Code State Transaction ID: SA11AI.6381 TX Wimberley 78676 Amount of Each Receipt this Period FEC ID number of contributing 125.00 С federal political committee. Name of Employer Occupation Senior Vice President, IT Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 2250.00 Other (specify) 375.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

### SCHEDULE A (FEC Form 3X) IT

FOR LINE NUMBER: PAGE 94 OF

EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	`	ck only o	ne) 11b 14	11c 15	12 16	17
ny information copied from such Reports and Statements may for commercial purposes, other than using the name and a	, , , ,				_		

Ar or NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Diane Kenyon Date of Receipt Mailing Address 285 E Summit Dr 10 31 2011 City State Zip Code Transaction ID: SA11AI.6640 TX Wimberley 78676 Amount of Each Receipt this Period FEC ID number of contributing C 125.00 federal political committee. Name of Employer Occupation Harden Healthcare Services Senior Vice President, IT Receipt For: Aggregate Year-to-Date ▼ Primary General 2375.00 Other (specify) Full Name (Last, First, Middle Initial) B. Diane Kenyon Date of Receipt Mailing Address 285 E Summit Dr 11 15 2011 City State Zip Code Transaction ID: SA11AI.6894 Wimberley TX 78676 Amount of Each Receipt this Period FEC ID number of contributing 125.00 federal political committee. Name of Employer Occupation Harden Healthcare Services Senior Vice President, IT Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Diane Kenyon Date of Receipt Mailing Address 285 E Summit Dr M M / 30 11 2011 Zip Code City State Transaction ID: SA11AI.7156 TX Wimberley 78676 Amount of Each Receipt this Period FEC ID number of contributing C 125.00 federal political committee. Name of Employer Occupation Senior Vice President, IT Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 2625.00 Other (specify) 375.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

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Any information copied from such Reports and Sor for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address of any political committee to				
NAME OF COMMITTEE (In Full)  Harden Healthcare LLC Federal	PAC				
/					
Full Name (Last, First, Middle Initial)  1. Diane Kenyon		Date of Receipt			
Mailing Address 285 E Summit Dr		12 15 _ 2011 _			
City	State Zip Code	Transaction ID : SA11AI.7404			
Wimberley	TX 78676	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	125.00			
Name of Employer	Occupation				
Harden Healthcare Services	Senior Vice President, IT				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General  Other (specify) ▼	2750.00				
Full Name (Last, First, Middle Initial)  Diane Kenyon		Date of Receipt			
Mailing Address 285 E Summit Dr		M M / D D / Y Y Y Y			
City	State Zip Code	12 30 2011 Transaction ID : \$41141.7645			
Wimberley	TX 78676	Transaction ID : SA11AI.7645  Amount of Each Receipt this Period			
FEC ID number of contributing					
federal political committee.	C	125.00			
Name of Employer	Occupation				
Harden Healthcare Services	Senior Vice President, IT				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General  Other (specify) ▼	2875.00				
Full Name (Last, First, Middle Initial)  C. Jay J Koeper		Date of Receipt			
Mailing Address 3216 E Gary Way		11 07 _2011 _			
City	State Zip Code	Transaction ID : SA11AI.6754			
Pheonix	AZ 85042	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	50.00			
Name of Employer	Occupation				
Voyager Hospice	coo				
Receipt For:	Receipt For: Aggregate Year-to-Date ▼				
Primary General					
Other (specify) ▼	250.00				
SUBTOTAL of Receipts This Page (optional)		300.00			
TOTAL This Period (last page this line number of	only)				

FOR LINE NUMBER: PAGE 96 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Jay J Koeper Date of Receipt Mailing Address 3216 E Gary Way 2011 11 22 City State Zip Code Transaction ID: SA11AI.7015 Pheonix ΑZ 85042 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation COO Voyager Hospice Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jay J Koeper Date of Receipt Mailing Address 3216 E Gary Way 12 07 2011 City State Zip Code Transaction ID: SA11AI.7270 ΑZ Pheonix 85042 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Voyager Hospice COO Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kimberly A Layton Date of Receipt Mailing Address 9513 Prescott Drive 07 15 2011 City State Zip Code Transaction ID: SA11AI.5154 TX Austin 78748 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation President, Leadership Development Inst Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 1300.00 Other (specify) 200.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

FOR LINE NUMBER: PAGE 97 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Kimberly A Layton Date of Receipt Mailing Address 9513 Prescott Drive 2011 07 29 City State Zip Code Transaction ID: SA11AI.5225 TX 78748 Austin Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Harden Healthcare President, Leadership Development Inst Receipt For: Aggregate Year-to-Date ▼ Primary General 1400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kimberly A Layton Date of Receipt Mailing Address 9513 Prescott Drive 80 15 2011 City State Zip Code Transaction ID: SA11AI.5362 TX Austin 78748 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Harden Healthcare President, Leadership Development Inst Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kimberly A Layton Date of Receipt Mailing Address 9513 Prescott Drive 80 31 2011 City Zip Code State Transaction ID: SA11AI.5516 TX Austin 78748 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation President, Leadership Development Inst Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 1600.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

9

FOR LINE NUMBER: PAGE 98 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Kimberly A Layton Date of Receipt Mailing Address 9513 Prescott Drive 15 2011 09 City State Zip Code Transaction ID: SA11AI.5828 TX 78748 Austin Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Harden Healthcare President, Leadership Development Inst Receipt For: Aggregate Year-to-Date ▼ Primary General 1700.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kimberly A Layton Date of Receipt Mailing Address 9513 Prescott Drive 09 30 2011 City State Zip Code Transaction ID: SA11AI.6128 TX Austin 78748 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Harden Healthcare President, Leadership Development Inst Receipt For: Aggregate Year-to-Date ▼ Primary General 1800.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kimberly A Layton Date of Receipt Mailing Address 9513 Prescott Drive 10 14 2011 City Zip Code State Transaction ID: SA11AI.6388 TX Austin 78748 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation President, Leadership Development Inst Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 1900.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 99 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

197

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Kimberly A Layton Date of Receipt Mailing Address 9513 Prescott Drive 2011 10 31 City State Zip Code Transaction ID: SA11AI.6647 TX 78748 Austin Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Harden Healthcare President, Leadership Development Inst Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kimberly A Layton Date of Receipt Mailing Address 9513 Prescott Drive 11 15 2011 City State Zip Code Transaction ID: SA11AI.6901 TX Austin 78748 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Harden Healthcare President, Leadership Development Inst Receipt For: Aggregate Year-to-Date ▼ Primary General 2100.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kimberly A Layton Date of Receipt Mailing Address 9513 Prescott Drive 30 11 2011 City Zip Code State Transaction ID: SA11AI.7163 TX Austin 78748 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation President, Leadership Development Inst Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 2200.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

9

FOR LINE NUMBER: PAGE 100 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Kimberly A Layton Date of Receipt Mailing Address 9513 Prescott Drive 2011 12 15 City State Zip Code Transaction ID: SA11AI.7411 TX 78748 Austin Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Harden Healthcare President, Leadership Development Inst Receipt For: Aggregate Year-to-Date ▼ Primary General 2300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kimberly A Layton Date of Receipt Mailing Address 9513 Prescott Drive 12 30 2011 City State Zip Code Transaction ID: SA11AI.7651 TX Austin 78748 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Harden Healthcare President, Leadership Development Inst Receipt For: Aggregate Year-to-Date ▼ Primary General 2400.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** George Ledbetter Date of Receipt Mailing Address 1620 Elderhill Road 07 15 2011 City State Zip Code Transaction ID: SA11AI.5155 TX Driftwood 78619 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Girling Community Care General Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) 250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 101 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) George Ledbetter Date of Receipt Mailing Address 1620 Elderhill Road 07 2011 29 City State Zip Code Transaction ID: SA11AI.5226 TX Driftwood 78619 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Girling Community Care General Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) B. George Ledbetter Date of Receipt Mailing Address 1620 Elderhill Road 80 15 2011 City State Zip Code Transaction ID: SA11AI.5363 Driftwood TX 78619 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Girling Community Care General Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** George Ledbetter Date of Receipt Mailing Address 1620 Elderhill Road 80 31 2011 City State Zip Code Transaction ID: SA11AI.5517 TX Driftwood 78619 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Girling Community Care General Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

FOR LINE NUMBER: PAGE 102 OF 197 Use separate schedule(s) (check only one) X 11a 11b 12 11c 14 13 15 16

for each category of the Detailed Summary Page 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) George Ledbetter Date of Receipt Mailing Address 1620 Elderhill Road 2011 09 15 City State Zip Code Transaction ID: SA11AI.5829 TX Driftwood 78619 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Girling Community Care General Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) Full Name (Last, First, Middle Initial) B. George Ledbetter Date of Receipt Mailing Address 1620 Elderhill Road 09 30 2011 City State Zip Code Transaction ID: SA11AI.6129 Driftwood TX 78619 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Girling Community Care General Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** George Ledbetter Date of Receipt Mailing Address 1620 Elderhill Road 10 14 2011 City State Zip Code Transaction ID: SA11AI.6389 TX Driftwood 78619 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Girling Community Care General Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 950.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

	FOR LINE	NUMBER:	: PAGE	= 103 OF
Use separate schedule(s)	(check only	y one)		
for each category of the Detailed Summary Page	X 11a	11b	11c	12
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197

	d Statements may not be sold or used by any persthe name and address of any political committee t	
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Fede	ral PAC	
Full Name (Last, First, Middle Initial)  George Ledbetter  Mailing Address 1620 Elderhill Road		Date of Receipt
City Driftwood	State Zip Code TX 78619	10 31 2011  Transaction ID : SA11AI.6648  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer  Girling Community Care  Receipt For:  Primary General  Other (specify) ▼	Occupation General Manager  Aggregate Year-to-Date ▼  1000.00	
Full Name (Last, First, Middle Initial)  George Ledbetter  Mailing Address 1620 Elderhill Road		Date of Receipt  11 15 2011
City Driftwood	State Zip Code TX 78619	Transaction ID : SA11AI.6902  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer Girling Community Care Receipt For:	Occupation General Manager	
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  1050.00	
Full Name (Last, First, Middle Initial)  Ceorge Ledbetter		Date of Receipt
Mailing Address 1620 Elderhill Road  City	State Zip Code	11 30 2011 Transaction ID : SA11AI.7164
Driftwood	TX 78619	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Girling Community Care	Occupation General Manager	-
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	150.00
TOTAL This Period (last page this line numb	er only)	

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197

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	y information copied from such Reports and Sta for commercial purposes, other than using the				for the purpose of soliciting contributions
$\rangle$	NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal	PAC			
١.	Full Name (Last, First, Middle Initial) George Ledbetter Mailing Address 1620 Elderhill Road				Date of Receipt
	City	State	Zip Code		12 15 2011 Transaction ID : SA11AI.7412
	Driftwood	TX	78619		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			50.00
	Name of Employer	Occupation			
	Girling Community Care	General Ma	nager		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1150.00	0	
3	Full Name (Last, First, Middle Initial) George Ledbetter		,		Date of Receipt
	Mailing Address 1620 Elderhill Road				12 30 2011
	City	State	Zip Code		Transaction ID : SA11AI.7652
	Driftwood	TX	78619		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			50.00
	Name of Employer Girling Community Care	Occupation			
	Receipt For:	General Mai			
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1200.00	0	
).	Full Name (Last, First, Middle Initial) Lewis W (Wesley) Little				Date of Receipt
	Mailing Address 901 W 9th St #316				07 15 2011
	City Austin	State TX	Zip Code 78703		Transaction ID : SA11AI.5156  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С			20.00
	Name of Employer	Occupation			
	Harden Healthcare	Governmen	t Relations		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼		
	Other (specify) ▼		220.00		
S	UBTOTAL of Receipts This Page (optional)			···· <b>&gt;</b>	120.00
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FOR LINE NUMBER: PAGE 105 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Lewis W (Wesley) Little Date of Receipt Mailing Address 901 W 9th St #316 2011 07 29 City State Zip Code Transaction ID: SA11AI.5227 TX 78703 Austin Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer Occupation Harden Healthcare Government Relations Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lewis W (Wesley) Little Date of Receipt Mailing Address 901 W 9th St #316 08 15 2011 City State Zip Code Transaction ID: SA11AI.5364 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Harden Healthcare Government Relations Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) Full Name (Last, First, Middle Initial) c. Lewis W (Wesley) Little Date of Receipt Mailing Address 901 W 9th St #316 80 31 2011 City Zip Code State Transaction ID: SA11AI.5518 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation Government Relations Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 280.00 Other (specify) 60.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE NUMBER:	PAGE 106 OF 197
Use separate schedule(s)	(check only one)	
for each category of the Detailed Summary Page	X 11a 11b 1	l1c 12
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Any information copied from such Reports and a or for commercial purposes, other than using the	Statements may not be sold or used by any persi- e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federa		
Full Name (Last, First, Middle Initial) Lewis W (Wesley) Little  Mailing Address 901 W 9th St #316		Date of Receipt
waining Address 901 W 9th St #316		09 15 2011
City	State Zip Code	Transaction ID: SA11AI.5832
Austin	TX 78703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	1
Harden Healthcare	Government Relations	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	300.00	
Full Name (Last, First, Middle Initial)  Lewis W (Wesley) Little		Date of Receipt
Mailing Address 901 W 9th St #316		09 30 / Y = Y = Y = Y
City	State Zip Code TX 78703	Transaction ID : SA11AI.6131
Austin	TX 78703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	
Harden Healthcare	Government Relations	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	320.00	
Full Name (Last, First, Middle Initial)  C. Lewis W (Wesley) Little		Date of Receipt
Mailing Address 901 W 9th St #316		10 14 2011
City Austin	State Zip Code TX 78703	Transaction ID : SA11AI.6391  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	
Harden Healthcare	Government Relations	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	340.00	
SUBTOTAL of Receipts This Page (optional)		60.00
TOTAL This Period (last page this line number	<u>^</u>	

FOR LINE NUMBER: PAGE 107 OF 197 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Lewis W (Wesley) Little Date of Receipt Mailing Address 901 W 9th St #316 2011 10 31 City State Zip Code Transaction ID: SA11AI.6650 TX 78703 Austin Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer Occupation Harden Healthcare Government Relations Receipt For: Aggregate Year-to-Date ▼ Primary General 360.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lewis W (Wesley) Little Date of Receipt Mailing Address 901 W 9th St #316 11 15 2011 City State Zip Code Transaction ID: SA11AI.6904 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Harden Healthcare Government Relations Receipt For: Aggregate Year-to-Date ▼ Primary General 380.00 Other (specify) Full Name (Last, First, Middle Initial) c. Lewis W (Wesley) Little Date of Receipt Mailing Address 901 W 9th St #316 30 11 2011 City Zip Code State Transaction ID: SA11AI.7166 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation Government Relations Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 60.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 108 OF 197 Use separate schedule(s) (check only one) X 11a 11b 11c 12

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Lewis W (Wesley) Little Date of Receipt Mailing Address 901 W 9th St #316 2011 12 15 City State Zip Code Transaction ID: SA11AI.7414 TX 78703 Austin Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer Occupation Harden Healthcare Government Relations Receipt For: Aggregate Year-to-Date ▼ Primary General 420.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lewis W (Wesley) Little Date of Receipt Mailing Address 901 W 9th St #316 12 30 2011 City State Zip Code Transaction ID: SA11AI.7654 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Harden Healthcare Government Relations Receipt For: Aggregate Year-to-Date ▼ Primary General 440.00 Other (specify) Full Name (Last, First, Middle Initial) c. Angelin C Lockhart Date of Receipt Mailing Address 3002 W 2nd Ave 11 10 2011 City Zip Code State Transaction ID: SA11AI.7871 TX Corsicana 75110 Amount of Each Receipt this Period FEC ID number of contributing 300.00 С federal political committee. Name of Employer Occupation Certified Occupational Therapist TRISUN Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 416.00 Other (specify) 340.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 109 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Angelin C Lockhart Date of Receipt Mailing Address 3002 W 2nd Ave 2011 11 22 City State Zip Code Transaction ID: SA11AI.7018 TX Corsicana 75110 Amount of Each Receipt this Period FEC ID number of contributing C 5.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Certified Occupational Therapist Receipt For: Aggregate Year-to-Date ▼ Primary General 421.00 Other (specify) Full Name (Last, First, Middle Initial) B. Angelin C Lockhart Date of Receipt Mailing Address 3002 W 2nd Ave 12 07 2011 City State Zip Code Transaction ID: SA11AI.7273 TX Corsicana 75110 Amount of Each Receipt this Period FEC ID number of contributing C 5.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Certified Occupational Therapist Receipt For: Aggregate Year-to-Date ▼ Primary General 426.00 Other (specify) Full Name (Last, First, Middle Initial) c. Angelin C Lockhart Date of Receipt Mailing Address 3002 W 2nd Ave 12 22 2011 City Zip Code State Transaction ID: SA11AI.7518 TX Corsicana 75110 Amount of Each Receipt this Period FEC ID number of contributing C 5.00 federal political committee. Name of Employer Occupation Certified Occupational Therapist TRISUN Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 431.00 Other (specify) 15.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	Statements may not be sold or used by any person e name and address of any political committee to	
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federa	al PAC	
Full Name (Last, First, Middle Initial)  A. Maria A MacKeil		Date of Receipt
Mailing Address 8820 Colberg Dr		07 15 2011
City	State Zip Code	Transaction ID : SA11AI.5157
Austin	TX 78749	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	
Harden Healthcare	Director of Internal Audit	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial)  Maria A MacKeil		Date of Receipt
Mailing Address 8820 Colberg Dr		07 29 2011
City	State Zip Code	Transaction ID : SA11AI.5228
Austin	TX 78749	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	
Harden Healthcare	Director of Internal Audit	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	325.00	
Full Name (Last, First, Middle Initial)  C. Maria A MacKeil		Date of Receipt
Mailing Address 8820 Colberg Dr		08 15 2011
City	State Zip Code	Transaction ID : SA11AI.5365
Austin	TX 78749	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	
Harden Healthcare	Director of Internal Audit	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
SUBTOTAL of Receipts This Page (optional)		75.00
TOTAL This Period (last page this line number	<u> </u>	

FOR LINE NUMBER: PAGE 111 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Maria A MacKeil Date of Receipt Mailing Address 8820 Colberg Dr 80 2011 31 City State Zip Code Transaction ID: SA11AI.5519 TX 78749 Austin Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Director of Internal Audit Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name (Last, First, Middle Initial) B. Maria A MacKeil Date of Receipt Mailing Address 8820 Colberg Dr 09 15 2011 City State Zip Code Transaction ID: SA11AI.5833 TX Austin 78749 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Harden Healthcare **Director of Internal Audit** Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) c. Maria A MacKeil Date of Receipt Mailing Address 8820 Colberg Dr 30 09 2011 City State Zip Code Transaction ID: SA11AI.6132 TX Austin 78749 Amount of Each Receipt this Period FEC ID number of contributing 75.00 С federal political committee. Name of Employer Occupation Director of Internal Audit Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 475.00 Other (specify) 125.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 112 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Maria A MacKeil Date of Receipt Mailing Address 8820 Colberg Dr 2011 10 City State Zip Code Transaction ID: SA11AI.6392 TX 78749 Austin Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Name of Employer Occupation Director of Internal Audit Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name (Last, First, Middle Initial) B. Maria A MacKeil Date of Receipt Mailing Address 8820 Colberg Dr 10 31 2011 City State Zip Code Transaction ID: SA11AI.6651 TX Austin 78749 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Harden Healthcare **Director of Internal Audit** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Maria A MacKeil Date of Receipt Mailing Address 8820 Colberg Dr 11 15 2011 City State Zip Code Transaction ID: SA11AI.6905 TX Austin 78749 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Director of Internal Audit Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) 175.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full) Harden Healthcare LLC Fede	ral PAC	
Full Name (Last, First, Middle Initial)  Maria A MacKeil  Mailing Address, 8820 Colbora Dr.		Date of Receipt
Mailing Address 8820 Colberg Dr		11 30 2011
City	State Zip Code	Transaction ID : SA11AI.7167
Austin	TX 78749	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	-
Harden Healthcare	Director of Internal Audit	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  700.00	
Full Name (Last, First, Middle Initial)  Maria A MacKeil  Mailing Address 8820 Colberg Dr		Date of Receipt
		12 15 2011
City	State Zip Code	Transaction ID : SA11AI.7415
Austin	TX 78749	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	1
Harden Healthcare	Director of Internal Audit	
Receipt For:    Primary   General	Aggregate Year-to-Date ▼	
Other (specify)	750.00	
Full Name (Last, First, Middle Initial)  C. Maria A MacKeil	<u>'</u>	Date of Receipt
Mailing Address 8820 Colberg Dr		12 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Austin	State Zip Code TX 78749	Transaction ID : SA11AI.7655  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	-
Harden Healthcare	Director of Internal Audit	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	800.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line numb	per only)	

FOR LINE NUMBER: PAGE 114 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Tonya Maldonado Date of Receipt Mailing Address 709 Speed Horse 01 2011 City State Zip Code Transaction ID: SA11AI.7729 TX Liberty Hill 78642 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Janet K Marks Date of Receipt Mailing Address 311 Pecan Hollow Dr 11 15 2011 City State Zip Code Transaction ID: SA11AI.7795 TX Coppell 75019 Amount of Each Receipt this Period FEC ID number of contributing 350.00 federal political committee. Name of Employer Occupation Winters Park Nursing & Rehab Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Mary Beth May Date of Receipt Mailing Address PO Box 112594 09 15 2011 City State Zip Code Transaction ID: SA11AI.7753 TX Carrollton 75011 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Indiv Attrib: MBM Consuting & Training Name of Employer Occupation MBM Consulting & Training Trainer Receipt For: Aggregate Year-to-Date ▼ [MEMO ITEM] Primary General Other (specify) 850.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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9

## SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 115 OF

Τ	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check	a [	— ´	1b	11c	12	
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$\overline{\ \ }$	NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal	PAC								
Δ.	Full Name (Last, First, Middle Initial) Cathy McKinny Mailing Address 811 Rowe St  City Rockport  FEC ID number of contributing federal political committee.	State TX	Zip Code 78382	1 Tra	1 ansa	ction	10 1D:	SA11AI	nis Per	1
	Name of Employer  TRISUN Healthcare  Receipt For:  Primary General  Other (specify) ▼	Occupation Administrate Aggregate	or Year-to-Date ▼ 331.00							
3.	Full Name (Last, First, Middle Initial)  Cathy McKinny  Mailing Address 811 Rowe St  City  Rockport  FEC ID number of contributing federal political committee.  Name of Employer  TRISUN Healthcare  Receipt For:	State TX  C  Occupation Administrato	*	1 Tra	1 ansa	ction	22 1 ID : S	6A11AI.		
 C.	Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Cathy McKinny	Aggregate	Year-to-Date ▼ 336.00	Date	e of	Rece	eipt			
	Mailing Address 811 Rowe St  City Rockport  FEC ID number of contributing federal political committee.  Name of Employer TRISUN Healthcare Receipt For:  Primary General Other (specify) ▼	State TX  C  Occupation Administrator Aggregate	Zip Code 78382 or Year-to-Date ▼	1 Tra	2 ansa	ction	07 n ID : \$	SA11AI eceipt th		1
S	UBTOTAL of Receipts This Page (optional)								3	316.00
Т	OTAL This Period (last page this line number o	nly)						7		

# SCHEDULE A (FEC Form 3X)

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TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X   11a
Any information copied from such Reports and State or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal	PAC	
Full Name (Last, First, Middle Initial) Cathy McKinny  Mailing Address 811 Rowe St  City Rockport  FEC ID number of contributing federal political committee.  Name of Employer TRISUN Healthcare Receipt For: Primary Other (specify)	State Zip Code TX 78382  C  Occupation Administrator  Aggregate Year-to-Date ▼  346.00	Date of Receipt  12 22 2011  Transaction ID : SA11AI.7521  Amount of Each Receipt this Period  5.00
Full Name (Last, First, Middle Initial)  Jason T Moler  Mailing Address 9910 Grand Summitt Blvd  City  Dripping Springs  FEC ID number of contributing federal political committee.  Name of Employer  Voyager Hospice  Receipt For:  Primary  General  Other (specify)	State Zip Code TX 78620  C  Occupation Marketing  Aggregate Year-to-Date ▼	Date of Receipt  12 07 2011  Transaction ID : SA11AI.7277  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial)  Jason T Moler  Mailing Address 9910 Grand Summitt Blvd  City Dripping Springs  FEC ID number of contributing federal political committee.  Name of Employer  Voyager Hospice  Receipt For: Primary General Other (specify)	State Zip Code TX 78620  C  Occupation Marketing  Aggregate Year-to-Date ▼	Date of Receipt  12 22 2011  Transaction ID : SA11AI.7522  Amount of Each Receipt this Period  25.00
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number of	·	55.00

FOR LINE NUMBER: PAGE 117 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Laura A Moore Date of Receipt Mailing Address 1314 Pigeon View St 01 2011 City State Zip Code Transaction ID: SA11AI.7723 TX Round Rock 78664 Amount of Each Receipt this Period FEC ID number of contributing C 510.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Admin Receipt For: Aggregate Year-to-Date ▼ Primary General 510.00 Other (specify) Full Name (Last, First, Middle Initial) B. Deborah Morgan Date of Receipt Mailing Address 5404 Agatha Circle 07 15 2011 City State Zip Code Transaction ID: SA11AI.5160 TX Austin 78724 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Harden Healthcare Services **PMO Director** Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Deborah Morgan Date of Receipt Mailing Address 5404 Agatha Circle 29 07 2011 City State Zip Code Transaction ID: SA11AI.5229 TX Austin 78724 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation **PMO Director** Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) 610.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 118 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Deborah Morgan Date of Receipt Mailing Address 5404 Agatha Circle 80 2011 15 City State Zip Code Transaction ID: SA11AI.5369 TX Austin 78724 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation PMO Director Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) B. Deborah Morgan Date of Receipt Mailing Address 5404 Agatha Circle 08 31 2011 City State Zip Code Transaction ID: SA11AI.5524 TX Austin 78724 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Harden Healthcare Services **PMO Director** Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) c. Deborah Morgan Date of Receipt Mailing Address 5404 Agatha Circle 09 15 2011 City State Zip Code Transaction ID: SA11AI.5843 TX Austin 78724 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation **PMO Director** Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 119 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

197

Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Deborah Morgan Date of Receipt Mailing Address 5404 Agatha Circle 30 2011 09 City State Zip Code Transaction ID: SA11AI.6139 TX Austin 78724 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation PMO Director Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) Full Name (Last, First, Middle Initial) B. Deborah Morgan Date of Receipt Mailing Address 5404 Agatha Circle 10 14 2011 City State Zip Code Transaction ID: SA11AI.6399 TX Austin 78724 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Harden Healthcare Services **PMO Director** Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) Full Name (Last, First, Middle Initial) c. Deborah Morgan Date of Receipt Mailing Address 5404 Agatha Circle 10 31 2011 City State Zip Code Transaction ID: SA11AI.6657 TX Austin 78724 Amount of Each Receipt this Period FEC ID number of contributing 12.50 С federal political committee. Name of Employer Occupation **PMO Director** Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 912.50 Other (specify) 112.50 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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

PAGE 120 OF 197 Use separate schedule(s) for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Deborah Morgan Date of Receipt Mailing Address 5404 Agatha Circle 2011 11 15 City State Zip Code Transaction ID: SA11AI.6911 TX Austin 78724 Amount of Each Receipt this Period FEC ID number of contributing C 12.50 federal political committee. Name of Employer Occupation Harden Healthcare Services PMO Director Receipt For: Aggregate Year-to-Date ▼ Primary General 925.00 Other (specify) Full Name (Last, First, Middle Initial) B. Deborah Morgan Date of Receipt Mailing Address 5404 Agatha Circle 30 11 2011 City State Zip Code Transaction ID: SA11AI.7173 TX Austin 78724 Amount of Each Receipt this Period FEC ID number of contributing C 12.50 federal political committee. Name of Employer Occupation Harden Healthcare Services **PMO Director** Receipt For: Aggregate Year-to-Date ▼ Primary General 937.50 Other (specify) Full Name (Last, First, Middle Initial) c. Deborah Morgan Date of Receipt Mailing Address 5404 Agatha Circle M M / 12 15 2011 City State Zip Code Transaction ID: SA11AI.7421 TX Austin 78724 Amount of Each Receipt this Period FEC ID number of contributing C 12.50 federal political committee. Name of Employer Occupation **PMO Director** Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General

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Other (specify)

FOR LINE NUMBER: PAGE 121 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Deborah Morgan Date of Receipt Mailing Address 5404 Agatha Circle 30 2011 12 City State Zip Code Transaction ID: SA11AI.7661 TX Austin 78724 Amount of Each Receipt this Period FEC ID number of contributing C 12.50 federal political committee. Name of Employer Occupation PMO Director Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 962.50 Other (specify) Full Name (Last, First, Middle Initial) **B.** Trina L Moskovitz Date of Receipt Mailing Address 3809 Spicewood Springs Rd Apt 142 20 12 2011 City State Zip Code Transaction ID: SA11AI.7466 TX Austin 78759 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation Girling Home Health Accounts Receivable Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) Full Name (Last, First, Middle Initial) c. Trina L Moskovitz Date of Receipt Mailing Address 3809 Spicewood Springs Rd Apt 142 30 12 2011 City State Zip Code Transaction ID: SA11AI.7662 TX Austin 78759 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation Girling Home Health Accounts Receivable Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 62.50 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 122 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

197

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Joseph Odom Date of Receipt Mailing Address 13020 Humphrey Drive 2011 07 15 City State Zip Code Transaction ID: SA11AI.5161 TX Austin 78729 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Harden Healthcare Services IT Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Joseph Odom Date of Receipt Mailing Address 13020 Humphrey Drive 07 29 2011 City State Zip Code Transaction ID: SA11AI.5230 TX Austin 78729 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Harden Healthcare Services IT Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) Full Name (Last, First, Middle Initial) c. Joseph Odom Date of Receipt Mailing Address 13020 Humphrey Drive 80 15 2011 City State Zip Code Transaction ID: SA11AI.5374 TX Austin 78729 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Harden Healthcare Services IT Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 123 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Joseph Odom Date of Receipt Mailing Address 13020 Humphrey Drive 2011 31 City State Zip Code Transaction ID: SA11AI.5531 TX Austin 78729 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Harden Healthcare Services IT Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Joseph Odom Date of Receipt Mailing Address 13020 Humphrey Drive 09 15 2011 City State Zip Code Transaction ID: SA11AI.5852 TX Austin 78729 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Harden Healthcare Services IT Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name (Last, First, Middle Initial) c. Joseph Odom Date of Receipt Mailing Address 13020 Humphrey Drive 30 09 2011 City State Zip Code Transaction ID: SA11AI.6146 TX Austin 78729 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Harden Healthcare Services IT Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

## SCHEDULE A (FEC Form 3X) 17

FOR LINE NUMBER: PAGE 124 OF

ΙT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check on	11b 14	11c	12	17
Ar or	y information copied from such Reports and for commercial purposes, other than using th	Statements made and a	ay not be sold or used by any paddress of any political committee	erson for the	purpose of	soliciting	contributions	
$\rangle$	NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federa	al PAC						
Α.	Full Name (Last, First, Middle Initial) Joseph Odom  Mailing Address 13020 Humphrey Drive				of Receipt	/ Y		
				10	14	J L	2011	
	City Austin	State TX	Zip Code 78729		saction ID:			
	FEC ID number of contributing federal political committee.	С			n or Laon I	occipi an	50.00	
	Name of Employer	Occupation	1	$\dashv$				
	Harden Healthcare Services	IT Manage	r					
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 900.00					
- B	Full Name (Last, First, Middle Initial) Joseph Odom	<u> </u>		Date (	of Receipt			
υ.	Mailing Address 13020 Humphrey Drive			10		/ Y	2011	
	City	State	Zip Code	_	saction ID :	SA11AI.		
	Austin	TX	78729	Amour	nt of Each R	eceipt th	is Period	
	FEC ID number of contributing federal political committee.	С			7	7	50.00	
	Name of Employer Harden Healthcare Services	Occupation IT Manager						
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼  950.00					
— С.	Full Name (Last, First, Middle Initial) Joseph Odom			Date of	of Receipt			
	Mailing Address 13020 Humphrey Drive			M N	M / D D	/ Y	2011	
	City Austin	State TX	Zip Code 78729		saction ID :			
		17	10125	Amour	nt of Each R	eceipt th	is Period	_
	FEC ID number of contributing federal political committee.	C		L		7	50.00	┙
	Name of Employer	Occupation						
	Harden Healthcare Services Receipt For:	IT Manage						
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00					
s	UBTOTAL of Receipts This Page (optional)				1 1	- 1	150.00	Ī
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FOR LINE NUMBER: PAGE 125 OF 197 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Victoria Palm Date of Receipt Mailing Address 3507 Abrazo 2011 07 15 City Zip Code State Transaction ID: SA11AI.5162 TX 78247 San Antonio Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 325.00 Other (specify) Full Name (Last, First, Middle Initial) B. Victoria Palm Date of Receipt Mailing Address 3507 Abrazo 07 29 2011 City State Zip Code Transaction ID: SA11AI.5231 TX San Antonio 78247 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) c. Victoria Palm Date of Receipt Mailing Address 3507 Abrazo 80 15 2011 City Zip Code State Transaction ID: SA11AI.5375 TX San Antonio 78247 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation Regional Vice President TRISUN Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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Detailed Summary Page	X	11a		11b		11c		12	_	_
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or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Harden Healthcare LLC Fed	ng the name and address of any political committee	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Victoria Palm Mailing Address 3507 Abrazo  City San Antonio  FEC ID number of contributing federal political committee.  Name of Employer TRISUN Healthcare	State Zip Code TX 78247  C  Occupation Regional Vice President	Date of Receipt  08 31 2011  Transaction ID: SA11AI.5532  Amount of Each Receipt this Period  25.00
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial)  Notice Palm  Mailing Address 3507 Abrazo		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City San Antonio  FEC ID number of contributing federal political committee.	State Zip Code TX 78247	Transaction ID : SA11AI.5855  Amount of Each Receipt this Period  25.00
Name of Employer TRISUN Healthcare Receipt For: Primary General	Occupation Regional Vice President  Aggregate Year-to-Date ▼	
Other (specify) ▼  Full Name (Last, First, Middle Initial)  Victoria Palm  Mailing Address 3507 Abrazo	425.00	Date of Receipt
City San Antonio  FEC ID number of contributing federal political committee.  Name of Employer  TRISUN Healthcare  Receipt For:  Primary General Other (specify)   Other	State Zip Code TX 78247  C  Occupation Regional Vice President  Aggregate Year-to-Date ▼  450.00	Transaction ID : SA11Al.6148  Amount of Each Receipt this Period  25.00
SUBTOTAL of Receipts This Page (options	al)	75.00
TOTAL This Period (last page this line nur	<u> </u>	

FOR LINE NUMBER: PAGE 127 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Victoria Palm Date of Receipt Mailing Address 3507 Abrazo 2011 10 City Zip Code State Transaction ID: SA11AI.6408 TX 78247 San Antonio Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 475.00 Other (specify) Full Name (Last, First, Middle Initial) B. Victoria Palm Date of Receipt Mailing Address 3507 Abrazo 10 31 2011 City State Zip Code Transaction ID: SA11AI.6666 TX San Antonio 78247 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Victoria Palm Date of Receipt Mailing Address 3507 Abrazo 11 15 2011 City Zip Code State Transaction ID: SA11AI.6920 TX San Antonio 78247 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation Regional Vice President TRISUN Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 525.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 128 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

197

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Victoria Palm Date of Receipt Mailing Address 3507 Abrazo 30 2011 11 City Zip Code State Transaction ID: SA11AI.7181 TX 78247 San Antonio Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name (Last, First, Middle Initial) B. Victoria Palm Date of Receipt Mailing Address 3507 Abrazo 12 15 2011 City State Zip Code Transaction ID: SA11AI.7428 TX San Antonio 78247 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 575.00 Other (specify) Full Name (Last, First, Middle Initial) c. Victoria Palm Date of Receipt Mailing Address 3507 Abrazo M M / 30 12 2011 City Zip Code State Transaction ID: SA11AI.7669 TX San Antonio 78247 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation Regional Vice President TRISUN Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 129 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

197

Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) William B Parrish Date of Receipt Mailing Address 3200 Wild Canyon Loop 80 2011 15 City State Zip Code Transaction ID: SA11AI.5376 TX Austin 78732 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Vice President of Finance Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. William B Parrish Date of Receipt Mailing Address 3200 Wild Canyon Loop 80 31 2011 City State Zip Code Transaction ID: SA11AI.5533 TX Austin 78732 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Girling Home Health Vice President of Finance Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. William B Parrish Date of Receipt Mailing Address 3200 Wild Canyon Loop 09 15 2011 City State Zip Code Transaction ID: SA11AI.5856 TX Austin 78732 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Vice President of Finance Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 130 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) William B Parrish Date of Receipt Mailing Address 3200 Wild Canyon Loop 30 2011 09 City State Zip Code Transaction ID: SA11AI.6149 TX Austin 78732 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Vice President of Finance Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. William B Parrish Date of Receipt Mailing Address 3200 Wild Canyon Loop 10 14 2011 City State Zip Code Transaction ID: SA11AI.6409 TX Austin 78732 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Girling Home Health Vice President of Finance Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name (Last, First, Middle Initial) c. William B Parrish Date of Receipt Mailing Address 3200 Wild Canyon Loop 10 31 2011 City State Zip Code Transaction ID: SA11AI.6667 TX Austin 78732 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Vice President of Finance Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 131 OF (check only one)

X 11a 11b 11c 12

13 14 15 16

197

Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) William B Parrish Date of Receipt Mailing Address 3200 Wild Canyon Loop 2011 11 15 City State Zip Code Transaction ID: SA11AI.6921 TX Austin 78732 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Vice President of Finance Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name (Last, First, Middle Initial) B. William B Parrish Date of Receipt Mailing Address 3200 Wild Canyon Loop 11 30 2011 City State Zip Code Transaction ID: SA11AI.7182 TX Austin 78732 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Girling Home Health Vice President of Finance Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. William B Parrish Date of Receipt Mailing Address 3200 Wild Canyon Loop M = M 12 15 2011 City State Zip Code Transaction ID: SA11AI.7429 TX Austin 78732 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Vice President of Finance Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 132 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) William B Parrish Date of Receipt Mailing Address 3200 Wild Canyon Loop 30 2011 12 City State Zip Code Transaction ID: SA11AI.7670 TX Austin 78732 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Vice President of Finance Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mark Pinckard Date of Receipt Mailing Address 2913 Richfield Landing 07 15 2011 City State Zip Code Transaction ID: SA11AI.5164 Pflugerville TX 78660 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Girling Community Care Financial Analyst Receipt For: Aggregate Year-to-Date ▼ Primary General 325.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mark Pinckard Date of Receipt Mailing Address 2913 Richfield Landing 29 07 2011 City State Zip Code Transaction ID: SA11AI.5233 TX Pflugerville 78660 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation Girling Community Care Financial Analyst Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 100.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

## SCHEDULE A (FEC Form 3X) IT

FOR LINE NUMBER: PAGE 133 OF Use separate schedule(s)

197

EMIZED RECEIPTS	for each category of the Detailed Summary Page	`	11a 13	11b 14		11c	12 16		]17
ny information copied from such Reports and Statements ma	ay not be sold or used by any pe	rson fo	or the pu	urpose of	sol	iciting	contril	outions	;

Ar 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Mark Pinckard Date of Receipt Mailing Address 2913 Richfield Landing 2011 15 City State Zip Code Transaction ID: SA11AI.5377 TX 78660 Pflugerville Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Financial Analyst Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mark Pinckard Date of Receipt Mailing Address 2913 Richfield Landing 80 31 2011 City State Zip Code Transaction ID: SA11AI.5536 Pflugerville TX 78660 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Girling Community Care Financial Analyst Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mark Pinckard Date of Receipt Mailing Address 2913 Richfield Landing 09 15 2011 City State Zip Code Transaction ID: SA11AI.5858 TX Pflugerville 78660 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Financial Analyst Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General

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425.00

Other (specify)

FOR LINE NUMBER: PAGE 134 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Mark Pinckard Date of Receipt Mailing Address 2913 Richfield Landing 30 2011 City State Zip Code Transaction ID: SA11AI.6151 TX 78660 Pflugerville Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Girling Community Care Financial Analyst Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mark Pinckard Date of Receipt Mailing Address 2913 Richfield Landing 10 2011 14 City State Zip Code Transaction ID: SA11AI.6411 Pflugerville TX 78660 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation Girling Community Care Financial Analyst Receipt For: Aggregate Year-to-Date ▼ Primary General 475.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mark Pinckard Date of Receipt Mailing Address 2913 Richfield Landing 10 31 2011 City State Zip Code Transaction ID: SA11AI.6669 TX Pflugerville 78660 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation Girling Community Care Financial Analyst Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

9

FOR LINE NUMBER: PAGE 135 OF Use separate schedule(s) (check only one) X 11a 11b 11c

197

for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Mark Pinckard Date of Receipt Mailing Address 2913 Richfield Landing 2011 11 15 City State Zip Code Transaction ID: SA11AI.6923 TX 78660 Pflugerville Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Girling Community Care Financial Analyst Receipt For: Aggregate Year-to-Date ▼ Primary General 525.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mark Pinckard Date of Receipt Mailing Address 2913 Richfield Landing 2011 11 30 City State Zip Code Transaction ID: SA11AI.7184 Pflugerville TX 78660 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation Girling Community Care Financial Analyst Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mark Pinckard Date of Receipt Mailing Address 2913 Richfield Landing 12 15 2011 City State Zip Code Transaction ID: SA11AI.7431 TX Pflugerville 78660 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation Girling Community Care Financial Analyst Receipt For: Aggregate Year-to-Date ▼ Primary General 575.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

# SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 136 OF

TEMIZED RECEIPTS	for each category of the  Detailed Summary Page	(check only one)
Any information copied from such Reports and or for commercial purposes, other than using the		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federa	al PAC	
Full Name (Last, First, Middle Initial)  Mark Pinckard  Mailing Address 2913 Richfield Landing	Charles Tim Conde	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Pflugerville  FEC ID number of contributing federal political committee.	State Zip Code TX 78660	Transaction ID : SA11AI.7672  Amount of Each Receipt this Period  25.00
Name of Employer  Girling Community Care  Receipt For:  Primary General  Other (specify) ▼	Occupation Financial Analyst  Aggregate Year-to-Date ▼  600.00	
Full Name (Last, First, Middle Initial)  Robin A Polk  Mailing Address 201 CR 326A		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Rosebud  FEC ID number of contributing federal political committee.  Name of Employer Girling Community Care  Receipt For: Primary  General	State Zip Code TX 76570  C  Occupation Regional Manager, Compliance  Aggregate Year-to-Date ▼	Transaction ID : SA11AI.5165  Amount of Each Receipt this Period  25.00
Other (specify) ▼  Full Name (Last, First, Middle Initial)  Robin A Polk  Mailing Address 201 CR 326A	325.00	Date of Receipt
City Rosebud  FEC ID number of contributing federal political committee.  Name of Employer Girling Community Care Receipt For:  Primary General Other (specify)	State Zip Code TX 76570  C  Occupation Regional Manager, Compliance  Aggregate Year-to-Date ▼  350.00	7 29 2011 Transaction ID : SA11AI.5234 Amount of Each Receipt this Period 25.00
SUBTOTAL of Receipts This Page (optional)	·····	75.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 137 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Robin A Polk Date of Receipt Mailing Address 201 CR 326A 2011 08 15 City State Zip Code Transaction ID: SA11AI.5378 TX Rosebud 76570 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Regional Manager, Compliance Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name (Last, First, Middle Initial) B. Robin A Polk Date of Receipt Mailing Address 201 CR 326A 08 31 2011 City State Zip Code Transaction ID: SA11AI.5537 Rosebud TX 76570 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation Girling Community Care Regional Manager, Compliance Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) c. Robin A Polk Date of Receipt Mailing Address 201 CR 326A 09 15 2011 City Zip Code State Transaction ID: SA11AI.5861 TX Rosebud 76570 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation Girling Community Care Regional Manager, Compliance Receipt For: Aggregate Year-to-Date ▼ Primary General 425.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 138 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

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FOR LINE NUMBER: PAGE 139 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

197

Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Robin A Polk Date of Receipt Mailing Address 201 CR 326A 2011 11 15 City State Zip Code Transaction ID: SA11AI.6925 TX Rosebud 76570 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Regional Manager, Compliance Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 525.00 Other (specify) Full Name (Last, First, Middle Initial) B. Robin A Polk Date of Receipt Mailing Address 201 CR 326A 11 30 2011 City State Zip Code Transaction ID: SA11AI.7186 Rosebud TX 76570 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation Girling Community Care Regional Manager, Compliance Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name (Last, First, Middle Initial) c. Robin A Polk Date of Receipt Mailing Address 201 CR 326A M = M 12 15 2011 City Zip Code State Transaction ID: SA11AI.7433 TX Rosebud 76570 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation Girling Community Care Regional Manager, Compliance Receipt For: Aggregate Year-to-Date ▼ Primary General 575.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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

FOR LINE NUMBER:			PAGE	: 1	40 OF	197			
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		13		14		15		16	17

	Statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Feder	ral PAC	
Full Name (Last, First, Middle Initial)  A. Robin A Polk  Mailing Address 201 CR 326A  City  Received	State Zip Code TX 76570	Date of Receipt  12 30 2011  Transaction ID: SA11AI.7674
Rosebud  FEC ID number of contributing federal political committee.  Name of Employer  Girling Community Care  Receipt For:  Primary General  Other (specify)	C Occupation Regional Manager, Compliance  Aggregate Year-to-Date ▼ 600.00	Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial)  Shanni F Ponce  Mailing Address 2818 Fountain Grove Cove  City  Round Rock	State Zip Code TX 78665	Date of Receipt  07 07 2011  Transaction ID : SA11Al.5107  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer MBS Rehab  Receipt For:  Primary General Other (specify) ▼	Occupation Senior Vice President  Aggregate Year-to-Date ▼  520.00	Amount of Each Receipt this Period 40.00
Full Name (Last, First, Middle Initial) Shanni F Ponce  Mailing Address 2818 Fountain Grove Cove  City Round Rock  FEC ID number of contributing federal political committee.  Name of Employer  MBS Rehab  Receipt For:  Primary General Other (specify)	State Zip Code TX 78665  C  Occupation Senior Vice President  Aggregate Year-to-Date ▼  560.00	Date of Receipt  07
SUBTOTAL of Receipts This Page (optional).	<b>&gt;</b>	105.00
TOTAL This Period (last page this line number	er only)	

## SCHEDULE A (FEC Form 3X) IT

FOR LINE NUMBER: PAGE 141 OF 197

EMIZED RECEIPTS	for each category of the Detailed Summary Page	`	11a 13	11b		11c 15		12 16	1	17
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Ar 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Shanni F Ponce Date of Receipt Mailing Address 2818 Fountain Grove Cove 80 2011 City State Zip Code Transaction ID: SA11AI.5268 TX Round Rock 78665 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation MBS Rehab Senior Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Shanni F Ponce Date of Receipt Mailing Address 2818 Fountain Grove Cove 80 22 2011 City State Zip Code Transaction ID: SA11AI.5423 Round Rock TX 78665 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation MBS Rehab Senior Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 640.00 Other (specify) C.

, ,	
	Date of Receipt
	09 07 2011
State Zip Code	Transaction ID : SA11AI.5654
TX 78665	Amount of Each Receipt this Period
C	40.00
Occupation	
Senior Vice President	
Aggregate Year-to-Date ▼ 680.00	
	TX 78665  C Occupation Senior Vice President Aggregate Year-to-Date ▼

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

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

120.00

FOR LINE NUMBER: PAGE 142 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Shanni F Ponce Date of Receipt Mailing Address 2818 Fountain Grove Cove 2011 22 City Zip Code State Transaction ID: SA11AI.5991 TX Round Rock 78665 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation MBS Rehab Senior Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 720.00 Other (specify) Full Name (Last, First, Middle Initial) B. Shanni F Ponce Date of Receipt Mailing Address 2818 Fountain Grove Cove 10 07 2011 City State Zip Code Transaction ID: SA11AI.6259 Round Rock TX 78665 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation MBS Rehab Senior Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 760.00 Other (specify) Full Name (Last, First, Middle Initial) c. Shanni F Ponce Date of Receipt Mailing Address 2818 Fountain Grove Cove 10 21 2011 City Zip Code State Transaction ID: SA11AI.6515 TX Round Rock 78665 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation Senior Vice President MBS Rehab Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) 120.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 143 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Shanni F Ponce Date of Receipt Mailing Address 2818 Fountain Grove Cove 07 2011 11 City Zip Code State Transaction ID: SA11AI.6771 TX Round Rock 78665 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation MBS Rehab Senior Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 840.00 Other (specify) Full Name (Last, First, Middle Initial) B. Shanni F Ponce Date of Receipt Mailing Address 2818 Fountain Grove Cove 11 22 2011 City State Zip Code Transaction ID: SA11AI.7032 Round Rock TX 78665 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation MBS Rehab Senior Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 880.00 Other (specify) Full Name (Last, First, Middle Initial) c. Shanni F Ponce Date of Receipt Mailing Address 2818 Fountain Grove Cove M = M 12 07 2011 City Zip Code State Transaction ID: SA11AI.7287 TX Round Rock 78665 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation Senior Vice President MBS Rehab Receipt For: Aggregate Year-to-Date ▼ Primary General 920.00 Other (specify) 120.00 SUBTOTAL of Receipts This Page (optional).....

- 9

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

FOR LINE NUMBER: PAGE 144 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Shanni F Ponce Date of Receipt Mailing Address 2818 Fountain Grove Cove 2011 12 22 City Zip Code State Transaction ID: SA11AI.7532 TX Round Rock 78665 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation MBS Rehab Senior Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 960.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dee Ann Probst Date of Receipt Mailing Address 7800 Pine Ridge Dr 07 07 2011 City State Zip Code Transaction ID: SA11AI.5108 TX Justin 76247 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator, Victoria Gardens of Fri Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dee Ann Probst Date of Receipt Mailing Address 7800 Pine Ridge Dr 07 22 2011 City State Zip Code Transaction ID: SA11AI.5181 TX Justin 76247 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator, Victoria Gardens of Fri Receipt For: Aggregate Year-to-Date ▼ Primary General 280.00 Other (specify) 80.00 SUBTOTAL of Receipts This Page (optional).....

- 9

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

FOR LINE NUMBER: PAGE 145 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Dee Ann Probst Date of Receipt Mailing Address 7800 Pine Ridge Dr 2011 08 08 City State Zip Code Transaction ID: SA11AI.5269 TX 76247 Justin Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator, Victoria Gardens of Fri Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dee Ann Probst Date of Receipt Mailing Address 7800 Pine Ridge Dr 08 22 2011 City State Zip Code Transaction ID: SA11AI.5426 TX Justin 76247 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator, Victoria Gardens of Fri Receipt For: Aggregate Year-to-Date ▼ Primary General 320.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dee Ann Probst Date of Receipt Mailing Address 7800 Pine Ridge Dr 09 07 2011 City State Zip Code Transaction ID: SA11AI.5657 TX Justin 76247 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator, Victoria Gardens of Fri Receipt For: Aggregate Year-to-Date ▼ Primary General 340.00 Other (specify) 60.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

# SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 146 OF

197

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)         X       11a       11b       11c       12         13       14       15       16       17
Any information copied from such Reports and Statement or for commercial purposes, other than using the name a		
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC		
Pagaint For:	76247	Date of Receipt  O9 22 2011  Transaction ID : SA11AI.5994  Amount of Each Receipt this Period  20.00
Pagaint For:	76247	Date of Receipt  10 07 2011  Transaction ID: SA11Al.6262  Amount of Each Receipt this Period  20.00
Possint For:	76247	Date of Receipt  10 21 2011  Transaction ID : SA11AI.6518  Amount of Each Receipt this Period  20.00
SUBTOTAL of Receipts This Page (optional)		60.00
TOTAL This Period (last page this line number only)		

FOR LINE NUMBER: PAGE 147 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Dee Ann Probst Date of Receipt Mailing Address 7800 Pine Ridge Dr 07 2011 11 City State Zip Code Transaction ID: SA11AI.6774 TX Justin 76247 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator, Victoria Gardens of Fri Receipt For: Aggregate Year-to-Date ▼ Primary General 420.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kathleen M Schellhaas Date of Receipt Mailing Address 2535 Grassy Spring PI 12 15 2011 City State Zip Code Transaction ID: SA11AI.7440 NV Las Vegas 89135 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation Harden Healthcare **Business Development** Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kathleen M Schellhaas Date of Receipt Mailing Address 2535 Grassy Spring Pl 30 12 2011 City Zip Code State Transaction ID: SA11AI.7682 NV Las Vegas 89135 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation Harden Healthcare **Business Development** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 70.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 148 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Rebecca Shropshire Date of Receipt Mailing Address 722 Craig St 2011 10 21 City Zip Code State Transaction ID: SA11AI.6527 TX 76645 Hillboro Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 205.00 Other (specify) Full Name (Last, First, Middle Initial) B. Rebecca Shropshire Date of Receipt Mailing Address 722 Craig St 11 07 2011 City State Zip Code Transaction ID: SA11AI.6783 TX Hillboro 76645 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 245.00 Other (specify) Full Name (Last, First, Middle Initial) c. Rebecca Shropshire Date of Receipt Mailing Address 722 Craig St 11 22 2011 City Zip Code State Transaction ID: SA11AI.7045 TX Hillboro 76645 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation Administrator TRISUN Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 285.00 Other (specify) 120.00 SUBTOTAL of Receipts This Page (optional).....

- 9

9

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

FOR LINE NUMBER: PAGE 149 OF 197 Use separate schedule(s) (check only one) X 11a 11b 12 11c 14 13 15 16

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- 9

9

FOR LINE NUMBER: PAGE 150 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Toni M Silguero Date of Receipt Mailing Address 3804 Middle Earth Trail 2011 07 29 City State Zip Code Transaction ID: SA11AI.5236 TX Austin 78739 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Controller Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Toni M Silguero Date of Receipt Mailing Address 3804 Middle Earth Trail 08 15 2011 City State Zip Code Transaction ID: SA11AI.5384 TX Austin 78739 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation Harden Healthcare Services Controller Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name (Last, First, Middle Initial) c. Toni M Silguero Date of Receipt Mailing Address 3804 Middle Earth Trail 80 31 2011 City Zip Code State Transaction ID: SA11AI.5543 TX Austin 78739 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation Controller Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 151 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

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FOR LINE NUMBER: PAGE 152 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Toni M Silguero Date of Receipt Mailing Address 3804 Middle Earth Trail 2011 10 31 City State Zip Code Transaction ID: SA11AI.6684 TX Austin 78739 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Controller Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Toni M Silguero Date of Receipt Mailing Address 3804 Middle Earth Trail 11 15 2011 City State Zip Code Transaction ID: SA11AI.6937 TX Austin 78739 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation Harden Healthcare Services Controller Receipt For: Aggregate Year-to-Date ▼ Primary General 525.00 Other (specify) Full Name (Last, First, Middle Initial) c. Toni M Silguero Date of Receipt Mailing Address 3804 Middle Earth Trail 30 11 2011 City Zip Code State Transaction ID: SA11AI.7197 TX Austin 78739 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation Harden Healthcare Services Controller Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 153 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Toni M Silguero Date of Receipt Mailing Address 3804 Middle Earth Trail 2011 12 15 City State Zip Code Transaction ID: SA11AI.7443 TX Austin 78739 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Controller Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 575.00 Other (specify) Full Name (Last, First, Middle Initial) B. Toni M Silguero Date of Receipt Mailing Address 3804 Middle Earth Trail 12 30 2011 City State Zip Code Transaction ID: SA11AI.7685 TX Austin 78739 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation Harden Healthcare Services Controller Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Juli Simmang Date of Receipt Mailing Address 991 Oak Ridge 07 07 2011 City Zip Code State Transaction ID: SA11AI.5111 TX Shertz 78154 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation **Director of Clinical Services** MBS Rehab Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) 100.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 154 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

197

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Juli Simmang Date of Receipt Mailing Address 991 Oak Ridge 2011 07 22 City State Zip Code Transaction ID: SA11AI.5184 TX Shertz 78154 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation MBS Rehab **Director of Clinical Services** Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) B. Juli Simmang Date of Receipt Mailing Address 991 Oak Ridge 08 80 2011 City State Zip Code Transaction ID: SA11AI.5270 TX Shertz 78154 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation MBS Rehab **Director of Clinical Services** Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) c. Juli Simmang Date of Receipt Mailing Address 991 Oak Ridge 80 22 2011 City Zip Code State Transaction ID: SA11AI.5429 TX Shertz 78154 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation **Director of Clinical Services** MBS Rehab Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 155 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Juli Simmang Date of Receipt Mailing Address 991 Oak Ridge 07 2011 City State Zip Code Transaction ID: SA11AI.5676 TX Shertz 78154 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation MBS Rehab **Director of Clinical Services** Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) Full Name (Last, First, Middle Initial) B. Juli Simmang Date of Receipt Mailing Address 991 Oak Ridge 09 22 2011 City State Zip Code Transaction ID: SA11AI.6006 TX Shertz 78154 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation MBS Rehab **Director of Clinical Services** Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) Full Name (Last, First, Middle Initial) c. Juli Simmang Date of Receipt Mailing Address 991 Oak Ridge 10 07 2011 City Zip Code State Transaction ID: SA11AI.6275 TX Shertz 78154 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation **Director of Clinical Services** MBS Rehab Receipt For: Aggregate Year-to-Date ▼ Primary General 950.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOR LINE NUMBER: PAGE 156 OF	197
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for each category of the Detailed Summary Page	X 11a 11b 11c 12	
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	d Statements may not be sold or used by any pers the name and address of any political committee t	
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Fede	eral PAC	
Full Name (Last, First, Middle Initial) Juli Simmang Mailing Address 991 Oak Ridge  City Shertz	State Zip Code TX 78154	Date of Receipt  10 21 2011  Transaction ID : SA11AI.6529  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer  MBS Rehab  Receipt For:  Primary General  Other (specify)	Occupation Director of Clinical Services  Aggregate Year-to-Date ▼  1000.00	50.00
Full Name (Last, First, Middle Initial)  Juli Simmang  Mailing Address 991 Oak Ridge  City  Shertz	State Zip Code TX 78154	Date of Receipt  11 07 2011  Transaction ID : SA11Al.6785
FEC ID number of contributing federal political committee.  Name of Employer MBS Rehab  Receipt For:  Primary  Other (specify)	Occupation Director of Clinical Services  Aggregate Year-to-Date   1050.00	Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial) Juli Simmang  Mailing Address 991 Oak Ridge  City Shertz  FEC ID number of contributing federal political committee.  Name of Employer  MBS Rehab  Receipt For: Primary General Other (specify)	State Zip Code TX 78154  C  Occupation Director of Clinical Services  Aggregate Year-to-Date ▼  1100.00	Date of Receipt  11 22 2011  Transaction ID: SA11AI.7047  Amount of Each Receipt this Period  50.00
	<u> </u>	150.00
TOTAL This Period (last page this line numb	per only)	

FOR LINE NUMBER: PAGE 157 OF (check only one) X 11a 11b 12 11c

197 Use separate schedule(s) for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Juli Simmang Date of Receipt Mailing Address 991 Oak Ridge 07 2011 12 City State Zip Code Transaction ID: SA11AI.7301 TX Shertz 78154 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation MBS Rehab **Director of Clinical Services** Receipt For: Aggregate Year-to-Date ▼ Primary General 1150.00 Other (specify) Full Name (Last, First, Middle Initial) B. Juli Simmang Date of Receipt Mailing Address 991 Oak Ridge 12 22 2011 City State Zip Code Transaction ID: SA11AI.7546 TX Shertz 78154 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation MBS Rehab **Director of Clinical Services** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kristen Noel Sluder Date of Receipt Mailing Address 6903 Dubuque Lane 11 10 2011 City State Zip Code Transaction ID: SA11AI.7793 TX Austin 78723 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation Trisun Administrator TRISUN Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 532.00 Other (specify) 600.00 SUBTOTAL of Receipts This Page (optional).....

- 9

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

FOR LINE NUMBER: PAGE 158 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Kristen Noel Sluder Date of Receipt Mailing Address 6903 Dubuque Lane 2011 11 22 City State Zip Code Transaction ID: SA11AI.7048 TX Austin 78723 Amount of Each Receipt this Period FEC ID number of contributing C 2.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Trisun Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 534.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kristen Noel Sluder Date of Receipt Mailing Address 6903 Dubuque Lane 12 07 2011 City State Zip Code Transaction ID: SA11AI.7302 TX Austin 78723 Amount of Each Receipt this Period FEC ID number of contributing 2.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Trisun Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 536.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kristen Noel Sluder Date of Receipt Mailing Address 6903 Dubuque Lane 12 22 2011 City State Zip Code Transaction ID: SA11AI.7547 TX Austin 78723 Amount of Each Receipt this Period FEC ID number of contributing C 2.00 federal political committee. Name of Employer Occupation Trisun Administrator TRISUN Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 538.00 Other (specify) 6.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: PAGE 159 OF 197 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Pattie Ann Smith Date of Receipt Mailing Address 4940 SW CR 1140 01 2011 09 City State Zip Code Transaction ID: SA11AI.7717 TX Corsicana 75110 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Pattie Ann Smith Date of Receipt Mailing Address 4940 SW CR 1140 09 07 2011 City State Zip Code Transaction ID: SA11AI.5679 TX Corsicana 75110 Amount of Each Receipt this Period FEC ID number of contributing 5.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 505.00 Other (specify) Full Name (Last, First, Middle Initial) c. Pattie Ann Smith Date of Receipt Mailing Address 4940 SW CR 1140 09 22 2011 City State Zip Code Transaction ID: SA11AI.6008 TX Corsicana 75110 Amount of Each Receipt this Period FEC ID number of contributing 5.00 С federal political committee. Name of Employer Occupation Administrator TRISUN Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 510.00 Other (specify) 510.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

# SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 160 OF

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X   11a
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any pene name and address of any political committee	rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Feder	al PAC	
Full Name (Last, First, Middle Initial)  Robert E Steel  Mailing Address 5315 Magdelena Dr  City  Austin  FEC ID number of contributing federal political committee.  Name of Employer  Harden Healthcare  Receipt For:  Primary  Other (specify)   Full Name (Last First Middle Initial)	State Zip Code TX 78735  C  Occupation Finance  Aggregate Year-to-Date ▼  225.00	Date of Receipt  12 30 2011  Transaction ID: SA11AI.7687  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial)  Charlene Turner  Mailing Address 2101 Birdie Court  City  San Angelo  FEC ID number of contributing federal political committee.  Name of Employer  TRISUN Healthcare  Receipt For:  Primary  General  Other (specify)	State Zip Code TX 76904  C  Occupation Administrator, Regency House  Aggregate Year-to-Date ▼  210.00	Date of Receipt  07 22 2011  Transaction ID: SA11Al.5187  Amount of Each Receipt this Period  15.00
Full Name (Last, First, Middle Initial) Charlene Turner  Mailing Address 2101 Birdie Court  City San Angelo  FEC ID number of contributing federal political committee.  Name of Employer TRISUN Healthcare Receipt For: Primary Other (specify)	State Zip Code TX 76904  C  Occupation Administrator, Regency House  Aggregate Year-to-Date ▼  225.00	Date of Receipt  08 08 2011  Transaction ID : SA11AI.5274  Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	55.00
TOTAL This Period (last page this line numbe	r only)	

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

FOR LINE	: PAGI	E 161 OF	197	
(check only one)				
<b>X</b> 11a	11b	11c	12	
13	14	15	16	17

	the name and address of any political committee t	
NAME OF COMMITTEE (In Full)		
Harden Healthcare LLC Fede	eral PAC	
Full Name (Last, First, Middle Initial)  A. Charlene Turner		Date of Receipt
Mailing Address 2101 Birdie Court		08 22 2011
City	State Zip Code	Transaction ID : SA11AI.5434
San Angelo	TX 76904	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer	Occupation	7
TRISUN Healthcare	Administrator, Regency House	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	30 0	
Other (specify) ▼	240.00	<u>L</u>
Full Name (Last, First, Middle Initial)  Charlene Turner		Date of Receipt
Mailing Address 2101 Birdie Court		M = M / D = D / Y = Y = Y = Y
City	State Zip Code	09 07 2011
City San Angelo	State Zip Code TX 76904	Transaction ID : SA11AI.5690  Amount of Each Receipt this Period
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer	Occupation	7
TRISUN Healthcare	Administrator, Regency House	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	255.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 2101 Birdie Court		Date of Receipt
	State 7's Code	09 22 2011
City San Angelo	State Zip Code TX 76904	Transaction ID : SA11AI.6015  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer	Occupation	1
TRISUN Healthcare	Administrator, Regency House	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	270.00	
SUBTOTAL of Receipts This Page (optional)		45.00
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TOTAL This Period (last page this line numb	per only)	

FOR LINE NUMBER: PAGE 162 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Charlene Turner Date of Receipt Mailing Address 2101 Birdie Court 07 2011 10 City State Zip Code Transaction ID: SA11AI.6284 TX San Angelo 76904 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator, Regency House Receipt For: Aggregate Year-to-Date ▼ Primary General 285.00 Other (specify) Full Name (Last, First, Middle Initial) B. Charlene Turner Date of Receipt Mailing Address 2101 Birdie Court 10 21 2011 City State Zip Code Transaction ID: SA11AI.6537 TX San Angelo 76904 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator, Regency House Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Charlene Turner Date of Receipt Mailing Address 2101 Birdie Court 11 07 2011 City State Zip Code Transaction ID: SA11AI.6793 TX San Angelo 76904 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator, Regency House Receipt For: Aggregate Year-to-Date ▼ Primary General 315.00 Other (specify) 45.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 163 OF 197 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Charlene Turner Date of Receipt Mailing Address 2101 Birdie Court 2011 11 22 City State Zip Code Transaction ID: SA11AI.7056 TX San Angelo 76904 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator, Regency House Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) Full Name (Last, First, Middle Initial) B. Charlene Turner Date of Receipt Mailing Address 2101 Birdie Court 12 07 2011 City State Zip Code Transaction ID: SA11AI.7310 TX San Angelo 76904 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator, Regency House Receipt For: Aggregate Year-to-Date ▼ Primary General 345.00 Other (specify) Full Name (Last, First, Middle Initial) c. Charlene Turner Date of Receipt Mailing Address 2101 Birdie Court 12 22 2011 City State Zip Code Transaction ID: SA11AI.7554 TX San Angelo 76904 Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator, Regency House Receipt For: Aggregate Year-to-Date ▼ Primary General 360.00 Other (specify) 45.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 164 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Julie Vandre Date of Receipt Mailing Address 629 Park Ave 2011 09 15 City Zip Code State Transaction ID: SA11AI.5900 WI New Richmond 54017 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Vice President of Quality & Compliance Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 205.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Julie Vandre Date of Receipt Mailing Address 629 Park Ave 09 30 2011 City State Zip Code Transaction ID: SA11AI.6182 WI New Richmond 54017 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation Girling Home Health Vice President of Quality & Compliance Receipt For: Aggregate Year-to-Date ▼ Primary General 230.00 Other (specify) Full Name (Last, First, Middle Initial) c. Julie Vandre Date of Receipt Mailing Address 629 Park Ave M = M 10 14 2011 City Zip Code State Transaction ID: SA11AI.6440 WI New Richmond 54017 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation Girling Home Health Vice President of Quality & Compliance Receipt For: Aggregate Year-to-Date ▼ Primary General 255.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

### SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 165 OF

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)       X     11a     11b     11c     12       13     14     15     16     17
Any information copied from such Reports and State or for commercial purposes, other than using the na		
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal F	PAC	
Full Name (Last, First, Middle Initial)  A. Julie Vandre		Date of Receipt
Mailing Address 629 Park Ave		10 31 2011
City New Richmond	State Zip Code WI 54017	Transaction ID : SA11AI.6698  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Girling Home Health	Occupation /ice President of Quality & Compliance	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	
Full Name (Last, First, Middle Initial)  Julie Vandre		Date of Receipt
Mailing Address 629 Park Ave		11 15 2011
City New Richmond	State Zip Code WI 54017	Transaction ID : SA11Al.6953  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	25.00
Cirling Home Heelth	Occupation  (ice President of Quality & Compliance	
Possint For:	Aggregate Year-to-Date ▼  305.00	
Full Name (Last, First, Middle Initial)  C. Julie Vandre		Date of Receipt
Mailing Address 629 Park Ave		11 30 2011
City New Richmond	State Zip Code WI 54017	Transaction ID : SA11AI.7211  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
. ,	Occupation	
Pagaint For:	/ice President of Quality & Compliance	$\dashv$
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	
SUBTOTAL of Receipts This Page (optional)		75.00

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

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Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any personame and address of any political committee to	
NAME OF COMMITTEE (In Full)		
Harden Healthcare LLC Federal	PAU	
Full Name (Last, First, Middle Initial)  Julie Vandre		Date of Receipt
Mailing Address 629 Park Ave		12 15 2011
City	State Zip Code	Transaction ID : SA11AI.7456
New Richmond	WI 54017	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	
Girling Home Health	Vice President of Quality & Compliance	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00000	
Other (specify) ▼	355.00	
Full Name (Last, First, Middle Initial)  Julie Vandre		Date of Receipt
Mailing Address 629 Park Ave		12 30 2011
City	State Zip Code	Transaction ID : SA11AI.7697
New Richmond	WI 54017	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	25.00
Name of Employer	Occupation	
Girling Home Health	Vice President of Quality & Compliance	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  380.00	
Full Name (Last, First, Middle Initial)  C. Ronda Van Meter		Date of Receipt
Mailing Address 253 LCR 405		M = M / D = D / Y = Y = Y
City	State Zip Code	07 15 2011
Mexia	TX 76667	Transaction ID : SA11AI.5169  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	
Girling Home Health	Regional Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	650.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	100.00
TOTAL This Period (last page this line number of	only)	

FOR LINE NUMBER: PAGE 167 OF (check only one) X 11a 11b 12 11c

197 Use separate schedule(s) for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Ronda Van Meter Date of Receipt Mailing Address 253 LCR 405 07 2011 29 City State Zip Code Transaction ID: SA11AI.5238 TX Mexia 76667 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Girling Home Health Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ronda Van Meter Date of Receipt Mailing Address 253 LCR 405 80 15 2011 City State Zip Code Transaction ID: SA11AI.5396 TX Mexia 76667 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Girling Home Health Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ronda Van Meter Date of Receipt Mailing Address 253 LCR 405 80 31 2011 City Zip Code State Transaction ID: SA11AI.5554 TX Mexia 76667 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Regional Vice President Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

- 9

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

FOR LINE NUMBER: PAGE 168 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Ronda Van Meter Date of Receipt Mailing Address 253 LCR 405 2011 09 15 City State Zip Code Transaction ID: SA11AI.5899 TX Mexia 76667 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Girling Home Health Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ronda Van Meter Date of Receipt Mailing Address 253 LCR 405 09 30 2011 City State Zip Code Transaction ID: SA11AI.6181 TX Mexia 76667 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Girling Home Health Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ronda Van Meter Date of Receipt Mailing Address 253 LCR 405 10 14 2011 City Zip Code State Transaction ID: SA11AI.6439 TX Mexia 76667 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Regional Vice President Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 950.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

# SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 169 OF

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold or used by any priche name and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Feder	ral PAC	
Full Name (Last, First, Middle Initial) Ronda Van Meter  Mailing Address 253 LCR 405  City Mexia  FEC ID number of contributing federal political committee.  Name of Employer Girling Home Health Receipt For: Primary General Other (specify)   Eull Name (Last, First, Middle Initial)	State Zip Code TX 76667  C  Occupation Regional Vice President  Aggregate Year-to-Date ▼  1000.00	Date of Receipt  10 31 2011  Transaction ID: SA11AI.6697  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial)  Ronda Van Meter  Mailing Address 253 LCR 405  City  Mexia  FEC ID number of contributing federal political committee.  Name of Employer Girling Home Health  Receipt For:  Primary  General Other (specify)	State Zip Code TX 76667  C  Occupation Regional Vice President  Aggregate Year-to-Date ▼  1050.00	Date of Receipt  11 15 2011  Transaction ID: SA11Al.6952  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial) Ronda Van Meter  Mailing Address 253 LCR 405  City Mexia  FEC ID number of contributing federal political committee.  Name of Employer Girling Home Health Receipt For: Primary General Other (specify)	State Zip Code TX 76667  C  Occupation Regional Vice President  Aggregate Year-to-Date ▼  1100.00	Date of Receipt  11 30 2011  Transaction ID: SA11AI.7210  Amount of Each Receipt this Period  50.00
SUBTOTAL of Receipts This Page (optional).		150.00
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 170 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Ronda Van Meter Date of Receipt Mailing Address 253 LCR 405 2011 12 15 City State Zip Code Transaction ID: SA11AI.7455 TX Mexia 76667 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Girling Home Health Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 1150.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ronda Van Meter Date of Receipt Mailing Address 253 LCR 405 12 30 2011 City State Zip Code Transaction ID: SA11AI.7696 TX Mexia 76667 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Girling Home Health Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Jennifer Lynn Vogt Date of Receipt Mailing Address 4506 Grand Cypress Drive 07 15 2011 City Zip Code State Transaction ID: SA11AI.5171 TX Austin 78747 Amount of Each Receipt this Period FEC ID number of contributing 55.00 С federal political committee. Name of Employer Occupation Regional Vice President Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 1965.00 Other (specify) 155.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 171 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Jennifer Lynn Vogt Date of Receipt Mailing Address 4506 Grand Cypress Drive 2011 07 29 City State Zip Code Transaction ID: SA11AI.5240 TX Austin 78747 Amount of Each Receipt this Period FEC ID number of contributing C 55.00 federal political committee. Name of Employer Occupation Girling Community Care Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 2020.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jennifer Lynn Vogt Date of Receipt Mailing Address 4506 Grand Cypress Drive 80 15 2011 City State Zip Code Transaction ID: SA11AI.5398 TX Austin 78747 Amount of Each Receipt this Period FEC ID number of contributing 55.00 federal political committee. Name of Employer Occupation Girling Community Care Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 2075.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Jennifer Lynn Vogt Date of Receipt Mailing Address 4506 Grand Cypress Drive 80 31 2011 City Zip Code State Transaction ID: SA11AI.5556 TX Austin 78747 Amount of Each Receipt this Period FEC ID number of contributing 55.00 С federal political committee. Name of Employer Occupation Regional Vice President Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 2130.00 Other (specify) 165.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 172 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Jennifer Lynn Vogt Date of Receipt Mailing Address 4506 Grand Cypress Drive 15 2011 City State Zip Code Transaction ID: SA11AI.5901 TX Austin 78747 Amount of Each Receipt this Period FEC ID number of contributing C 55.00 federal political committee. Name of Employer Occupation Girling Community Care Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 2185.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jennifer Lynn Vogt Date of Receipt Mailing Address 4506 Grand Cypress Drive 09 30 2011 City State Zip Code Transaction ID: SA11AI.6183 TX Austin 78747 Amount of Each Receipt this Period FEC ID number of contributing 55.00 federal political committee. Name of Employer Occupation Girling Community Care Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 2240.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Jennifer Lynn Vogt Date of Receipt Mailing Address 4506 Grand Cypress Drive 10 14 2011 City Zip Code State Transaction ID: SA11AI.6441 TX Austin 78747 Amount of Each Receipt this Period FEC ID number of contributing 55.00 С federal political committee. Name of Employer Occupation Regional Vice President Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 2295.00 Other (specify) 165.00 SUBTOTAL of Receipts This Page (optional).....

- 9

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

	FOR LINE NUMBER: PAGE			E 173 OF	19
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	Statements may not be sold or used by any personal part of any political committee to	
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federa	al PAC	
Full Name (Last, First, Middle Initial)  Jennifer Lynn Vogt  Mailing Address 4506 Grand Cypress Drive  City Austin  FEC ID number of contributing federal political committee.  Name of Employer  Girling Community Care  Receipt For:  Primary  General  Other (specify)	State Zip Code TX 78747  C  Occupation Regional Vice President  Aggregate Year-to-Date ▼	Date of Receipt  10 31 2011  Transaction ID: SA11AI.6699  Amount of Each Receipt this Period  55.00
Full Name (Last, First, Middle Initial)  Jennifer Lynn Vogt  Mailing Address 4506 Grand Cypress Drive  City  Austin  FEC ID number of contributing federal political committee.	State Zip Code TX 78747	Date of Receipt  11 15 2011  Transaction ID : SA11Al.6954  Amount of Each Receipt this Period  55.00
Name of Employer Girling Community Care  Receipt For:  Primary General Other (specify) ▼	Occupation Regional Vice President  Aggregate Year-to-Date ▼  2405.00	
Full Name (Last, First, Middle Initial)  Jennifer Lynn Vogt  Mailing Address 4506 Grand Cypress Drive  City Austin  FEC ID number of contributing federal political committee.  Name of Employer  Girling Community Care  Receipt For:  Primary General Other (specify)	State Zip Code TX 78747  C  Occupation Regional Vice President  Aggregate Year-to-Date ▼  2460.00	Date of Receipt  11 30 2011  Transaction ID: SA11AI.7212  Amount of Each Receipt this Period  55.00
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	165.00
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:		: PAGE	= 174 OF	197	
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	Statements may not be sold or used by any person e name and address of any political committee to	
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federa	al PAC	
Full Name (Last, First, Middle Initial)  Jennifer Lynn Vogt  Mailing Address 4506 Grand Cypress Drive  City  Austin  FEC ID number of contributing federal political committee.  Name of Employer  Girling Community Care  Receipt For:  Primary  General  Other (specify)	State Zip Code TX 78747  C  Occupation Regional Vice President  Aggregate Year-to-Date ▼  2515.00	Date of Receipt  12 15 2011  Transaction ID: SA11AI.7457  Amount of Each Receipt this Period  55.00
Full Name (Last, First, Middle Initial)  Jennifer Lynn Vogt  Mailing Address 4506 Grand Cypress Drive  City  Austin  FEC ID number of contributing federal political committee.  Name of Employer Girling Community Care  Receipt For:  Primary General Other (specify)	State Zip Code TX 78747  C  Occupation Regional Vice President  Aggregate Year-to-Date ▼  2570.00	Date of Receipt  12 30 2011  Transaction ID: SA11AI.7698  Amount of Each Receipt this Period  55.00
Full Name (Last, First, Middle Initial)  Marrissa Wade  Mailing Address 221 Cedar Dr  City Portland  FEC ID number of contributing federal political committee.  Name of Employer TRISUN Healthcare Receipt For:  Primary General Other (specify)	State Zip Code TX 78374  C  Occupation Administrator  Aggregate Year-to-Date ▼  300.00	Date of Receipt  07
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	410.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 175 OF 197 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Maureen Walther Date of Receipt Mailing Address 582 State Hwy 7 2011 09 15 City State Zip Code Transaction ID: SA11AI.7743 TX Eddy 76524 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Deborah Weems Date of Receipt Mailing Address 2518 Harris Blvd 07 15 2011 City State Zip Code Transaction ID: SA11AI.5172 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Marketing Receipt For: Aggregate Year-to-Date ▼ Primary General 325.00 Other (specify) Full Name (Last, First, Middle Initial) c. Deborah Weems Date of Receipt Mailing Address 2518 Harris Blvd 29 07 2011 City State Zip Code Transaction ID: SA11AI.5241 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Marketing Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 550.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 176 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Deborah Weems Date of Receipt Mailing Address 2518 Harris Blvd 2011 08 15 City State Zip Code Transaction ID: SA11AI.5399 TX 78703 Austin Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Marketing Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name (Last, First, Middle Initial) B. Deborah Weems Date of Receipt Mailing Address 2518 Harris Blvd 80 31 2011 City State Zip Code Transaction ID: SA11AI.5557 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Marketing Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) c. Deborah Weems Date of Receipt Mailing Address 2518 Harris Blvd 09 15 2011 City State Zip Code Transaction ID: SA11AI.5904 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Marketing Receipt For: Aggregate Year-to-Date ▼ Primary General 425.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional).....

- 9

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

FOR LINE NUMBER: PAGE 177 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

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FOR LINE NUMBER: PAGE 178 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Deborah Weems Date of Receipt Mailing Address 2518 Harris Blvd 2011 11 15 City State Zip Code Transaction ID: SA11AI.6959 TX 78703 Austin Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Marketing Receipt For: Aggregate Year-to-Date ▼ Primary General 525.00 Other (specify) Full Name (Last, First, Middle Initial) B. Deborah Weems Date of Receipt Mailing Address 2518 Harris Blvd 11 30 2011 City State Zip Code Transaction ID: SA11AI.7216 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Marketing Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name (Last, First, Middle Initial) c. Deborah Weems Date of Receipt Mailing Address 2518 Harris Blvd M = M 12 15 2011 City Zip Code State Transaction ID: SA11AI.7461 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Marketing Receipt For: Aggregate Year-to-Date ▼ Primary General 575.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional).....

- 9

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

FOR LINE NUMBER: PAGE 179 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

197

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Deborah Weems Date of Receipt Mailing Address 2518 Harris Blvd 30 2011 12 City State Zip Code Transaction ID: SA11AI.7702 TX 78703 Austin Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Marketing Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. James S B Whittenburg Date of Receipt Mailing Address 13406 Tierra Dr 11 15 2011 City State Zip Code Transaction ID: SA11AI.7794 TX Austin 78727 Amount of Each Receipt this Period FEC ID number of contributing C 5000.00 federal political committee. Name of Employer Occupation HealthTronics CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Carolyn Williams Date of Receipt Mailing Address 12707 Eagle Nest Dr 07 15 2011 City State Zip Code Transaction ID: SA11AI.5173 TX Buda 78610 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation **Director of Compliance** Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 325.00 Other (specify) 5050.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

9

FOR LINE NUMBER: PAGE 180 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

197

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Carolyn Williams Date of Receipt Mailing Address 12707 Eagle Nest Dr 07 2011 29 City State Zip Code Transaction ID: SA11AI.5242 TX 78610 Buda Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Director of Compliance Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Carolyn Williams Date of Receipt Mailing Address 12707 Eagle Nest Dr 80 15 2011 City State Zip Code Transaction ID: SA11AI.5400 TX Buda 78610 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Girling Home Health **Director of Compliance** Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name (Last, First, Middle Initial) c. Carolyn Williams Date of Receipt Mailing Address 12707 Eagle Nest Dr 80 31 2011 City State Zip Code Transaction ID: SA11AI.5558 TX Buda 78610 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation **Director of Compliance** Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

9

FOR LINE NUMBER: PAGE 181 OF Use separate schedule(s) (check only one) X 11a 11b 11c

197

for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Carolyn Williams Date of Receipt Mailing Address 12707 Eagle Nest Dr 2011 15 City State Zip Code Transaction ID: SA11AI.5907 TX 78610 Buda Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Director of Compliance Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 425.00 Other (specify) Full Name (Last, First, Middle Initial) B. Carolyn Williams Date of Receipt Mailing Address 12707 Eagle Nest Dr 09 30 2011 City State Zip Code Transaction ID: SA11AI.6189 TX Buda 78610 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Girling Home Health **Director of Compliance** Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name (Last, First, Middle Initial) c. Carolyn Williams Date of Receipt Mailing Address 12707 Eagle Nest Dr 2011 10 14 City State Zip Code Transaction ID: SA11AI.6446 TX Buda 78610 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation

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475.00

**Director of Compliance** 

Aggregate Year-to-Date ▼

Girling Home Health Receipt For:

Primary

Other (specify)

General

FOR LINE NUMBER: PAGE 182 OF Use separate schedule(s) (check only one) X 11a 11b 11c

197

for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Iris B Williams Date of Receipt Mailing Address 3733 Locke Lane 07 2011 City Zip Code State Transaction ID: SA11AI.5115 TX Corpus Christi 78415 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation MBS Rehab Director of Operations Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) Full Name (Last, First, Middle Initial) B. Iris B Williams Date of Receipt Mailing Address 3733 Locke Lane 07 22 2011 City State Zip Code Transaction ID: SA11AI.5188 Corpus Christi TX 78415 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation MBS Rehab **Director of Operations** Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) c. Iris B Williams Date of Receipt Mailing Address 3733 Locke Lane 80 80 2011 City Zip Code State Transaction ID: SA11AI.5275 TX Corpus Christi 78415 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation MBS Rehab **Director of Operations** Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

- 9

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

FOR LINE NUMBER: PAGE 183 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Iris B Williams Date of Receipt Mailing Address 3733 Locke Lane 2011 08 22 City Zip Code State Transaction ID: SA11AI.5435 TX Corpus Christi 78415 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation MBS Rehab Director of Operations Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name (Last, First, Middle Initial) B. Iris B Williams Date of Receipt Mailing Address 3733 Locke Lane 09 07 2011 City State Zip Code Transaction ID: SA11AI.5697 Corpus Christi TX 78415 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation MBS Rehab **Director of Operations** Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) Full Name (Last, First, Middle Initial) c. Iris B Williams Date of Receipt Mailing Address 3733 Locke Lane 09 22 2011 City Zip Code State Transaction ID: SA11AI.6019 TX Corpus Christi 78415 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation MBS Rehab **Director of Operations** Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

FOR LINE NUMBER: PAGE 184 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Iris B Williams Date of Receipt Mailing Address 3733 Locke Lane 07 2011 10 City Zip Code State Transaction ID: SA11AI.6288 TX Corpus Christi 78415 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation MBS Rehab Director of Operations Receipt For: Aggregate Year-to-Date ▼ Primary General 950.00 Other (specify) Full Name (Last, First, Middle Initial) B. Iris B Williams Date of Receipt Mailing Address 3733 Locke Lane 10 21 2011 City State Zip Code Transaction ID: SA11AI.6541 Corpus Christi TX 78415 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation MBS Rehab **Director of Operations** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Iris B Williams Date of Receipt Mailing Address 3733 Locke Lane 11 07 2011 City Zip Code State Transaction ID: SA11AI.6797 TX Corpus Christi 78415 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation MBS Rehab **Director of Operations** Receipt For: Aggregate Year-to-Date ▼ Primary General 1050.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 185 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12

Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Iris B Williams Date of Receipt Mailing Address 3733 Locke Lane 2011 11 22 City Zip Code State Transaction ID: SA11AI.7061 TX Corpus Christi 78415 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation MBS Rehab Director of Operations Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) Full Name (Last, First, Middle Initial) B. Iris B Williams Date of Receipt Mailing Address 3733 Locke Lane 2011 12 07 City State Zip Code Transaction ID: SA11AI.7314 Corpus Christi TX 78415 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation MBS Rehab **Director of Operations** Receipt For: Aggregate Year-to-Date ▼ Primary General 1150.00 Other (specify) Full Name (Last, First, Middle Initial) c. Iris B Williams Date of Receipt Mailing Address 3733 Locke Lane M = M 12 22 2011 City Zip Code State Transaction ID: SA11AI.7558 TX Corpus Christi 78415 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation MBS Rehab **Director of Operations** Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

FOR LINE NUMBER: PAGE 186 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Thomas Lloyd Wilson Date of Receipt Mailing Address 1703 W. 5th St Ste 700 08 15 2011 City State Zip Code Transaction ID: SA11AI.5401 TX 78703 Austin Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Name of Employer Occupation Home Care Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) Full Name (Last, First, Middle Initial) B. Thomas Lloyd Wilson Date of Receipt Mailing Address 1703 W. 5th St Ste 700 08 31 2011 City State Zip Code Transaction ID: SA11AI.5559 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Name of Employer Occupation Harden Healthcare Home Care Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) Full Name (Last, First, Middle Initial) c. Thomas Lloyd Wilson Date of Receipt Mailing Address 1703 W. 5th St Ste 700 09 15 2011 City State Zip Code Transaction ID: SA11AI.5910 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Harden Healthcare Home Care Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) 80.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 187 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

197

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Thomas Lloyd Wilson Date of Receipt Mailing Address 1703 W. 5th St Ste 700 30 2011 City State Zip Code Transaction ID: SA11AI.6191 TX 78703 Austin Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Home Care Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 325.00 Other (specify) Full Name (Last, First, Middle Initial) B. Thomas Lloyd Wilson Date of Receipt Mailing Address 1703 W. 5th St Ste 700 10 2011 14 City State Zip Code Transaction ID: SA11AI.6448 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation Harden Healthcare Home Care Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) c. Thomas Lloyd Wilson Date of Receipt Mailing Address 1703 W. 5th St Ste 700 10 31 2011 City Zip Code State Transaction ID: SA11AI.6705 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation Harden Healthcare Home Care Receipt For: Aggregate Year-to-Date ▼ Primary General 405.00 Other (specify) 130.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 188 OF 197 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Thomas Lloyd Wilson Date of Receipt Mailing Address 1703 W. 5th St Ste 700 2011 11 15 City State Zip Code Transaction ID: SA11AI.6962 TX 78703 Austin Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation Home Care Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 445.00 Other (specify) Full Name (Last, First, Middle Initial) B. Thomas Lloyd Wilson Date of Receipt Mailing Address 1703 W. 5th St Ste 700 11 30 2011 City State Zip Code Transaction ID: SA11AI.7218 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation Harden Healthcare Home Care Receipt For: Aggregate Year-to-Date ▼ Primary General 485.00 Other (specify) Full Name (Last, First, Middle Initial) c. Thomas Lloyd Wilson Date of Receipt Mailing Address 1703 W. 5th St Ste 700 12 15 2011 City Zip Code State Transaction ID: SA11AI.7463 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation Harden Healthcare Home Care Receipt For: Aggregate Year-to-Date ▼ Primary General 525.00 Other (specify) 120.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

FOR LINE NUMBER: PAGE 189 OF 197 Use separate schedule(s) (check only one) X 11a 11b 11c 12

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Thomas Lloyd Wilson Date of Receipt Mailing Address 1703 W. 5th St Ste 700 30 2011 12 City State Zip Code Transaction ID: SA11AI.7704 TX 78703 Austin Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation Harden Healthcare Home Care Receipt For: Aggregate Year-to-Date ▼ Primary General 565.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kendall Young Date of Receipt Mailing Address 3506 Oak Villa Dr. 07 15 2011 City State Zip Code Transaction ID: SA11AI.7872 TX Temple 76502 Amount of Each Receipt this Period FEC ID number of contributing C 800.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administartor Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 840.00 SUBTOTAL of Receipts This Page (optional)..... 43155.50 TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X)	Llog congrete cohedule/e	FOR LINE	PAGE 190 OF 197			
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 28a 28b	24 25 26 28c 29 30		
Any information copied from such Reports and Stat or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal I		car committee to	Solicit Continuations in	on such committee.		
Full Name (Last, First, Middle Initial)			Data of Bishaman			
A. Harden Healthcare Services			Date of Disburseme	ent		
Mailing Address 3307 Northland Dr Ste 430			09 01	2011		
City						
Austin Purpose of Disbursement	TX 78731		Transaction ID:	55215.7040		
Administative Services			Amount of Each Di	sbursement this Period		
Candidate Name		Category/	400.00			
Office Sought: House Disburs	ement For:	Туре	-	100.00		
Senate President	Primary General Other (specify) ▼					
State: District:						
Full Name (Last, First, Middle Initial)  B. Harden Healthcare Services			Date of Disburseme	≏nt		
- Harden Healthcare Services		M M / D D	/			
Mailing Address 3307 Northland Dr Ste 430		11 02	2011			
City Austin	State Zip Code TX 78731		Transaction ID :	SB21B.7845		
Purpose of Disbursement	17 70731					
Administative Services			Amount of Each Di	sbursement this Period		
Candidate Name		Category/ Type		200.00		
	ement For:	,,				
Senate President	Primary General Other (specify) ▼					
State: District:	Other (specify)					
Full Name (Last, First, Middle Initial)			5			
C. PlainsCapital Bank		Date of Disburseme	_			
Mailing Address 919 Congress Ave Ste 100		12 23	2011			
City	State Zip Code		Transaction ID . (	SD04D 7044		
Austin	TX 78701		Transaction ID:	SB21B.7841		
Bank fee	Purpose of Disbursement Bank fee					
Candidate Name		Category/ Type	Amount of Each Di	sbursement this Period 5.00		
Office Sought: House Disburs Senate President State: District:	ement For:  Primary General  Other (specify)			. ,		
2.03.00.						
SUBTOTAL of Disbursements This Page (optional)				605.00		
TOTAL This Desired (Instrument III)	LA			605.00		
TOTAL This Period (last page this line number on	y)		1	200.00		

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 19			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)		04 🗆 05 🗆 66	
	Detailed Summary Page	21b 27	22 X 23 28b	24 25 26 28c 29 30b	
Any information copied from such Reports and State	ments may not be sold or use				
or for commercial purposes, other than using the na					
NAME OF COMMITTEE (In Full)					
$ \; angle$ Harden Healthcare LLC Federal F	PAC				
Full Name (Last, First, Middle Initial)					
A. AMERICAN HEALTH CARE ASSOCIATION	ON POLITICAL ACTION C	OMMITTEE	Date of Disbursemen	t	
			M M / D D	/ Y Y Y Y Y	
Mailing Address 1201 L STREET NW			08 02	2011	
City	State Zip Code				
WASHINGTON	DC 20005		Transaction ID : SB	23.7811	
Purpose of Disbursement Political Contribution					
Candidate Name		011	Amount of Each Disb	ursement this Period	
Candidate Ivanie		Category/ Type		787.00	
Office Sought: House Disburse	ement For:	Type	7	7	
Senate	Primary General				
President	Other (specify) ▼				
State: District:					
Full Name (Last, First, Middle Initial)  B. BEN CARDIN FOR SENATE			Date of Disbursemen	t	
	BEN CARDIN I OR SENATE				
Mailing Address PO BOX 21093			09 22	2011	
City	State Zip Code		Transaction ID : SE	323.7815	
CATONSVILLE Purpose of Disbursement	MD 21228				
Political Contribution		011	Amount of Each Disb	ursement this Period	
Candidate Name		Category/			
BENJAMIN L CARDIN Type			1000.00		
	ement For: 2012				
Senate President	Primary General Other (specify) ▼				
State: MD District: 03	(-poon)/ <b>\</b>				
Full Name (Last, First, Middle Initial)					
C. DEMOCRATIC SENATORIAL CA	MPAIGN COMMITTE	EE	Date of Disbursemen	t	
Mailing Address 120 MARYLAND AVE NE			08 02	2011	
Maining Address 120 MARYLAND AVE NE			00 02	2011	
City	State Zip Code		Transaction ID : SE	323.7810	
WASHINGTON Purpose of Disbursement	DC 20002				
Political Contribution		011	Amount of Each Disb	ursement this Pariod	
Candidate Name		Category/	Amount of Lacif Disc		
		Туре		2000.00	
	ement For:				
Senate President	Primary General  Other (specify) ▼				
State: District:	Salor (opcolly)				
SUBTOTAL of Disbursements This Page (optional)		······		3787.00	
TOTAL This Period (last page this line number onl	/)				

S	CHEDULE B (FEC Form 3X)						192 O	92 OF 197	
IT	EMIZED DISBURSEMENTS		parate schedule(s) n category of the	(check only one)			0.5		
			d Summary Page	21b	22 28a	X 23 28b	24 28c	25 29	26 30b
Λ.	by information copied from such Departs and Chite-	onto ma	, not be sold or						
	ny information copied from such Reports and Statem for commercial purposes, other than using the name								
$\setminus$	NAME OF COMMITTEE (In Full)								
$ \rangle$	Harden Healthcare LLC Federal PA	/C							
$\angle$	Full Name (Lost First Middle Initial)								
Α.	Full Name (Last, First, Middle Initial)  DEWHURST FOR TEXAS				Date of	f Disbursen	nent		
					M			Y	Υ
	Mailing Address 1210 SAN ANTONIO ST STE 700				11	16	20	11	
	City	State	Zip Code						
	AUSTIN	TX	78767		Trans	saction ID :	SB23.7836		
	Purpose of Disbursement				1				
	Political Contribution			011	Amoun	t of Each [	Disbursement	this Po	eriod
	Candidate Name DAVID H DEWHURST			Category/				5000.0	00
	Office Sought: House Disbursen	nent For:	2012	Type		7	7		
		Primary	General						
		Other (sp	ecify) 🔻						
_	State: TX District: 00								
P	Full Name (Last, First, Middle Initial)				Data	f Disbursen	ment		
٥.	DEWHURST FOR TEXAS							V = 1	V
	Mailing Address 1210 SAN ANTONIO ST STE 700				11 16 _ 2011 _				1
		State TX	Zip Code		Trans	saction ID :	SB23.7847		
	AUSTIN Purpose of Disbursement	1/	78767		-				
	Political Contribution			011	Amoun	t of Each [	Disbursement	this Pe	eriod
	Candidate Name			Category/				5000.	00
	DAVID H DEWHURST			Type		7		5000.	00
	Office Sought: House Disbursen  Senate	nent For: Primary	2012 General						
		Other (sp							
	State: TX District: 00	\-P	· · •						
	Full Name (Last, First, Middle Initial)								
C.	DOGGETT FOR US CONGRESS				Date o	f Disbursen	ment		
	Mailing Address PO BOX 5843				09	/ D 1 0		)11	Y
	Maining Address FO DOV 2043				0.9	20	20		-
	•	State	Zip Code		Trans	saction ID :	: SB23.7817		
		TX	78763				. 3520011		
	Purpose of Disbursement Political Contribution 011				Amoun	t of Each	Disbursement	thic D	oriod
	Candidate Name			Category/	Amoun	ı ∪ı ⊑aCII L	ni seilleill	-	
	LLOYD DOGGETT			Type		7		1000.0	00
	Office Sought: House Disbursen								
		Primary Other (sp	General						
	State: TX District: 25	omer (sp	▼ ▼						
					-				_
s	SUBTOTAL of Disbursements This Page (optional)						1	1000.0	00
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T	OTAL This Period (last page this line number only).								

SCHEDULE B (FEC Form 3X)		FOR LINE I	PAGE 193 OF 197	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the			
	Detailed Summary Page	27	28a 28b	28c 29 30
Any information copied from such Reports and Staten				
or for commercial purposes, other than using the nam  NAME OF COMMITTEE (In Full)	ne and address of any politic	cal committee to	solicit contributions fr	om such committee.
Harden Healthcare LLC Federal PA	Δ <b>C</b>			
Tialdell Healthcare LLC Federal 17	40			
Full Name (Last, First, Middle Initial)		_	Data of Diahuraama	ant
A. NATIONAL REPUBLICAN SENAT	ORIAL COMMITTE	E	Date of Disburseme	ent
Mailing Address 425 SECOND STREET NE			10 25	2011
City	State Zip Code		Transaction ID : S	SP22 7924
WASHINGTON	DC 20002		Transaction ib . S	5623.7634
Purpose of Disbursement Political Contribution		011	Amount of Each Di	sbursement this Period
Candidate Name		Category/		
		Type		2500.00
Office Sought: House Disburser Senate				
President	Primary General Other (specify) ▼			
State: District:	Culci (opcony)			
Full Name (Last, First, Middle Initial)				
B. STABENOW FOR US SENATE			Date of Disburseme	ent
			M M / D D	/
Mailing Address P.O. BOX 4945		08 02	2011	
•	State Zip Code		Transaction ID : S	SB23.7807
EAST LANSING Purpose of Disbursement	MI 48826			
Political Contribution		011	Amount of Each Di	sbursement this Period
Candidate Name	Candidate Name			1000.00
DEBBIE MS STABENOW		Category/ Type		1000.00
	ment For: 2012			
Senate Y	Primary General Other (specify) ▼			
State: MI District: 00	Other (specify)			
Full Name (Last, First, Middle Initial)				
C.			Date of Disburseme	ent
Molling Address			M M / D D	/ Y Y Y Y Y
Mailing Address				
City	State Zip Code			
Purpose of Disbursement				
r dipose of bioscioonioni			Amount of Each Di	sbursement this Period
Candidate Name		Category/	Amount of Each Di	sparsement this remod
		Туре		
Office Sought: House Disburser				
Senate   President	Primary General Other (specify) ▼			
State: District:	Other (specify)			
SUBTOTAL of Disbursements This Page (optional)		·····		3500.00
				40007.00
TOTAL This Period (last page this line number only)				18287.00

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 194 OF 197
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	NOMBER.
	for each category of the Detailed Summary Page	21b	22 23 24 25 26
	Dotailed Guillinary Fage	27	28a 28b 28c X 29 30b
Any information copied from such Reports and Stater			
or for commercial purposes, other than using the nan	ne and address of any politi	cal committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
$ \; angle$ Harden Healthcare LLC Federal P.	AC		
Full Name (Last, First, Middle Initial)		I	
A. ELECT TODD HUNTER			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address 445 CAPE HENRY	10 06 2011		
0.1	01-1-		
City CORPUS CHRISTI	State Zip Code TX 78412		Transaction ID : SB29.7861
Purpose of Disbursement	70412		
Political Contribution		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
		Type	250.00
	ment For:		
Senate	Primary General		
President Pietriet:	Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial)  B. FRIENDS OF BOR DELIFIT			Date of Disbursement
B. FRIENDS OF BOB DEUELL			
Mailing Address PO BOX 8609			10 06 2011
,	State Zip Code		Transaction ID : SB29.7896
GREENVILLE Purpose of Disbursement	TX 75404		
Political Contribution		011	Amount of Each Disbursement this Period
Candidate Name			Sam S. Ellar Brown and Toriou
		Category/ Type	1000.00
Office Sought: House Disburser	ment For:		
Senate	Primary General		
President	Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial)			Date of Disbursement
C. FRIENDS OF BOB DEUELL			
Mailing Address PO BOX 8609			10 19 2011
City	State Zip Code		Transaction ID : SB29.7898
GREENVILLE	TX 75404		
Purpose of Disbursement Political Contribution		011	
Oznatista Nama			Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Candidate Name		Type	
	ment For:	Туре	
	ment For:  Primary General	Туре	
Office Sought: House Disburser		Туре	
Office Sought: House Disburser  Senate	Primary General	Туре	
Office Sought:    House   Disburser     Senate   President     State: District:	Primary General Other (specify) ▼		
Office Sought: House Disburser Senate President	Primary General Other (specify) ▼		2250.00

SCHEDU	ILE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 195 OF 197
	D DISBURSEMENTS	Use separate schedule(	s) (check only	TTO MEET I.
		for each category of the Detailed Summary Page		22 23 24 25 26
		_ stands summary rage	27	28a 28b 28c X 29 30b
				on for the purpose of soliciting contributions
		ne and address of any pol	litical committee to	o solicit contributions from such committee.
I \	F COMMITTEE (In Full)	4.0		
/ Harde	n Healthcare LLC Federal Pa	AC		
Full Name	e (Last, First, Middle Initial)			
A. FRIEN	IDS OF JOHN ZERWAS			Date of Disbursement
				M M / D D / Y Y Y Y
Mailing A	ddress PO BOX 852			10 06 2011
City		State Zip Code		
FULSHE/		TX 77441		Transaction ID : SB29.7858
	of Disbursement Contribution		2	
			011	Amount of Each Disbursement this Period
Candidate	= INAIIIE		Category/ Type	2500.00
Office So	ught: House Disburser	ment For:	Туре	
	Senate	Primary General		
	President	Other (specify) ▼		
State:	District:			
	e (Last, First, Middle Initial)			Date of Dishumannant
B. JUAN	HINOJOSA FOR TEXAS SE		Date of Disbursement	
Mailing A	ddress PO BOX 1421		10 24 2011	
	44.000   O BOX 1421			
City		State Zip Code		Transaction ID : SB29.7867
AUSTIN	of Disbursement	TX 78767		
	Contribution		011	Amount of Each Disbursement this Period
Candidate	e Name		Category/	
			Type	1000.00
Office So	ught: House Disburser	ment For:		
	Senate President	Primary General		
State:	District:	Other (specify) ▼		
	e (Last, First, Middle Initial)			
_	I ELTIFE CAMPAIGN			Date of Disbursement
				M M / D D / Y Y Y Y
Mailing A	ddress 417 S COLLEGE		11 29 2011	
City		State Zip Code		
TYLER		TX 75702		Transaction ID : SB29.7869
	of Disbursement			
	Contribution		011	Amount of Each Disbursement this Period
Candidate	e Name		Category/	1000.00
Office So	ught: House Disburser	ment For:	Type	
Jiiioc 00	Senate	Primary General		
	President	Other (specify) ▼		
State:	District:	· 		
SUBTOTAL	of Disbursements This Page (optional)		·····	4500.00
TOTAL THE	Deviced (look page this line mounts or and a	<b>N</b>		
I IOIAL INS	s Period (last page this line number only)	J		

S	CHEDULE B (FEC Form 3X)	11				PAGE 196 OF 197		
IT	EMIZED DISBURSEMENTS		ate schedule(s) ategory of the	(check only one)				
			ummary Page	21b 27	22 28a	23 24 25 26 28b 28c <b>X</b> 29 30b		
Δ	ny information copied from such Reports and Statem	ents may no	nt he sold or used					
	for commercial purposes, other than using the name							
$\setminus$	NAME OF COMMITTEE (In Full)							
$ \rangle$	Harden Healthcare LLC Federal PA	4C						
$\angle$	Full Name (Last, First, Middle Initial)							
Α.	LANCE GOODEN FOR SENATE				Date of	Disbursement		
					M M	/ D D / Y Y Y Y		
	Mailing Address PO BOX 2125				10	19 2011		
	City	State	Zip Code					
	TERRELL	TX	75160		Transa	action ID : SB29.7863		
	Purpose of Disbursement Political Contribution							
	Candidate Name			011	Amount	of Each Disbursement this Period		
	Candidate Name			Category/ Type		250.00		
	Office Sought: House Disbursen	nent For:		1,900				
	Senate	Primary	General					
		Other (specif	fy) 🔻					
_	State: District: Full Name (Last, First, Middle Initial)							
В.	LARRY GONZALES FOR SENATE	=			Date of	Disbursement		
-		<b>-</b> 			M = M	/ D D / Y Y Y Y Y		
	Mailing Address PO BOX 2501				10 13 2011			
	,		Zip Code		Transa	action ID : SB29.7865		
	ROUND ROCK Purpose of Disbursement	TX	78680					
	Political Contribution			011	Amount	of Each Disbursement this Period		
	Candidate Name			Category/		500.00		
	Office County			Туре		500.00		
	Office Sought: House Disbursen Senate	nent For: Primary	General					
		Other (specif						
_	State: District:		-· •					
_	Full Name (Last, First, Middle Initial)							
C.	RICHARD RAYMOND FOR CONG	RESS				Disbursement		
	Mailing Address PO BOX 450349				09	14 2011		
						,		
	,	State TX	Zip Code		Transa	action ID : SB29.7900		
	LARDEO Purpose of Disbursement	1 ^	78045					
	Political Contribution			011	Amount	of Each Disbursement this Period		
	Candidate Name			Category/		1500.00		
	Office Sought: House Disbursen	ont For		Туре		1300.00		
		nent For: Primary	General					
		Other (specif						
_	State: District:		· 					
	·							
[ 5	SUBTOTAL of Disbursements This Page (optional)					2250.00		
١,	TOTAL This Period (last page this line number only)							

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER		
TEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE (check only		
I LIVIIZED DISDUNSEIVIEN IS	for each category of the	21b	22 23 24 25 26	
	Detailed Summary Page	27	28a 28b 28c X 29 30	
Any information copied from such Reports and Statem	ents may not be sold or use	ed by any perso	on for the purpose of soliciting contributions	
or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full)	_			
igr > Harden Healthcare LLC Federal PA	AC .			
Full Name (Last, First, Middle Initial)		1		
A. ROYCE WEST CAMPAIGN			Date of Disbursement	
		M M / D D / Y Y Y Y		
Mailing Address 5787 S HAMPTON			10 06 2011	
City	7:- O-d-			
•	State Zip Code TX 75232		Transaction ID: SB29.7902	
Purpose of Disbursement	13232			
Political Contribution		011	Amount of Each Disbursement this Period	
Candidate Name		Category/	250.00	
		Type	250.00	
Office Sought: House Disbursem				
	Primary General  Other (specify) ▼			
State: District:	Culci (Specify)			
Full Name (Last, First, Middle Initial)				
<b>3.</b>			Date of Disbursement	
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Mailing Address				
City	State Zip Code			
Ony C	ruto Zip Oude			
Purpose of Disbursement				
			Amount of Each Disbursement this Period	
Candidate Name		Category/		
Office Sought: House Disbursem	nent For:	Туре		
	Primary General			
	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)				
<b>.</b>			Date of Disbursement	
Moiling Address			M M M / D D / Y N Y N Y	
Mailing Address				
City	tate Zip Code			
Durana of Diahuranana				
Purpose of Disbursement				
Candidate Name		0.1	Amount of Each Disbursement this Period	
		Category/ Type		
Office Sought: House Disbursem	nent For:			
	Primary General			
	Other (specify) ▼			
State: District:				
CURTOTAL ACROSS			250.00	
SUBTOTAL of Disbursements This Page (optional)		······	255.00	
TOTAL This Period (last page this line number only).			9250.00	