

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 1650 King Street
Suite 602
 Check if different than previously reported. (ACC)
Alexandria VA 22314

2. **FEC IDENTIFICATION NUMBER** C00338020
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

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

5. Covering Period 11 23 2010 through 12 31 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Ms Maribeth Bersani

Signature of Treasurer Electronically Filed by Ms Maribeth Bersani Date 12 19 2010

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Assisted Living Federation of America

Report Covering the Period: From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		172107.70
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	232378.37									
(c) Total Receipts (from Line 19)	14465.00	159363.84								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	246843.37	331471.54								
7. Total Disbursements (from Line 31)	0.00	84628.17								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	246843.37	246843.37								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Assisted Living Federation of America

Report Covering the Period: From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	12050.00	113236.00
(ii) Unitemized	2415.00	34005.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	14465.00	147241.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	6800.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	14465.00	154041.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	5322.84
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	14465.00	159363.84
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	14465.00	159363.84

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	4872.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	4872.17
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	75500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	250.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	250.00
29. Other Disbursements.....	0.00	4006.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	0.00	84628.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	84628.17

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	14465.00	154041.00
34. Total Contribution Refunds (from Line 28(d))	0.00	250.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	14465.00	153791.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	4872.17
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	5322.84
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	-450.67

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

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

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Assisted Living Federation of America

A. Full Name (Last, First, Middle Initial)
Michel Augsburguer
Mailing Address 903 Vanessa Ct
City Windsor State CA Zip Code 95492-7924
FEC ID number of contributing federal political committee. **C**
Name of Employer Chancellor Health Care Inc Occupation President/CEO
Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 1250.00
Date of Receipt 11 / 23 / 2010
Transaction ID: C1150833
Amount of Each Receipt this Period 750.00

B. Full Name (Last, First, Middle Initial)
Rick Banas
Mailing Address 535 E North St Ste E
City Bradley State IL Zip Code 60915-1188
FEC ID number of contributing federal political committee. **C**
Name of Employer BMA Management LTD Occupation Vice President of Marketing
Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 12 / 19 / 2010
Transaction ID: C1161912
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Maribeth Bersani
Mailing Address 320 S. West St.
City Alexandria State VA Zip Code 22314
FEC ID number of contributing federal political committee. **C**
Name of Employer Assisted Living Federation of America Occupation Senior Vice President of Public Policy
Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00
Date of Receipt 12 / 03 / 2010
Transaction ID: C1161888
Amount of Each Receipt this Period 750.00

SUBTOTAL of Receipts This Page (optional) ► 1750.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 12
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Assisted Living Federation of America

A.

Full Name (Last, First, Middle Initial)
Rod Burkett

Mailing Address 535 E North St Ste E

City State Zip Code
Bradley IL 60915-1188

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

Name of Employer BMA Management LTD Occupation President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 9 / 2 0 1 0

Transaction ID: C1161937

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Vicki R. Clark

Mailing Address 714 1/2 Poinsettia Ave

City State Zip Code
Corona Del Mar CA 92625-5525

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

Name of Employer Vintage senior living Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 0 2 / 2 0 1 0

Transaction ID: C1154683

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
Rick Grimes

Mailing Address 5265 Cozy Glen Ln

City State Zip Code
Alexandria VA 22312-3911

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

Name of Employer Assisted Living Federation of America Occupation President/CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 1 0

Transaction ID: C1167496

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

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

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

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

FOR LINE NUMBER: PAGE 8 / 12

(check only one)

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

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NAME OF COMMITTEE (In Full)
Assisted Living Federation of America

A.

Full Name (Last, First, Middle Initial)
Christopher Hollister
Mailing Address 411 N. 3rd Street

City State Zip Code
Wills Point TX 75169-2107

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

Name of Employer Occupation
Retired Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 03 / 2010

Transaction ID: C1161891

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Paul Klaassen
Mailing Address 100 S Pointe Dr
Apt 3803

City State Zip Code
Miami Beach FL 33139-7375

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

Name of Employer Occupation
N/A Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 15 / 2010

Transaction ID: C1160175

Amount of Each Receipt this Period
2000.00

C.

Full Name (Last, First, Middle Initial)
Craig Livermore
Mailing Address 1101 Geneva Rd.

City State Zip Code
Saint Charles IL 60174

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

Name of Employer Occupation
BMA Management Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 19 / 2010

Transaction ID: C1161916

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 12
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Assisted Living Federation of America

A.	Full Name (Last, First, Middle Initial) David Mitchell	Date of Receipt MM / DD / YYYY 12 / 19 / 2010
	Mailing Address 535 E North St Ste E	Transaction ID: C1161914
	City State Zip Code Bradley IL 60915-1188	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation BMA Management LTD Chief Financial Officer	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Mark Ohlendorf	Date of Receipt MM / DD / YYYY 12 / 06 / 2010
	Mailing Address 6737 W Washington St Ste 2300	Transaction ID: C1161889
	City State Zip Code West Allis WI 53214-5650	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Brookdale Senior Living, Inc. Co-President	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

C.	Full Name (Last, First, Middle Initial) Steven L. Vick	Date of Receipt MM / DD / YYYY 12 / 06 / 2010
	Mailing Address 4232 San Carlos St	Transaction ID: C1161890
	City State Zip Code Dallas TX 75205-2050	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Signature Senior Living, LLC Chief Executive Officer	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	3300.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Assisted Living Federation of America

A.	Full Name (Last, First, Middle Initial) Colleen Wille	Date of Receipt MM / DD / YYYY 12 / 19 / 2010
	Mailing Address 16703 Spring View Dr	Transaction ID: C1161919
	City State Zip Code Lockport IL 60441	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Horizon Bay Senior Communities Occupation: Regional Vice President Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Paul J. Williams	Date of Receipt MM / DD / YYYY 11 / 30 / 2010
	Mailing Address 613 Walnut Grove Rd	Transaction ID: C1150062
	City State Zip Code Essex MD 21221-6091	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: ALFA Occupation: Association Executive Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Paul J. Williams	Date of Receipt MM / DD / YYYY 12 / 19 / 2010
	Mailing Address 613 Walnut Grove Rd	Transaction ID: C1161887
	City State Zip Code Essex MD 21221-6091	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: ALFA Occupation: Association Executive Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	425.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 12

(check only one)

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

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NAME OF COMMITTEE (In Full)
Assisted Living Federation of America

A.

Full Name (Last, First, Middle Initial)
Paul J. Williams

Mailing Address 613 Walnut Grove Rd

City State Zip Code
Essex MD 21221-6091

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

Name of Employer Occupation
ALFA Association Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
1000.00

Date of Receipt

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

Transaction ID: C1167269

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)
Granger Cobb

Mailing Address 3131 Elliott Ave
Ste 500

City State Zip Code
Seattle WA 98121-1032

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

Name of Employer Occupation
Emeritus Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID: C1154642

Amount of Each Receipt this Period

-40.00

[MEMO ITEM]

* Reassigned 5/24/10 contribution to Ms. Tina Cobb (wife).

C.

Full Name (Last, First, Middle Initial)
Tina Cobb

Mailing Address 1521 2nd AVE
Apt. 3602

City State Zip Code
Seattle WA 98101

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

Name of Employer requested Occupation requested

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
240.00

Date of Receipt

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

Transaction ID: C1154648

Amount of Each Receipt this Period

40.00

[MEMO ITEM]

* Reassigned 5/24/10 contribution of Mr. Granger Cobb (husband).

SUBTOTAL of Receipts This Page (optional) ▶

75.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Assisted Living Federation of America

A.	Full Name (Last, First, Middle Initial) Granger Cobb		Date of Receipt MM / DD / YYYY 12 / 02 / 2010
	Mailing Address 3131 Elliott Ave Ste 500		Transaction ID: C1154645
	City Seattle	State WA	Zip Code 98121-1032
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -200.00
	Name of Employer Emeritus	Occupation Executive	[MEMO ITEM] * Reassigned 5/27/10 contribution to Ms. Tina Cobb (wife).
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

B.	Full Name (Last, First, Middle Initial) Tina Cobb		Date of Receipt MM / DD / YYYY 12 / 02 / 2010
	Mailing Address 1521 2nd AVE Apt. 3602		Transaction ID: C1154647
	City Seattle	State WA	Zip Code 98101
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
	Name of Employer requested	Occupation requested	[MEMO ITEM] * Reassigned 5/27/10 contribution of Mr. Granger Cobb (husband).
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	12050.00