

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

Office Use Only

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

American Seniors Housing Association (Seniors Housing PAC)

ADDRESS (number and street)

5100 Wisconsin Ave., NW

Suite 307

☐Check if different  
than previously  
reported. (ACC)

Washington

DC

20016

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00325332

3. IS THIS  
REPORT☒NEW  
(N)**OR**☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

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

Feb 20 (M2)

☐

May 20 (M5)

☒

Aug 20 (M8)

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

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

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

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

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

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

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

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2008

through

07

31

2008

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

Type or Print Name of Treasurer

David Schless

Signature of Treasurer

Electronically Filed by David Schless

Date

08

06

2008

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

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

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American Seniors Housing Association (Seniors Housing PAC)

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	7	3	1	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2008</span>		538900.99
(b) Cash on Hand at Beginning of Reporting Period .....	655070.99	
(c) Total Receipts (from Line 19) .....	30550.00	363220.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	685620.99	902120.99
7. Total Disbursements (from Line 31) .....	24655.00	241155.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	660965.99	660965.99
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

American Seniors Housing Association (Seniors Housing PAC)

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	7	3	1	2	0	0	8

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	29200.00	336825.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	1350.00	23895.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➡	30550.00	360720.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	2500.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➡	30550.00	363220.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	30550.00	363220.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	30550.00	363220.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	24500.00	241000.00
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 .....	150.00	150.00
(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)) .....	150.00	150.00
29. Other Disbursements.....	5.00	5.00
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))..	24655.00	241155.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24655.00	241155.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	30550.00	363220.00
34. Total Contribution Refunds (from Line 28(d)) .....	150.00	150.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	30400.00	363070.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 / 17

(check only one)

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

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

NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

**A.**

Full Name (Last, First, Middle Initial)

Gary Smith

Mailing Address 71 South Wacker Drive  
Suite 900

City State Zip Code  
Chicago IL 60606-4637

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Classic Residence by Hyatt

Occupation  
Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: 25295015

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Doug S Schiffer

Mailing Address 1050 Crown Pointe Pkwy  
Suite 960

City State Zip Code  
Atlanta GA 30338-7700

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Hallmark Holdings LLC

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 1 / 2 0 0 8

Transaction ID: 25295016

Amount of Each Receipt this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

Raymond J. Lewis

Mailing Address 111 S. Wacker Dr.  
Suite 4800

City State Zip Code  
Chicago IL 60606-4302

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Ventas Healthcare Propert-  
ies

Occupation  
EVP & Chief Invesmtent Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 3 / 2 0 0 8

Transaction ID: 25386650

Amount of Each Receipt this Period

3000.00

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

6000.00

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

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

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

FOR LINE NUMBER: PAGE 7 / 17

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

**A.**

Full Name (Last, First, Middle Initial)

Tim A Doman

Mailing Address 111 S. Wacker Dr.  
Suite 4800

City State Zip Code  
Chicago IL 60606-4302

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Ventas Healthcare Propert-  
ies

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 3 / 2 0 0 8

Transaction ID: 25386651

Amount of Each Receipt this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)

Joseph G Solari

Mailing Address 111 S. Wacker Dr.  
Suite 4800

City State Zip Code  
Chicago IL 60606-4302

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Ventas Healthcare Propert-  
ies

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 3 / 2 0 0 8

Transaction ID: 25386652

Amount of Each Receipt this Period

1500.00

**C.**

Full Name (Last, First, Middle Initial)

Chris N Cummings

Mailing Address 10350 Ormsby Park Place  
Suite 300

City State Zip Code  
Louisville KY 40223-6178

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Ventas Healthcare Propert-  
ies

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 3 / 2 0 0 8

Transaction ID: 25386653

Amount of Each Receipt this Period

1000.00

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

4000.00

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

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

FOR LINE NUMBER: PAGE 8 / 17

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

**A.**

Full Name (Last, First, Middle Initial)

Vince M Cozzi

Mailing Address 111 S. Wacker Dr.  
Suite 4800City State Zip Code  
Chicago IL 60606-4302FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Ventas Healthcare PropertiesOccupation  
VP, Acquisitions

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	3		2	0	0	8

Transaction ID: 25386664

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Philip J Kayden

Mailing Address 111 S. Wacker Dr  
Suite 4800City State Zip Code  
Chicago IL 60606-4302FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Ventas Healthcare PropertiesOccupation  
Manager, Real Estate Investments

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	3		2	0	0	8

Transaction ID: 25386665

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Joy L Butora

Mailing Address 111 S. Wacker Dr.  
Suite 4800City State Zip Code  
Chicago IL 60606-4302FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Ventas Healthcare Properties

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	3		2	0	0	8

Transaction ID: 25386666

Amount of Each Receipt this Period

500.00

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

2000.00

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



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

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

FOR LINE NUMBER: PAGE 9 / 17

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

**A.**

Full Name (Last, First, Middle Initial)

Jennifer A St. Marie

Mailing Address 111 S. Wacker Dr.  
Suite 4800

City State Zip Code  
Chicago IL 60606-4302

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Ventas Healthcare Propert-  
ies

Occupation  
Manager, Real Estate Investments

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 3 / 2 0 0 8

Transaction ID: 25386667

Amount of Each Receipt this Period

400.00

**B.**

Full Name (Last, First, Middle Initial)

Brian L Tilton

Mailing Address 111 S. Wacker Dr.  
Suite 4800

City State Zip Code  
Chicago IL 60606-4302

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Ventas Healthcare Propert-  
ies

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 3 / 2 0 0 8

Transaction ID: 25386670

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

William A Johnson

Mailing Address 10350 Ormsby Park Place  
Suite 300

City State Zip Code  
Louisville KY 40223-6178

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Ventas Healthcare Propert-  
ies

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 3 / 2 0 0 8

Transaction ID: 25386671

Amount of Each Receipt this Period

300.00

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

1000.00

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

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

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

FOR LINE NUMBER: PAGE 10 / 17

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

**A.**

Full Name (Last, First, Middle Initial)

Joseph D Lambert

Mailing Address 111 S. Wacker Dr.  
Suite 4800

City State Zip Code  
Chicago IL 60606-4302

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Ventas Healthcare Properties

Occupation  
Senior Transactions Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 3 / 2 0 0 8

Transaction ID: 25386672

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

Marc R Thompson

Mailing Address 3000 Oak Rd.  
Suite 400

City State Zip Code  
Walnut Creek CA 94597-2092

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Bank of the West

Occupation  
Senior VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: 25420868

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Laurence A Schiffer

Mailing Address 212 S. Central Ave.  
Suite 201

City State Zip Code  
Saint Louis MO 63105-3500

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Hallmark Holdings LLC

Occupation  
Chairman & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: 25420869

Amount of Each Receipt this Period

2000.00

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

2550.00

**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 / 17

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

**A.**

Full Name (Last, First, Middle Initial)

Paul Gallagher

Mailing Address 3760 Kilroy Airport Way  
Suite 300

City State Zip Code  
Long Beach CA 90806-2443

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HCP, Inc.

Occupation  
EVP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: 25420871

Amount of Each Receipt this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)

James F Flaherty, III

Mailing Address 3760 Kilroy Airport Way  
Suite 300

City State Zip Code  
Long Beach CA 90806-2443

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HCP, Inc.

Occupation  
Chairman and CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: 25420872

Amount of Each Receipt this Period

3000.00

**C.**

Full Name (Last, First, Middle Initial)

Scott Stewart

Mailing Address 1001 Pennsylvania, NW  
Suite 220 South

City State Zip Code  
Washington DC 20004-2505

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
The Carlyle Group

Occupation  
Managing Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 6 / 2 0 0 8

Transaction ID: 25459703

Amount of Each Receipt this Period

2500.00

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

7500.00

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

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

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

FOR LINE NUMBER: PAGE 12 / 17

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

**A.**

Full Name (Last, First, Middle Initial)

Kathy Mahan

Mailing Address 4615 Green Trail Dr.

City

Houston

State

TX

Zip Code

77084-2946

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Silverado Senior Living

Occupation

Regional Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 6 / 2 0 0 8

Transaction ID: 25459704

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

Elmo L Robinson

Mailing Address 211 East Parkwood  
Suite 100

City

Friendswood

State

TX

Zip Code

77546-5174

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
E-Quest Management, LLC

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 3 1 / 2 0 0 8

Transaction ID: 25677938

Amount of Each Receipt this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

David W Beathard, Sr.

Mailing Address 14160 Dallas Pkwy.  
Suite 300

City

Dallas

State

TX

Zip Code

75254-4319

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Capital Senior Living Cor-  
poration

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 3 1 / 2 0 0 8

Transaction ID: 25677939

Amount of Each Receipt this Period

750.00

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

2900.00

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

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

FOR LINE NUMBER: PAGE 13 / 17

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

**A.**

Full Name (Last, First, Middle Initial)

Keith N Johannessen

Mailing Address 14160 Dallas Parkway  
Suite 300

City	State	Zip Code
Dallas	TX	75254-4319

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Capital Senior Living Cor-  
porationOccupation  
President and COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	0	8

Transaction ID: 25677941

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Lisa M Brush

Mailing Address 3560 Pine Grove Ave.  
Suite 368

City	State	Zip Code
Port Huron	MI	48060-1994

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Symphony Senior LivingOccupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	0	8

Transaction ID: 25677942

Amount of Each Receipt this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

Ryan E Frederick

Mailing Address 1 California St.  
22nd Floor

City	State	Zip Code
San Francisco	CA	94111-5433

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CoastWood Capital GroupOccupation  
Associate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	0	8

Transaction ID: 25677944

Amount of Each Receipt this Period

250.00

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

3250.00

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

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

FOR LINE NUMBER: PAGE 14 / 17

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

**A.**

Full Name (Last, First, Middle Initial)

Kathy Mahan

Mailing Address 4615 Green Trail Dr.

City

Houston

State

TX

Zip Code

77084-2946

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Silverado Senior Living

Occupation

Regional Director

Receipt For:

☐
☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	0	8

Transaction ID: 25798656

Amount of Each Receipt this Period

0.00

**[MEMO ITEM]**Refund(s) on Schedule B  
Totaling \$150.00 This changes  
the YTD Total to \$15-  
0.00

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

0.00

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

29200.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 17

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

A.

Full Name (Last, First, Middle Initial)

Kathy Mahan

Mailing Address 4615 Green Trail Dr.

City  
Houston

State  
TX

Zip Code  
77084-2946

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 25294095

Date of Disbursement

/   /

Amount of Each Disbursement this Period

150.00

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

150.00

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

150.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 / 17

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

**A.** Full Name (Last, First, Middle Initial)  
Richard E Neal For Congress Committee

Mailing Address P O Box 15906

City Chevy Chase State MD Zip Code 20825

Purpose of Disbursement

Candidate Name  
Rep. Richard E. NealOffice Sought: ☒ House  
☐ Senate  
☐ President

State: MA District: 02

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: 25427210

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	1		2	0	0	8

Amount of Each Disbursement this Period

2000.00

**B.** Full Name (Last, First, Middle Initial)  
Kendrick Meek Campaign For CongressMailing Address 111 Nw 183rd Street  
Suite 325

City Miami State FL Zip Code 33169

Purpose of Disbursement

Candidate Name  
Rep. Kendrick MeekOffice Sought: ☒ House  
☐ Senate  
☐ President

State: FL District: 17

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: 25461801

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	0	8

Amount of Each Disbursement this Period

2500.00

**C.** Full Name (Last, First, Middle Initial)  
Friends Of Dick Durbin Committee

Mailing Address 200 E. Jefferson St.

City Falls Church State VA Zip Code 22046

Purpose of Disbursement

Candidate Name  
Sen. Richard DurbinOffice Sought: ☐ House  
☒ Senate  
☐ President

State: IL District:

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: 25609032

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	1		2	0	0	8

Amount of Each Disbursement this Period

5000.00

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

9500.00

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 17

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

A.

Full Name (Last, First, Middle Initial)

Hawkeye PAC

Mailing Address P O Box 7255

City  
Des Moines

State  
IA

Zip Code  
50309

Purpose of Disbursement

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: 25609035

Date of Disbursement

07 / 21 / 2008

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Crowley For Congress

Mailing Address 422 C St., NE  
Lower Level

City  
Washington

State  
DC

Zip Code  
20002

Purpose of Disbursement

Candidate Name  
Rep. Joseph Crowley

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 07

Transaction ID: 25660448

Date of Disbursement

07 / 29 / 2008

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Kind For Congress Committee

Mailing Address 1207 C St. NE

City  
Washington

State  
DC

Zip Code  
20002

Purpose of Disbursement

Candidate Name  
Rep. Ron Kind

011  
Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WI District: 03

Transaction ID: 25660453

Date of Disbursement

07 / 29 / 2008

Amount of Each Disbursement this Period

5000.00

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

15000.00

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

24500.00