

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street)   
  
 Check if different than previously reported. (ACC)    -

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 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  /  /  through  /  /

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 Ms Maribeth Bersani [Electronically Filed] Date  /  /

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Assisted Living Federation of America**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>		293019.97
(b) Cash on Hand at Beginning of Reporting Period.....	270476.84	
(c) Total Receipts (from Line 19) .....	14865.00	81357.38
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	285341.84	374377.35
7. Total Disbursements (from Line 31).....	7164.03	96199.54
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	278177.81	278177.81
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

Write or Type Committee Name

Assisted Living Federation of America

Report Covering the Period: From: 08 / 01 / 2012 To: 08 / 31 / 2012

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).....	13390.17	63481.17
(ii) Unitemized .....	1379.00	6133.52
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	14769.17	69614.69
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	14769.17	79614.69
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).....	95.83	1742.69
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	14865.00	81357.38
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	14865.00	81357.38

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	164.03	6449.54
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	164.03	6449.54
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7000.00	89500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	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	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	7164.03	96199.54
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7164.03	96199.54

**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) .....	14769.17	79614.69
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	250.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	14769.17	79364.69
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	164.03	6449.54
37. Offsets to Operating Expenditures (from Line 15, page 3).....	95.83	1742.69
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	68.20	4706.85

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

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

FOR LINE NUMBER: PAGE 6 OF 15  
(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**

Full Name (Last, First, Middle Initial)  
**A. Donna Lynne Aldrige**

Mailing Address 2493 N 450 W

City Ogden State UT Zip Code 84414

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

Name of Employer Emeritus Senior Living Occupation Regional Director of Quality Services

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 01 / 2012  
**Transaction ID : C1799063**

Amount of Each Receipt this Period  
180.00

Full Name (Last, First, Middle Initial)  
**B. Budgie Amparo**

Mailing Address 737 Olive Way Apt 2800

City Seattle State WA Zip Code 98101-3754

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

Name of Employer Emeritus Senior Living Occupation EVP, Quality & Risk Management

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
627.90

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 01 / 2012  
**Transaction ID : C1799064**

Amount of Each Receipt this Period  
434.70

Full Name (Last, First, Middle Initial)  
**C. Michel Augsburg**

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:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 31 / 2012  
**Transaction ID : C1817166**

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 914.70

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 15
	<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	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial)  
**A. Gregory Batchelder**

Mailing Address 1 Pandy Ln

City Methuen State MA Zip Code 01844-5567

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

Name of Employer Benchmark Senior Living Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 17 / 2012**

**Transaction ID : C1810681**

Amount of Each Receipt this Period  
**400.00**

Full Name (Last, First, Middle Initial)  
**B. Ana de la Cerda**

Mailing Address 8420 SE 39th St

City Mercer Island State WA Zip Code 98040-3623

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

Name of Employer Emeritus Senior Living Occupation Director of Policy and Compliance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **568.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 01 / 2012**

**Transaction ID : C1799068**

Amount of Each Receipt this Period  
**508.00**

Full Name (Last, First, Middle Initial)  
**C. Jon DeLuca**

Mailing Address 4728 Rue Bordeaux

City Lutz State FL Zip Code 33558-5366

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

Name of Employer Senior Lifestyle Corporation-N/A Occupation President and CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 07 / 2012**

**Transaction ID : C1804163**

Amount of Each Receipt this Period  
**250.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **1158.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 15
<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. Jamison Gosselin**  
Full Name (Last, First, Middle Initial)  
Mailing Address 202 Burgess Ave  
City Alexandria State VA Zip Code 22305  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Assisted Living Federation of America Occupation SVP Marketing  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 31 / 2012  
**Transaction ID : C1817165**  
Amount of Each Receipt this Period 500.00

**B. Allison Guthertz**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2 Herrick Dr, Apt 2H Apt 2H  
City Lawrence State NY Zip Code 11559-1404  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Benchmark Senior Living Occupation VP, Quality Resident Services  
Receipt For: 2012  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 17 / 2012  
**Transaction ID : C1810713**  
Amount of Each Receipt this Period 500.00

**C. Michele Hughes**  
Full Name (Last, First, Middle Initial)  
Mailing Address 345 Willow Dr  
City Cape May State NJ Zip Code 08204-4717  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Emeritus Assisted Living Occupation Regional Director of Operations  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 01 / 2012  
**Transaction ID : C1799071**  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 1100.00  
**TOTAL** This Period (last page this line number only).....▶

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

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

FOR LINE NUMBER: PAGE 9 OF 15  
(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**

Full Name (Last, First, Middle Initial)  
**A. Whitney Jackson**

Mailing Address 3131 Elliott Avenue, Suite 500

City State Zip Code  
Seattle WA 98121

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

Name of Employer Occupation  
Emeritus Senior Living Information Requested

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2012  
**Transaction ID : C1799072**

Amount of Each Receipt this Period  
225.00

Full Name (Last, First, Middle Initial)  
**B. Kellie Murray**

Mailing Address 3131 Elliott Ave # 500

City State Zip Code  
Seattle WA 98121

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

Name of Employer Occupation  
Emeritus Senior Living Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2012  
**Transaction ID : C1799074**

Amount of Each Receipt this Period  
180.00

Full Name (Last, First, Middle Initial)  
**C. Martin Roffe**

Mailing Address 615 Vista Dr

City State Zip Code  
Tacoma WA 98465-1420

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

Name of Employer Occupation  
Emeritus Senior Living SVP Financial Planning

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.79

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2012  
**Transaction ID : C1799078**

Amount of Each Receipt this Period  
187.47

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 592.47

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 15
<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. Ken Segarnick**  
Full Name (Last, First, Middle Initial)  
Mailing Address 510 Benson Ln  
City Chester Springs State PA Zip Code 19425-3644  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Brandywine Senior Living Occupation Information Requested  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 10 / 2012  
**Transaction ID : C1805285**  
Amount of Each Receipt this Period 2000.00

**B. Paula Serios**  
Full Name (Last, First, Middle Initial)  
Mailing Address 400 San Nicholas Ct  
City Laguna Beach State CA Zip Code 92651  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Silverado Senior Living Occupation Information Requested  
Receipt For: 2012  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 31 / 2012  
**Transaction ID : C1817167**  
Amount of Each Receipt this Period 1000.00

**C. Loren B. Shook**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2 Arabian  
City Trabuco Canyon State CA Zip Code 92679  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Silverado Senior Living Inc Occupation President/CEO & Chairman  
Receipt For: 2012  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 08 / 31 / 2012  
**Transaction ID : C1817169**  
Amount of Each Receipt this Period 3500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6500.00  
**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 11 OF 15
<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. Linda A Silveira**  
Full Name (Last, First, Middle Initial)  
Mailing Address 84 Cummings Rd  
City Swansea State MA Zip Code 02777  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Benchmark Senior Living Occupation Information Requested  
Receipt For: 2012  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 17 / 2012  
**Transaction ID : C1810714**  
Amount of Each Receipt this Period 300.00

**B. Rachel Tackett**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1733 Union Ave #901  
City Memphis State TN Zip Code 38104  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Emeritus Senior Living Occupation Regional Director of Operations  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 01 / 2012  
**Transaction ID : C1799079**  
Amount of Each Receipt this Period 225.00

**C. Dawn S. Usher**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6400 Oak Canyon, Ste. 200  
City Irvine State CA Zip Code 92618  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Silverado Senior Living Inc Occupation Sr. VP/Chief Administrative Officer  
Receipt For: 2012  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 31 / 2012  
**Transaction ID : C1817168**  
Amount of Each Receipt this Period 2000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2525.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 12 OF 15  
(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. Leonard Watterson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8547 Southridge Place  
 City Anacortes State WA Zip Code 98221  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Emeritus Senior Living Occupation Accountant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 01 / 2012  
**Transaction ID : C1799080**  
 Amount of Each Receipt this Period 150.00

**B. Melanie Werdel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3131 Elliott Ave Ste 500  
 City Seattle State WA Zip Code 98121-1032  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Emeritus Senior Living Occupation Executive Vice President Administratio  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 08 / 01 / 2012  
**Transaction ID : C1799081**  
 Amount of Each Receipt this Period 450.00

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

Date of Receipt  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	13390.17

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

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

FOR LINE NUMBER: PAGE 13 OF 15  
(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)  
**Assisted Living Federation of America**

Mailing Address 1650 King St  
 Ste 602

City Alexandria State VA Zip Code 22314-2747

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1742.69

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2012

**Transaction ID : C1826115**

Amount of Each Receipt this Period  
 95.83

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	95.83
<b>TOTAL</b> This Period (last page this line number only).....▶	95.83

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" 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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

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

Full Name (Last, First, Middle Initial)

**A. SunTrust Bank**

Mailing Address 1445 New York Ave NW

City Washington State DC Zip Code 20005-2134

Purpose of Disbursement  
Credit Card Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 31 / 2012

**Transaction ID : D136221**

Amount of Each Disbursement this Period

164.03

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

164.03

164.03

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. TEAM EMERSON FOR JO ANN EMERSON**

Mailing Address P.O. Box 822

City State Zip Code  
Cape Girardeau MO 63702

Purpose of Disbursement  
Contribution to FED Committee

Candidate Name  
**Rep. Jo Ann Emerson**

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: MO District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	27	/	2012

**Transaction ID : D135790**

Amount of Each Disbursement this Period

2,000.00
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Full Name (Last, First, Middle Initial)

**B. BACHUS FOR CONGRESS COMMITTEE**

Mailing Address P.O. Box 131134

City State Zip Code  
Birmingham AL 35213

Purpose of Disbursement  
Contribution to FED Committee

Candidate Name  
**Rep. Spencer Bachus**

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: AL District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	27	/	2012

**Transaction ID : D135791**

Amount of Each Disbursement this Period

5,000.00
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Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

7,000.00
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7,000.00
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