02/14/2002 14 : 55

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 Health Care Association Political Action Committee

ADDRESS (number and street) ▼ 1201 L Street, NW

Check if different than previously reported. (ACC)

Washington | DC | 20005 –

2. **FEC IDENTIFICATION NUMBER** ▼ C00006080

CITY ▲ STATE ▲ ZIPCODE ▲

3. IS THIS REPORT NEW (N) **OR** X 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)
X Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (M13)

(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 **P**ost -Election Report for the: General (30G) Runoff (30R) Special (30S)

Election on in the State of

5. Covering Period 03 01 2001 through 03 31 2001

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 Anna Lee, PAC Director

Signature of Treasurer Electronically Filed by Anna Lee, PAC Director Date 02 14 2002

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** (Revised 1/2001)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Revised 1/2001)

Write or Type Committee Name
American Health Care Association Political Action Committee

Report Covering the Period: From: 03 01 2001 To: 03 31 2001

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2001		89814.06
(b) Cash on Hand at Begining of Reporting Period	153669.10	
(c) Total Receipts (from Line 19)	45626.71	121631.59
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	199295.81	211445.65
7. Total Disbursements (from Line 30)	27434.58	39584.42
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	171861.23	171861.23
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	

X 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 (Revised 1/2001)

Write or Type Committee Name

American Health Care Association Political Action Committee

Report Covering the Period: From: 03 01 2001 To: 03 31 2001

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)	42453.84	
(ii) Unitemized	2934.47	
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ▶	45388.31	121260.09
(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 Totals to Line 32, page 4) ..... ▶	45388.31	121260.09
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 36, page 4)	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.)	238.40	371.50
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) ..... ▶	45626.71	121631.59
20. Total Federal Receipts (subtract Line 18 from Line 19) ..... ▶	45626.71	121631.59

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Revised 1/2001)

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	584.58	1544.51
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	584.58	1544.51
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	26500.00	36014.91
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	250.00	1500.00
(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)) ▶	250.00	1500.00
29. Other Disbursements	100.00	525.00
30. Total Disbursements (add Lines 21(c), 22, 23,24,25,26,27,28(d),and 29) ▶	27434.58	39584.42
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) ▶	27434.58	39584.42

III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3)	45388.31	121260.09
33. Total Contribution Refunds (from Line 28(d))	250.00	1500.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	45138.31	119760.09
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	584.58	1544.51
36. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35) ▶	584.58	1544.51

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 5 / 25

[X] 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 Health Care Association Political Action Committee

A.
Full Name (Last, First, Middle Initial): Ms Mike McDaniel
Mailing Address: 1611 West Lakes Pkwy.
City: West Des Moines | State: IA | Zip Code: 50266
FEC ID number of contributing federal political committee.
Name of Employer: Care Initiatives
Occupation: Senior Vice President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03 01 2001
Amount of Each Receipt this Period: 500.00
Transaction ID: 10000003252600002

B.
Full Name (Last, First, Middle Initial): Mr. Barton D. Weisman
Mailing Address: 5310 NW 33rd Ave #211
City: Ft Lauderdale | State: FL | Zip Code: 33309
FEC ID number of contributing federal political committee.
Name of Employer: HBA Corporation
Occupation: President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 03 02 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: 10000003250200003

C.
Full Name (Last, First, Middle Initial): Mr. David Crail
Mailing Address: 12701 Lillian St.
City: Omaha | State: NE | Zip Code: 68137
FEC ID number of contributing federal political committee.
Name of Employer: Vetter Health Services
Occupation: President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 03 02 2001
Amount of Each Receipt this Period: 300.00
Transaction ID: 10000003250500004

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1050.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 6 / 25

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Mr Andrew Martini

Mailing Address
4601 NE 77th Avenue Suite 300

City: Vancouver State: WA Zip Code: 98662

FEC ID number of contributing federal political committee.

Name of Employer: Evergreen HealthCare
Occupation: President

Receipt For: Primary General
Other (specify)

Aggregate Year-to-Date: 5000.00

Date of Receipt: 03 05 2001

Amount of Each Receipt this Period: 5000.00

Transaction ID: 10000003249900005

B.
Full Name (Last, First, Middle Initial)
Mr Thomas Grissom

Mailing Address
4515 Catherdral Avenue NW

City: Washington State: DC Zip Code: 40202

FEC ID number of contributing federal political committee.

Name of Employer: Kindred Healthcare
Occupation: VP, Government Relations

Receipt For: Primary General
Other (specify)

Aggregate Year-to-Date: 500.00

Date of Receipt: 03 05 2001

Amount of Each Receipt this Period: 500.00

Transaction ID: 10000003251800008

C.
Full Name (Last, First, Middle Initial)
Ms. Karen Holly Waldron

Mailing Address
290 Boners Run Rd

City: Shawsville State: VA Zip Code: 24162

FEC ID number of contributing federal political committee.

Name of Employer: Medical Facilities of America
Occupation: Partner

Receipt For: Primary General
Other (specify)

Aggregate Year-to-Date: 5000.00

Date of Receipt: 03 06 2001

Amount of Each Receipt this Period: 5000.00

Transaction ID: 10000003252200007

SUBTOTAL of Receipts This Page (optional) ..... ▶ **10500.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 7 / 25

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Mr Robert Murtha
Mailing Address
580 North Fourth St #620
City: Columbus State: OH Zip Code: 43215
FEC ID number of contributing federal political committee.
Name of Employer: The Macintosh Company
Occupation: President
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt: 03 06 2001
Amount of Each Receipt this Period: 500.00
Transaction ID: 10000003252300008

B.
Full Name (Last, First, Middle Initial)
Mr Michael McBride
Mailing Address
101 Grace Drive
City: Easley State: SC Zip Code: 29640
FEC ID number of contributing federal political committee.
Name of Employer: Health Management Resources
Occupation: President
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 1250.00
Date of Receipt: 03 07 2001
Amount of Each Receipt this Period: 1250.00
Transaction ID: 10000003252000009

C.
Full Name (Last, First, Middle Initial)
W. Heywood Fralin
Mailing Address
P.O. Box 29600
City: Roanoke State: VA Zip Code: 24016-0797
FEC ID number of contributing federal political committee.
Name of Employer: Medical Facilities of America Inc.
Occupation: CEO
Receipt For: Primary General
Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt: 03 07 2001
Amount of Each Receipt this Period: 3750.00
Transaction ID: 10000003252800010

SUBTOTAL of Receipts This Page (optional) ..... ▶ **5500.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 8 / 25

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A.
Full Name (Last, First, Middle Initial): Mr. Berel Tennenbaum
Mailing Address: 303 Elm St
City: Perth Amboy State: NJ Zip Code: 08861-4015
FEC ID number of contributing federal political committee.
Name of Employer: Perth Amboy Nursing Home
Occupation: Administrator
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03 09 2001
Amount of Each Receipt this Period: 500.00
Transaction ID: 10000003253300011

B.
Full Name (Last, First, Middle Initial): Mr Jack Vetter
Mailing Address: 5020 South 118th St
City: Omaha State: NE Zip Code: 68137
FEC ID number of contributing federal political committee.
Name of Employer: Vetter Health Services
Occupation: President
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03 09 2001
Amount of Each Receipt this Period: 500.00
Transaction ID: 10000003253400012

C.
Full Name (Last, First, Middle Initial): Ms Mary Baker
Mailing Address: 108 Starr Ave. PO Box 1129
City: Turlock State: CA Zip Code: 95381
FEC ID number of contributing federal political committee.
Name of Employer: Bel-Air Lodge
Occupation: Administrator
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1250.00
Date of Receipt: 03 12 2001
Amount of Each Receipt this Period: 1250.00
Transaction ID: 10000003253500013

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2250.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 9 / 25

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Mr John Schaeffler
Mailing Address
PAYROLL DEDUCTION
City: Washington State: AH Zip Code: 20005
FEC ID number of contributing federal political committee.
Name of Employer: AHCA
Occupation: Lobbyist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.77
Date of Receipt: 03 16 2001
Amount of Each Receipt this Period: 76.92
Transaction ID: 10000003256000014

B.
Full Name (Last, First, Middle Initial)
Mr John Schaeffler
Mailing Address
PAYROLL DEDUCTION
City: Washington State: AH Zip Code: 20005
FEC ID number of contributing federal political committee.
Name of Employer: AHCA
Occupation: Lobbyist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 307.69
Date of Receipt: 03 16 2001
Amount of Each Receipt this Period: 76.92
Transaction ID: 10000003257000015

C.
Full Name (Last, First, Middle Initial)
Mr Dale Thompson
Mailing Address
1995 E Rum River Dr S
City: Cambridge State: MN Zip Code: 55008
FEC ID number of contributing federal political committee.
Name of Employer: Health Dimensions
Occupation: Administrator
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt: 03 16 2001
Amount of Each Receipt this Period: 5000.00
Transaction ID: 10000003257300016

SUBTOTAL of Receipts This Page (optional) ..... ▶ **5153.84**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 10 / 25

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A.
Full Name (Last, First, Middle Initial): Mr Scott Bell
Mailing Address: 125 W Romona Street Suite 400
City: Pensacola Plaza State: FL Zip Code: 32501
FEC ID number of contributing federal political committee.
Name of Employer: Delta Health Group, Inc.
Occupation: President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 2500.00
Date of Receipt: 03 16 2001
Amount of Each Receipt this Period: 2500.00
Transaction ID: 10000003257400017

B.
Full Name (Last, First, Middle Initial): Mr Jack Markovitz
Mailing Address: P.O. Box 605
City: Sunset Beach State: CA Zip Code: 90742-0605
FEC ID number of contributing federal political committee.
Name of Employer: JK Health Care Mgmt. Inc.
Occupation: President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 1250.00
Date of Receipt: 03 19 2001
Amount of Each Receipt this Period: 1250.00
Transaction ID: 10000003257800018

C.
Full Name (Last, First, Middle Initial): Mr Steven Bendalis
Mailing Address: 1600 S. Beacon Blvd. #200
City: Grand Haven State: MI Zip Code: 49417-2820
FEC ID number of contributing federal political committee.
Name of Employer: Community Centre Group
Occupation: President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 5000.00
Date of Receipt: 03 20 2001
Amount of Each Receipt this Period: 5000.00
Transaction ID: 10000003258200019

SUBTOTAL of Receipts This Page (optional) ..... ▶ **8750.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 11 / 25

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Mr Theodore Lee
Mailing Address
700 Hanover St
City: Manchester State: NH Zip Code: 03110
FEC ID number of contributing federal political committee.
Name of Employer: Hanover Hill Health Care
Occupation: President
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 03 22 2001
Amount of Each Receipt this Period: 1000.00
Transaction ID: 10000003258300020

B.
Full Name (Last, First, Middle Initial)
Ms Adele Wilzack
Mailing Address
7060 Oakland Mills Road Suite M
City: Columbia State: MD Zip Code: 21046
FEC ID number of contributing federal political committee.
Name of Employer: Health Facilities Assn of MD
Occupation:
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03 26 2001
Amount of Each Receipt this Period: 500.00
Transaction ID: 10000003258700021

C.
Full Name (Last, First, Middle Initial)
Mr. Richard G Miller
Mailing Address
9403 Mill Brook Rd
City: Lousiville State: KY Zip Code: 40223
FEC ID number of contributing federal political committee.
Name of Employer: Kentucky Health Care Assn.
Occupation: State Executive
Receipt For: Primary General
Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 03 30 2001
Amount of Each Receipt this Period: 250.00
Transaction ID: 10000003259400022

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) or each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) PAGE 12 / 25

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Mike Oley

Mailing Address
1 Park West Circle Stwe 102

City: Midlothian State: VA Zip Code: 23113

FEC ID number of contributing federal political committee.

Name of Employer: Rehab Management
Occupation: Director of Marketing

Receipt For: Primary General
Other (specify)

Aggregate Year-to-Date: 500.00

Date of Receipt: 03 30 2001

Amount of Each Receipt this Period: 250.00

Transaction ID: 10000003259500023

B. Full Name (Last, First, Middle Initial)
Mr. Thomas Reddy

Mailing Address
7357 West 152nd

City: Stilwell State: KS Zip Code: 66085

FEC ID number of contributing federal political committee.

Name of Employer: Vintage Park
Occupation: President

Receipt For: Primary General
Other (specify)

Aggregate Year-to-Date: 2500.00

Date of Receipt: 03 30 2001

Amount of Each Receipt this Period: 1250.00

Transaction ID: 10000003259700024

C. Full Name (Last, First, Middle Initial)
Mr William Biggs

Mailing Address
4605 Belton Highway

City: Anderson State: SC Zip Code: 29621

FEC ID number of contributing federal political committee.

Name of Employer: Richard Campbell Veterans Home
Occupation: Executive Director

Receipt For: Primary General
Other (specify)

Aggregate Year-to-Date: 1000.00

Date of Receipt: 03 30 2001

Amount of Each Receipt this Period: 500.00

Transaction ID: 10000003259800025

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) or each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) PAGE 13 / 25

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. Robert Moran

Mailing Address
2201 K St. PO Box 537004

City: Sacramento State: CA Zip Code: 95853

FEC ID number of contributing federal political committee.

Name of Employer: CA Assn. of Health Facilities
Occupation:

Receipt For: Primary General
Other (specify)

Aggregate Year-to-Date: 500.00

Date of Receipt: 03 30 2001

Amount of Each Receipt this Period: 250.00

Transaction ID: 10000003259900026

B. Full Name (Last, First, Middle Initial)
David E Meller

Mailing Address
27 Brand Avenue P.O. Box 448

City: Faribault State: MN Zip Code: 55021

FEC ID number of contributing federal political committee.

Name of Employer: Pleasant Manor Inc
Occupation: Administrator/Owner

Receipt For: Primary General
Other (specify)

Aggregate Year-to-Date: 1000.00

Date of Receipt: 03 30 2001

Amount of Each Receipt this Period: 500.00

Transaction ID: 10000003260000027

C. Full Name (Last, First, Middle Initial)
Ms Dide Taylor-Huff

Mailing Address
932 Baddour Pkwy

City: Lebanon State: TN Zip Code: 37087

FEC ID number of contributing federal political committee.

Name of Employer: Quality Care Health Center
Occupation: Administrator

Receipt For: Primary General
Other (specify)

Aggregate Year-to-Date: 2500.00

Date of Receipt: 03 30 2001

Amount of Each Receipt this Period: 1250.00

Transaction ID: 10000003260100028

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) or each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) PAGE 14 / 25

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A.
Full Name (Last, First, Middle Initial): Robert Lohr
Mailing Address: 311 Castle Shannon Blvd
City: Pittsburgh State: PA Zip Code: 15234
FEC ID number of contributing federal political committee.
Name of Employer: Peridot Enterprises, Inc.
Occupation: President
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 2500.00
Date of Receipt: 03 30 2001
Amount of Each Receipt this Period: 1250.00
Transaction ID: 10000003260200029

B.
Full Name (Last, First, Middle Initial): Howard Groff
Mailing Address: 9031 Penn. Ave. South
City: Bloomington State: MN Zip Code: 55431
FEC ID number of contributing federal political committee.
Name of Employer: Teakwood Care Centers Inc
Occupation: President
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 2500.00
Date of Receipt: 03 30 2001
Amount of Each Receipt this Period: 1250.00
Transaction ID: 10000003260300030

C.
Full Name (Last, First, Middle Initial): Mr Robert Rosenthal
Mailing Address: 6400 SW 44th St
City: Miami State: FL Zip Code: 33155
FEC ID number of contributing federal political committee.
Name of Employer: 21st Century Health Group Inc.
Occupation: President
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 03 30 2001
Amount of Each Receipt this Period: 1000.00
Transaction ID: 10000003267900031

SUBTOTAL of Receipts This Page (optional) ..... ▶ **3500.00**

TOTAL This Period (last page this line number only) ..... ▶ **42453.84**

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 15 / 25

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

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Mailing Address
4922 Fairmont Ave

City: Bethesda
State: MD
Zip Code: 20814

FEC ID number of contributing federal political committee.

Name of Employer

Occupation
Rushmore

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
228.25

Date of Receipt
03 30 2001

Amount of Each Receipt this Period
190.85

Transaction ID: 10000003348900032

B.

C.

SUBTOTAL of Receipts This Page (optional) ..... ▶	**190.85**
TOTAL This Period (last page this line number only) ..... ▶	**190.85**

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)
[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25
[ ] 26 [ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Bank of America

Mailing Address

City: Washington
State: DC
Zip Code: 20005

Purpose of Disbursement
Merchant fees

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement
03 / 02 / 2001

Amount of Each Disbursement this Period
203.62

Transaction ID: 10000003267000002

B.
Full Name (Last, First, Middle Initial)
Bank of America

Mailing Address

City: Washington
State: DC
Zip Code: 20005

Purpose of Disbursement
Bank of America Service Charge

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement
03 / 22 / 2001

Amount of Each Disbursement this Period
16.39

Transaction ID: 10000003267100003

C.
Full Name (Last, First, Middle Initial)
Bank of America

Mailing Address

City: Washington
State: DC
Zip Code: 20005

Purpose of Disbursement
Bank of America Service Fee

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement
03 / 22 / 2001

Amount of Each Disbursement this Period
289.89

Transaction ID: 10000003267400004

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **509.90**

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)

[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25
[ ] 26 [ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Bank of America

Mailing Address

City: Washington
State: DC
Zip Code: 20005

Purpose of Disbursement
American Express Fees

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement
03 31 2001

Amount of Each Disbursement this Period
74.68

Transaction ID: 1000000326890000 5

B.

C.

SUBTOTAL of Disbursements This Page (optional) ..... ▶	74.68
TOTAL This Period (last page this line number only) ..... ▶	584.58

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A.
Full Name (Last, First, Middle Initial)
Hutchinson for Senate

Mailing Address
P.O. Box 998
City: Rogers | State: AR | Zip Code: 72756

Purpose of Disbursement
YTD:$1000.00 Tim Hutchinson, U.S. SENATE

Candidate Name
Mr. Tim Hutchinson

24K
Category/ Type

Office Sought: X House / Senate / President
State: AR District:

Disbursement For: 2002
X Primary / General / Other (specify)

Date of Disbursement
03 02 2001

Amount of Each Disbursement this Period
1000.00

Transaction ID: 10000003249300008

B.
Full Name (Last, First, Middle Initial)
Friends of John Rockefeller

Mailing Address
236 Massachusetts Ave., NE Ste. 310
City: Washington | State: DC | Zip Code: 20003

Purpose of Disbursement
YTD:$2500.00 John Rockefeller, U.S. SENA

Candidate Name
Senator John Rockefeller

24K
Category/ Type

Office Sought: House / X Senate / President
State: WV District:

Disbursement For: 2002
X Primary / General / Other (specify)

Date of Disbursement
03 02 2001

Amount of Each Disbursement this Period
2500.00

Transaction ID: 10000003249400007

C.
Full Name (Last, First, Middle Initial)
Nussle for Congress Committee

Mailing Address
PO Box 324
City: Manchester | State: IA | Zip Code: 52057

Purpose of Disbursement
YTD:$1000.00 Jim Nussle, U.S. HOUSE 2nd

Candidate Name
Mr. Jim Nussle

24K
Category/ Type

Office Sought: X House / Senate / President
State: IA District: 2

Disbursement For: 2002
X Primary / General / Other (specify)

Date of Disbursement
03 02 2001

Amount of Each Disbursement this Period
1000.00

Transaction ID: 10000003249500008

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **4500.00**

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

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☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
Friends of Mark Foley

Mailing Address
P.O. Box 19536
City: West Palm Beach | State: FL | Zip Code: 33416

Purpose of Disbursement
YTD:$1000.00 Mark Foley, U.S. HOUSE 16th

Candidate Name
Mr. Mark Foley

24K
Category/ Type

Office Sought: X House / Senate / President
State: FL District: 16

Disbursement For: 2002
X Primary / General / Other (specify)

Date of Disbursement
03 / 02 / 2001

Amount of Each Disbursement this Period
1000.00

Transaction ID: 10000003249800009

B. Full Name (Last, First, Middle Initial)
Democratic Senatorial Campaign Committee

Mailing Address
430 South Capitol St., SE
City: Washington | State: DC | Zip Code: 20003

Purpose of Disbursement
YTD:$7500.00

Candidate Name
DSCC

24K
Category/ Type

Office Sought: House / Senate / President
State: DC District:

Disbursement For: 2001
Primary / General / X Other (specify)

Date of Disbursement
03 / 05 / 2001

Amount of Each Disbursement this Period
7500.00

Transaction ID: 10000003249800010

C. Full Name (Last, First, Middle Initial)
Keep Our Majority PAC

Mailing Address
PO Box 422
City: Yorkville | State: IL | Zip Code: 60650

Purpose of Disbursement
YTD:$5000.00 Denny Hastert event 3/13

Candidate Name

24K
Category/ Type

Office Sought: House / Senate / President
State: District:

Disbursement For: 2001
Primary / General / X Other (specify)

Date of Disbursement
03 / 15 / 2001

Amount of Each Disbursement this Period
5000.00

Transaction ID: 10000003254000011

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **13500.00**

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)
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
Thurman for Congress

Mailing Address
3610 38th St., NW #F-270
City: Washington | State: DC | Zip Code: 20016

Purpose of Disbursement
YTD:$1000.00 Karen Thurman, U.S. HOUSE 5

Candidate Name
Ms. Karen Thurman

24K
Category/ Type

Office Sought: X House / Senate / President
State: FL District: 5

Disbursement For: 2002
X Primary / General / Other (specify)

Date of Disbursement
03 / 15 / 2001

Amount of Each Disbursement this Period
1000.00

Transaction ID: 10000003254100D12

B. Full Name (Last, First, Middle Initial)
Collins for Senate

Mailing Address
202 Harlow Street, Room 204
City: Bangor | State: ME | Zip Code: 04402-1096

Purpose of Disbursement
YTD:$1000.00 Susan Collins, U.S. SENATE

Candidate Name
Ms. Susan Collins

24K
Category/ Type

Office Sought: House / Senate / President
State: ME District:

Disbursement For: 2002
X Primary / General / Other (specify)

Date of Disbursement
03 / 15 / 2001

Amount of Each Disbursement this Period
1000.00

Transaction ID: 10000003254200D13

C. Full Name (Last, First, Middle Initial)
Pete Stark Re-Election Committee

Mailing Address
PO Box 8331
City: Fremont | State: CA | Zip Code: 94537

Purpose of Disbursement
YTD:$1000.00 Pete Stark U.S. HOUSE 13th

Candidate Name
Mr. Pete Stark

24K
Category/ Type

Office Sought: X House / Senate / President
State: CA District: 13

Disbursement For: 2002
X Primary / General / Other (specify)

Date of Disbursement
03 / 15 / 2001

Amount of Each Disbursement this Period
1000.00

Transaction ID: 10000003254300D14

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **3000.00**

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)
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☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
Earl Pomeroy for Congress

Mailing Address
PO Box 746
City: Bismarck State: ND Zip Code: 58502

Purpose of Disbursement
YTD:$2000.00 Earl Pomeroy, U.S. HOUSE AL

Candidate Name
Mr. Earl Pomeroy

24K Category/Type

Office Sought: X House / Senate / President
State: ND District:

Disbursement For: 2002 X Primary / General / Other (specify)

Date of Disbursement: 03 15 2001

Amount of Each Disbursement this Period: 1000.00

Transaction ID: 10000003254400D15

B. Full Name (Last, First, Middle Initial)
Norwood for Congress

Mailing Address
PO Box 499
City: Evans State: CA Zip Code: 30809-9906

Purpose of Disbursement
YTD:$500.00 Charles Norwood, U.S. HOUSE

Candidate Name
Dr. Charles Norwood

24K Category/Type

Office Sought: X House / Senate / President
State: GA District: 10

Disbursement For: 2002 X Primary / General / Other (specify)

Date of Disbursement: 03 15 2001

Amount of Each Disbursement this Period: 500.00

Transaction ID: 10000003254500D16

C. Full Name (Last, First, Middle Initial)
Volunteers for Shimkus

Mailing Address
PO Box 2776
City: Arlington State: VA Zip Code: 22202

Purpose of Disbursement
YTD:$500.00 John Shimkus, U.S. HOUSE 20t

Candidate Name
Mr John Shimkus

24K Category/Type

Office Sought: House / Senate / President
State: IL District: 20

Disbursement For: 2002 X Primary / General / Other (specify)

Date of Disbursement: 03 15 2001

Amount of Each Disbursement this Period: 500.00

Transaction ID: 10000003254600D17

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2000.00**

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)
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☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
Enzi for Senate

Mailing Address
PO Box 2775
City: Cody State: WY Zip Code: 82414

Purpose of Disbursement
YTD:$1000.00 Mike Enzi, U.S. SENATE WY;

24K Category/Type

Candidate Name
Mr. Mike Enzi

Office Sought: House / Senate / President
State: WY District:

Disbursement For: 2002
X Primary / General / Other (specify)

Date of Disbursement: 03 / 15 / 2001

Amount of Each Disbursement this Period: 1000.00

Transaction ID: 10000000325470001B

B. Full Name (Last, First, Middle Initial)
Ganske for Senate Committee

Mailing Address
4010 Franconia Road
City: Alexandria State: VA Zip Code: 22310-2136

Purpose of Disbursement
YTD:$1000.00 Greg Ganske, U.S. HOUSE 4th

24K Category/Type

Candidate Name
Mr. Greg Ganske

Office Sought: X House / Senate / President
State: IA District: 4

Disbursement For: 2002
X Primary / General / Other (specify)

Date of Disbursement: 03 / 15 / 2001

Amount of Each Disbursement this Period: 1000.00

Transaction ID: 10000000325480001B

C. Full Name (Last, First, Middle Initial)
Pallone for Congress

Mailing Address
PO Box 3176
City: Long Branch State: NJ Zip Code: 77401

Purpose of Disbursement
YTD:$500.00 Frank Pallone, U.S. HOUSE 6t

24K Category/Type

Candidate Name
Mr. Frank Pallone

Office Sought: X House / Senate / President
State: NJ District: 6

Disbursement For: 2002
X Primary / General / Other (specify)

Date of Disbursement: 03 / 15 / 2001

Amount of Each Disbursement this Period: 500.00

Transaction ID: 10000000325490002B

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2500.00**

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)

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

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Friends of Joe Pitts

Mailing Address
PO Box 16021

City: Alexandria
State: VA
Zip Code: 22302

Purpose of Disbursement
YTD:$1000.00 Joe Pitts, U.S. HOUSE 16th

Category/Type: 24K

Candidate Name
Mr. Joe Pitts

Office Sought: House / Senate / President
State: PA District: 16

Disbursement For: 2002
X Primary General
Other (specify)

Date of Disbursement
03 15 2001

Amount of Each Disbursement this Period
1000.00

Transaction ID: 10000000325500002 1

B.

C.

SUBTOTAL of Disbursements This Page (optional) ..... ▶	**1000.00**
TOTAL This Period (last page this line number only) ..... ▶	**26500.00**

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)

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

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Crowne Nursing Home Associates, Inc.

Mailing Address
3457 Nostrand Avenue

City: Brooklyn
State: NY
Zip Code: 11229

Purpose of Disbursement
Refund to Crown Nursing Home, Inc.

Candidate Name

Category/Type: 22Y

Office Sought: House / Senate / President
State: District:

Disbursement For: 2002
Primary / General
X Other (specify) ▼
2002 Other

Date of Disbursement
03 01 2001

Amount of Each Disbursement this Period
250.00

Transaction ID: 1000000324880002 2

B.

C.

SUBTOTAL of Disbursements This Page (optional) ..... ▶	**250.00**
TOTAL This Period (last page this line number only) ..... ▶	**250.00**

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)

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

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A.

Full Name (Last, First, Middle Initial)
AHCA Administrative Fund

Mailing Address
1201 L Street, NW

City: Washington
State: DC
Zip Code: 20005

Purpose of Disbursement
Transfer from direct deposit Sunrest

Candidate Name

Category/ Type

Office Sought: House / Senate / President
State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement
03 26 2001

Amount of Each Disbursement this Period
75.00

Transaction ID: 1000000032584000023

B.

C.

SUBTOTAL of Disbursements This Page (optional) ..... ▶	75.00
TOTAL This Period (last page this line number only) ..... ▶	75.00