

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. 12FE4M5
Advocat Inc. Political Action Committee

ADDRESS (number and street) 1621 Galleria Blvd
Check if different than previously reported. (ACC) Brentwood TN 37027

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00421735

3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] NEW (N) [] 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), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11) (Non-Election Year Only), Dec 20 (M12) (Non-Election Year Only), Jan 31 (YE)
(c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)
Election on MM/DD/YYYY in the State of
(d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)
Election on MM/DD/YYYY in the State of TN

5. Covering Period MM/DD/YYYY through MM/DD/YYYY
10/16/2014 through 11/24/2014

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 Kelly J. Gill

Signature of Treasurer Kelly J. Gill [Electronically Filed] Date 12/01/2014

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

Advocat Inc. Political Action Committee

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="2014"/>	<input type="text" value="38860.17"/>	<input type="text" value="38860.17"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="38697.92"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="2809.38"/>	<input type="text" value="28446.72"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="41507.30"/>	<input type="text" value="67306.89"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="0.00"/>	<input type="text" value="25799.59"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="41507.30"/>	<input type="text" value="41507.30"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

Advocat Inc. Political Action Committee

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

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).....	2809.38	21269.81
(ii) Unitemized	0.00	2127.32
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2809.38	23397.13
(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 33, page 5)	2809.38	23397.13
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	49.59
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	5000.00
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))..... ▶	2809.38	28446.72
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	2809.38	28446.72

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) 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	0.00	49.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	49.59
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	21000.00
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	0.00
(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	0.00
29. Other Disbursements	0.00	4750.00
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)) ..	0.00	25799.59
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	25799.59

DETAILED SUMMARY PAGE
of Disbursements

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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)	2809.38	23397.13
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2809.38	23397.13
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	49.59
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	49.59
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 OF 12
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
Advocat Inc. Political Action Committee

Full Name (Last, First, Middle Initial)
A. Beverly Cox

Mailing Address 1017 Riverchase Rd SE

City Huntsville State AL Zip Code 35803-2327

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

Name of Employer: Diversicare Leasing Corporation Occupation: Admin Administrator-exemp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **778.41**

Date of Receipt: **11 / 20 / 2014**
Transaction ID : A2155242FC6C44336BAE

Amount of Each Receipt this Period: **103.86**

Payroll Deduction: \$34.62/Bi-Weekly

Full Name (Last, First, Middle Initial)
B. Kevin Crowley

Mailing Address 607 N Brookhaven

City Wichita State KS Zip Code 67230-6603

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

Name of Employer: Diversicare Leasing Corporation Occupation: RVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **560.00**

Date of Receipt: **11 / 21 / 2014**
Transaction ID : A0D877B7EBF794982A41

Amount of Each Receipt this Period: **105.00**

Payroll Deduction: \$35.00/Bi-Weekly

Full Name (Last, First, Middle Initial)
C. Joseph A. Deans

Mailing Address 1030 Sunset Rd

City Brentwood State TN Zip Code 37027-8276

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

Name of Employer: Diversicare Management Services Occupation: VP, Bd and Acquisition

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1246.08**

Date of Receipt: **11 / 21 / 2014**
Transaction ID : A82E47DCEEEC247D58A4

Amount of Each Receipt this Period: **155.76**

Payroll Deduction: \$51.92/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ **364.62**

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 OF 12
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Advocat Inc. Political Action Committee

A. Kathi B. Duke
 Full Name (Last, First, Middle Initial)
 Mailing Address 35 Barlow Rd
 City State Zip Code
 Equality AL 36026-2765
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Diversicare Management Services Alabama CQI Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 932.34

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : A90449DE8AF71470491A
 Amount of Each Receipt this Period
 116.97
 Payroll Deduction: \$38.99/Bi-Weekly

B. Kelly J. Gill
 Full Name (Last, First, Middle Initial)
 Mailing Address 1621 Galleria Blvd
 City State Zip Code
 Brentwood TN 37027-2926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Diversicare Management Services CEO/President
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 4615.44

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : A75D15E048E894E9183A
 Amount of Each Receipt this Period
 576.93
 Payroll Deduction: \$192.31/Bi-Weekly

C. Joyce D. Griffith
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 62
 City State Zip Code
 Grayson KY 41143-0062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Diversicare Management Services Kentucky Reboc
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 480.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : A9E584D6F8E8E43988E1
 Amount of Each Receipt this Period
 60.00
 Payroll Deduction: \$20.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 753.90
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 12
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Advocat Inc. Political Action Committee

A. Inga F. Handley
Full Name (Last, First, Middle Initial)

Mailing Address 6151 US Highway 278 E

City Gadsden	State AL	Zip Code 35903-7001
-----------------	-------------	------------------------

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

Name of Employer Diversicare Leasing Corporation	Occupation Nursing Admin Don-exempt
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **728.94**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2014

Transaction ID : AA06110A9873249DD934

Amount of Each Receipt this Period

91.83

Payroll Deduction: \$30.61/Bi-Weekly

B. Janice L. Horton
Full Name (Last, First, Middle Initial)

Mailing Address 4527 SE Highway 70

City Arcadia	State FL	Zip Code 34266-7787
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FEC ID number of contributing federal political committee. **C**

Name of Employer Diversicare Leasing Corporation	Occupation Admin Administrator-exemp
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **742.31**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2014

Transaction ID : AD7CF2CEB7AEE410EB39

Amount of Each Receipt this Period

93.99

Payroll Deduction: \$31.33/Bi-Weekly

C. Thomas Killingsworth
Full Name (Last, First, Middle Initial)

Mailing Address 2667 Vista Del Arroyo Dr

City San Angelo	State TX	Zip Code 76904-6212
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FEC ID number of contributing federal political committee. **C**

Name of Employer Diversicare Leasing Corporation	Occupation Admin Administrator-exemp
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **795.48**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2014

Transaction ID : A78C6232448EC4A84818

Amount of Each Receipt this Period

99.63

Payroll Deduction: \$33.21/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	285.45
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 12
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Advocat Inc. Political Action Committee

A. Randi M. Kiphen
Full Name (Last, First, Middle Initial)

Mailing Address 10880 Gallia Pike Rd

City Wheelersburg State OH Zip Code 45694-8443

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

Name of Employer Occupation
Diversicare Leasing Corporation Admin Administrator-exemp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **921.60**

Date of Receipt
11 / 13 / 2014

Transaction ID : A85E647A671254F06AF6

Amount of Each Receipt this Period
115.20

Payroll Deduction: \$38.40/Bi-Weekly

B. Robin R. LeBlanc
Full Name (Last, First, Middle Initial)

Mailing Address 7030 Fountain Lilly Dr

City Humble State TX Zip Code 77346-3355

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

Name of Employer Occupation
Diversicare Management Services Director, Case Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
11 / 21 / 2014

Transaction ID : A99FFDFEC269F47FA8F5

Amount of Each Receipt this Period
30.00

Payroll Deduction: \$10.00/Bi-Weekly

C. Randy L. McChristian
Full Name (Last, First, Middle Initial)

Mailing Address 921 Charmont Dr

City Charleston State AR Zip Code 72933-9083

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

Name of Employer Occupation
Diversicare Management Services Arkansas Director Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **742.20**

Date of Receipt
11 / 21 / 2014

Transaction ID : A123C8D68B5FD452A9D4

Amount of Each Receipt this Period
93.24

Payroll Deduction: \$31.08/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	238.44
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 12
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Advocat Inc. Political Action Committee

A. James R. McKnight Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1621 Galleria Blvd
 City Brentwood State TN Zip Code 37027-2926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Advocat, Inc. Occupation: CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **2442.33**

Date of Receipt: 11 / 21 / 2014
Transaction ID : A9B68213C1ECF443B805
 Amount of Each Receipt this Period: **317.31**
 Payroll Deduction: \$105.77/Bi-Weekly

B. Wanda C. Meade
 Full Name (Last, First, Middle Initial)
 Mailing Address 3728 State Route 3
 City Catlettsburg State KY Zip Code 41129-9340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Diversicare Management Services Occupation: Kentucky Rvp
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **1671.87**

Date of Receipt: 11 / 21 / 2014
Transaction ID : AAACE1FC526F4780A6D
 Amount of Each Receipt this Period: **209.76**
 Payroll Deduction: \$69.92/Bi-Weekly

C. Glenda Nelson
 Full Name (Last, First, Middle Initial)
 Mailing Address 2600 Cole Ave Apt 112
 City Dallas State TX Zip Code 75204-4040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer: Diversicare Management Services Occupation: Texas CQI Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **499.23**

Date of Receipt: 11 / 21 / 2014
Transaction ID : A099F48ECE1594D3DBE6
 Amount of Each Receipt this Period: **62.64**
 Payroll Deduction: \$20.88/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	589.71
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 12
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Advocat Inc. Political Action Committee

A. Treieva Oakley
 Full Name (Last, First, Middle Initial)
 Mailing Address 901 Camellia Rd
 City Oneonta State AL Zip Code 35121-1902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Diversicare Management Services Occupation DMS Training Coordinator
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **769.95**

Date of Receipt **11 / 21 / 2014**
Transaction ID : A0427A88413DC4D21AB9
 Amount of Each Receipt this Period **103.86**
 Payroll Deduction: \$34.62/Bi-Weekly

B. Laura A. Saxon
 Full Name (Last, First, Middle Initial)
 Mailing Address 3055 Michele Dr
 City Mobile State AL Zip Code 36605-4462
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Diversicare Leasing Corporation Occupation Admin Administrator-exemp
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **914.00**

Date of Receipt **11 / 20 / 2014**
Transaction ID : A7387A3FEF0A64E309FE
 Amount of Each Receipt this Period **115.20**
 Payroll Deduction: \$38.40/Bi-Weekly

C. Trescha A. Snyder
 Full Name (Last, First, Middle Initial)
 Mailing Address 1124 Craig Rd
 City Knoxville State TN Zip Code 37919-8238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Diversicare Management Services Occupation Director, Dietary Service
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1052.61**

Date of Receipt **11 / 21 / 2014**
Transaction ID : A10D919B0283E47A9BB9
 Amount of Each Receipt this Period **132.06**
 Payroll Deduction: \$44.02/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	351.12
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 12
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 18

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NAME OF COMMITTEE (In Full)
Advocat Inc. Political Action Committee

A. Matthew J. Weishaar
Full Name (Last, First, Middle Initial)

Mailing Address 1621 Galleria Blvd

City Brentwood State TN Zip Code 37027-2926

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

Name of Employer Diversicare Management Services Occupation VP Finance & Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1535.91**

Date of Receipt **11 / 21 / 2014**

Transaction ID : A3FC482E9F9044F7B915

Amount of Each Receipt this Period **196.14**

Payroll Deduction: \$65.38/Bi-Weekly

B. Brenda L. Wimsatt
Full Name (Last, First, Middle Initial)

Mailing Address 6216 Palomar Ct

City Nashville State TN Zip Code 37211-7482

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

Name of Employer Diversicare Management Services Occupation Director of Corp Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **11 / 21 / 2014**

Transaction ID : A8552A29077414689AA8

Amount of Each Receipt this Period **30.00**

Payroll Deduction: \$10.00/Bi-Weekly

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

SUBTOTAL of Receipts This Page (optional).....▶	226.14
TOTAL This Period (last page this line number only).....▶	2809.38