

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 5100 Wisconsin Ave., NW
Suite 307
 Check if different than previously reported. (ACC)
Washington DC 20016

2. **FEC IDENTIFICATION NUMBER** C00325332
3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period 03 01 2010 through 03 31 2010

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

Signature of Treasurer Electronically Filed by David Schless Date 04 14 2010

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

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
American Seniors Housing Association (Seniors Housing PAC)

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		750300.26
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	749267.26									
(c) Total Receipts (from Line 19)	51685.00	83185.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	800952.26	833485.26								
7. Total Disbursements (from Line 31)	51500.00	84033.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	749452.26	749452.26								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

Write or Type Committee Name

American Seniors Housing Association (Seniors Housing PAC)

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	48600.00	77100.00
(ii) Unitemized	3085.00	3085.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	51685.00	80185.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	3000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	51685.00	83185.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	51685.00	83185.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	51685.00	83185.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	51500.00	84000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	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	33.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	51500.00	84033.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	51500.00	84033.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	51685.00	83185.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	51685.00	83185.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 21
	<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

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

NAME OF COMMITTEE (In Full)
American Seniors Housing Association (Seniors Housing PAC)

A.	Full Name (Last, First, Middle Initial) Anja Rogers		Date of Receipt	
	Mailing Address 1516 South Boston Suite 301		M M / D D / Y Y Y Y 03 / 05 / 2010	
	City	State	Zip Code	Transaction ID: 33775500
	Tulsa	OK	74119-4003	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		2000.00	
Name of Employer Senior Star Living		Occupation Senior Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00		

B.	Full Name (Last, First, Middle Initial) Vicki R Clark		Date of Receipt	
	Mailing Address 17748 Skypark Circle Suite 225		M M / D D / Y Y Y Y 03 / 05 / 2010	
	City	State	Zip Code	Transaction ID: 33775501
	Irvine	CA	92614-6420	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		3000.00	
Name of Employer Vintage Senior Living		Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3000.00		

C.	Full Name (Last, First, Middle Initial) Raymond J. Lewis		Date of Receipt	
	Mailing Address 111 S. Wacker Dr. Suite 4800		M M / D D / Y Y Y Y 03 / 05 / 2010	
	City	State	Zip Code	Transaction ID: 33775502
	Chicago	IL	60606-4302	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		3000.00	
Name of Employer Ventas Healthcare Properties		Occupation EVP & Chief Investment Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3000.00		

SUBTOTAL of Receipts This Page (optional)	▶	8000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 21
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Seniors Housing Association (Seniors Housing PAC)

<p>A. Full Name (Last, First, Middle Initial) Paul A. Gordon</p> <p>Mailing Address 425 Market Street 26th Floor</p> <p>City State Zip Code San Francisco CA 94105-2499</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Hanson Bridgett Partner</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 3000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 03 / 11 / 2010</p> <p>Transaction ID: 33902757</p> <p>Amount of Each Receipt this Period 3000.00</p>
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<p>B. Full Name (Last, First, Middle Initial) Joel Goldman</p> <p>Mailing Address 425 Market Street 26th Floor</p> <p>City State Zip Code San Francisco CA 94105-2499</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Hanson Bridgett Partner</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 3000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 03 / 11 / 2010</p> <p>Transaction ID: 33902758</p> <p>Amount of Each Receipt this Period 3000.00</p>
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<p>C. Full Name (Last, First, Middle Initial) Donald O Thompson, Jr.</p> <p>Mailing Address 10706 Sikes Place Suite 150</p> <p>City State Zip Code Charlotte NC 28277-8140</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Senior Living Communities President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 5000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 03 / 11 / 2010</p> <p>Transaction ID: 33902759</p> <p>Amount of Each Receipt this Period 5000.00</p>
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SUBTOTAL of Receipts This Page (optional)	11000.00
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 / 21
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Seniors Housing Association (Seniors Housing PAC)

A.	Full Name (Last, First, Middle Initial) Mike Stephen	Date of Receipt MM / DD / YYYY 03 / 11 / 2010
	Mailing Address 2033 Wood Street Suite 210	Transaction ID: 33902762
	City State Zip Code Sarasota FL 34237-7900	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Health Care REIT, Inc. Occupation SVP, Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) George L. Chapman	Date of Receipt MM / DD / YYYY 03 / 11 / 2010
	Mailing Address One SeaGate Suite 1500	Transaction ID: 33902763
	City State Zip Code Toledo OH 43604-1442	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Health Care REIT, Inc. Occupation Chairman & CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

C.	Full Name (Last, First, Middle Initial) Charles J. Herman	Date of Receipt MM / DD / YYYY 03 / 11 / 2010
	Mailing Address One SeaGate Suite 1500	Transaction ID: 33902764
	City State Zip Code Toledo OH 43604-1442	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Health Care REIT, Inc. Occupation EVP and Chief Investment Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	15000.00
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 / 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Seniors Housing Association (Seniors Housing PAC)

<p>A. Full Name (Last, First, Middle Initial) John T Thomas</p> <p>Mailing Address One SeaGate Suite 1500</p> <p>City Toledo State OH Zip Code 43604-1442</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Health Care REIT, Inc. Occupation EVP Medical Facilities</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 1000.00</p>	<p>Date of Receipt 03 / 11 / 2010</p> <p>Transaction ID: 33902765</p> <p>Amount of Each Receipt this Period 1000.00</p>
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<p>B. Full Name (Last, First, Middle Initial) Joseph P Weisenburger</p> <p>Mailing Address One SeaGate Suite 1500</p> <p>City Toledo State OH Zip Code 43604-1442</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Health Care REIT, Inc. Occupation VP-Senior Housing</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 500.00</p>	<p>Date of Receipt 03 / 11 / 2010</p> <p>Transaction ID: 33902766</p> <p>Amount of Each Receipt this Period 500.00</p>
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<p>C. Full Name (Last, First, Middle Initial) Scott M Brinker</p> <p>Mailing Address One SeaGate Suite 1500</p> <p>City Toledo State OH Zip Code 43604-1442</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Health Care REIT, Inc. Occupation Investment Analyst</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 500.00</p>	<p>Date of Receipt 03 / 11 / 2010</p> <p>Transaction ID: 33902812</p> <p>Amount of Each Receipt this Period 500.00</p>
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SUBTOTAL of Receipts This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 21
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
American Seniors Housing Association (Seniors Housing PAC)

A.

Full Name (Last, First, Middle Initial)
Scott A Estes

Mailing Address One SeaGate Suite 1500

City Toledo State OH Zip Code 43604-1442

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

Name of Employer Health Care REIT, Inc. Occupation SVP & Chief Financial Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 11 / 2010

Transaction ID: 33902813

Amount of Each Receipt this Period: 500.00

B.

Full Name (Last, First, Middle Initial)
Mercedes Kerr

Mailing Address 38 Harmony

City Irvine State CA Zip Code 92602-0920

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

Name of Employer Health Care REIT, Inc. Occupation VP Marketing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 03 / 11 / 2010

Transaction ID: 33902814

Amount of Each Receipt this Period: 1000.00

C.

Full Name (Last, First, Middle Initial)
Steven Blazejewski

Mailing Address One SeaGate Suite 1500

City Toledo State OH Zip Code 43604-1442

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

Name of Employer Health Care REIT, Inc. Occupation Senior Origination Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 11 / 2010

Transaction ID: 33902815

Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ► **2000.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 21
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Seniors Housing Association (Seniors Housing PAC)

A.	Full Name (Last, First, Middle Initial) Charles W Hiller		Date of Receipt
	Mailing Address One SeaGate Suite 1500		<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Toledo	OH	43604-1442
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Health Care REIT, Inc.		Occupation Associate General Counsel	Transaction ID: 33902821
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="250.00"/>

B.	Full Name (Last, First, Middle Initial) Steve J. Hays		Date of Receipt
	Mailing Address One SeaGate Suite 1500		<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Toledo	OH	43604-1590
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Health Care REIT, Inc.		Occupation	Transaction ID: 33902822
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>	<input type="text" value="1000.00"/>

C.	Full Name (Last, First, Middle Initial) Jeff H Miller		Date of Receipt
	Mailing Address One SeaGate Suite 1500		<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Toledo	OH	43604-1442
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Health Care REIT, Inc.		Occupation General Counsel & EVP	Transaction ID: 33902823
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="500.00"/>	<input type="text" value="500.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1750.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 21
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Seniors Housing Association (Seniors Housing PAC)

A.

Full Name (Last, First, Middle Initial) Daniel M. Klein		Date of Receipt MM / DD / YYYY 03 / 11 / 2010
Mailing Address One SeaGate Suite 1500		Transaction ID: 33902833
City Toledo	State OH	Zip Code 43604-1590
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Health Care REIT, Inc.	Occupation VP, Asset Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.

Full Name (Last, First, Middle Initial) Jim P. Bove		Date of Receipt MM / DD / YYYY 03 / 11 / 2010
Mailing Address One SeaGate Suite 1500		Transaction ID: 33902847
City Toledo	State OH	Zip Code 43604-1590
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Health Care REIT, Inc.	Occupation VP, Communications	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.

Full Name (Last, First, Middle Initial) Michael A Crabtree		Date of Receipt MM / DD / YYYY 03 / 11 / 2010
Mailing Address One SeaGate Suite 1500		Transaction ID: 33902848
City Toledo	State OH	Zip Code 43603
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Health Care REIT	Occupation Treasurer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 13 / 21
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Seniors Housing Association (Seniors Housing PAC)

A.

Full Name (Last, First, Middle Initial)
John J Getchey

Mailing Address One SeaGate Suite 1500

City Toledo State OH Zip Code 43604-1442

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

Name of Employer Health Care REIT, Inc. Occupation Senior Investment Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 11 / 2010

Transaction ID: 33902849

Amount of Each Receipt this Period 300.00

B.

Full Name (Last, First, Middle Initial)
David N. Barnes

Mailing Address 2020 W. Rudasill Road

City Tucson State AZ Zip Code 85704-7800

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

Name of Employer Watermark Retirement Communities Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 03 / 30 / 2010

Transaction ID: 34158879

Amount of Each Receipt this Period 3000.00

C.

Full Name (Last, First, Middle Initial)
Allan D. Jergesen

Mailing Address 425 Market Street 26th Floor

City San Francisco State CA Zip Code 94105-2499

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

Name of Employer Hanson Bridgett Occupation Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 03 / 30 / 2010

Transaction ID: 34158881

Amount of Each Receipt this Period 1500.00

SUBTOTAL of Receipts This Page (optional) ► 4800.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Seniors Housing Association (Seniors Housing PAC)

A. Full Name (Last, First, Middle Initial)
Judy W Boyette

Mailing Address 425 Market St.
26th Floor

City State Zip Code
San Francisco CA 94105-2499

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

Name of Employer Occupation
Hanson Bridgett LLP Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2010

Transaction ID: 34158883

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Pamela S. Kaufmann

Mailing Address 425 Market Street
26th Floor

City State Zip Code
San Francisco CA 94105-2499

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

Name of Employer Occupation
Hanson Bridgett Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2010

Transaction ID: 34158921

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Glenda M Zarbock

Mailing Address 425 Market St
26th Floor

City State Zip Code
San Francisco CA 94105

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

Name of Employer Occupation
Hanson Bridgett Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2010

Transaction ID: 34158977

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **800.00**

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 15 / 21
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Seniors Housing Association (Seniors Housing PAC)

A.

Full Name (Last, First, Middle Initial) Peter S Muhlbach		Date of Receipt MM / DD / YYYY 03 / 30 / 2010
Mailing Address 3590 Riverknoll Way		Transaction ID: 34158979
City West Linn	State OR	Zip Code 97068-3639
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Encore Senior Living LLC	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

B.

Full Name (Last, First, Middle Initial) Thomas J Clarke		Date of Receipt MM / DD / YYYY 03 / 31 / 2010
Mailing Address 8887 S. Lewis Ave.		Transaction ID: 34183393
City Tulsa	State OK	Zip Code 74137-3239
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Senior Star Living	Occupation Executive Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	2250.00
TOTAL This Period (last page this line number only)	48600.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 16 / 21

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

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NAME OF COMMITTEE (In Full)
American Seniors Housing Association (Seniors Housing PAC)

A.	Full Name (Last, First, Middle Initial) Narragansett Bay PAC	Transaction ID: 33736275 Date of Disbursement 03 / 02 / 2010
	Mailing Address 303 Massachusetts Ave NE	Amount of Each Disbursement this Period 5000.00
	City Washington State DC Zip Code 20002	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Fund for America's Future	Transaction ID: 33736431 Date of Disbursement 03 / 02 / 2010
	Mailing Address 211 N. Union St. Suite 200	Amount of Each Disbursement this Period 5000.00
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ERIC PAC	Transaction ID: 33736441 Date of Disbursement 03 / 02 / 2010
	Mailing Address P O Box 17813	Amount of Each Disbursement this Period 2500.00
	City Richmond State VA Zip Code 23226	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	12500.00
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)

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

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NAME OF COMMITTEE (In Full)
American Seniors Housing Association (Seniors Housing PAC)

A.	Full Name (Last, First, Middle Initial) Brady For Congress	Transaction ID: 33736475 Date of Disbursement 03 / 02 / 2010
	Mailing Address 3323 N. Washington Blvd.	Amount of Each Disbursement this Period 1000.00
	City Arlington State VA Zip Code 22201	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Kevin Brady	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 08	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Wally Herger For Congress Committee	Transaction ID: 33736495 Date of Disbursement 03 / 02 / 2010
	Mailing Address 1006 Pendleton St.	Amount of Each Disbursement this Period 2000.00
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Wally Herger	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Ben Cardin For Senate	Transaction ID: 33736575 Date of Disbursement 03 / 02 / 2010
	Mailing Address P.O. Box 21093	Amount of Each Disbursement this Period 1000.00
	City Catonsville State MD Zip Code 21228	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Mr. Benjamin Cardin	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	4000.00
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)

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

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NAME OF COMMITTEE (In Full)
American Seniors Housing Association (Seniors Housing PAC)

A.	Full Name (Last, First, Middle Initial) PATPAC	Transaction ID: 33740933
	Mailing Address 610 S. Boulevard St.	Date of Disbursement 03 / 02 / 2010
	City Tampa State FL Zip Code 33606	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement	011 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Hoeven for Senate	Transaction ID: 33785470
	Mailing Address P O Box 861	Date of Disbursement 03 / 09 / 2010
	City Bismarck State ND Zip Code 58502	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement	011 Category/ Type
	Candidate Name John Hoeven	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
	State: ND District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Richard Burr Committee	Transaction ID: 33785471
	Mailing Address Post Office Box 5928	Date of Disbursement 03 / 09 / 2010
	City Winston-Salem State NC Zip Code 27113	Amount of Each Disbursement this Period 3000.00
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Sen. Richard Burr	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
	State: NC District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	10000.00
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)

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

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NAME OF COMMITTEE (In Full)
American Seniors Housing Association (Seniors Housing PAC)

A.	Full Name (Last, First, Middle Initial) Friends Of Ginny Brown-Waite	Transaction ID: 33971317 Date of Disbursement 03 / 17 / 2010
	Mailing Address 2501 Wisconsin Ave Suite 304	Amount of Each Disbursement this Period 1000.00
	City Washington State DC Zip Code 20007	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Virginia Brown-Waite Brown-Waite	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mikulski for Senate	Transaction ID: 33971345 Date of Disbursement 03 / 17 / 2010
	Mailing Address 10 G St NE Suite 570	Amount of Each Disbursement this Period 2500.00
	City Washington State DC Zip Code 20002	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Sen. Barbara Mikulski	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Becerra For Congress	Transaction ID: 34018956 Date of Disbursement 03 / 22 / 2010
	Mailing Address P O Box 116	Amount of Each Disbursement this Period 5000.00
	City Hyattsville State MD Zip Code 20781	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Xavier Becerra	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 31	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

8500.00

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)

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

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NAME OF COMMITTEE (In Full)
American Seniors Housing Association (Seniors Housing PAC)

A.	Full Name (Last, First, Middle Initial) Continuing a Majority PAC/CAMPAC	Transaction ID: 34018957 Date of Disbursement
	Mailing Address 2501 Wisconsin Ave, NW Suite 304	<input type="text" value="03"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20007	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="5000.00"/>
	Candidate Name	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Jon Kyl For U S Senate	Transaction ID: 34018958 Date of Disbursement
	Mailing Address PO Box 10246	<input type="text" value="03"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City Phoenix State AZ Zip Code 85064	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="2500.00"/>
	Candidate Name Sen. Jon Kyl	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Moving America Forward	Transaction ID: 34018959 Date of Disbursement
	Mailing Address 426 C St. NE	<input type="text" value="03"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="5000.00"/>
	Candidate Name	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="12500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 21 / 21

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

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NAME OF COMMITTEE (In Full)
American Seniors Housing Association (Seniors Housing PAC)

A. Full Name (Last, First, Middle Initial) Yarmuth For Congress <hr/> Mailing Address 1819 Brownsboro Road Suite 100 <hr/> City Louisville State KY Zip Code 40206 <hr/> Purpose of Disbursement <hr/> Candidate Name Rep. John Yarmuth <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 03 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 34146407 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 1 0
	Amount of Each Disbursement this Period 2000.00 <hr/> Category/ Type 011
B. Full Name (Last, First, Middle Initial) McHenry for Congress <hr/> Mailing Address PO Box 1406 <hr/> City Hickory State NC Zip Code 28603 <hr/> Purpose of Disbursement <hr/> Candidate Name Rep. Patrick McHenry <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 10 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 34146409 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 1 0
	Amount of Each Disbursement this Period 2000.00 <hr/> Category/ Type 011

SUBTOTAL of Disbursements This Page (optional) ►

4000.00

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

51500.00