Image# 12954305611 PAGE 1 / 131

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

						Office Us	e Only
NAME OF T     COMMITTEE (in full)	YPE OR PRINT ▼		nple: If typir the lines.	ig, type	12FE4	M5	
Harden Healthcare LLC	Federal PAC						
ADDRESS (number and street)	1703 W. 5th Stree	et 					
Check if different	Suite 700						
than previously reported. (ACC)	Austin				TX	78703	
2. FEC IDENTIFICATION NUM	//BER ▼	CITY A		5	STATE A		ZIP CODE A
C C00489740		3. IS THIS REPORT	\ \ \ \	IEW N) <b>OR</b>		AMENDED (A)	
4. TYPE OF REPORT (Choose One)	(b) Monthly Report	Feb 20 (M2)	N	May 20 (M5)	_ A	Aug 20 (M8)	Nov 20 (M11 (Non-Election Year Only)
(a) Quarterly Reports:	Due On:	Mar 20 (M3)		lun 20 (M6)		Sep 20 (M9)	Dec 20 (M12 (Non-Election Year Only)
April 15		Apr 20 (M4)		lul 20 (M7)		Oct 20 (M10)	Jan 31 (YE)
Quarterly Report (Q1)  July 15  Quarterly Report (Q2)	(c) 12-Day PRE-EI	ection	Primary (12P	-	1	ral (12G)	Runoff (12R)
Cottober 15 Quarterly Report (Q3)		for the:	Convention (	12C)	Speci	al (12S)	
January 31 Year-End Report (YE)		Election on	M = M /	D   D /	YIYIY	Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day		General (300	i)	Runo	ff (30R)	Special (30S)
Termination Report (TER)	Пероп	Election on	M M /	D   D /	Y = Y = Y	Y	in the State of
5. Covering Period 07	/ D D / O1	2012	through	M M 09	/ D D D 30	/ Y Y 201	2
I certify that I have examined this		-	ledge and b	pelief it is tru	e, correct	and complet	e.
Type or Print Name of Treasurer	Thomas Lloyd Llo	oyd Wilson					
Signature of Treasurer Thomas	s Lloyd Lloyd Wilson	<u> </u>	Electronically	<i>Filed]</i> D	ate 1	0 10	2012
NOTE: Submission of false, erroneo	ous, or incomplete	information may sub	ject the pers	son signing th	is Report t	to the penaltie	es of 2 U.S.C. §437g.
Office Use Only							FORM 3X ev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Harden Healthcare LLC Federal PAC 07 01 2012 09 30 2012 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 57115.50 January 1, 2012 (b) Cash on Hand at 45752.00 Beginning of Reporting Period..... 71379.50 23451.00 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 69203.00 128495.00 6(a) and 6(c) for Column B)..... 15175.00 74467.00 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 54028.00 54028.00 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) .....

×

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

#### For further information contact:

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

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

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

# Harden Healthcare LLC Federal PAC

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
ntributions (other than loans) From:	-			
Individuals/Persons Other				
Than Political Committees		4750000		
(i) Itemized (use Schedule A)	1/254.00	47583.00		
(ii) Unitemized	6197.00	23796.50		
Lines 11(a)(i) and (ii)▶	23451.00	71379.50		
Political Party Committees	0.00	0.00		
	0.00	0.00		
	7			
	23451.00	71379.50		
ty Committees	0.00	0.00		
Loans Received	0.00	0.00		
	0.00	0.00		
	0.00	0.00		
· · · · · · · · · · · · · · · · · · ·	0.00	0.00		
	7	0.00		
1 -	0.00	0.00		
·	0.00	0.00		
· · · · · · · · · · · · · · · · · · ·	7			
Non-Federal Account				
(from Schedule H3)	0.00	0.00		
_				
Levin Funds (from Schedule H5)	0.00	0.00		
Total Transfers (add 18(a) and 18(b))	0.00	0.00		
	Than Political Committees  (i) Itemized (use Schedule A)	Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)		

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

0.00 0.00 0.00 0.00	0.00 0.00 845.00
0.00	0.00
0.00	0.00
0.00	7 7 7 7
0.00	7 7 7 7
	845.00
0.00	
0.00	
	845.00
0.00	0.00
0.00	0.00
5625.00	46865.00
0.00	0.00
3.33	0.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	2.00
0.00	0.00
0.00	0.00
0.00	0.00
	7
0.00	
0.00	2.00
0550.00	26755.00
9550.00	20733.00
0.00	0.00
0.00	
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
15175.00	74467.00
15175 00	74467.00
	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	23451.00	71379.50
34. Total Contribution Refunds (from Line 28(d))	0.00	2.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	23451.00	71377.50
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	845.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	845.00

FOR LINE NUMBER: **PAGE** (check only one) X 11a 11b 11c

6 OF 131 Use separate schedule(s) for each category of the 12 Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Jeanette A Bloch Date of Receipt Mailing Address 1211 S Ginkgo Ln 07 06 2012 City State Zip Code Transaction ID: SA11AI.11729 KS Andover 67002 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation **Executive Director** Voyager Hospice Receipt For: Aggregate Year-to-Date ▼ Primary General 325.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jeanette A Bloch Date of Receipt Mailing Address 1211 S Ginkgo Ln 07 20 2012 City State Zip Code Transaction ID: SA11AI.12045 KS Andover 67002 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation Voyager Hospice **Executive Director** Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) c. Jeanette A Bloch Date of Receipt Mailing Address 1211 S Ginkgo Ln 07 80 2012 City State Zip Code Transaction ID: SA11AI.12372 KS Andover 67002 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation **Executive Director** Voyager Hospice Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify)

FEC Schedule	Α	(Form	3X)	Rev.	02/2003

75.00

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

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

# SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 7 OF 131

TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)         X       11a       11b       11c       12         13       14       15       16       17
	d Statements may not be sold or used by any p the name and address of any political committee	
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Fede	ral PAC	
Full Name (Last, First, Middle Initial)  Jeanette A Bloch  Mailing Address 1211 S Ginkgo Ln		Date of Receipt
City Andover	State Zip Code KS 67002	08 22 2012  Transaction ID : SA11AI.12707  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	25.00
Name of Employer  Voyager Hospice  Receipt For:  Primary General  Other (specify) ▼	Occupation Executive Director  Aggregate Year-to-Date ▼  400.00	
Full Name (Last, First, Middle Initial)  3. Jeanette A Bloch  Mailing Address 1211 S Ginkgo Ln		Date of Receipt
City Andover	State Zip Code KS 67002	09 07 2012  Transaction ID : SA11AI.13148  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Voyager Hospice Receipt For:	Occupation Executive Director	
Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	]
Full Name (Last, First, Middle Initial)  2. Jeanette A Bloch  Mailing Address 1211 S Ginkgo Ln		Date of Receipt
City Andover	State Zip Code KS 67002	09 21 2012  Transaction ID : SA11AI.13599  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer  Voyager Hospice  Receipt For:  Primary General  Other (specify) ▼	Occupation Executive Director  Aggregate Year-to-Date ▼  450.00	
SUBTOTAL of Receipts This Page (optional)		75.00
TOTAL This Period (last page this line numb	er only)	

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

FOF	R LINE	NUMBER: PAGE 8 OF 13						131		
(check only one)										
X	11a		11b		11c		12	2		
	13		14		15		16	6		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

	the name and address of any political committee to	
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Feder	ral PAC	
Full Name (Last, First, Middle Initial)  A. Brianna B Braden  Mailing Address 18821 Gold Dust Pass		Date of Receipt
ag / National 10021 Gold Dust Pass		07 13 2012
City	State Zip Code	Transaction ID : SA11AI.11906
Pflugerville	TX 78660	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer	Occupation	
Harden Healthcare Services	Senior Vice President, Human Resources	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial)  Brianna B Braden  Mailing Address 18821 Gold Dust Pass		Date of Receipt
City	State Zip Code	07 31 2012
Offy Pflugerville	TX 78660	Transaction ID : SA11AI.12236  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
Harden Healthcare Services	Senior Vice President, Human Resources	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1400.00	
Full Name (Last, First, Middle Initial)  Brianna B Braden		Date of Receipt
Mailing Address 18821 Gold Dust Pass		08 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Pflugerville	State Zip Code TX 78660	Transaction ID : SA11AI.12609  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
Harden Healthcare Services	Senior Vice President, Human Resources	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	1500.00	
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	300.00
TOTAL This Period (last page this line number	er only)	

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

_	IE NUMBER:   PAGE 9 OF 13				
(check on	ly one)				
<b>X</b> 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

	he name and address of any political committee to	
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Feder	ral PAC	
Full Name (Last, First, Middle Initial)  Brianna B Braden  Mailing Address 18821 Gold Dust Pass		Date of Receipt
Mailing Address 18821 Gold Dust Pass		08 31 2012
City	State Zip Code	Transaction ID : SA11AI.12877
Pflugerville	TX 78660	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
Harden Healthcare Services	Senior Vice President, Human Resources	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1600.00	
Full Name (Last, First, Middle Initial)  Brianna B Braden  Mailing Address 18821 Gold Dust Pass		Date of Receipt
	7. 2.	09 14 2012
City Pflugerville	State Zip Code TX 78660	Transaction ID : SA11AI.13326
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
Harden Healthcare Services	Senior Vice President, Human Resources	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1700.00	
Full Name (Last, First, Middle Initial)  C. Brianna B Braden		Date of Receipt
Mailing Address 18821 Gold Dust Pass		09 28 2012
City Pflugerville	State Zip Code TX 78660	Transaction ID : SA11AI.13807  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
Harden Healthcare Services	Senior Vice President, Human Resources	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	1800.00	
SUBTOTAL of Receipts This Page (optional)		300.00
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 10 OF 131 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Wendi Bray Date of Receipt Mailing Address 15705 Edenderry Dr 2012 07 City State Zip Code Transaction ID: SA11AI.11907 TX 78717 Austin Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Senior Vice President, Finance Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 1300.00 Other (specify) Full Name (Last, First, Middle Initial) B. Wendi Bray Date of Receipt Mailing Address 15705 Edenderry Dr 07 31 2012 City State Zip Code Transaction ID: SA11AI.12237 TX Austin 78717 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Harden Healthcare Services Senior Vice President, Finance Receipt For: Aggregate Year-to-Date ▼ Primary General 1400.00 Other (specify) Full Name (Last, First, Middle Initial) c. Wendi Bray Date of Receipt Mailing Address 15705 Edenderry Dr 80 15 2012 City State Zip Code Transaction ID: SA11AI.12610 TX Austin 78717 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Senior Vice President, Finance Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 11 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Wendi Bray Date of Receipt Mailing Address 15705 Edenderry Dr 2012 31 City State Zip Code Transaction ID: SA11AI.12878 TX 78717 Austin Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Senior Vice President, Finance Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 1600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Wendi Bray Date of Receipt Mailing Address 15705 Edenderry Dr 09 14 2012 City State Zip Code Transaction ID: SA11AI.13327 TX Austin 78717 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Harden Healthcare Services Senior Vice President, Finance Receipt For: Aggregate Year-to-Date ▼ Primary General 1700.00 Other (specify) Full Name (Last, First, Middle Initial) c. Wendi Bray Date of Receipt Mailing Address 15705 Edenderry Dr 09 28 2012 City State Zip Code Transaction ID: SA11AI.13808 TX Austin 78717 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Senior Vice President, Finance Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 1800.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 12 OF 131 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Richard W Breuss III Date of Receipt Mailing Address 6175 Colt Dr 06 2012 07 City Zip Code State Transaction ID: SA11AI.11736 West Des Moines IΑ 50131 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Voyager Hospice Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) Full Name (Last, First, Middle Initial) B. Richard W Breuss III Date of Receipt Mailing Address 6175 Colt Dr 20 07 2012 City State Zip Code Transaction ID: SA11AI.12048 IΑ West Des Moines 50131 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Voyager Hospice Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) c. Richard W Breuss III Date of Receipt Mailing Address 6175 Colt Dr 80 07 2012 City State Zip Code Transaction ID: SA11AI.12379 IΑ West Des Moines 50131 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Voyager Hospice Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 13 OF 131 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Richard W Breuss III Date of Receipt Mailing Address 6175 Colt Dr 2012 08 22 City Zip Code State Transaction ID: SA11AI.12714 West Des Moines IΑ 50131 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Voyager Hospice Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name (Last, First, Middle Initial) B. Richard W Breuss III Date of Receipt Mailing Address 6175 Colt Dr 09 07 2012 City State Zip Code Transaction ID: SA11AI.13155 IΑ West Des Moines 50131 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Voyager Hospice Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) Full Name (Last, First, Middle Initial) c. Richard W Breuss III Date of Receipt Mailing Address 6175 Colt Dr 09 21 2012 City State Zip Code Transaction ID: SA11AI.13606 IΑ West Des Moines 50131 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Voyager Hospice Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

- 9

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

FOR LINE NUMBER: PAGE 14 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 13 14 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Timothy R Brittingham Date of Receipt Mailing Address 2807 S Gary Ave 2012 07 City Zip Code State Transaction ID: SA11AI.11908 OK Tulsa 74114 Amount of Each Receipt this Period FEC ID number of contributing C 60.00 federal political committee. Name of Employer Occupation Regional Manager, Oklahoma Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 780.00 Other (specify) Full Name (Last, First, Middle Initial) B. Timothy R Brittingham Date of Receipt Mailing Address 2807 S Gary Ave 07 27 2012 City State Zip Code Transaction ID: SA11AI.12221 OK Tulsa 74114 Amount of Each Receipt this Period FEC ID number of contributing 60.00 federal political committee. Name of Employer Occupation Girling Community Care Regional Manager, Oklahoma Receipt For: Aggregate Year-to-Date ▼ Primary General 840.00 Other (specify) Full Name (Last, First, Middle Initial) c. Timothy R Brittingham Date of Receipt Mailing Address 2807 S Gary Ave 80 13 2012 City Zip Code State Transaction ID: SA11AI.12601 OK Tulsa 74114 Amount of Each Receipt this Period FEC ID number of contributing 60.00 С federal political committee. Name of Employer Occupation Girling Community Care Regional Manager, Oklahoma Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) 180.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FO	R LINE	NU	IMBER	:	PAGE	15 OF	13
Use separate schedule(s)	(che	eck only	or or	ne)				
for each category of the Detailed Summary Page		11a		11b		11c	12	
		13		14		15	16	1 1·

Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any per the name and address of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Fede	ral PAC	
Full Name (Last, First, Middle Initial)  Timothy R Brittingham  Mailing Address, 2807 S Gany Ave.		Date of Receipt
Mailing Address 2807 S Gary Ave		08 28 2012
City	State Zip Code	Transaction ID : SA11AI.12859
Tulsa	OK 74114	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer	Occupation	1
Girling Community Care	Regional Manager, Oklahoma	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	960.00	
Full Name (Last, First, Middle Initial)  Timothy R Brittingham	•	Date of Receipt
Mailing Address 2807 S Gary Ave		09 13 _2012 _
City	State Zip Code	Transaction ID : SA11AI.13312
Tulsa	OK 74114	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer	Occupation	-
Girling Community Care	Regional Manager, Oklahoma	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify)	1020.00	
Full Name (Last, First, Middle Initial)  C. Timothy R Brittingham	<u>'</u>	Date of Receipt
Mailing Address 2807 S Gary Ave		09 28 2012
City Tulsa	State Zip Code OK 74114	Transaction ID : SA11AI.13753
-		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer	Occupation	1
Girling Community Care	Regional Manager, Oklahoma	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify)	1080.00	
SUBTOTAL of Receipts This Page (optional)		180.00
TOTAL This Period (last page this line numb	er only)	

	FOR LINE NUMBER:	PAGE	16 OF	131
Use separate schedule(s) for each category of the	(check only one)	_	_	
Detailed Summary Page	X 11a 11b	11c	12	
, ,	13     14	15	16	17

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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Stefanie L Cavanaugh Date of Receipt Mailing Address 12512 Deer Falls Dr 2012 13 City State Zip Code Transaction ID: SA11AI.11912 TX Austin 78729 Amount of Each Receipt this Period FEC ID number of contributing C 200.00 federal political committee. Name of Employer Occupation Harden Healthcare Services **Finance** Receipt For: Aggregate Year-to-Date ▼ Primary General 2600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Stefanie L Cavanaugh Date of Receipt Mailing Address 12512 Deer Falls Dr 07 2012 31 City State Zip Code Transaction ID: SA11AI.12241 TX Austin 78729 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Name of Employer Occupation Harden Healthcare Services Finance Receipt For: Aggregate Year-to-Date ▼ Primary General 2800.00 Other (specify) Full Name (Last, First, Middle Initial) Stefanie L Cavanaugh Date of Receipt

Otorariio E Gavariaagii	name E Cavanaagn					
Mailing Address 12512 Deer Falls Dr		08 15 2012				
City	State Zip Code	Transaction ID : SA11AI.12613				
Austin	TX 78729	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	200				
Name of Employer	Occupation					
Harden Healthcare Services	Finance					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General	1.99.09 10 10 = 1					
Other (specify)	3000.00					

SUBTOTAL of Receipts This Page (optional)		7			7	60	0.00	
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200.00

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	d Statements may not be sold or used by any persthe name and address of any political committee t	
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Fede	ral PAC	
Full Name (Last, First, Middle Initial)  Stefanie L Cavanaugh  Mailing Address 12512 Deer Falls Dr		Date of Receipt
aming / Mariodo 12012 Deel Falls Di		08 31 2012
City	State Zip Code	Transaction ID : SA11AI.12882
Austin	TX 78729	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer	Occupation	-
Harden Healthcare Services	Finance	
Receipt For:  Primary  General  Other (specify)	Aggregate Year-to-Date ▼ 3200.00	
Full Name (Last, First, Middle Initial)	3200.00	
3. Stefanie L Cavanaugh		Date of Receipt
Mailing Address 12512 Deer Falls Dr		09 14 2012
City	State Zip Code	Transaction ID : SA11AI.13333
Austin	TX 78729	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	200.00
Name of Employer Harden Healthcare Services	Occupation	1
	Finance	-
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify) ▼	3400.00	
Full Name (Last, First, Middle Initial)  C. Stefanie L Cavanaugh		Date of Receipt
Mailing Address 12512 Deer Falls Dr		09 28 2012
City Austin	State Zip Code TX 78729	Transaction ID : SA11AI.13813  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer	Occupation	-
Harden Healthcare Services	Finance	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General  Other (specify) ▼	3600.00	
SUBTOTAL of Receipts This Page (optional)		600.00
TOTAL This Period (last page this line numb	er only)	

FOR LINE NUMBER: PAGE 18 OF 131 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Cathi Coney Date of Receipt Mailing Address 7207 Nine Oaks Cv 2012 07 06 City State Zip Code Transaction ID: SA11AI.11752 TX 78759 Austin Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Vice President, Operations MBS Pharmacv Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) Full Name (Last, First, Middle Initial) B. Cathi Coney Date of Receipt Mailing Address 7207 Nine Oaks Cv 07 23 2012 City State Zip Code Transaction ID: SA11AI.12109 TX Austin 78759 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation MBS Pharmacy Vice President, Operations Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) c. Cathi Coney Date of Receipt Mailing Address 7207 Nine Oaks Cv 80 07 2012 City State Zip Code Transaction ID: SA11AI.12395 TX Austin 78759 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation MBS Pharmacy Vice President, Operations Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any pers the name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Fede	ral PAC	
Full Name (Last, First, Middle Initial) Cathi Coney  Mailing Address, 7207 Nine Only		Date of Receipt
Mailing Address 7207 Nine Oaks Cv		08 22 2012
City	State Zip Code	Transaction ID : SA11AI.12685
Austin	TX 78759	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	-
MBS Pharmacy	Vice President, Operations	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	800.00	
Full Name (Last, First, Middle Initial)  Cathi Coney		Date of Receipt
Mailing Address 7207 Nine Oaks Cv		09 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.13170
Austin	TX 78759	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	1
MBS Pharmacy	Vice President, Operations	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	850.00	
Full Name (Last, First, Middle Initial)  Cathi Coney		Date of Receipt
Mailing Address 7207 Nine Oaks Cv		09 21 2012
City	State Zip Code	Transaction ID : SA11AI.13620
Austin	TX 78759	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	1
MBS Pharmacy	Vice President, Operations	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	900.00	
SUBTOTAL of Receipts This Page (optional).		150.00
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Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold or used by any pers he name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Feder	ral PAC	
Full Name (Last, First, Middle Initial)  A. Gloria R Crawford		Date of Receipt
Mailing Address 6013 Forest Shadow St		07 13 2012
City San Antonio	State Zip Code TX 78240	Transaction ID : SA11AI.11921  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer  Girling Community Care  Receipt For:  Primary General  Other (specify) ▼	Occupation Regional Director  Aggregate Year-to-Date ▼  390.00	
Full Name (Last, First, Middle Initial)  Gloria R Crawford  Mailing Address 6013 Forest Shadow St		Date of Receipt
City San Antonio	State Zip Code TX 78240	Transaction ID : SA11AI.12249  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	30.00
Name of Employer Girling Community Care	Occupation Regional Director	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	
Full Name (Last, First, Middle Initial)  C. Gloria R Crawford		Date of Receipt
Mailing Address 6013 Forest Shadow St		08 15 2012
City San Antonio	State Zip Code TX 78240	Transaction ID : SA11AI.12618  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	
Girling Community Care Receipt For:	Regional Director  Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	450.00	
SUBTOTAL of Receipts This Page (optional).	•	90.00
TOTAL This Period (last page this line number	er only)	

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for each category of the Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Gloria R Crawford Date of Receipt Mailing Address 6013 Forest Shadow St 2012 08 31 City State Zip Code Transaction ID: SA11AI.12889 TX 78240 San Antonio Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation Regional Director Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 480.00 Other (specify) Full Name (Last, First, Middle Initial) B. Gloria R Crawford Date of Receipt Mailing Address 6013 Forest Shadow St 09 2012 14 City State Zip Code Transaction ID: SA11AI.13340 TX San Antonio 78240 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation Girling Community Care Regional Director Receipt For: Aggregate Year-to-Date ▼ Primary General 510.00 Other (specify) Full Name (Last, First, Middle Initial) c. Gloria R Crawford Date of Receipt Mailing Address 6013 Forest Shadow St 09 28 2012 City Zip Code State Transaction ID: SA11AI.13820 TX San Antonio 78240 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation Regional Director Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 540.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional).....

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for each category of the Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Lisa Lynn Cupps Date of Receipt Mailing Address 2450 County Road 253 2012 07 City State Zip Code Transaction ID: SA11AI.11923 TX Comanche 76442 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Regional Director, West Texas Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lisa Lynn Cupps Date of Receipt Mailing Address 2450 County Road 253 07 31 2012 City State Zip Code Transaction ID: SA11AI.12251 TX Comanche 76442 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Girling Community Care Regional Director, West Texas Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) c. Lisa Lynn Cupps Date of Receipt Mailing Address 2450 County Road 253 80 15 2012 City State Zip Code Transaction ID: SA11AI.12620 TX Comanche 76442 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Regional Director, West Texas Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Lisa Lynn Cupps Date of Receipt Mailing Address 2450 County Road 253 2012 08 31 City State Zip Code Transaction ID: SA11AI.12891 TX Comanche 76442 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Regional Director, West Texas Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lisa Lynn Cupps Date of Receipt Mailing Address 2450 County Road 253 09 2012 14 City State Zip Code Transaction ID: SA11AI.13342 TX Comanche 76442 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Girling Community Care Regional Director, West Texas Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) Full Name (Last, First, Middle Initial) c. Lisa Lynn Cupps Date of Receipt Mailing Address 2450 County Road 253 09 28 2012 City State Zip Code Transaction ID: SA11AI.13822 TX Comanche 76442 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Regional Director, West Texas Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Wendy L Day Date of Receipt Mailing Address 4809 Sinclair Ave 06 2012 07 City State Zip Code Transaction ID: SA11AI.11756 TX 78756 Austin Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) Full Name (Last, First, Middle Initial) B. Wendy L Day Date of Receipt Mailing Address 4809 Sinclair Ave 07 23 2012 City State Zip Code Transaction ID: SA11AI.12113 TX Austin 78756 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) c. Wendy L Day Date of Receipt Mailing Address 4809 Sinclair Ave 80 07 2012 City State Zip Code Transaction ID: SA11AI.12399 TX Austin 78756 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Administrator TRISUN Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Wendy L Day Date of Receipt Mailing Address 4809 Sinclair Ave 2012 08 22 City State Zip Code Transaction ID: SA11AI.12731 TX 78756 Austin Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name (Last, First, Middle Initial) B. Wendy L Day Date of Receipt Mailing Address 4809 Sinclair Ave 09 07 2012 City State Zip Code Transaction ID: SA11AI.13174 TX Austin 78756 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) Full Name (Last, First, Middle Initial) c. Wendy L Day Date of Receipt Mailing Address 4809 Sinclair Ave 09 21 2012 City State Zip Code Transaction ID: SA11AI.13624 TX Austin 78756 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Administrator TRISUN Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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for each category of the Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) James Wayne Douglas Date of Receipt Mailing Address 4701 Circle Oak Cv 2012 07 City State Zip Code Transaction ID: SA11AI.11927 TX 78749 Austin Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Girling Community Care President Receipt For: Aggregate Year-to-Date ▼ Primary General 1300.00 Other (specify) Full Name (Last, First, Middle Initial) B. James Wayne Douglas Date of Receipt Mailing Address 4701 Circle Oak Cv 07 31 2012 City State Zip Code Transaction ID: SA11AI.12254 TX Austin 78749 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Girling Community Care President Receipt For: Aggregate Year-to-Date ▼ Primary General 1400.00 Other (specify) Full Name (Last, First, Middle Initial) c. James Wayne Douglas Date of Receipt Mailing Address 4701 Circle Oak Cv 80 31 2012 City State Zip Code Transaction ID: SA11AI.12894 TX Austin 78749 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation President Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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131 for each category of the Detailed Summary Page 13 14 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) James Wayne Douglas Date of Receipt Mailing Address 4701 Circle Oak Cv 2012 09 City State Zip Code Transaction ID: SA11AI.13345 TX 78749 Austin Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Girling Community Care President Receipt For: Aggregate Year-to-Date ▼ Primary General 1600.00 Other (specify) Full Name (Last, First, Middle Initial) B. James Wayne Douglas Date of Receipt Mailing Address 4701 Circle Oak Cv 09 28 2012 City State Zip Code Transaction ID: SA11AI.13825 TX Austin 78749 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Girling Community Care President Receipt For: Aggregate Year-to-Date ▼ Primary General 1700.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mark Duncan Date of Receipt Mailing Address 799 W Bartlett Dr 07 13 2012 City State Zip Code Transaction ID: SA11AI.11929 TX Buda 78610 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Operations, North Receipt For: Aggregate Year-to-Date ▼ Primary General 975.00 Other (specify) 275.00 SUBTOTAL of Receipts This Page (optional).....

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14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Mark Duncan Date of Receipt Mailing Address 799 W Bartlett Dr 2012 07 31 City State Zip Code Transaction ID: SA11AI.12256 TX 78610 Buda Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Operations, North Receipt For: Aggregate Year-to-Date ▼ Primary General 1050.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mark Duncan Date of Receipt Mailing Address 799 W Bartlett Dr 08 15 2012 City State Zip Code Transaction ID: SA11AI.12621 TX Buda 78610 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Operations, North Receipt For: Aggregate Year-to-Date ▼ Primary General 1125.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mark Duncan Date of Receipt Mailing Address 799 W Bartlett Dr 80 31 2012 City Zip Code State Transaction ID: SA11AI.12896 TX Buda 78610 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Operations, North Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) 225.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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Full Name (Last, First, Middle Initial)    Mark Duncan	or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  Harden Healthcare LLC Fede	the name and address of any political committee	to solicit contributions from such committee.
Mailing Address 799 W Bartlett Dr  City Buda TX 78610  FEC ID number of contributing federal political committee.  Name of Employer TRISUN Healthcare Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) City State Zip Code TX 78610  Amount of Each Receipt this Period  Aggregate Year-to-Date ▼  Transaction ID : SA11Al.13826  Amount of Each Receipt this Period  T5.0  Date of Receipt  Transaction ID : SA11Al.13826  Amount of Each Receipt this Period  Date of Receipt  Transaction ID : SA11Al.13826  Amount of Each Receipt this Period  Date of Receipt  Transaction ID : SA11Al.13826  Amount of Each Receipt this Period  Date of Receipt  Transaction ID : SA11Al.11831  Amount of Each Receipt this Period  Date of Receipt  Transaction ID : SA11Al.11831  Amount of Each Receipt this Period  Date of Receipt  Transaction ID : SA11Al.11831  Amount of Each Receipt this Period  Date of Receipt  Transaction ID : SA11Al.11931  Amount of Each Receipt this Period  Date of Receipt  Amount of Each Receipt this Period  Date of Receipt  Transaction ID : SA11Al.11831  Amount of Each Receipt this Period  Date of Receipt  Transaction ID : SA11Al.11931  Amount of Each Receipt this Period  Date of Receipt  Transaction ID : SA11Al.11931  Amount of Each Receipt this Period  Date of Receipt  Transaction ID : SA11Al.11931  Amount of Each Receipt this Period  Date of Receipt  Transaction ID : SA11Al.11931  Amount of Each Receipt this Period  Date of Receipt  Transaction ID : SA11Al.11931  Amount of Each Receipt this Period  Date of Receipt  Transaction ID : SA11Al.11931  Amount of Each Receipt this Period  Aggregate Year-to-Date ▼  Date of Receipt	Full Name (Last, First, Middle Initial)  Mark Duncan  Mailing Address 799 W Bartlett Dr  City Buda  FEC ID number of contributing federal political committee.  Name of Employer  TRISUN Healthcare  Receipt For:  Primary  General	State Zip Code TX 78610  C  Occupation Vice President, Operations, North  Aggregate Year-to-Date ▼	09 14 2012 Transaction ID : SA11AI.13347
Mailing Address 6600 Lands End Ct  City State Zip Code Transaction ID: SA11AI.11931  Fort Worth TX 76116  FEC ID number of contributing federal political committee.  Name of Employer TRISUN Healthcare  Receipt For:  Primary General  Date of Receipt  Aggregate Year-to-Date ▼  Date of Receipt  Aggregate Year-to-Date ▼	Mark Duncan  Mailing Address 799 W Bartlett Dr  City Buda  FEC ID number of contributing federal political committee.  Name of Employer TRISUN Healthcare  Receipt For:  Primary  General	TX 78610  C  Occupation  Vice President, Operations, North  Aggregate Year-to-Date ▼	09 28 2012 Transaction ID : SA11AI.13826
	City Fort Worth  FEC ID number of contributing federal political committee.  Name of Employer TRISUN Healthcare Receipt For: Primary General	TX 76116  C Occupation Nurse Consultant Aggregate Year-to-Date ▼	07 13 2012 Transaction ID : SA11AI.11931
SUBTOTAL of Receipts This Page (optional)	SUBTOTAL of Receipts This Page (optional	)	175.00

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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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Dianne B Edwards Date of Receipt Mailing Address 6600 Lands End Ct 07 2012 31 City State Zip Code Transaction ID: SA11AI.12258 TX Fort Worth 76116 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Nurse Consultant Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dianne B Edwards Date of Receipt Mailing Address 6600 Lands End Ct 08 15 2012 City State Zip Code Transaction ID: SA11AI.12623 Fort Worth TX 76116 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Nurse Consultant Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name (Last, First, Middle Initial) c. Dianne B Edwards Date of Receipt Mailing Address 6600 Lands End Ct 80 31 2012 City State Zip Code Transaction ID: SA11AI.12898 TX Fort Worth 76116 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation **Nurse Consultant** TRISUN Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full)	LDAC	
Harden Healthcare LLC Federa	I PAC	
Full Name (Last, First, Middle Initial)  1. Dianne B Edwards		Date of Receipt
Mailing Address 6600 Lands End Ct		09 14 2012
City	State Zip Code	Transaction ID : SA11AI.13349
Fort Worth	TX 76116	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	
TRISUN Healthcare	Nurse Consultant	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	425.00	
Full Name (Last, First, Middle Initial)  3. Dianne B Edwards		Date of Receipt
Mailing Address 6600 Lands End Ct		09 28 _2012 _
City	State Zip Code	Transaction ID : SA11AI.13828
Fort Worth	TX 76116	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	
TRISUN Healthcare	Nurse Consultant	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial)  C. Scott Ellyson		Date of Receipt
Mailing Address 824 Stonewall Ridge		07 13 _ 2012 _
City	State Zip Code	Transaction ID : SA11AI.11932
Austin	TX 78746	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer	Occupation	
Harden Healthcare	Chief Financial Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1300.00	
SUBTOTAL of Receipts This Page (optional)	<b></b>	150.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 32 OF 131 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Scott Ellyson Date of Receipt Mailing Address 824 Stonewall Ridge 2012 07 31 City State Zip Code Transaction ID: SA11AI.12260 TX 78746 Austin Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Chief Financial Officer Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 1400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Scott Ellyson Date of Receipt Mailing Address 824 Stonewall Ridge 08 15 2012 City State Zip Code Transaction ID: SA11AI.12624 TX Austin 78746 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Harden Healthcare Chief Financial Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Scott Ellyson Date of Receipt Mailing Address 824 Stonewall Ridge 80 31 2012 City State Zip Code Transaction ID: SA11AI.12900 TX Austin 78746 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Chief Financial Officer Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 1600.00 Other (specify) 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 33 OF 131 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Scott Ellyson Date of Receipt Mailing Address 824 Stonewall Ridge 2012 City State Zip Code Transaction ID: SA11AI.13351 TX 78746 Austin Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Name of Employer Occupation Chief Financial Officer Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 1700.00 Other (specify) Full Name (Last, First, Middle Initial) B. Scott Ellyson Date of Receipt Mailing Address 824 Stonewall Ridge 09 28 2012 City State Zip Code Transaction ID: SA11AI.13829 TX Austin 78746 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Harden Healthcare Chief Financial Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 1800.00 Other (specify) Full Name (Last, First, Middle Initial) c. Bradford W Evans Date of Receipt Mailing Address 400 E Red Bridge Rd 06 07 2012 City Zip Code State Transaction ID: SA11AI.11764 MO Kansas City 67131 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Hospice Care of Kansas Director Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) 250.00 SUBTOTAL of Receipts This Page (optional).....

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

FOR LINE NUMBER: PAGE 34 OF Use separate schedule(s) for each category of the (check only one) X 11a 11b 11c 12

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Detailed Summary Page 13 16 14 15

	Statements may not be sold or used by any person e name and address of any political committee to		
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federa			
Full Name (Last, First, Middle Initial)  A. Bradford W Evans  Mailing Address 400 E Red Bridge Rd		Date of Receipt	
		07 20 2012	
City Kansas City	State Zip Code MO 67131	Transaction ID : SA11AI.12054  Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	50.00	
Name of Employer  Hospice Care of Kansas  Receipt For:  Primary  General  Other (specify) ▼	Occupation Director  Aggregate Year-to-Date ▼  700.00		
Full Name (Last, First, Middle Initial)  Bradford W Evans  Mailing Address 400 E Red Bridge Rd		Date of Receipt	
City Kansas City  FEC ID number of contributing federal political committee.	State Zip Code MO 67131	08 07 2012  Transaction ID : SA11AI.12407  Amount of Each Receipt this Period  50.00	
Name of Employer Hospice Care of Kansas  Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation Director  Aggregate Year-to-Date ▼  750.00		
Full Name (Last, First, Middle Initial) C. Bradford W Evans  Mailing Address 400 E Red Bridge Rd  City	State Zip Code	Date of Receipt  M M / D D / Y Y Y Y  08 22 2012  Transaction ID : SA11AL12739	
Kansas City	MO 67131	Transaction ID : SA11AI.12739  Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	50.00	
Name of Employer  Hospice Care of Kansas  Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation Director  Aggregate Year-to-Date ▼  800.00		
SUBTOTAL of Receipts This Page (optional)		150.00	
TOTAL This Period (last page this line number	<u> </u>		

FOR LINE NUMBER: PAGE 35 OF 131 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Bradford W Evans Date of Receipt Mailing Address 400 E Red Bridge Rd 07 2012 City Zip Code State Transaction ID: SA11AI.13182 MO Kansas City 67131 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Hospice Care of Kansas Director Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) Full Name (Last, First, Middle Initial) B. Bradford W Evans Date of Receipt Mailing Address 400 E Red Bridge Rd 09 21 2012 City State Zip Code Transaction ID: SA11AI.13632 MO Kansas City 67131 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Hospice Care of Kansas Director Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) Full Name (Last, First, Middle Initial) c. Patricia A (Tricia) Fox Date of Receipt Mailing Address PO Box 190 07 13 2012 City Zip Code State Transaction ID: SA11AI.11939 TX Florence 76527 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Vice President, Rehab Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 36 OF 131 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Patricia A (Tricia) Fox Date of Receipt Mailing Address PO Box 190 2012 07 31 City Zip Code State Transaction ID: SA11AI.12266 Florence TX 76527 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Vice President, Rehab Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) B. Patricia A (Tricia) Fox Date of Receipt Mailing Address PO Box 190 08 15 2012 City State Zip Code Transaction ID: SA11AI.12628 TX Florence 76527 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Girling Home Health Vice President, Rehab Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) c. Patricia A (Tricia) Fox Date of Receipt Mailing Address PO Box 190 80 31 2012 City Zip Code State Transaction ID: SA11AI.12906 TX Florence 76527 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Vice President, Rehab Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

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for each category of the Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Patricia A (Tricia) Fox Date of Receipt Mailing Address PO Box 190 2012 City Zip Code State Transaction ID: SA11AI.13357 Florence TX 76527 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Vice President, Rehab Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) Full Name (Last, First, Middle Initial) B. Patricia A (Tricia) Fox Date of Receipt Mailing Address PO Box 190 09 28 2012 City State Zip Code Transaction ID: SA11AI.13835 TX Florence 76527 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Girling Home Health Vice President, Rehab Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) Full Name (Last, First, Middle Initial) c. Lori Don McNamee Gregory Date of Receipt Mailing Address 555 E 5th St Apt 2819 07 13 2012 City State Zip Code Transaction ID: SA11AI.11945 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation Chief Compliance Officer Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 325.00 Other (specify) 125.00 SUBTOTAL of Receipts This Page (optional).....

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FOR LINE NUMBER: PAGE 38 OF 131 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Lori Don McNamee Gregory Date of Receipt Mailing Address 555 E 5th St Apt 2819 2012 07 31 City Zip Code State Transaction ID: SA11AI.12272 TX 78703 Austin Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Chief Compliance Officer Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lori Don McNamee Gregory Date of Receipt Mailing Address 555 E 5th St Apt 2819 80 15 2012 City State Zip Code Transaction ID: SA11AI.12630 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation Harden Healthcare Services Chief Compliance Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name (Last, First, Middle Initial) c. Lori Don McNamee Gregory Date of Receipt Mailing Address 555 E 5th St Apt 2819 80 31 2012 City Zip Code State Transaction ID: SA11AI.12912 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation Chief Compliance Officer Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

		PAGE	39 OF	131
Use separate schedule(s) for each category of the	(check only one)	. –		
Detailed Summary Page	X 11a 11b	11c	12	
, ,		15	16	17

NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC  Full Name (Last, First, Middle Initial) Lori Don McNamee Gregory  Mailing Address 555 E 5th St Apt 2819  City State Zip Code TX 78703  FEC ID number of contributing federal political committee.  Name of Employer Harden Healthcare Services Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial)  Date of Receipt  Transaction ID: SA11AL.13364  Amount of Each Receipt this Period  25.1	
Full Name (Last, First, Middle Initial) Lori Don McNamee Gregory  Mailing Address 555 E 5th St Apt 2819  City Austin  FEC ID number of contributing federal political committee.  Name of Employer Harden Healthcare Services Receipt For:  Primary  General  Other (specify)   Date of Receipt  M. M. M. D. D. J. Y.	
A. Lori Don McNamee Gregory  Mailing Address 555 E 5th St Apt 2819  City State Zip Code TX 78703  FEC ID number of contributing federal political committee.  Name of Employer Harden Healthcare Services  Receipt For:  Primary General Other (specify) ▼  Date of Receipt  MMM / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City State Zip Code Austin TX 78703  FEC ID number of contributing federal political committee.  Name of Employer Harden Healthcare Services Receipt For:  Primary General Other (specify) ▼  Other (specify) ▼  Other State Zip Code Transaction ID : SA11AI.13364  Amount of Each Receipt this Period  Clief Compliance Officer  Aggregate Year-to-Date ▼  425.00	
City Austin  TX  78703  Amount of Each Receipt this Period  Cocupation Harden Healthcare Services  Receipt For:  Primary  Other (specify) ▼  Austin  State Zip Code TX  78703  Amount of Each Receipt this Period  Cocupation Chief Compliance Officer  Aggregate Year-to-Date ▼  425.00	00
FEC ID number of contributing federal political committee.  Name of Employer Harden Healthcare Services Receipt For: Primary Other (specify)   Affidult of Each Receipt this Period  Cocupation Chief Compliance Officer  Aggregate Year-to-Date   425.00	00
federal political committee.  Name of Employer  Harden Healthcare Services  Receipt For:  Primary  General  Other (specify) ▼  Occupation  Chief Compliance Officer  Aggregate Year-to-Date ▼  425.00	00
Harden Healthcare Services  Receipt For:  Primary  Other (specify) ▼  Chief Compliance Officer  Aggregate Year-to-Date ▼  425.00	
Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  425.00	
Primary General Other (specify) ▼  Aggregate Teal-to-Date ▼  425.00	
Other (specify) ▼ 425.00	
Full Name (Last First Middle Initial)	
Full Name (Last, First, Middle Initial)  Lori Don McNamee Gregory  Date of Receipt	
Mailing Address 555 E 5th St Apt 2819  09 28 2012	
City State Zip Code Transaction ID : SA11AI.13841	_
Austin TX 78703 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	00
Name of Employer Occupation	
Harden Healthcare Services Chief Compliance Officer	
Receipt For:  Primary  Other (specify) ▼  Aggregate Year-to-Date ▼  450.00	
Full Name (Last, First, Middle Initial)  C. Elaine Hall  Date of Receipt	
Mailing Address 6480 County Road 321  Mailing Address 6480 County Road 321  07 06 2012	Y
City State Zip Code Transaction ID : SA11AI.11782	
Blanket TX 76432 Amount of Each Receipt this Period	_
FEC ID number of contributing federal political committee.	00
Name of Employer Occupation	
Lighthouse Hospice Administrator	
Receipt For:  Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼  325.00	
SUBTOTAL of Receipts This Page (optional)	0
TOTAL This Period (last page this line number only)	

FOR LINE NUMBER: PAGE 40 OF 131 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Elaine Hall Date of Receipt Mailing Address 6480 County Road 321 20 2012 07 City State Zip Code Transaction ID: SA11AI.12060 TX Blanket 76432 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Administrator Lighthouse Hospice Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Elaine Hall Date of Receipt Mailing Address 6480 County Road 321 80 07 2012 City State Zip Code Transaction ID: SA11AI.12425 TX **Blanket** 76432 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation Lighthouse Hospice Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name (Last, First, Middle Initial) c. Elaine Hall Date of Receipt Mailing Address 6480 County Road 321 80 22 2012 City State Zip Code Transaction ID: SA11AI.12754 TX Blanket 76432 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation Administrator Lighthouse Hospice Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional).....

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# SCHEDULE A (FEC Form 3X)

SCHEDULE A (LECTOHII SA	4)	Use separate schedule(s)		Ck only			. [P/	AGE	41 0	ır 13
ITEMIZED RECEIPTS		for each category of the	1 '	ck only	·—	,			٦٫٫	
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	1011	<u> </u>	1   -	13		14	15		16	1
Any information copied from such Reports an or for commercial purposes, other than using										
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Fede	eral PAC									
Full Name (Last, First, Middle Initial)										
A. Elaine Hall				Date of	Red	ceipt				
Mailing Address 6480 County Road 321				M = M		D =	D /	Y	Υ	Υ
, , , , , , , , , , , , , , , , , , , ,				09		07			2012	
City	State	Zip Code	Π.	Trans	actio	on ID	: SA11			
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FEC ID number of contributing federal political committee.	C				-	,			25	5.00
Name of Employer	Occupation	1								
Lighthouse Hospice	Administrat	or								
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General Other (specify) ▼	Aggregate	425.00								
Full Name (Last, First, Middle Initial)  B. Elaine Hall	1			Date of	Red	ceipt				
Mailing Address 6480 County Road 321				M = M	/	21		Y = Y	012	Y
City	State	Zip Code	Π.	Trans	actio	n ID :	SA11	AI.136	46	
Blanket	TX	76432		mount	of I	Each I	Receipt	this F	eriod	
FEC ID number of contributing federal political committee.	C					,			25	.00
Name of Employer	Occupation	1								
Lighthouse Hospice	Administrate	or								
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General Other (specify) ▼		450.00								
Full Name (Last, First, Middle Initial)  C. Benjamin Hanson				Date of	Red	ceipt				
Mailing Address 2211 Sunny Slope Dr				M = M 07	/	13			012	Y
City	State	Zip Code	TL"	Trans	acti	on ID	: SA11	AI.119	50	
Austin	TX	78703		Amount	of I	Each I	Receipt	this F	eriod	
FEC ID number of contributing federal political committee.	С								200	0.00

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TOTAL This Period (last page this line number only)	<b>-</b>	Ī			7								٦

2600.00

Sr Vice President & General Counsel

Aggregate Year-to-Date ▼

Occupation

Name of Employer

Harden Healthcare

Primary

Other (specify)

General

Receipt For:

FOR LINE NUMBER: PAGE 42 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Benjamin Hanson Date of Receipt Mailing Address 2211 Sunny Slope Dr 2012 07 31 City State Zip Code Transaction ID: SA11AI.12276 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing C 200.00 federal political committee. Name of Employer Occupation Sr Vice President & General Counsel Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 2800.00 Other (specify) Full Name (Last, First, Middle Initial) B. Benjamin Hanson Date of Receipt Mailing Address 2211 Sunny Slope Dr 80 15 2012 City State Zip Code Transaction ID: SA11AI.12632 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Name of Employer Occupation Harden Healthcare Sr Vice President & General Counsel Receipt For: Aggregate Year-to-Date ▼ Primary General 3000.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Benjamin Hanson Date of Receipt Mailing Address 2211 Sunny Slope Dr 80 31 2012 City Zip Code State Transaction ID: SA11AI.12916 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing 200.00 С federal political committee. Name of Employer Occupation Sr Vice President & General Counsel Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 3200.00 Other (specify) 600.00 SUBTOTAL of Receipts This Page (optional).....

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for each category of the Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Benjamin Hanson Date of Receipt Mailing Address 2211 Sunny Slope Dr 2012 City State Zip Code Transaction ID: SA11AI.13368 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing C 200.00 federal political committee. Name of Employer Occupation Sr Vice President & General Counsel Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 3400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Benjamin Hanson Date of Receipt Mailing Address 2211 Sunny Slope Dr 09 28 2012 City State Zip Code Transaction ID: SA11AI.13845 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Name of Employer Occupation Harden Healthcare Sr Vice President & General Counsel Receipt For: Aggregate Year-to-Date ▼ Primary General 3600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Eric J Hansum Date of Receipt Mailing Address 3005 Chatelaine Dr 07 13 2012 City State Zip Code Transaction ID: SA11AI.11951 TX Austin 78746 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Harden Healthcare Legal Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) 450.00 SUBTOTAL of Receipts This Page (optional).....

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for each category of the 12 Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Eric J Hansum Date of Receipt Mailing Address 3005 Chatelaine Dr 07 2012 31 City State Zip Code Transaction ID: SA11AI.12277 TX 78746 Austin Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Harden Healthcare Legal Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) B. Eric J Hansum Date of Receipt Mailing Address 3005 Chatelaine Dr 08 15 2012 City State Zip Code Transaction ID: SA11AI.12633 TX Austin 78746 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Harden Healthcare Legal Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) c. Eric J Hansum Date of Receipt Mailing Address 3005 Chatelaine Dr 80 31 2012 City State Zip Code Transaction ID: SA11AI.12917 TX Austin 78746 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Harden Healthcare Legal Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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FOR LINE NUMBER: PAGE 45 OF 131 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Eric J Hansum Date of Receipt Mailing Address 3005 Chatelaine Dr 2012 City State Zip Code Transaction ID: SA11AI.13369 TX 78746 Austin Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Harden Healthcare Legal Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) Full Name (Last, First, Middle Initial) B. Eric J Hansum Date of Receipt Mailing Address 3005 Chatelaine Dr 09 28 2012 City State Zip Code Transaction ID: SA11AI.13846 TX Austin 78746 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Harden Healthcare Legal Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) Full Name (Last, First, Middle Initial) c. Robin J Hayes Date of Receipt Mailing Address 6112 Jumano Ln 07 13 2012 City State Zip Code Transaction ID: SA11AI.11955 TX Austin 78749 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Professional Services Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional).....

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FOR LINE NUMBER: PAGE 46 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

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14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Robin J Hayes Date of Receipt Mailing Address 6112 Jumano Ln 2012 07 31 City State Zip Code Transaction ID: SA11AI.12281 TX 78749 Austin Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Professional Services Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Robin J Hayes Date of Receipt Mailing Address 6112 Jumano Ln 08 15 2012 City State Zip Code Transaction ID: SA11AI.12636 TX Austin 78749 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Professional Services Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) c. Robin J Hayes Date of Receipt Mailing Address 6112 Jumano Ln 80 31 2012 City Zip Code State Transaction ID: SA11AI.12921 TX Austin 78749 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Professional Services Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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for each category of the 12 Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Robin J Hayes Date of Receipt Mailing Address 6112 Jumano Ln 2012 City State Zip Code Transaction ID: SA11AI.13373 TX 78749 Austin Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Professional Services Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Robin J Hayes Date of Receipt Mailing Address 6112 Jumano Ln 09 28 2012 City State Zip Code Transaction ID: SA11AI.13850 TX Austin 78749 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Vice President, Professional Services Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) Full Name (Last, First, Middle Initial) c. Tina Hilmas Date of Receipt Mailing Address 494 Countryside Dr 03 07 2012 City State Zip Code Transaction ID: SA11AI.11714 MO Rolla 65401 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation Girling Community Care Director of Nursing Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 125.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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A 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Tina Hilmas Date of Receipt Mailing Address 494 Countryside Dr 2012 City State Zip Code Transaction ID: SA11AI.12039 MO Rolla 65401 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Girling Community Care Director of Nursing Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name (Last, First, Middle Initial) B. Tina Hilmas Date of Receipt Mailing Address 494 Countryside Dr 80 01 2012 City State Zip Code Transaction ID: SA11AI.12357 Rolla MO 65401 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation Girling Community Care Director of Nursing Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) c. Tina Hilmas Date of Receipt Mailing Address 494 Countryside Dr 80 15 2012 Zip Code City State Transaction ID: SA11AI.12639 MO Rolla 65401 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Girling Community Care Director of Nursing Receipt For: Aggregate Year-to-Date ▼ Primary General 425.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full)  Harden Healthcare LLC Fede	ral PAC	
Full Name (Last, First, Middle Initial) Tina Hilmas		Date of Receipt
Mailing Address 494 Countryside Dr		08 29 2012
City	State Zip Code	Transaction ID : SA11AI.12868
Rolla	MO 65401	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	_
Girling Community Care	Director of Nursing	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	450.00	
Full Name (Last, First, Middle Initial) Tina Hilmas		Date of Receipt
Mailing Address 494 Countryside Dr		09 12 2012
City	State Zip Code	Transaction ID : SA11AI.13306
Rolla	MO 65401	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	25.00
Name of Employer	Occupation	
Girling Community Care	Director of Nursing	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	475.00	
Full Name (Last, First, Middle Initial) Tina Hilmas		Date of Receipt
Mailing Address 494 Countryside Dr		09 26 2012
City	State Zip Code	Transaction ID : SA11AI.13798
Rolla	MO 65401	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	
Girling Community Care	Director of Nursing	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		75.00
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Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Chelsea M Holden Date of Receipt Mailing Address 4000 Dunning Ln 2012 07 City State Zip Code Transaction ID: SA11AI.11959 TX 78746 Austin Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Harden Healthcare Services Government Relations Liaison Receipt For: Aggregate Year-to-Date ▼ Primary General 325.00 Other (specify) Full Name (Last, First, Middle Initial) B. Chelsea M Holden Date of Receipt Mailing Address 4000 Dunning Ln 07 31 2012 City State Zip Code Transaction ID: SA11AI.12285 TX Austin 78746 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation Harden Healthcare Services Government Relations Liaison Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) c. Chelsea M Holden Date of Receipt Mailing Address 4000 Dunning Ln 80 15 2012 City Zip Code State Transaction ID: SA11AI.12640 TX Austin 78746 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation Harden Healthcare Services Government Relations Liaison Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Chelsea M Holden Date of Receipt Mailing Address 4000 Dunning Ln 08 2012 31 City State Zip Code Transaction ID: SA11AI.12927 TX 78746 Austin Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Harden Healthcare Services Government Relations Liaison Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Chelsea M Holden Date of Receipt Mailing Address 4000 Dunning Ln 09 14 2012 City State Zip Code Transaction ID: SA11AI.13379 TX Austin 78746 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation Harden Healthcare Services Government Relations Liaison Receipt For: Aggregate Year-to-Date ▼ Primary General 425.00 Other (specify) Full Name (Last, First, Middle Initial) c. Chelsea M Holden Date of Receipt Mailing Address 4000 Dunning Ln 09 28 2012 City Zip Code State Transaction ID: SA11AI.13855 TX Austin 78746 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation Government Relations Liaison Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional).....

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for each category of the Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Maxzine Holliday Date of Receipt Mailing Address 6116 Sulfur Spring Dr 06 2012 07 City State Zip Code Transaction ID: SA11AI.11785 TX Killeen 76542 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Director of Nursing Receipt For: Aggregate Year-to-Date ▼ Primary General 370.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Maxzine Holliday Date of Receipt Mailing Address 6116 Sulfur Spring Dr 07 23 2012 City State Zip Code Transaction ID: SA11AI.12134 TX Killeen 76542 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Director of Nursing Receipt For: Aggregate Year-to-Date ▼ Primary General 410.00 Other (specify) Full Name (Last, First, Middle Initial) c. Maxzine Holliday Date of Receipt Mailing Address 6116 Sulfur Spring Dr 80 07 2012 City State Zip Code Transaction ID: SA11AI.12428 TX Killeen 76542 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation TRISUN Healthcare Director of Nursing Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) 120.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full)		
Harden Healthcare LLC Federal		
Full Name (Last, First, Middle Initial)  Maxzine Holliday		Date of Receipt
Mailing Address 6116 Sulfur Spring Dr		08 22 2012
City	State Zip Code	Transaction ID : SA11AI.12757
Killeen	TX 76542	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	40.00
Name of Employer	Occupation	
TRISUN Healthcare	Director of Nursing	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	0.0	
Other (specify) ▼	490.00	
Full Name (Last, First, Middle Initial)  Maxzine Holliday		Date of Receipt
Mailing Address 6116 Sulfur Spring Dr		09 07 2012
City	State Zip Code	Transaction ID : SA11AI.13204
Killeen	TX 76542	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	40.00
Name of Employer	Occupation	
TRISUN Healthcare	Director of Nursing	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 530.00	
Full Name (Last, First, Middle Initial)  C. Maxzine Holliday		Date of Receipt
Mailing Address 6116 Sulfur Spring Dr		M = M / D = D / Y = Y = Y
City	State Zip Code	09 21 2012 Transaction ID : SA11AI.13649
Killeen	TX 76542	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	40.00
Name of Employer	Occupation	
TRISUN Healthcare	Director of Nursing	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	570.00	
SUBTOTAL of Receipts This Page (optional)		120.00
TOTAL This Period (last page this line number of	only)	

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Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any perso name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
Harden Healthcare LLC Federal	PAU	
Full Name (Last, First, Middle Initial)  Kelly Ann Jalowiec		Date of Receipt
Mailing Address 1410 W Fillmore St		07 13 2012
City	State Zip Code	Transaction ID : SA11AI.11965
Chicago	IL 60607	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer	Occupation	
Girling Home Health	Vice President, Operations	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	975.00	
Full Name (Last, First, Middle Initial)  Kelly Ann Jalowiec		Date of Receipt
Mailing Address 1410 W Fillmore St		07 31 2012
City	State Zip Code	Transaction ID : SA11AI.12290
Chicago	IL 60607	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer	Occupation	
Girling Home Health	Vice President, Operations	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  1050.00	
Full Name (Last, First, Middle Initial)  C. Kelly Ann Jalowiec		Date of Receipt
Mailing Address 1410 W Fillmore St		08 15 _2012 _
City	State Zip Code	Transaction ID : SA11AI.12565
Chicago	IL 60607	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer	Occupation	
Girling Home Health	Vice President, Operations	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1125.00	
SUBTOTAL of Receipts This Page (optional)		225.00
TOTAL This Period (last page this line number of	only)	

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14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Kelly Ann Jalowiec Date of Receipt Mailing Address 1410 W Fillmore St 2012 08 31 City State Zip Code Transaction ID: SA11AI.12932 Chicago IL 60607 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Name of Employer Occupation Vice President, Operations Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kelly Ann Jalowiec Date of Receipt Mailing Address 1410 W Fillmore St 09 2012 14 City State Zip Code Transaction ID: SA11AI.13384 IL Chicago 60607 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Name of Employer Occupation Girling Home Health Vice President, Operations Receipt For: Aggregate Year-to-Date ▼ Primary General 1275.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kelly Ann Jalowiec Date of Receipt Mailing Address 1410 W Fillmore St 09 28 2012 City State Zip Code Transaction ID: SA11AI.13862 IL Chicago 60607 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Name of Employer Occupation Girling Home Health Vice President, Operations Receipt For: Aggregate Year-to-Date ▼ Primary General 1350.00 Other (specify) 225.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

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for each category of the Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Lakishia Lanette Jawdjee Date of Receipt Mailing Address 5735 Tiger Lilly Way 2012 07 City State Zip Code Transaction ID: SA11AI.11966 TX Houston 77085 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Regional Director Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 325.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lakishia Lanette Jawdjee Date of Receipt Mailing Address 5735 Tiger Lilly Way 07 31 2012 City State Zip Code Transaction ID: SA11AI.12291 TX Houston 77085 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation Girling Community Care Regional Director Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) C. Lakishia Lanette Jawdjee Date of Receipt Mailing Address 5735 Tiger Lilly Way 80 15 2012 City State Zip Code Transaction ID: SA11AI.12642 TX Houston 77085 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation Regional Director Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional).....

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450.00

75.00

Other (specify)

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

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	e name and address of any political committee to	
Full Name (Last, First, Middle Initial)  A. Brenda Kaden  Mailing Address 13601 County Road 7160  City Rolla  FEC ID number of contributing federal political committee.  Name of Employer  Girling Community Care  Receipt For:  Primary General Other (specify)	State Zip Code MO 65401  C  Occupation Regional Director  Aggregate Year-to-Date ▼	Date of Receipt  07 03 2012  Transaction ID : SA11AI.11716  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial)  Brenda Kaden  Mailing Address 13601 County Road 7160  City Rolla  FEC ID number of contributing federal political committee.  Name of Employer Girling Community Care  Receipt For:  Primary General Other (specify)	State Zip Code MO 65401  C  Occupation Regional Director  Aggregate Year-to-Date ▼  375.00	Date of Receipt  M M M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  Brenda Kaden  Mailing Address 13601 County Road 7160  City Rolla  FEC ID number of contributing federal political committee.  Name of Employer Girling Community Care  Receipt For:  Primary General Other (specify)	State Zip Code MO 65401  C  Occupation Regional Director  Aggregate Year-to-Date ▼	Date of Receipt  08  01  2012  Transaction ID: SA11AI.12359  Amount of Each Receipt this Period  25.00
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	75.00
TOTAL This Period (last page this line number	only)	

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Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address of any political committee to	
NAME OF COMMITTEE (In Full)	DAC	
Harden Healthcare LLC Federal		
Full Name (Last, First, Middle Initial)  A. Brenda Kaden		Date of Receipt
Mailing Address 13601 County Road 7160		08 15 <u>Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y</u>
City	State Zip Code	Transaction ID : SA11AI.12645
Rolla	MO 65401	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	
Girling Community Care	Regional Director	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	33 0	
Other (specify) ▼	425.00	
Full Name (Last, First, Middle Initial)  Brenda Kaden		Date of Receipt
Mailing Address 13601 County Road 7160		08 29 2012
City	State Zip Code	Transaction ID : SA11AI.12870
Rolla	MO 65401	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	
Girling Community Care	Regional Director	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial)  C. Brenda Kaden		Date of Receipt
Mailing Address 13601 County Road 7160		M M / D D / Y Y Y Y
City	State Zip Code	09 12 2012 Transaction ID : SA11AI.13308
Rolla	MO 65401	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	25.00
Name of Employer	Occupation	
Girling Community Care	Regional Director	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	475.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	75.00
TOTAL This Period (last page this line number of	only)	

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NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federa	IPAC	
Full Name (Last, First, Middle Initial)  Brenda Kaden  Mailing Address, 13604 County Bood 7460		Date of Receipt
Mailing Address 13601 County Road 7160		09 26 2012
City	State Zip Code	Transaction ID : SA11AI.13800
Rolla	MO 65401	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	
Girling Community Care	Regional Director	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)  Diane Kenyon		Date of Receipt
Mailing Address 285 E Summit Dr		07 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Wimberley	State Zip Code TX 78676	Transaction ID : SA11AI.11971
Wimberley		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer	Occupation	
Harden Healthcare Services	Senior Vice President, IT	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1625.00	
Full Name (Last, First, Middle Initial)  C. Diane Kenyon		Date of Receipt
Mailing Address 285 E Summit Dr		07 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Wimberley	State Zip Code TX 78676	Transaction ID : SA11AI.12296
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer	Occupation	
Harden Healthcare Services	Senior Vice President, IT	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify)	1750.00	
SUBTOTAL of Receipts This Page (optional)		275.00
TOTAL This Period (last page this line number	only)	

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ı	(check only one)									
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		13		14		15		16		17

	d Statements may not be sold or used by any persthe name and address of any political committee t	
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Fede	ral PAC	
Full Name (Last, First, Middle Initial)  A. Diane Kenyon  Mailing Address 285 E Summit Dr		Date of Receipt
City	State Zip Code	08 15 2012 Transaction ID : SA11AI.12646
Wimberley FEC ID number of contributing	TX 78676	Amount of Each Receipt this Period
federal political committee.  Name of Employer	Occupation	120.00
Harden Healthcare Services  Receipt For:  □ Primary □ General □ Other (specify) ▼	Senior Vice President, IT  Aggregate Year-to-Date ▼  1875.00	_
Full Name (Last, First, Middle Initial)  3. Diane Kenyon  Mailing Address 285 E Summit Dr		Date of Receipt
City Wimberley	State Zip Code TX 78676	08 31 2012  Transaction ID : SA11AI.12937  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	125.00
Name of Employer Harden Healthcare Services	Occupation Senior Vice President, IT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  2000.00	
Full Name (Last, First, Middle Initial)  C. Diane Kenyon		Date of Receipt
Mailing Address 285 E Summit Dr		09 14 2012
City Wimberley	State Zip Code TX 78676	Transaction ID : SA11AI.13388  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer  Harden Healthcare Services	Occupation Senior Vice President, IT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 2125.00	
SUBTOTAL of Receipts This Page (optional).	<b></b>	375.00
TOTAL This Period (last page this line number	er only)	

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for each category of the Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Diane Kenyon Date of Receipt Mailing Address 285 E Summit Dr 2012 09 28 City State Zip Code Transaction ID: SA11AI.13866 TX 78676 Wimberley Amount of Each Receipt this Period FEC ID number of contributing C 125.00 federal political committee. Name of Employer Occupation Senior Vice President, IT Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 2250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kimberly A Layton Date of Receipt Mailing Address 9513 Prescott Dr 07 13 2012 City State Zip Code Transaction ID: SA11AI.11975 TX Austin 78749 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Harden Healthcare President, Leadership Development Inst Receipt For: Aggregate Year-to-Date ▼ Primary General 1300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kimberly A Layton Date of Receipt Mailing Address 9513 Prescott Dr 07 31 2012 City Zip Code State Transaction ID: SA11AI.12300 TX Austin 78749 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation President, Leadership Development Inst Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 1400.00 Other (specify) 325.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	d Statements may not be sold or used by any pers the name and address of any political committee t	
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Fede	ral PAC	
Full Name (Last, First, Middle Initial)  Kimberly A Layton  Mailing Address 9513 Prescott Dr		Date of Receipt
		08 15 2012
City	State Zip Code	Transaction ID : SA11AI.12649
Austin	TX 78749	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	1
Harden Healthcare	President, Leadership Development Inst	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial)  Kimberly A Layton  Mailing Address 9513 Prescott Dr		Date of Receipt
City	State Zip Code	08 31 2012
Austin	TX 78749	Transaction ID : SA11AI.12941  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Harden Healthcare	Occupation President, Leadership Development Inst	-
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1600.00	
Full Name (Last, First, Middle Initial)  C. Kimberly A Layton	<del>'</del>	Date of Receipt
Mailing Address 9513 Prescott Dr		09 14 2012
City Austin	State Zip Code TX 78749	Transaction ID : SA11AI.13392  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	1
Harden Healthcare	President, Leadership Development Inst	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General  Other (specify) ▼	1700.00	
SUBTOTAL of Receipts This Page (optional)		300.00
TOTAL This Period (last page this line numb	er only)	

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	d Statements may not be sold or used by any per- the name and address of any political committee t	
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Fede	ral PAC	
Full Name (Last, First, Middle Initial)  Kimberly A Layton  Mailing Address 9513 Prescott Dr		Date of Receipt
City Austin	State Zip Code TX 78749	09 28 2012  Transaction ID : SA11AI.13870  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer	Occupation	100.00
Harden Healthcare  Receipt For:  Primary General  Other (specify) ▼	President, Leadership Development Inst  Aggregate Year-to-Date ▼  1800.00	
Full Name (Last, First, Middle Initial)  George Ledbetter  Mailing Address 1620 Elder Hill Rd		Date of Receipt  07 13 2012
City Driftwood	State Zip Code TX 78619	Transaction ID : SA11AI.11977  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer Girling Community Care Receipt For:	Occupation General Manager  Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	Aggregate Teal-to-Date • 650.00	
Full Name (Last, First, Middle Initial)  George Ledbetter  Mailing Address 1999 File All III B. I.		Date of Receipt
Mailing Address 1620 Elder Hill Rd  City Driftwood	State Zip Code TX 78619	07 31 2012 Transaction ID : SA11AI.12302
FEC ID number of contributing federal political committee.	C 70019	Amount of Each Receipt this Period  50.00
Name of Employer Girling Community Care	Occupation General Manager	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	
SUBTOTAL of Receipts This Page (optional).	•	200.00
TOTAL This Period (last page this line numb	er only)	

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14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) George Ledbetter Date of Receipt Mailing Address 1620 Elder Hill Rd 2012 08 15 City State Zip Code Transaction ID: SA11AI.12651 TX Driftwood 78619 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Girling Community Care General Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. George Ledbetter Date of Receipt Mailing Address 1620 Elder Hill Rd 80 31 2012 City State Zip Code Transaction ID: SA11AI.12943 TX Driftwood 78619 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Girling Community Care General Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** George Ledbetter Date of Receipt Mailing Address 1620 Elder Hill Rd 09 14 2012 City State Zip Code Transaction ID: SA11AI.13394 TX Driftwood 78619 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Girling Community Care General Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full)		
Harden Healthcare LLC Fede	erai PAC	
Full Name (Last, First, Middle Initial)  A. George Ledbetter		Date of Receipt
Mailing Address 1620 Elder Hill Rd		09 28 2012
City	State Zip Code	Transaction ID : SA11AI.13872
Driftwood	TX 78619	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	1
Girling Community Care	General Manager	]
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	0.0	
Other (specify) ▼	900.00	
Full Name (Last, First, Middle Initial)  Deanna Faye Lewis		Date of Receipt
Mailing Address 1645 BENBOW RD		M = M / D = D / Y = Y = Y
City	State 7in Codo	07 13 2012
City INF7	State Zip Code TX 77968	Transaction ID : SA11AI.11978
INEZ	TX 77968	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer	Occupation	7
Girling Home Health	Regional Vice President	]
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	0.0	
Other (specify) ▼	195.00	
Full Name (Last, First, Middle Initial)  Deanna Faye Lewis		Date of Receipt
Mailing Address 1645 BENBOW RD		07 31 2012
City	State Zip Code	07 31 2012 Transaction ID : SA11AI.12303
INEZ	TX 77968	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer	Occupation	1
Girling Home Health	Regional Vice President	]
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	210.00	
SUBTOTAL of Receipts This Page (optional)	)	80.00
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TOTAL This Period (last page this line numb	per only)	

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NAME OF COMMITTEE (In Full)						
Harden Healthcare LLC Feder	al PAC					
Full Name (Last, First, Middle Initial)  A. Deanna Faye Lewis		Date of Receipt				
Mailing Address 1645 BENBOW RD		08 15 2012				
City	State Zip Code	Transaction ID : SA11AI.12570				
INEZ	TX 77968	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	15.00				
Name of Employer	Occupation					
Girling Home Health	Regional Vice President					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General	225.00					
Other (specify) ▼	225.00					
Full Name (Last, First, Middle Initial)  Deanna Faye Lewis		Date of Receipt				
Mailing Address 1645 BENBOW RD		08 31 _ 2012 _				
City	State Zip Code	08 31 2012 Transaction ID : SA11AI.12944				
INEZ	·					
FEC ID number of contributing		Amount of Each Receipt this Period				
federal political committee.	C	15.00				
Name of Employer	Occupation					
Girling Home Health	Regional Vice President					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General	00 0					
Other (specify) ▼	240.00					
Full Name (Last, First, Middle Initial)  C. Deanna Faye Lewis		Date of Receipt				
Mailing Address 1645 BENBOW RD		M = M / D = D / Y = Y = Y				
City	State Zip Code	09 14 2012 Transaction ID : SA11AI.13395				
INEZ	TX 77968	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	15.00				
Name of Employer	Occupation					
Girling Home Health	Regional Vice President					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General	255.00					
Other (specify) ▼	255.00					
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	45.00				
TOTAL This Period (last page this line number	er only)					
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NAME OF COMMITTEE (In Full)	1010	
Harden Healthcare LLC Fede	eral PAC	
Full Name (Last, First, Middle Initial)  Deanna Faye Lewis		Date of Receipt
Mailing Address 1645 BENBOW RD		09 28 2012
City	State Zip Code	Transaction ID : SA11AI.13873
INEZ	TX 77968	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer	Occupation	1
Girling Home Health	Regional Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	270.00	
Full Name (Last, First, Middle Initial)  Debra Lietz		Date of Receipt
Mailing Address 210 W Windcrest St		07 06 2012
City	State Zip Code	07 06 2012 Transaction ID : SA11AI 11803
Frederickburg	TX 78624	Transaction ID : SA11AI.11803  Amount of Each Receipt this Period
FEC ID number of contributing		sant of Eduli Hoodipt this I Glidd
federal political committee.		10.00
Name of Employer	Occupation	
Windcrest Nursing & Rehab	Administrator	1
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	230.00	
Full Name (Last, First, Middle Initial)  Debra Lietz		Date of Receipt
Mailing Address 210 W Windcrest St		07 23 _ 2012 _
City	State Zip Code	Transaction ID : SA11AI.12150
Frederickburg	TX 78624	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer	Occupation	-
Windcrest Nursing & Rehab	Administrator	]
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	240.00	
SUBTOTAL of Receipts This Page (optional)	)	35.00
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for each category of the 12 Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Debra Lietz Date of Receipt Mailing Address 210 W Windcrest St 07 2012 08 City State Zip Code Transaction ID: SA11AI.12446 TX Frederickburg 78624 Amount of Each Receipt this Period FEC ID number of contributing C 10.00 federal political committee. Name of Employer Occupation Administrator Windcrest Nursing & Rehab Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Debra Lietz Date of Receipt Mailing Address 210 W Windcrest St 08 22 2012 City State Zip Code Transaction ID: SA11AI.12774 TX Frederickburg 78624 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Name of Employer Occupation Windcrest Nursing & Rehab Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) Full Name (Last, First, Middle Initial) c. Debra Lietz Date of Receipt Mailing Address 210 W Windcrest St 09 07 2012 City State Zip Code Transaction ID: SA11AI.13222 TX Frederickburg 78624 Amount of Each Receipt this Period FEC ID number of contributing 10.00 С federal political committee. Name of Employer Occupation Administrator Windcrest Nursing & Rehab Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) 30.00 SUBTOTAL of Receipts This Page (optional).....

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Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any personal part of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federa	II PAC	
Full Name (Last, First, Middle Initial)  A. Debra Lietz  Mailing Address 210 W Windcrest St		Date of Receipt
		09 21 2012
City	State Zip Code	Transaction ID : SA11AI.13665
Frederickburg	TX 78624	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	10.00
Name of Employer	Occupation	
Windcrest Nursing & Rehab	Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	280.00	
Full Name (Last, First, Middle Initial)  William Thomas Linder Jr.		Date of Receipt
Mailing Address 1703 W 5th St	Otate 7. O. d.	07 13 2012
City Austin	State Zip Code TX 78703	Transaction ID : SA11AI.11980
<u>. 177</u>	10103	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	
Girling Home Health	Vice President, Home Health Sales	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	150.00	
Full Name (Last, First, Middle Initial)  C. William Thomas Linder Jr.		Date of Receipt
Mailing Address 1703 W 5th St		07 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Austin	State Zip Code TX 78703	Transaction ID : SA11AI.12304  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	
Girling Home Health	Vice President, Home Health Sales	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	200.00	
SUBTOTAL of Receipts This Page (optional)		110.00
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14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) William Thomas Linder Jr. Date of Receipt Mailing Address 1703 W 5th St 2012 08 15 City Zip Code State Transaction ID: SA11AI.12571 TX 78703 Austin Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Vice President, Home Health Sales Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. William Thomas Linder Jr. Date of Receipt Mailing Address 1703 W 5th St 80 31 2012 City State Zip Code Transaction ID: SA11AI.12945 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Girling Home Health Vice President, Home Health Sales Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. William Thomas Linder Jr. Date of Receipt Mailing Address 1703 W 5th St 09 14 2012 City Zip Code State Transaction ID: SA11AI.13396 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Girling Home Health Vice President, Home Health Sales Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) William Thomas Linder Jr. Date of Receipt Mailing Address 1703 W 5th St 2012 09 28 City Zip Code State Transaction ID: SA11AI.13874 TX 78703 Austin Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Vice President, Home Health Sales Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Maria A MacKeil Date of Receipt Mailing Address 8820 Colberg Dr 07 13 2012 City State Zip Code Transaction ID: SA11AI.11983 TX Austin 78749 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Harden Healthcare **Director of Internal Audit** Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) Full Name (Last, First, Middle Initial) c. Maria A MacKeil Date of Receipt Mailing Address 8820 Colberg Dr 07 31 2012 City Zip Code State Transaction ID: SA11AI.12307 TX Austin 78749 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Director of Internal Audit Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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Any information copied from such Reports an or for commercial purposes, other than using	d Statements may not be sold or used by any per- the name and address of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Fede	eral PAC	
Full Name (Last, First, Middle Initial)  A. Maria A MacKeil		Date of Receipt
Mailing Address 8820 Colberg Dr		08 15 2012
City	State Zip Code	Transaction ID : SA11AI.12652
Austin	TX 78749	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	1
Harden Healthcare	Director of Internal Audit	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General  Other (specify) ▼	750.00	
Full Name (Last, First, Middle Initial)  Maria A MacKeil	•	Date of Receipt
Mailing Address 8820 Colberg Dr		08 31 2012
City	State Zip Code	Transaction ID : SA11AI.12948
Austin	TX 78749	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	1
Harden Healthcare	Director of Internal Audit	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	800.00	
Full Name (Last, First, Middle Initial)  C. Maria A MacKeil	<u>'</u>	Date of Receipt
Mailing Address 8820 Colberg Dr		09 14 2012
City	State Zip Code	Transaction ID : SA11AI.13399
Austin	TX 78749	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	1
Harden Healthcare	Director of Internal Audit	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	850.00	
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14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Maria A MacKeil Date of Receipt Mailing Address 8820 Colberg Dr 2012 28 City State Zip Code Transaction ID: SA11AI.13877 TX 78749 Austin Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Director of Internal Audit Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Polly A Matlock Date of Receipt Mailing Address 7225 Eastex Fwy 07 13 2012 City State Zip Code Transaction ID: SA11AI.11987 TX **Beaumont** 77708 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation Girling Home Health Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 90.00 Other (specify) Full Name (Last, First, Middle Initial) c. Polly A Matlock Date of Receipt Mailing Address 7225 Eastex Fwy 07 31 2012 City Zip Code State Transaction ID: SA11AI.12310 TX Beaumont 77708 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation Administrator Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 120.00 Other (specify) 110.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full) Harden Healthcare LLC Fede	ral PAC	
Full Name (Last, First, Middle Initial)  Polly A Matlock  Mailing Address 7225 Eastex Fwy		Date of Receipt
		08 15 2012
City	State Zip Code	Transaction ID : SA11AI.12575
Beaumont	TX 77708	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	
Girling Home Health	Administrator	
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial)  3. Polly A Matlock		Date of Receipt
Mailing Address 7225 Eastex Fwy		08 31 / Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.12953
Beaumont	TX 77708	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	30.00
Name of Employer Girling Home Health	Occupation Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	180.00	
Full Name (Last, First, Middle Initial)  C. Polly A Matlock	-	Date of Receipt
Mailing Address 7225 Eastex Fwy		09 14 2012
City Beaumont	State Zip Code TX 77708	Transaction ID : SA11AI.13403  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	
Girling Home Health	Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	210.00	
SUBTOTAL of Receipts This Page (optional).	<b>&gt;</b>	90.00
TOTAL This Period (last page this line numb	er only)	

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		13		14		15		16		717

	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Feder	al PAC	
Full Name (Last, First, Middle Initial)  Polly A Matlock  Mailing Address 7225 Eastex Fwy		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Beaumont	State Zip Code TX 77708	Transaction ID : SA11AI.13881  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer  Girling Home Health  Receipt For:  Primary General  Other (specify) ▼	Occupation Administrator  Aggregate Year-to-Date ▼  240.00	
Full Name (Last, First, Middle Initial)  Cathy McKinney  Mailing Address 811 Rowe St		Date of Receipt  07 06 2012
City Rockport	State Zip Code TX 78382	Transaction ID : SA11AI.12696  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5.00
Name of Employer TRISUN Healthcare	Occupation Administrator	previously reported as McKinny
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 65.00	[MEMO ITEM]
Full Name (Last, First, Middle Initial)  Deborah Morgan		Date of Receipt
Mailing Address 5404 Agatha Cir		07 13 2012
City Austin	State Zip Code TX 78724	Transaction ID : SA11AI.11993  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	12.50
Name of Employer	Occupation	_
Harden Healthcare Services  Receipt For:  □ Primary □ General  □ Other (specify) ▼	PMO Director  Aggregate Year-to-Date ▼  162.50	
SUBTOTAL of Receipts This Page (optional)		42.50
TOTAL This Period (last page this line numbe	r only)	

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14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Deborah Morgan Date of Receipt Mailing Address 5404 Agatha Cir 2012 07 31 City State Zip Code Transaction ID: SA11AI.12316 TX Austin 78724 Amount of Each Receipt this Period FEC ID number of contributing C 12.50 federal political committee. Name of Employer Occupation PMO Director Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 175.00 Other (specify) Full Name (Last, First, Middle Initial) B. Deborah Morgan Date of Receipt Mailing Address 5404 Agatha Cir 08 15 2012 City State Zip Code Transaction ID: SA11AI.12656 TX Austin 78724 Amount of Each Receipt this Period FEC ID number of contributing 12.50 federal political committee. Name of Employer Occupation Harden Healthcare Services **PMO Director** Receipt For: Aggregate Year-to-Date ▼ Primary General 187.50 Other (specify) Full Name (Last, First, Middle Initial) c. Deborah Morgan Date of Receipt Mailing Address 5404 Agatha Cir 80 31 2012 City State Zip Code Transaction ID: SA11AI.12960 TX Austin 78724 Amount of Each Receipt this Period FEC ID number of contributing 12.50 С federal political committee. Name of Employer Occupation **PMO Director** Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 200.00 Other (specify) 37.50 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Deborah Morgan Date of Receipt Mailing Address 5404 Agatha Cir 2012 City State Zip Code Transaction ID: SA11AI.13409 TX Austin 78724 Amount of Each Receipt this Period FEC ID number of contributing C 12.50 federal political committee. Name of Employer Occupation PMO Director Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 212.50 Other (specify) Full Name (Last, First, Middle Initial) B. Deborah Morgan Date of Receipt Mailing Address 5404 Agatha Cir 09 28 2012 City State Zip Code Transaction ID: SA11AI.13888 TX Austin 78724 Amount of Each Receipt this Period FEC ID number of contributing 12.50 federal political committee. Name of Employer Occupation Harden Healthcare Services **PMO Director** Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) Full Name (Last, First, Middle Initial) c. Victoria Palm Date of Receipt Mailing Address 3507 Abrazo 06 07 2012 City Zip Code State Transaction ID: SA11AI.11835 TX San Antonio 78247 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation TRISUN Healthcare Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 50.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Victoria Palm Date of Receipt Mailing Address 3507 Abrazo 2012 07 23 City Zip Code State Transaction ID: SA11AI.12172 TX 78247 San Antonio Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 325.00 Other (specify) Full Name (Last, First, Middle Initial) B. Victoria Palm Date of Receipt Mailing Address 3507 Abrazo 08 07 2012 City State Zip Code Transaction ID: SA11AI.12477 TX San Antonio 78247 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) c. Victoria Palm Date of Receipt Mailing Address 3507 Abrazo 80 22 2012 City Zip Code State Transaction ID: SA11AI.12804 TX San Antonio 78247 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation TRISUN Healthcare Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

## SCHEDULE A (FEC Form 3X)

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TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X   11a
Any information copied from such Reports and State or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal	PAC	
Full Name (Last, First, Middle Initial)  Victoria Palm  Mailing Address 3507 Abrazo  City San Antonio  FEC ID number of contributing federal political committee.  Name of Employer  TRISUN Healthcare  Receipt For:  Primary General Other (specify)	State Zip Code TX 78247  C  Occupation Regional Vice President  Aggregate Year-to-Date ▼  400.00	Date of Receipt  09 07 2012  Transaction ID: SA11AI.13250  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial)  Victoria Palm  Mailing Address 3507 Abrazo  City San Antonio  FEC ID number of contributing federal political committee.  Name of Employer TRISUN Healthcare  Receipt For:  Primary General Other (specify)	State Zip Code TX 78247  C  Occupation Regional Vice President  Aggregate Year-to-Date ▼  425.00	Date of Receipt  9 21 2012  Transaction ID : SA11AI.13692  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial)  William B Parrish  Mailing Address 3200 Wild Canyon Loop  City Austin  FEC ID number of contributing federal political committee.  Name of Employer  Girling Home Health  Receipt For:  Primary General Other (specify)	State Zip Code TX 78732  C  Occupation Vice President, Finance  Aggregate Year-to-Date ▼  650.00	Date of Receipt  07 13 2012  Transaction ID : SA11AI.11999  Amount of Each Receipt this Period  50.00
SUBTOTAL of Receipts This Page (optional)		100.00
TOTAL This Period (last page this line number of	nlv)	

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for each category of the Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) William B Parrish Date of Receipt Mailing Address 3200 Wild Canyon Loop 2012 07 31 City State Zip Code Transaction ID: SA11AI.12323 TX Austin 78732 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Vice President, Finance Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) B. William B Parrish Date of Receipt Mailing Address 3200 Wild Canyon Loop 80 15 2012 City State Zip Code Transaction ID: SA11AI.12583 TX Austin 78732 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Girling Home Health Vice President, Finance Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) c. William B Parrish Date of Receipt Mailing Address 3200 Wild Canyon Loop 80 31 2012 City State Zip Code Transaction ID: SA11AI.12969 TX Austin 78732 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Vice President, Finance Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

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Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) William B Parrish Date of Receipt Mailing Address 3200 Wild Canyon Loop 2012 09 City State Zip Code Transaction ID: SA11AI.13417 TX Austin 78732 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Vice President, Finance Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) Full Name (Last, First, Middle Initial) B. William B Parrish Date of Receipt Mailing Address 3200 Wild Canyon Loop 09 28 2012 City State Zip Code Transaction ID: SA11AI.13896 TX Austin 78732 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Girling Home Health Vice President, Finance Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mark Pinckard Date of Receipt Mailing Address 2913 Richfield Landing 07 13 2012 City State Zip Code Transaction ID: SA11AI.12001 TX Pflugerville 78660 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation Girling Community Care Financial Analyst Receipt For: Aggregate Year-to-Date ▼ Primary General 325.00 Other (specify) 125.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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for each category of the Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Mark Pinckard Date of Receipt Mailing Address 2913 Richfield Landing 2012 07 31 City State Zip Code Transaction ID: SA11AI.12325 TX Pflugerville 78660 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Girling Community Care Financial Analyst Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mark Pinckard Date of Receipt Mailing Address 2913 Richfield Landing 80 15 2012 City State Zip Code Transaction ID: SA11AI.12660 Pflugerville TX 78660 Amount of Each Receipt this Period FEC ID number of contributing 1.00 federal political committee. Name of Employer Occupation Girling Community Care Financial Analyst Receipt For: Aggregate Year-to-Date ▼ Primary General 351.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mark Pinckard Date of Receipt Mailing Address 2913 Richfield Landing 80 31 2012 City State Zip Code Transaction ID: SA11AI.12971 TX Pflugerville 78660 Amount of Each Receipt this Period FEC ID number of contributing 1.00 С federal political committee. Name of Employer Occupation Girling Community Care Financial Analyst Receipt For: Aggregate Year-to-Date ▼ Primary General 352.00 Other (specify) 27.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

## SCHEDULE A (FEC Form 3X)

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TEMIZED RECEIPTS	for each category of the  Detailed Summary Page	(check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any per ename and address of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federa	al PAC	
Full Name (Last, First, Middle Initial)  Mark Pinckard  Mailing Address 2913 Richfield Landing  City Pflugerville  FEC ID number of contributing federal political committee.  Name of Employer  Girling Community Care  Receipt For:  Primary General Other (specify)	State Zip Code TX 78660  C  Occupation Financial Analyst  Aggregate Year-to-Date ▼  353.00	Date of Receipt  99 14 2012  Transaction ID: SA11AI.13419  Amount of Each Receipt this Period  1.00
Full Name (Last, First, Middle Initial)  Mark Pinckard  Mailing Address 2913 Richfield Landing  City  Pflugerville  FEC ID number of contributing federal political committee.  Name of Employer  Girling Community Care  Receipt For:  Primary  General  Other (specify)	State Zip Code TX 78660  C  Occupation Financial Analyst  Aggregate Year-to-Date ▼	Date of Receipt  09 28 2012  Transaction ID : SA11AI.13898  Amount of Each Receipt this Period  1.00
Full Name (Last, First, Middle Initial)  Robin A Polk  Mailing Address 201 County Road 326a  City Rosebud  FEC ID number of contributing federal political committee.  Name of Employer  Girling Community Care  Receipt For:  Primary General Other (specify)	State Zip Code TX 76570  C  Occupation Regional Manager, Compliance  Aggregate Year-to-Date ▼  325.00	Date of Receipt  07 13 2012  Transaction ID: SA11AI.12002  Amount of Each Receipt this Period  25.00
SUBTOTAL of Receipts This Page (optional)		27.00
TOTAL This Period (last page this line number	only)	

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Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Robin A Polk Date of Receipt Mailing Address 201 County Road 326a 2012 07 31 City State Zip Code Transaction ID: SA11AI.12326 TX Rosebud 76570 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Regional Manager, Compliance Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Robin A Polk Date of Receipt Mailing Address 201 County Road 326a 80 15 2012 City State Zip Code Transaction ID: SA11AI.12661 Rosebud TX 76570 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation Girling Community Care Regional Manager, Compliance Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name (Last, First, Middle Initial) c. Robin A Polk Date of Receipt Mailing Address 201 County Road 326a 80 31 2012 City State Zip Code Transaction ID: SA11AI.12972 TX Rosebud 76570 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation Girling Community Care Regional Manager, Compliance Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federa		
/		
Full Name (Last, First, Middle Initial)  A. Robin A Polk		Date of Receipt
Mailing Address 201 County Road 326a		09 14 _ 2012 _
City	State Zip Code	Transaction ID : SA11Al.13420
Rosebud	TX 76570	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	
Girling Community Care	Regional Manager, Compliance	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	425.00	
Full Name (Last, First, Middle Initial)  Robin A Polk		Date of Receipt
Mailing Address 201 County Road 326a		09 28 2012
City	State Zip Code	09 28 2012 Transaction ID : SA11AI.13899
Rosebud	TX 76570	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	25.00
Name of Employer	Occupation	
Girling Community Care	Regional Manager, Compliance	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial)  C. Shanni F Ponce		Date of Receipt
Mailing Address 2818 Fountain Grove Cv		07 06 _2012 _
City	State Zip Code	Transaction ID : SA11AI.11845
Round Rock	TX 78665	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	40.00
Name of Employer	Occupation	
MBS Rehab	Senior Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	520.00	
SUBTOTAL of Receipts This Page (optional)		90.00
TOTAL This Period (last page this line number	only)	

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	d Statements may not be sold or used by any pers the name and address of any political committee to					
NAME OF COMMITTEE (In Full)						
Harden Healthcare LLC Fede	ral PAC					
Full Name (Last, First, Middle Initial)  A. Shanni F Ponce		Date of Receipt				
Mailing Address 2818 Fountain Grove Cv		07 20 2012				
City	State Zip Code	Transaction ID : SA11AI.12074				
Round Rock	TX 78665	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	40.00				
Name of Employer	Occupation					
MBS Rehab	Senior Vice President					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General	F00.00					
Other (specify) ▼	560.00					
Full Name (Last, First, Middle Initial)  3. Shanni F Ponce		Date of Receipt				
Mailing Address 2818 Fountain Grove Cv		08 07 2012				
City	State Zip Code	Transaction ID : SA11AI.12487				
Round Rock	TX 78665	Amount of Each Receipt this Period				
FEC ID number of contributing						
federal political committee.	C	40.00				
Name of Employer	Occupation	1				
MBS Rehab	Senior Vice President					
Receipt For:	Aggregate Year-to-Date ▼	1				
Primary General						
Other (specify) ▼	600.00					
Full Name (Last, First, Middle Initial)  C. Shanni F Ponce	•	Date of Receipt				
Mailing Address 2818 Fountain Grove Cv		M = M / D = D / Y = Y = Y				
City	State Zip Code	08 22 2012 Transaction ID : \$A11A112690				
Round Rock	TX 78665	Transaction ID : SA11AI.12690  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	40.00				
Name of Employer	Name of Employer Occupation					
MBS Rehab						
Receipt For:	Aggregate Year-to-Date ▼					
Primary General						
Other (specify) ▼	640.00					
SUBTOTAL of Receipts This Page (optional).	<b>•</b>	120.00				
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for each category of the Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Shanni F Ponce Date of Receipt Mailing Address 2818 Fountain Grove Cv 07 2012 City State Zip Code Transaction ID: SA11AI.13260 TX Round Rock 78665 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation MBS Rehab Senior Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 680.00 Other (specify) Full Name (Last, First, Middle Initial) B. Shanni F Ponce Date of Receipt Mailing Address 2818 Fountain Grove Cv 09 21 2012 City State Zip Code Transaction ID: SA11AI.13702 Round Rock TX 78665 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation MBS Rehab Senior Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 720.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Beth Ratliff Date of Receipt Mailing Address 2505 S 37th St 06 07 2012 City Zip Code State Transaction ID: SA11AI.11850 TX Temple 76504 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation TRISUN Healthcare Director of Nursing Receipt For: Aggregate Year-to-Date ▼ Primary General 200.00 Other (specify) 105.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full)	DAC	
Harden Healthcare LLC Federal	PAC	
Full Name (Last, First, Middle Initial)  A. Beth Ratliff		Date of Receipt
Mailing Address 2505 S 37th St		07 23 2012
City	State Zip Code	Transaction ID : SA11AI.12180
Temple	TX 76504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	
TRISUN Healthcare	Director of Nursing	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	30 0	
Other (specify) ▼	225.00	
Full Name (Last, First, Middle Initial)  Beth Ratliff		Date of Receipt
Mailing Address 2505 S 37th St		08 07 _2012 _
City	State Zip Code	08 07 2012 Transaction ID : SA11AI.12492
Temple	TX 76504	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	C	25.00
Name of Employer	Occupation	
TRISUN Healthcare	Director of Nursing	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	050.00	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial)  C. Jeanette Reinert		Date of Receipt
Mailing Address 3110 Cimmaron Rd		07 13 _2012 _
City	State Zip Code	Transaction ID : SA11AI.12006
Weatherford	TX 76087	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	
TRISUN Healthcare	Regional Manager	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	325.00	
SUBTOTAL of Receipts This Page (optional)		75.00
TOTAL This Period (last page this line number of	only)	

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NAME OF COMMITTEE (In Full)		
Harden Healthcare LLC Fed	leral PAC	
Full Name (Last, First, Middle Initial)  Jeanette Reinert		Date of Receipt
Mailing Address 3110 Cimmaron Rd		07 31 2012
City	State Zip Code	Transaction ID : SA11AI.12329
Weatherford	TX 76087	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	†
TRISUN Healthcare	Regional Manager	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	350.00	<u></u>
Full Name (Last, First, Middle Initial)  Jeanette Reinert		Date of Receipt
Mailing Address 3110 Cimmaron Rd		08 15 _ 2012 _
City	State Zip Code	08 15 2012 Transaction ID : SA11AI.12662
Weatherford	TX 76087	Amount of Each Receipt this Period
FEC ID number of contributing		sart of Edon Hoodipt tills I Glod
federal political committee.	C	25.00
Name of Employer	Occupation	1
TRISUN Healthcare	Regional Manager	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	375.00	
Full Name (Last, First, Middle Initial)  2. Jeanette Reinert		Date of Receipt
Mailing Address 3110 Cimmaron Rd		M = M / D = D / Y = Y = Y
City	State Zip Code	08 31 2012 Transaction ID : SA11AI 12975
Weatherford	TX 76087	Transaction ID : SA11AI.12975  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	1
TRISUN Healthcare	Regional Manager	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	400.00	
Other (specify) ▼	400.00	
SUBTOTAL of Receipts This Page (optional	al)	75.00
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NAME OF COMMITTEE (In Full)  Harden Healthcare LLC Fede	the name and address of any political committee	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Jeanette Reinert  Mailing Address 3110 Cimmaron Rd  City  Weatherford  FEC ID number of contributing federal political committee.	State Zip Code TX 76087	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer  TRISUN Healthcare  Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation Regional Manager  Aggregate Year-to-Date ▼  425.00	
Full Name (Last, First, Middle Initial)  Jeanette Reinert  Mailing Address 3110 Cimmaron Rd  City  Weatherford  FEC ID number of contributing federal political committee.  Name of Employer  TRISUN Healthcare  Receipt For:  Primary  General  Other (specify)	State Zip Code TX 76087  C  Occupation Regional Manager  Aggregate Year-to-Date ▼	Date of Receipt  M M O9 28 2012  Transaction ID: SA11AI.13902  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial)  Lisa Roundtree  Mailing Address 408 Beauty Ln  City Whitesboro  FEC ID number of contributing federal political committee.  Name of Employer  MBS Rehab  Receipt For:  Primary  General  Other (specify)	State Zip Code TX 76273  C  Occupation Occupational Therapist  Aggregate Year-to-Date ▼  325.00	Date of Receipt  07 06 2012  Transaction ID: SA11AI.11860  Amount of Each Receipt this Period  25.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	75.00

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for each category of the Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Lisa Roundtree Date of Receipt Mailing Address 408 Beauty Ln 20 2012 07 City Zip Code State Transaction ID: SA11AI.12079 TX 76273 Whitesboro Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation MBS Rehab Occupational Therapist Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lisa Roundtree Date of Receipt Mailing Address 408 Beauty Ln 08 07 2012 City State Zip Code Transaction ID: SA11AI.12501 Whitesboro TX 76273 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation MBS Rehab Occupational Therapist Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name (Last, First, Middle Initial) c. Lisa Roundtree Date of Receipt Mailing Address 408 Beauty Ln 80 22 2012 City Zip Code State Transaction ID: SA11AI.12692 TX Whitesboro 76273 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation MBS Rehab Occupational Therapist Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Lisa Roundtree Date of Receipt Mailing Address 408 Beauty Ln 07 2012 City State Zip Code Transaction ID: SA11AI.13273 TX 76273 Whitesboro Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation MBS Rehab Occupational Therapist Receipt For: Aggregate Year-to-Date ▼ Primary General 425.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lisa Roundtree Date of Receipt Mailing Address 408 Beauty Ln 09 21 2012 City State Zip Code Transaction ID: SA11AI.13714 Whitesboro TX 76273 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation MBS Rehab Occupational Therapist Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name (Last, First, Middle Initial) c. Chris Roussos Date of Receipt Mailing Address 1611 W 5th St 07 13 2012 City Zip Code State Transaction ID: SA11AI.12009 TX Austin 78713 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation Chief Financial Officer Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) 70.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Chris Roussos Date of Receipt Mailing Address 1611 W 5th St 2012 07 31 City State Zip Code Transaction ID: SA11AI.12332 TX 78713 Austin Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer Occupation Chief Financial Officer Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 280.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Chris Roussos Date of Receipt Mailing Address 1611 W 5th St 08 15 2012 City State Zip Code Transaction ID: SA11AI.12663 TX Austin 78713 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Harden Healthcare Chief Financial Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Chris Roussos Date of Receipt Mailing Address 1611 W 5th St 80 31 2012 City Zip Code State Transaction ID: SA11AI.12978 TX Austin 78713 Amount of Each Receipt this Period FEC ID number of contributing 20.00 С federal political committee. Name of Employer Occupation Chief Financial Officer Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 320.00 Other (specify) 60.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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for each category of the Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Chris Roussos Date of Receipt Mailing Address 1611 W 5th St 2012 City State Zip Code Transaction ID: SA11AI.13426 TX 78713 Austin Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer Occupation Chief Financial Officer Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 340.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Chris Roussos Date of Receipt Mailing Address 1611 W 5th St 09 28 2012 City State Zip Code Transaction ID: SA11AI.13904 TX Austin 78713 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation Harden Healthcare Chief Financial Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 360.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kelly Rowe Date of Receipt Mailing Address 1284 County Road 282 07 13 2012 City State Zip Code Transaction ID: SA11AI.12010 TX Bertram 78605 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation Harden Healthcare Services Sr. Network Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 325.00 Other (specify) 65.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Kelly Rowe Date of Receipt Mailing Address 1284 County Road 282 2012 31 City State Zip Code Transaction ID: SA11AI.12333 TX Bertram 78605 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Sr. Network Administrator Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kelly Rowe Date of Receipt Mailing Address 1284 County Road 282 08 15 2012 City State Zip Code Transaction ID: SA11AI.12664 TX Bertram 78605 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation Harden Healthcare Services Sr. Network Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kelly Rowe Date of Receipt Mailing Address 1284 County Road 282 80 31 2012 City Zip Code State Transaction ID: SA11AI.12979 TX Bertram 78605 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation Harden Healthcare Services Sr. Network Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Kelly Rowe Date of Receipt Mailing Address 1284 County Road 282 2012 City State Zip Code Transaction ID: SA11AI.13427 TX Bertram 78605 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Sr. Network Administrator Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 425.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kelly Rowe Date of Receipt Mailing Address 1284 County Road 282 09 28 2012 City State Zip Code Transaction ID: SA11AI.13905 TX Bertram 78605 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation Harden Healthcare Services Sr. Network Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kathleen M Schellhaas Date of Receipt Mailing Address 2535 Grassy Spring Pl 07 13 2012 City Zip Code State Transaction ID: SA11AI.12012 NV Las Vegas 89135 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation Harden Healthcare **Business Development** Receipt For: Aggregate Year-to-Date ▼ Primary General 325.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Detailed Summary Page	×	11a		11b		11c		12		
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or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	ng the name and address of any political committee	
Harden Healthcare LLC Fed	derai PAC	
Full Name (Last, First, Middle Initial)  Kathleen M Schellhaas		Date of Receipt
Mailing Address 2535 Grassy Spring Pl		07 31 2012
City	State Zip Code	Transaction ID : SA11AI.12335
Las Vegas	NV 89135	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	
Harden Healthcare	Business Development	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial)  Kathleen M Schellhaas	'	Date of Receipt
Mailing Address 2535 Grassy Spring Pl		M = M / D = D / Y = Y = Y
City	State Zip Code	08 15 2012
Las Vegas	NV 89135	Transaction ID : SA11AI.12665
	00.00	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	
Harden Healthcare	Business Development	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Other (specify) ▼	375.00	
Full Name (Last, First, Middle Initial)  Kathleen M Schellhaas		Date of Receipt
Mailing Address 2535 Grassy Spring PI		08 31 _ 2012 _
City	State Zip Code	Transaction ID : SA11AI.12981
Las Vegas	NV 89135	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	_
Harden Healthcare	Business Development	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	400.00	
SUBTOTAL of Receipts This Page (ontion	nal)	75.00
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TOTAL This Period (last page this line nu	mber only)	

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for each category of the Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Kathleen M Schellhaas Date of Receipt Mailing Address 2535 Grassy Spring Pl 2012 09 City Zip Code State Transaction ID: SA11AI.13429 NV Las Vegas 89135 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Harden Healthcare **Business Development** Receipt For: Aggregate Year-to-Date ▼ Primary General 425.00 Other (specify) Full Name (Last, First, Middle Initial) B. Rebecca Shropshire Date of Receipt Mailing Address 722 Craig St 07 06 2012 City State Zip Code Transaction ID: SA11AI.11866 TX Hillboro 76645 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 520.00 Other (specify) Full Name (Last, First, Middle Initial) c. Rebecca Shropshire Date of Receipt Mailing Address 722 Craig St 07 23 2012 City Zip Code State Transaction ID: SA11AI.12194 TX Hillboro 76645 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation Administrator TRISUN Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 560.00 Other (specify) 105.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Rebecca Shropshire Date of Receipt Mailing Address 722 Craig St 80 07 2012 City Zip Code State Transaction ID: SA11AI.12506 TX 76645 Hillboro Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Rebecca Shropshire Date of Receipt Mailing Address 722 Craig St 08 22 2012 City State Zip Code Transaction ID: SA11AI.12829 TX Hillboro 76645 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 640.00 Other (specify) Full Name (Last, First, Middle Initial) c. Rebecca Shropshire Date of Receipt Mailing Address 722 Craig St 09 07 2012 City Zip Code State Transaction ID: SA11AI.13278 TX Hillboro 76645 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation Administrator TRISUN Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 680.00 Other (specify) 120.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

## SCHEDULE A (FEC Form 3X)

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TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X   11a
Any information copied from such Reports and Statements or for commercial purposes, other than using the name ar		
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal PAC		
Primary General Other (specify) ▼	76645 ation	Date of Receipt  99 21 2012  Transaction ID: SA11AI.13719  Amount of Each Receipt this Period  40.00
Full Name (Last, First, Middle Initial)  Toni M Silguero  Mailing Address 3804 Middle Earth Trl  City State Austin TX  FEC ID number of contributing federal political committee.  Name of Employer Harden Healthcare Services  Receipt For: Primary General Other (specify)   Aggregation	78739 ation	Date of Receipt    M
Full Name (Last, First, Middle Initial)  Toni M Silguero  Mailing Address 3804 Middle Earth Trl  City State Austin TX  FEC ID number of contributing federal political committee.  Name of Employer Harden Healthcare Services  Receipt For:  Primary General Other (specify) ▼  Aggreg	78739 ation	Date of Receipt  07 31 2012  Transaction ID : SA11AI.12339  Amount of Each Receipt this Period  25.00
SUBTOTAL of Receipts This Page (optional)	·····	90.00

## SCHEDULE A (FEC Form 3X)

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Any information copied from such Reports and St or for commercial purposes, other than using the		rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federal	PAC	
Full Name (Last, First, Middle Initial)  Toni M Silguero  Mailing Address 3804 Middle Earth Trl  City Austin  FEC ID number of contributing federal political committee.  Name of Employer Harden Healthcare Services Receipt For:  Primary General Other (specify)	State Zip Code TX 78739  C  Occupation Controller  Aggregate Year-to-Date ▼  375.00	Date of Receipt  M M M / D J 2012  Transaction ID : SA11AI.12669  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial)  Toni M Silguero  Mailing Address 3804 Middle Earth Trl  City  Austin  FEC ID number of contributing federal political committee.  Name of Employer Harden Healthcare Services  Receipt For:  Primary  General  Other (specify)	State Zip Code TX 78739  C  Occupation Controller  Aggregate Year-to-Date ▼  400.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  Toni M Silguero  Mailing Address 3804 Middle Earth Trl  City Austin  FEC ID number of contributing federal political committee.  Name of Employer Harden Healthcare Services  Receipt For:  Primary General Other (specify)	State Zip Code TX 78739  C  Occupation Controller  Aggregate Year-to-Date ▼  425.00	Date of Receipt  M M M / D D / Y D Y D Y D Y D Y D Y D Y D Y D
SUBTOTAL of Receipts This Page (optional)		75.00
TOTAL This Period (last page this line number of	only)	

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Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Toni M Silguero Date of Receipt Mailing Address 3804 Middle Earth Trl 2012 28 City State Zip Code Transaction ID: SA11AI.13911 TX Austin 78739 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Controller Harden Healthcare Services Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name (Last, First, Middle Initial) B. Juli Simmang Date of Receipt Mailing Address 991 Oak Rdg 07 06 2012 City State Zip Code Transaction ID: SA11AI.11867 TX Shertz 78154 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation MBS Rehab **Director of Clinical Services** Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) Full Name (Last, First, Middle Initial) c. Juli Simmang Date of Receipt Mailing Address 991 Oak Rdg 20 07 2012 City Zip Code State Transaction ID: SA11AI.12080 TX Shertz 78154 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation **Director of Clinical Services** MBS Rehab Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) 125.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Juli Simmang Date of Receipt Mailing Address 991 Oak Rdg 80 07 2012 City Zip Code State Transaction ID: SA11AI.12507 TX Shertz 78154 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation MBS Rehab **Director of Clinical Services** Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Juli Simmang Date of Receipt Mailing Address 991 Oak Rdg 08 22 2012 City State Zip Code Transaction ID: SA11AI.12693 TX Shertz 78154 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation MBS Rehab **Director of Clinical Services** Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name (Last, First, Middle Initial) c. Juli Simmang Date of Receipt Mailing Address 991 Oak Rdg 09 07 2012 City Zip Code State Transaction ID: SA11AI.13279 TX Shertz 78154 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation **Director of Clinical Services** MBS Rehab Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Juli Simmang Date of Receipt Mailing Address 991 Oak Rdg 2012 21 City State Zip Code Transaction ID: SA11AI.13720 TX Shertz 78154 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation MBS Rehab **Director of Clinical Services** Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) Full Name (Last, First, Middle Initial) B. Robert E Steel Date of Receipt Mailing Address 5315 Magdelena Dr 07 13 2012 City State Zip Code Transaction ID: SA11AI.12018 TX Austin 78735 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation Harden Healthcare Finance Receipt For: Aggregate Year-to-Date ▼ Primary General 325.00 Other (specify) Full Name (Last, First, Middle Initial) c. Robert E Steel Date of Receipt Mailing Address 5315 Magdelena Dr 07 31 2012 City State Zip Code Transaction ID: SA11AI.12340 TX Austin 78735 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation Harden Healthcare Finance Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 100.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	ng the name and address of any political committee	
> Harden Healthcare LLC Fed	deral PAC	
Full Name (Last, First, Middle Initial) Robert E Steel		Date of Receipt
Mailing Address 5315 Magdelena Dr		08 15 2012
City	State Zip Code	Transaction ID : SA11AI.12670
Austin	TX 78735	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	
Harden Healthcare	Finance	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	. iggregate roat to bate v	
Other (specify) ▼	375.00	
Full Name (Last, First, Middle Initial)  Robert E Steel	,	Date of Receipt
Mailing Address 5315 Magdelena Dr		08 31 2012
City	State Zip Code	Transaction ID : SA11AI.12987
Austin	TX 78735	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	25.00
Name of Employer	Occupation	_
Harden Healthcare	Finance	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial)  C. Robert E Steel		Date of Receipt
Mailing Address 5315 Magdelena Dr		09 14 2012
City	State Zip Code	Transaction ID : SA11AI.13435
Austin	TX 78735	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	
Harden Healthcare	Finance	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	425.00	
SUBTOTAL of Receipts This Page (option	al)	75.00
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TOTAL This Period (last page this line nur	mber only)	

FOR LINE NUMBER: PAGE 107 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Robert E Steel Date of Receipt Mailing Address 5315 Magdelena Dr 2012 28 City State Zip Code Transaction ID: SA11AI.13912 TX 78735 Austin Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Harden Healthcare **Finance** Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kenneth Stribling Date of Receipt Mailing Address 2419 Edgecliff Path 07 06 2012 City State Zip Code Transaction ID: SA11AI.11871 TX Georgetown 78626 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 589.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kenneth Stribling Date of Receipt Mailing Address 2419 Edgecliff Path 07 23 2012 City State Zip Code Transaction ID: SA11AI.12198 TX Georgetown 78626 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation Administrator TRISUN Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 614.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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for each category of the Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Kenneth Stribling Date of Receipt Mailing Address 2419 Edgecliff Path 80 07 2012 City State Zip Code Transaction ID: SA11AI.12511 TX Georgetown 78626 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 639.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kenneth Stribling Date of Receipt Mailing Address 2419 Edgecliff Path 80 22 2012 City State Zip Code Transaction ID: SA11AI.12833 TX Georgetown 78626 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 664.00 Other (specify) Full Name (Last, First, Middle Initial) c. Kenneth Stribling Date of Receipt Mailing Address 2419 Edgecliff Path 09 07 2012 City State Zip Code Transaction ID: SA11AI.13282 TX Georgetown 78626 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Administrator TRISUN Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 689.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Kenneth Stribling Date of Receipt Mailing Address 2419 Edgecliff Path 2012 21 City State Zip Code Transaction ID: SA11AI.13723 TX Georgetown 78626 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator Receipt For: Aggregate Year-to-Date ▼ Primary General 714.00 Other (specify) Full Name (Last, First, Middle Initial) B. Nancy A Taylor Date of Receipt Mailing Address 3208 Main Cir W 07 06 2012 City State Zip Code Transaction ID: SA11AI.11874 CO Clifton 81520 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Voyager Hospice Clinical Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 325.00 Other (specify) Full Name (Last, First, Middle Initial) c. Nancy A Taylor Date of Receipt Mailing Address 3208 Main Cir W 09 14 2012 City State Zip Code Transaction ID: SA11AI.13438 CO Clifton 81520 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation Voyager Hospice Clinical Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Nancy A Taylor Date of Receipt Mailing Address 3208 Main Cir W 2012 28 City State Zip Code Transaction ID: SA11AI.13915 CO Clifton 81520 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Voyager Hospice Clinical Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name (Last, First, Middle Initial) B. Charlene Turner Date of Receipt Mailing Address 2101 Birdie Ct 07 06 2012 City State Zip Code Transaction ID: SA11AI.11877 TX San Angelo 76904 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator, Regency House Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) Full Name (Last, First, Middle Initial) c. Charlene Turner Date of Receipt Mailing Address 2101 Birdie Ct 07 23 2012 City Zip Code State Transaction ID: SA11AI.12203 TX San Angelo 76904 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator, Regency House Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Charlene Turner Date of Receipt Mailing Address 2101 Birdie Ct 07 2012 08 City State Zip Code Transaction ID: SA11AI.12517 TX San Angelo 76904 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator, Regency House Receipt For: Aggregate Year-to-Date ▼ Primary General 325.00 Other (specify) Full Name (Last, First, Middle Initial) B. Charlene Turner Date of Receipt Mailing Address 2101 Birdie Ct 80 22 2012 City State Zip Code Transaction ID: SA11AI.12838 TX San Angelo 76904 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator, Regency House Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) Full Name (Last, First, Middle Initial) c. Charlene Turner Date of Receipt Mailing Address 2101 Birdie Ct 09 07 2012 City Zip Code State Transaction ID: SA11AI.13287 TX San Angelo 76904 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation TRISUN Healthcare Administrator, Regency House Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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Detailed Summary Page	2	<b>X</b> 11a		11b		11c		12		_
, 0		13		14		15		16		17

Any information copied from such Reports and sor for commercial purposes, other than using the	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Harden Healthcare LLC Federa	al PAC	
Full Name (Last, First, Middle Initial) Charlene Turner Mailing Addross, 2404 Birdia Ct		Date of Receipt
Mailing Address 2101 Birdie Ct		09 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City San Angelo	State Zip Code TX 76904	Transaction ID : SA11AI.13729
San Angelo	TX 76904	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	
TRISUN Healthcare	Administrator, Regency House	
Receipt For:  Primary General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial)  3. Julie Vandre		Date of Receipt
Mailing Address 629 Park Ave		07 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Now Richmond	State Zip Code	Transaction ID : SA11AI.12026
New Richmond	WI 54017	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	
Girling Home Health	Vice President, Quality & Compliance	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)   General	325.00	
Full Name (Last, First, Middle Initial)  C. Julie Vandre		Date of Receipt
Mailing Address 629 Park Ave		07 31 2012
City New Richmond	State Zip Code WI 54017	Transaction ID : SA11AI.12348  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	
Girling Home Health	Vice President, Quality & Compliance	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	350.00	
SUBTOTAL of Receipts This Page (optional)		75.00
TOTAL This Period (last page this line number	only)	

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for each category of the Detailed Summary Page 13 14 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Julie Vandre Date of Receipt Mailing Address 629 Park Ave 2012 08 15 City Zip Code State Transaction ID: SA11AI.12594 WI New Richmond 54017 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Girling Home Health Vice President, Quality & Compliance Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Julie Vandre Date of Receipt Mailing Address 629 Park Ave 08 31 2012 City State Zip Code Transaction ID: SA11AI.12996 WI New Richmond 54017 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation Girling Home Health Vice President, Quality & Compliance Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) c. Julie Vandre Date of Receipt Mailing Address 629 Park Ave 09 14 2012 City Zip Code State Transaction ID: SA11AI.13444 WI New Richmond 54017 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation Girling Home Health Vice President, Quality & Compliance Receipt For: Aggregate Year-to-Date ▼ Primary General 425.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Julie Vandre Date of Receipt Mailing Address 629 Park Ave 2012 28 City Zip Code State Transaction ID: SA11AI.13920 WI New Richmond 54017 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Vice President, Quality & Compliance Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ronda Van Meter Date of Receipt Mailing Address 253 LCR 405 07 13 2012 City State Zip Code Transaction ID: SA11AI.12025 TX Mexia 76667 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Girling Home Health Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ronda Van Meter Date of Receipt Mailing Address 253 LCR 405 07 31 2012 City Zip Code State Transaction ID: SA11AI.12347 TX Mexia 76667 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Regional Vice President Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify) 125.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Ronda Van Meter Date of Receipt Mailing Address 253 LCR 405 15 2012 08 City State Zip Code Transaction ID: SA11AI.12593 TX Mexia 76667 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Girling Home Health Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ronda Van Meter Date of Receipt Mailing Address 253 LCR 405 80 31 2012 City State Zip Code Transaction ID: SA11AI.12995 TX Mexia 76667 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Girling Home Health Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ronda Van Meter Date of Receipt Mailing Address 253 LCR 405 09 14 2012 City Zip Code State Transaction ID: SA11AI.13443 TX Mexia 76667 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Regional Vice President Girling Home Health Receipt For: Aggregate Year-to-Date ▼ Primary General 850.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the 12 Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Ronda Van Meter Date of Receipt Mailing Address 253 LCR 405 2012 09 28 City State Zip Code Transaction ID: SA11AI.13919 TX Mexia 76667 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Girling Home Health Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jennifer Lynn Vogt Date of Receipt Mailing Address 4506 Grand Cypress Dr 07 13 2012 City State Zip Code Transaction ID: SA11AI.12028 TX Austin 78747 Amount of Each Receipt this Period FEC ID number of contributing 55.00 federal political committee. Name of Employer Occupation Girling Community Care Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 715.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Jennifer Lynn Vogt Date of Receipt Mailing Address 4506 Grand Cypress Dr 07 31 2012 City State Zip Code Transaction ID: SA11AI.12349 TX Austin 78747 Amount of Each Receipt this Period FEC ID number of contributing 55.00 С federal political committee. Name of Employer Occupation Regional Vice President Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 770.00 Other (specify) 160.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Jennifer Lynn Vogt Date of Receipt Mailing Address 4506 Grand Cypress Dr 15 2012 08 City State Zip Code Transaction ID: SA11AI.12677 TX 78747 Austin Amount of Each Receipt this Period FEC ID number of contributing C 55.00 federal political committee. Name of Employer Occupation Girling Community Care Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 825.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jennifer Lynn Vogt Date of Receipt Mailing Address 4506 Grand Cypress Dr 80 31 2012 City State Zip Code Transaction ID: SA11AI.12998 TX Austin 78747 Amount of Each Receipt this Period FEC ID number of contributing 55.00 federal political committee. Name of Employer Occupation Girling Community Care Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 880.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Jennifer Lynn Vogt Date of Receipt Mailing Address 4506 Grand Cypress Dr 09 14 2012 City State Zip Code Transaction ID: SA11AI.13446 TX Austin 78747 Amount of Each Receipt this Period FEC ID number of contributing 55.00 С federal political committee. Name of Employer Occupation Regional Vice President Girling Community Care Receipt For: Aggregate Year-to-Date ▼ Primary General 935.00 Other (specify) 165.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Jennifer Lynn Vogt Date of Receipt Mailing Address 4506 Grand Cypress Dr 2012 28 City State Zip Code Transaction ID: SA11AI.13922 TX 78747 Austin Amount of Each Receipt this Period FEC ID number of contributing C 55.00 federal political committee. Name of Employer Occupation Girling Community Care Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 990.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jonathon T Wilder Date of Receipt Mailing Address 2905 Sundance Ln 07 13 2012 City State Zip Code Transaction ID: SA11AI.12031 FL Cantonment 32533 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation Girling Home Health Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 325.00 Other (specify) Full Name (Last, First, Middle Initial) c. Jonathon T Wilder Date of Receipt Mailing Address 2905 Sundance Ln 07 31 2012 Zip Code City State Transaction ID: SA11AI.12351 FL Cantonment 32533 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation Girling Home Health Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 105.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

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City State Zip Code Transaction ID : SA11AI.125  Cantonment FL 32533  FEC ID number of contributing federal political committee.  Name of Employer Girling Home Health Receipt For:  Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial)  Jonathon T Wilder  Mailing Address 2905 Sundance Ln  City Cantonment  FL  32533  FEC ID number of contributing federal political committee.  Name of Employer Girling Home Health  Receipt For:  Aggregate Year-to-Date	012 96 Period
A. Jonathon T Wilder  Mailing Address 2905 Sundance Ln  City Cantonment  FL  32533  FEC ID number of contributing federal political committee.  Name of Employer Girling Home Health  Receipt  Date of Receipt  M  M  M  O  O  State Zip Code Transaction ID: SA11AI.125  Amount of Each Receipt this F  C  State  O  Cupation Regional Vice President  Receipt For:  Aggregate Year-to-Date ▼	012 96 Period
City State Zip Code Cantonment FL 32533  FEC ID number of contributing federal political committee.  Name of Employer Girling Home Health Receipt For:  Aggregate Year-to-Date ▼	012 96 Period
City       State       Zip Code       Transaction ID : SA11AI.125         Cantonment       FL       32533       Amount of Each Receipt this F         FEC ID number of contributing federal political committee.       C       Image: Committee of the contribution of Each Receipt this F         Name of Employer       Occupation       Occupation         Girling Home Health       Regional Vice President         Receipt For:       Aggregate Year-to-Date ▼	96 Period
FEC ID number of contributing federal political committee.  Name of Employer  Girling Home Health  Receipt For:  Amount of Each Receipt this F	
Receipt For:  Name of Employer  Girling Home Health  Receipt For:  Aggregate Year-to-Date ▼	25.00
Girling Home Health  Receipt For:  Aggregate Year-to-Date ▼	
Receipt For:  Aggregate Year-to-Date ▼	
Aggregate real-to-bate ▼	
Primary General	
Other (specify) ▼ 375.00	
Full Name (Last, First, Middle Initial)  Dale E Williams  Date of Receipt	
	Y Y Y
	012
Wichita KS 67203 Transaction ID : SA11Al.118  Amount of Each Receipt this F	
FFO ID assert or of contributions	51150
federal political committee.	25.00
Name of Employer Occupation	
Voyager Hospice Executive Director	
Receipt For:  Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼ 325.00	
Other (specify) ▼ 325.00	
Full Name (Last, First, Middle Initial)  Date of Receipt	
Mailing Address 1545 N Charles St	)12
City State Zip Code Transaction ID : SA11AI.120	
Wichita KS 67203 Amount of Each Receipt this F	
FEC ID number of contributing federal political committee.	25.00
Name of Employer Occupation	
Voyager Hospice Executive Director	
Receipt For:  Aggregate Year-to-Date ▼	
Primary General	
Other (specify) ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

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Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Dale E Williams Date of Receipt Mailing Address 1545 N Charles St 80 07 2012 City State Zip Code Transaction ID: SA11AI.12530 KS Wichita 67203 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Name of Employer Occupation **Executive Director** Voyager Hospice Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name (Last, First, Middle Initial) B. Iris B Williams Date of Receipt Mailing Address 3733 Locke Ln 07 06 2012 City State Zip Code Transaction ID: SA11AI.11891 Corpus Christi TX 78415 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation MBS Rehab **Director of Operations** Receipt For: Aggregate Year-to-Date ▼ Primary General 650.00 Other (specify) Full Name (Last, First, Middle Initial) c. Iris B Williams Date of Receipt Mailing Address 3733 Locke Ln 20 07 2012 City Zip Code State Transaction ID: SA11AI.12083 TX Corpus Christi 78415 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation MBS Rehab **Director of Operations** Receipt For: Aggregate Year-to-Date ▼ Primary General 700.00 Other (specify)

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125.00

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	and Statements may not be sold or used by any per ng the name and address of any political committee	
NAME OF COMMITTEE (In Full)  Harden Healthcare LLC Fee	doral BAC	
	uerai PAC	
Full Name (Last, First, Middle Initial)  Iris B Williams		Date of Receipt
Mailing Address 3733 Locke Ln		08 07 2012
City	State Zip Code	Transaction ID : SA11AI.12531
Corpus Christi	TX 78415	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	+
MBS Rehab	Director of Operations	
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General	0.0	
Other (specify) ▼	750.00	
Full Name (Last, First, Middle Initial)  3. Iris B Williams	·	Date of Receipt
Mailing Address 3733 Locke Ln		M M / D D / Y Y Y Y Y Y
City	State Zip Code	08 22 2012 Transaction ID : \$41141 13695
Corpus Christi	TX 78415	Transaction ID : SA11AI.12695  Amount of Each Receipt this Period
FEC ID number of contributing		7 anount of Each receipt this Fellou
federal political committee.	C	50.00
Name of Employer	Occupation	
MBS Rehab	Director of Operations	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	800.00	
Full Name (Last, First, Middle Initial)  . Iris B Williams	1	Date of Receipt
Mailing Address 3733 Locke Ln		09 07 2012 _
City	State Zip Code	Transaction ID : SA11AI.13299
Corpus Christi	TX 78415	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	+
MBS Rehab	Director of Operations	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	850.00	
SUBTOTAL of Receipts This Page (ontion	nal)	150.00
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for each category of the Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Iris B Williams Date of Receipt Mailing Address 3733 Locke Ln 2012 21 City State Zip Code Transaction ID: SA11AI.13741 TX Corpus Christi 78415 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation MBS Rehab Director of Operations Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) Full Name (Last, First, Middle Initial) B. Thomas Lloyd Lloyd Wilson Date of Receipt Mailing Address 1703 W 5th St Ste 700 07 13 2012 City State Zip Code Transaction ID: SA11AI.12033 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation Harden Healthcare Vice President, Public Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General 520.00 Other (specify) Full Name (Last, First, Middle Initial) c. Thomas Lloyd Lloyd Wilson Date of Receipt Mailing Address 1703 W 5th St Ste 700 07 31 2012 City Zip Code State Transaction ID: SA11AI.12352 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation Vice President, Public Affairs Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 560.00 Other (specify) 130.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 123 OF 131 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Thomas Lloyd Lloyd Wilson Date of Receipt Mailing Address 1703 W 5th St Ste 700 2012 08 15 City State Zip Code Transaction ID: SA11AI.12679 TX 78703 Austin Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation Vice President, Public Affairs Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Thomas Lloyd Lloyd Wilson Date of Receipt Mailing Address 1703 W 5th St Ste 700 80 31 2012 City State Zip Code Transaction ID: SA11AI.13000 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation Harden Healthcare Vice President, Public Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General 640.00 Other (specify) Full Name (Last, First, Middle Initial) c. Troy Adam Yarborough Date of Receipt Mailing Address 1703 W 5th St Ste 700 07 13 2012 City Zip Code State Transaction ID: SA11AI.12035 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Senior Vice President Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) 130.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 124 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Troy Adam Yarborough Date of Receipt Mailing Address 1703 W 5th St Ste 700 2012 07 31 City State Zip Code Transaction ID: SA11AI.12354 TX 78703 Austin Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Senior Vice President Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 320.00 Other (specify) Full Name (Last, First, Middle Initial) B. Troy Adam Yarborough Date of Receipt Mailing Address 1703 W 5th St Ste 700 80 15 2012 City State Zip Code Transaction ID: SA11AI.12680 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Harden Healthcare Senior Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 370.00 Other (specify) Full Name (Last, First, Middle Initial) c. Troy Adam Yarborough Date of Receipt Mailing Address 1703 W 5th St Ste 700 80 31 2012 City Zip Code State Transaction ID: SA11AI.13002 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Senior Vice President Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 420.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 125 OF 131 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page

14 13 15 16 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) Harden Healthcare LLC Federal PAC Full Name (Last, First, Middle Initial) Troy Adam Yarborough Date of Receipt Mailing Address 1703 W 5th St Ste 700 2012 City State Zip Code Transaction ID: SA11AI.13450 TX 78703 Austin Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer Occupation Senior Vice President Harden Healthcare Receipt For: Aggregate Year-to-Date ▼ Primary General 470.00 Other (specify) Full Name (Last, First, Middle Initial) B. Troy Adam Yarborough Date of Receipt Mailing Address 1703 W 5th St Ste 700 09 28 2012 City State Zip Code Transaction ID: SA11AI.13926 TX Austin 78703 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation Harden Healthcare Senior Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 520.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 100.00 SUBTOTAL of Receipts This Page (optional)..... 17254.00 TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X)	11	FOR LINE					
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only					
	Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b				
Any information copied from such Reports and Staten	ente may not be sold or use						
or for commercial purposes, other than using the nam							
NAME OF COMMITTEE (In Full)							
$ \; angle$ Harden Healthcare LLC Federal PA	/C						
Full Name (Last, First, Middle Initial)		Ī					
A. CANSECO FOR CONGRESS			Date of Disbursement				
			M = M / D = D / Y = Y = Y				
Mailing Address 10004 WURZBACH ROAD #366			09 26 2012				
City	State Zip Code						
SAN ANTONIO	TX 78230		Transaction ID : SB23.13763				
Purpose of Disbursement Political contribution							
		011	Amount of Each Disbursement this Period				
Candidate Name		Category/ Type	125.00				
Office Sought:	nent For: 2012	туре					
	Primary Seneral						
	Other (specify) ▼						
State: TX District: 23							
Full Name (Last, First, Middle Initial)  B. CASTRO FOR CONGRESS			Date of Disbursement				
			M M / D D / Y Y Y Y Y				
Mailing Address PO BOX 544			08 21 2012				
City	State Zip Code						
SAN ANTONIO	TX 78292		Transaction ID : SB23.13931				
Purpose of Disbursement			Amount of Each Disbursement this Period				
Political contribution  Candidate Name		011					
Mr. JOAQUIN CASTRO		Category/ Type	1500.00				
	nent For: 2012	Type					
Senate	Primary Seneral						
	Other (specify) ▼						
State: TX District: 20							
Full Name (Last, First, Middle Initial)  C. MCCASKILL FOR MISSOURI 2012	)		Date of Disbursement				
	<u>-</u>		M M / D D / Y Y Y Y				
Mailing Address 700 13TH STREET NW			09 19 2012				
SUITE 600 City	State Zip Code						
	DC 20005		Transaction ID : SB23.13929				
Purpose of Disbursement Voided check issued 6/1/12							
Candidate Name		011 Category/	Amount of Each Disbursement this Period				
CLAIRE MCCASKILL	SKILI		-1000.00				
	nent For: 2012	Туре					
	Primary General						
President	Other (specify) ▼						
State: MO District: 00							
SUPTOTAL of Dishuranments This Dame (anticare)			625.00				
SUBTOTAL of Disbursements This Page (optional)		······					
TOTAL This Period (last page this line number only)			1				

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 12						
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	24 25 26					
	Detailed Summary Page	27	22 X 23 28a 28b	28c 29 30				
Any information copied from such Reports and Statem								
or for commercial purposes, other than using the name	e and address of any politica	al committee to	solicit contributions	s from such committee.				
NAME OF COMMITTEE (In Full)	\C							
Harden Healthcare LLC Federal PA	AC .							
Full Name (Last, First, Middle Initial)			Data of Dialarma					
A. TED CRUZ FOR SENATE			Date of Disburse					
Mailing Address 815 A BRAZOS PMB 550				28 2012				
	State Zip Code			OD00 40705				
7.667	TX 78701		Transaction ID	) : SB23.13795				
Purpose of Disbursement Political contribution		011	Amount of Each	Disbursement this Period				
Candidate Name		Category/		5000.00				
TED RAFAEL EDWARD CRUZ  Office Sought: House Disbursem	ant For: 0040	Туре		3000.00				
	nent For: 2012 Primary X General							
	Other (specify) ▼							
State: TX District: 00								
Full Name (Last, First, Middle Initial)								
3.			Date of Disburse					
Mailing Address			M - M / D - D / Y - Y - Y -					
City	State Zip Code							
Purpose of Disbursement								
			Amount of Each Disbursement this Perio					
Candidate Name		Category/						
Office Sought: House Disbursem	ant For	Туре						
	Primary General							
	Other (specify) ▼							
State: District:								
Full Name (Last, First, Middle Initial)			D . (D: I					
C.			Date of Disburse					
			M M / D	D / Y Y Y Y Y				
	State Zip Code							
Purpose of Disbursement								
Candidate Name			Amount of Each	Disbursement this Period				
		Category/ Type						
Office Sought: House Disbursem	nent For:	71						
	Primary General							
	Other (specify) ▼							
State: District:								
SUBTOTAL of Disbursements This Page (optional)				5000.00				
The or biobardomonia This Lago (optional)								
TOTAL This Period (last page this line number only).				5625.00				

	CHEDULE B (FEC Form 3X)	lise sens	arate schedule(s)	FOR LINE	_		PAGE 128 OF 131			
ΙT	EMIZED DISBURSEMENTS	for each	category of the Summary Page	(check only	22	23	24 25 26			
				27	28a	28b	28c 🗙 29 30			
Ar or	ly information copied from such Reports and Statem for commercial purposes, other than using the nam	nents may neents add	not be sold or us ress of any politic	ed by any perso al committee to	on for the solicit co	purpose on tributions	f soliciting contributions from such committee.			
	NAME OF COMMITTEE (In Full)									
	Harden Healthcare LLC Federal PA	/C								
_	Full Name (Last, First, Middle Initial)				Б.	. Б				
Α.	Tony Dale				Date of	f Disburser				
	Mailing Address 104 Breakaway Rd	ress 104 Breakaway Rd					2012			
	,	State	Zip Code		Transaction ID : SB29.13767					
	Cedar Park Purpose of Disbursement	TX	78613-6991							
	Political contribution			011	Amoun	t of Each I	Disbursement this Period			
	Candidate Name			Category/			500.00			
	Office Sought: House Disbursen	nent For		Туре		,	7			
		Primary	General							
		Other (spe	cify) ▼							
_	State: District: Full Name (Last, First, Middle Initial)									
В.	Drew Darby				Date of	Disburser	ment			
					М = М	/ D				
	Mailing Address PO Box 3284				09	20	2012			
	•	State Zip Code TX 76902			Trans	action ID	: SB29.13769			
	Purpose of Disbursement Political contribution			044	A	( =	Dishama and Mis David			
	Candidate Name	011				of Each I	Disbursement this Period			
				Category/ Type		-,	1500.00			
	Office Sought: House Disbursem									
		Primary Other (spe	General							
	State: District:	Otrior (opo-	ony) <b>▼</b>							
_	Full Name (Last, First, Middle Initial)									
C.	Sarah Davis					Disburser				
	Mailing Address 4203 Tennyson				09	24				
	City S	State	Zip Code							
	Houston	TX	77005		Trans	action ID	: SB29.13771			
	Purpose of Disbursement Political contribution	011								
	Candidate Name			Category/ Type	Amoun	of Each I	Disbursement this Period 500.00			
	Office Sought: House Disbursen	nent For:		.,,,,		,				
		Primary	General							
		Other (spe	cify) 🔻							
Г	State: District:									
8	UBTOTAL of Disbursements This Page (optional)						2500.00			
H										
T	OTAL This Period (last page this line number only).									

S	CHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 12				9 OF 131				
	EMIZED DISBURSEMENTS		e schedule(s)	(check only one)								
•		for each cat Detailed Sur	egory of the mmary Page		2	1b [	22		23	24	25	
_		20.000 001	a.y i ago		2	7	28a		28b	28	X 29	9 30b
	ny information copied from such Reports and Staten											
or	for commercial purposes, other than using the name	e and address	s of any politica	ıl comi	mitte	e to s	solicit co	ontrib	outions	from s	uch comr	nittee.
$  \setminus $	NAME OF COMMITTEE (In Full)											
/	Harden Healthcare LLC Federal PA	AC .										
_	Full Name (Last, First, Middle Initial)											
A.	Rep. Lois W Kolkhorst						Date	of Di	sburse	ment		
							M M / D D / Y Y Y Y					
	Mailing Address PO Box 2546						09		1	7	2012	:
	City	State Z	ip Code									
	Brenham		7834				Tran	sact	ion ID	: SB29	13773	
	Purpose of Disbursement				-	1						
	Political contribution			01	11	Ш	Amou	nt of	Each	Disburs	ement th	is Period
	Candidate Name			Cate							10	000.00
	Office Sought: House Disbursen	nent For:		Тур	pe	$\dashv$			7	- 7		
		Primary	General									
	President	Other (specify	) <b>\</b>									
	State: District:											
	Full Name (Last, First, Middle Initial)											
В.	Mexican American Legislative Cau	cus						of Di	sburse	ment		
	Mailing Address 202 West 13th St						08	И /		D /	2012	
	Walling Address 202 West 15th 5t						00				2012	
	City		ip Code				Tran	sact	ion ID	: SB29	13775	
	Austin Purpose of Disbursement	TX 7	78701							. 00		
	Contribution			01	11	11	Amoui	nt of	Each	Disburs	ement th	is Period
	Candidate Name			Cate	4	Amount of Each Disbursement this Period						
				Тур					,	,		300.00
	Office Sought: House Disbursen	nent For:										
		Primary	General									
	President State: District:	Other (specify	<b>V</b>									
_	Full Name (Last, First, Middle Initial)											
C.	Sen. Robert Nichols						Date of	of Di	sburse	ment		
							M N	И /	D	D /	Y	Y Y
	Mailing Address 214 E Commerce						08		0	2	2012	
	City S	State Z	ip Code									
	-		75766				Tran	sact	ion ID	: SB29	13777	
	Purpose of Disbursement				-	7						
	Political contribution			01	1	Ш	Amou	nt of	Each	Disburs	ement th	is Period
	Candidate Name			Cate					-		10	00.00
	Office Sought: House Disbursen	nent For:		Тур	pe	$\dashv$		-	7	- 7		
		Primary	General									
		Other (specify										
_	State: District:		<u> </u>									
Г	<u> </u>							-	-			
s	UBTOTAL of Disbursements This Page (optional)				)	•		_	7		23	300.00
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1 1	<b>OTAL</b> This Period (last page this line number only)				1	•	100		(B) = 1	1 40		- m - 1

SCHEDULE B (FEC Form 3X)	Han annual calculate	FOR LINE NUMBER: PAGE 130 (			
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(orleast orlin)			
	Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c X 29 30l		
Any information copied from such Reports and S or for commercial purposes, other than using the					
NAME OF COMMITTEE (In Full)			222.2		
Harden Healthcare LLC Federa	al PAC				
Full Name (Last, First, Middle Initial)					
A. John Otto			Date of Disbursement		
Mailing Address PO Box 965			08 23 / 2012		
City	State Zip Code		Transaction ID ODGG 46773		
Dayton	TX 77535		Transaction ID : SB29.13779		
Purpose of Disbursement Political contribution		011	Amount of Each Disbursement this Period		
Candidate Name		Category/	1500.00		
Office Sought	ulroament Corr	Type	1500.00		
Office Sought: House Disk	oursement For:  Primary General				
Senate President	Other (specify)				
State: District:	□ Strict (opooliy) ▼				
Full Name (Last, First, Middle Initial)					
B. Jose Rodriguez			Date of Disbursement		
			M = M / D = D / Y = Y = Y		
Mailing Address 911 Dallas			09 21 2012		
City	State Zip Code		Transaction ID : SB29.13781		
El Paso	TX 79902				
Purpose of Disbursement Political contribution		011	Amount of Each Disbursement this Period		
Candidate Name			or Lawn Dispursement this Fellod		
		Category/ Type	500.00		
Office Sought: House Disb	oursement For:	.,,,,,			
Senate	Primary General				
President	Other (specify) ▼				
State: District:					
Full Name (Last, First, Middle Initial)					
C. Ralph E Sheffield Jr.			Date of Disbursement		
·			M M / D D / Y Y Y Y		
Mailing Address 2907 S General Bruce Dr			08 14 2012		
City	State Zip Code				
Temple	TX 76504		Transaction ID: SB29.13783		
Purpose of Disbursement	. 300 .				
Political contribution		011	Amount of Each Disbursement this Period		
Candidate Name		Category/			
		Type	500.00		
	oursement For:				
Senate	Primary General				
State: District:	Other (specify)				
State: District:					
CUDTOTAL of Dishares are T. T.	nal\		2500.00		
SUBTOTAL of Disbursements This Page (option	ııdı)	·····•	2300.00		
TOTAL This Period (last page this line number	only)				
	U: :: y /				

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 131 OF 131				
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	NOMBELL.				
	for each category of the Detailed Summary Page	21b	22 23 24 25 26				
	1	27	28a 28b 28c X 29 30b				
Any information copied from such Reports and State							
or for commercial purposes, other than using the nar	ne and address of any politic	cal committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)	4.0						
│ Harden Healthcare LLC Federal P	AC						
Full Name (Last, First, Middle Initial)							
A. TEXANS FOR CHARLES SCHWE	RTNER		Date of Disbursement				
			M M / D D / Y Y Y Y				
Mailing Address PO BOX 2448			09 18 2012				
City	State Zip Code						
GEORGETOWN	TX 78627		Transaction ID : SB29.13785				
Purpose of Disbursement							
Political contribution		011	Amount of Each Disbursement this Period				
Candidate Name		Category/	1000.00				
Dr. Charles Schwertner Office Sought: House Disburse	ment For:	Туре	7				
Senate Disburse	Primary General						
President	Other (specify)						
State: District:							
Full Name (Last, First, Middle Initial)							
B. TEXANS FOR JOHN DAVIS			Date of Disbursement				
Matter Address and Tolkins			M M / D D / Y Y Y Y Y				
Mailing Address 1 E Greenway Plaza Ste 225			07 19 2012				
City	State Zip Code		Towns at law ID				
Houston	TX 77046		Transaction ID : SB29.13787				
Purpose of Disbursement Political contribution		044					
Candidate Name		011	Amount of Each Disbursement this Period				
John E Davis		Category/ Type	750.00				
<u></u>	ment For:	Турс					
Senate	Primary General						
President	Other (specify) ▼						
State: District:							
Full Name (Last, First, Middle Initial)			B				
C. Carlos I Uresti			Date of Disbursement				
Mailing Address 924 McCullough Ave			09 25 2012				
ag / tea. 555 524 Middulough 7W6							
City	State Zip Code		Transaction ID : SB29.13789				
San Antonio Purpose of Disbursement	TX 78215						
Political contribution		011	Assessment of Freeh Diehouse assess this Posice!				
Candidate Name			Amount of Each Disbursement this Period				
		Category/ Type	500.00				
Office Sought: House Disburse	ment For:						
Senate	Primary General						
President	Other (specify) ▼						
State: District:							
SUBTOTAL of Disbursements This Page (optional)			2250.00				
CODITION DISDUISEMENTS THIS Page (Optional)							
TOTAL This Period (last page this line number only	)		9550.00				