

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

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

Seniors Housing PAC

ADDRESS (number and street)

5100 Wisconsin Ave., NW

Suite 307

☐Check if different  
than previously  
reported. (ACC)

Washington

DC

20016

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00325332

3. IS THIS  
REPORT☐NEW  
(N)**OR**☒AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report (Q1)☐July 15  
Quarterly Report (Q2)☐October 15  
Quarterly Report (Q3)☐January 31  
Quarterly Report (YE)☐July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☒

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

03

01

2006

through

03

31

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

David Schless

Signature of Treasurer

Electronically Filed by David Schless

Date

06

05

2006

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

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Seniors Housing PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	3	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2006</span>		285162.37
(b) Cash on Hand at Beginning of Reporting Period .....	285662.37	
(c) Total Receipts (from Line 19) .....	40295.00	52295.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	325957.37	337457.37
7. Total Disbursements (from Line 31) .....	6500.00	18000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	319457.37	319457.37
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name  
Seniors Housing PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	3	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	36700.00	45700.00
(ii) Unitemized .....	3595.00	3595.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➡	40295.00	49295.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➡	40295.00	49295.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	3000.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	40295.00	52295.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	40295.00	52295.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		6500.00	18000.00
24. Independent Expenditure (use Schedule E) .....		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		0.00	0.00
26. Loan Repayments Made.....		0.00	0.00
27. Loans Made.....		0.00	0.00
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....		0.00	0.00
(b) Political Party Committees		0.00	0.00
(c) Other Political Committees (such as PACs) .....		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....		0.00	0.00
29. Other Disbursements.....		0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....		0.00	0.00
(ii) "Levin" Share .....		0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....		0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		6500.00	18000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		6500.00	18000.00

**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) .....	40295.00	49295.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	40295.00	49295.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 / 21

(check only one)

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

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

NAME OF COMMITTEE (In Full)

Seniors Housing PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Colleen Blumenthal Mailing Address 1605 Main Street, Suite 610 City State Zip Code Sarasota FL 34236 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer HealthTrust, LLC Occupation Partner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6 <b>Transaction ID: 13097792</b> Amount of Each Receipt this Period 500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Jerry Doctrow Mailing Address 100 Light Street City State Zip Code Baltimore MD 21203 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Stifel Nicolaus & Company, Inc. Occupation Managing Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6 <b>Transaction ID: 13097793</b> Amount of Each Receipt this Period 250.00
<b>C.</b> Full Name (Last, First, Middle Initial) David J. Hegarty Mailing Address 400 Centre Street City State Zip Code Newton MA 02458 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Senior Housing Properties Trust Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 6 <b>Transaction ID: 13366115</b> Amount of Each Receipt this Period 2000.00

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

**2750.00**

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 21

(check only one)

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

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)

Seniors Housing PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Herbert J. Horowitz Mailing Address 630 5th Avenue, Suite 2950 City New York State NY Zip Code 10111 FEC ID number of contributing federal political committee. <b>C</b>			Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 6 <b>Transaction ID: 13366207</b> Amount of Each Receipt this Period 500.00
Name of Employer Shattuck Hammond Partners Occupation Principal Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			
<b>B.</b> Full Name (Last, First, Middle Initial) John J. Piazza Mailing Address 13160 110th Ave North City Largo State FL Zip Code 33774 FEC ID number of contributing federal political committee. <b>C</b>			Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 6 <b>Transaction ID: 13366264</b> Amount of Each Receipt this Period 2000.00
Name of Employer The Adult Care Group, Inc. Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00			
<b>C.</b> Full Name (Last, First, Middle Initial) Anja Rogers Mailing Address 1516 South Boston, Suite 301 City Tulsa State OK Zip Code 74119 FEC ID number of contributing federal political committee. <b>C</b>			Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 6 <b>Transaction ID: 13366435</b> Amount of Each Receipt this Period 250.00
Name of Employer Senior Star Living Occupation Senior Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			

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

2750.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 21

(check only one)

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

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)

Seniors Housing PAC

**A.** Full Name (Last, First, Middle Initial)  
Charles J. Herman

Mailing Address One SeaGate, Suite 1500

City State Zip Code  
Toledo OH 43604

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Health Care REITOccupation  
Vice President, Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	0	6

Transaction ID: 13391337

Amount of Each Receipt this Period

2000.00

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

Mailing Address One SeaGate, Suite 1500

City State Zip Code  
Toledo OH 43604

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Health Care REITOccupation  
Chairman & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	0	6

Transaction ID: 13391404

Amount of Each Receipt this Period

2000.00

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

Mailing Address One SeaGate, Suite 1500

City State Zip Code  
Toledo OH 43604

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Health Care REITOccupation  
President & CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	0	6

Transaction ID: 13391447

Amount of Each Receipt this Period

2000.00

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

6000.00

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



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

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

FOR LINE NUMBER: PAGE 9 / 21

(check only one)

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

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

NAME OF COMMITTEE (In Full)

Seniors Housing PAC

Full Name (Last, First, Middle Initial)

A. Scott Estes

Mailing Address One SeaGate, Suite 1500

City State Zip Code  
 Toledo OH 43604

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Health Care REIT

Occupation  
Vice President, Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 4 / 2 0 0 6

Transaction ID: 13391518

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mike Stephen

Mailing Address 1133 Fourth St  
Suite 208

City State Zip Code  
 Sarasota FL 34236

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Health Care REIT

Occupation  
Vice President, Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 4 / 2 0 0 6

Transaction ID: 13391549

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Gilbert J. Till

Mailing Address 1833 N. 105th Street, Suite 101

City State Zip Code  
 Seattle WA 98133

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
URBEK

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 4 / 2 0 0 6

Transaction ID: 13391596

Amount of Each Receipt this Period

2000.00

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

4250.00

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

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

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

FOR LINE NUMBER: PAGE 10 / 21

(check only one)

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

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

NAME OF COMMITTEE (In Full)

Seniors Housing PAC

Full Name (Last, First, Middle Initial)

A. Alice Katz

Mailing Address 10085 Red Run Blvd.

City State Zip Code  
 Owings Mills MD 21117

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Vinca Group LLC

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 7 / 2 0 0 6

Transaction ID: 13418440

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Michael Bateman

Mailing Address 300 N. Green Street  
Suite 1000

City State Zip Code  
 Greensboro NC 27401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bell Senior Living

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 1 / 2 0 0 6

Transaction ID: 13453636

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Carlene M. Motto

Mailing Address 1217 Camelot Lane

City State Zip Code  
 Lemont IL 60434

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BelmontCorp

Occupation  
Vice President of Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 1 / 2 0 0 6

Transaction ID: 13453706

Amount of Each Receipt this Period

250.00

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

1750.00

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

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

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

FOR LINE NUMBER: PAGE 11 / 21

(check only one)

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

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

NAME OF COMMITTEE (In Full)

Seniors Housing PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Phil Anderson		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 7 / 2 0 0 6
Mailing Address 450 South Orange Avenue		<b>Transaction ID:</b> 13476267
City Orlando	State FL	Zip Code 32801
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer CNL Retirement Properties, Inc.	Occupation Chief Operating Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) William S. Sciortino		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 7 / 2 0 0 6
Mailing Address 71 South Wacker Drive Suite 900		<b>Transaction ID:</b> 13476284
City Chicago	State IL	Zip Code 60606
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Classic Residence by Hyatt	Occupation Senior VP of Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) John C. Erickson		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 7 / 2 0 0 6
Mailing Address 701 Maiden Choice Lane		<b>Transaction ID:</b> 13476285
City Catonsville	State MD	Zip Code 21228
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Erickson Retirement Communities LLC	Occupation Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

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

4500.00

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

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

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

FOR LINE NUMBER: PAGE 12 / 21

(check only one)

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

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

NAME OF COMMITTEE (In Full)

Seniors Housing PAC

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

Randall Bufford

Mailing Address 1650 Lyndon Farm Ct  
#201

City State Zip Code  
Louisville KY 40223

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Trilogy Health Services  
LLC

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 7 / 2 0 0 6

Transaction ID: 13476472

Amount of Each Receipt this Period

2000.00

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

Laurie D. Moreland

Mailing Address 9595 Six Pines Drive, Suite 6300

City State Zip Code  
The Woodlands TX 77380

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Hearthstone Assisted Living

Occupation  
Regional Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 8 / 2 0 0 6

Transaction ID: 13485122

Amount of Each Receipt this Period

250.00

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

Timothy P. Hekker

Mailing Address 3663 North Sam Houston Pkwy East

City State Zip Code  
Houston TX 77032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Hearthstone Assisted Living

Occupation  
President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 8 / 2 0 0 6

Transaction ID: 13485135

Amount of Each Receipt this Period

2000.00

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

4250.00

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

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

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

FOR LINE NUMBER: PAGE 13 / 21

(check only one)

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

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

NAME OF COMMITTEE (In Full)

Seniors Housing PAC

Full Name (Last, First, Middle Initial)

**A.** James T. Wang

Mailing Address 3663 North Sam Houston Pkwy East

City State Zip Code  
Houston TX 77032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Hearthstone Assisted Living

Occupation  
Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 8 / 2 0 0 6

Transaction ID: 13485136

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

**B.** Nathan Jones

Mailing Address 3663 North Sam Houston Pkwy East

City State Zip Code  
Houston TX 77032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Hearthstone Assisted Living

Occupation  
Director, Market Research

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 8 / 2 0 0 6

Transaction ID: 13485161

Amount of Each Receipt this Period

275.00

Full Name (Last, First, Middle Initial)

**C.** Liz Vargas

Mailing Address 13119 Wickersham Lane

City State Zip Code  
Houston TX 77077

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Hearthstone Assisted Living

Occupation  
Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 8 / 2 0 0 6

Transaction ID: 13485163

Amount of Each Receipt this Period

500.00

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

2025.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 21

(check only one)

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

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

NAME OF COMMITTEE (In Full)

Seniors Housing PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Laurence Daspit		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 8 / 2 0 0 6	
Mailing Address 9595 Six Pines Dr. Suite 6300		<b>Transaction ID:</b> 13485178	
City State Zip Code The Woodlands TX 77380		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Hearthstone Assisted Living		Occupation Senior Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	
<b>B.</b> Full Name (Last, First, Middle Initial) Patricia Abraham		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 8 / 2 0 0 6	
Mailing Address 9595 Six Pines Dr. Suite 6300		<b>Transaction ID:</b> 13485179	
City State Zip Code The Woodlands TX 77380		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Hearthstone Assisted Living		Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	
<b>C.</b> Full Name (Last, First, Middle Initial) Shannon Bailey		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 8 / 2 0 0 6	
Mailing Address 9595 Six Pines Dr. Suite 6300		<b>Transaction ID:</b> 13485191	
City State Zip Code The Woodlands TX 77380		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Hearthstone Assisted Living		Occupation Director of Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

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

2000.00

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

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

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

FOR LINE NUMBER: PAGE 15 / 21

(check only one)

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

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

NAME OF COMMITTEE (In Full)

Seniors Housing PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Lori Alford Mailing Address 4314 Country Heights Court City State Zip Code Spring TX 77388 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Hearthstone Assisted Living Occupation Marketing Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 03 / 28 / 2006 <b>Transaction ID:</b> 13485192 Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Lloyd Schill Mailing Address 3663 North Sam Houston Pkwy East City State Zip Code Houston TX 77032 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Hearthstone Assisted Living Occupation Vice President, Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 28 / 2006 <b>Transaction ID:</b> 13485193 Amount of Each Receipt this Period 1000.00
<b>C.</b> Full Name (Last, First, Middle Initial) Helena M. Ohmen Mailing Address 9595 Six Pines Drive, Suite 6300 City State Zip Code The Woodlands TX 77380 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Hearthstone Assisted Living Occupation Regional Director of Health and Wellne Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 03 / 28 / 2006 <b>Transaction ID:</b> 13485196 Amount of Each Receipt this Period 250.00

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

1500.00

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

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

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

FOR LINE NUMBER: PAGE 16 / 21

(check only one)

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

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

NAME OF COMMITTEE (In Full)

Seniors Housing PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Diane Bragg Mailing Address 613 Barnes Road City State Zip Code West Monroe LA 71291 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Hearthstone Assisted Living Occupation Regional Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 8 / 2 0 0 6 <b>Transaction ID: 13485214</b> Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) Scott Opheim Mailing Address 9595 Six Pines Drive, Suite 6300 City State Zip Code The Woodlands TX 77380 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Hearthstone Assisted Living Occupation Sr. Systems Engineer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 8 / 2 0 0 6 <b>Transaction ID: 13485215</b> Amount of Each Receipt this Period 275.00
<b>C.</b> Full Name (Last, First, Middle Initial) Richard Rosenberg Mailing Address 9595 Six Pines Dr. Suite 6300 City State Zip Code The Woodlands TX 77380 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Hearthstone Assisted Living Occupation General Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 8 / 2 0 0 6 <b>Transaction ID: 13485267</b> Amount of Each Receipt this Period 1000.00

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

1525.00

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



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

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

FOR LINE NUMBER: PAGE 17 / 21

(check only one)

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

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

NAME OF COMMITTEE (In Full)

Seniors Housing PAC

**A.** Full Name (Last, First, Middle Initial)  
Christopher Urban  
Mailing Address One SeaGate, Suite 1500

City State Zip Code  
Toledo OH 43604

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Health Care REIT

Occupation  
Marketing Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 8 / 2 0 0 6

Transaction ID: 13485273

Amount of Each Receipt this Period

500.00

**B.** Full Name (Last, First, Middle Initial)  
Arnold M Whitman  
Mailing Address 1035 Powers Place

City State Zip Code  
Alpharetta GA 30004

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Formation Capital, LLC

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 8 / 2 0 0 6

Transaction ID: 13489039

Amount of Each Receipt this Period

2000.00

**C.** Full Name (Last, First, Middle Initial)  
Frank Bumstead  
Mailing Address 1700 Hayes Street

City State Zip Code  
Nashville TN 37203

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Retirement Corpo-  
ration

Occupation  
Lead Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 0 6

Transaction ID: 13681096

Amount of Each Receipt this Period

500.00

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

3000.00

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

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

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

FOR LINE NUMBER: PAGE 18 / 21

(check only one)

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

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

NAME OF COMMITTEE (In Full)

Seniors Housing PAC

**A.**

Full Name (Last, First, Middle Initial)

Micheal Crabtree

Mailing Address One SeaGate, Suite 1500

City State Zip Code  
 Toledo OH 43604

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Health Care REIT

Occupation  
Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 3 1 / 2 0 0 6

Transaction ID: 13681284

Amount of Each Receipt this Period

400.00

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

400.00

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

36700.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 21

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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

NAME OF COMMITTEE (In Full)  
Seniors Housing PAC

Full Name (Last, First, Middle Initial)

**A.** Earl Pomeroy for Congress

Mailing Address PO Box 746

City Bismarck State ND Zip Code 58502

Purpose of Disbursement

Candidate Name  
Earl Pomeroy

Office Sought: ☒ House  
☐ Senate  
☐ President

State: ND District: 1

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: 13211332

Date of Disbursement

03 / 08 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.** Stephanie Tubbs Jones for Congress

Mailing Address 3729 Silsby Road

City University Heights State OH Zip Code 44118

Purpose of Disbursement

Candidate Name  
Stephanie Jones

Office Sought: ☒ House  
☐ Senate  
☐ President

State: OH District: 11

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: 13411491

Date of Disbursement

03 / 15 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** Ben Cardin For Senate

Mailing Address PO Box 65056

City Baltimore State MD Zip Code 21209

Purpose of Disbursement

Candidate Name  
Mr. Benjamin Cardin

Office Sought: ☐ House  
☒ Senate  
☐ President

State: MD District: 2

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

011  
Category/  
Type

Transaction ID: 13460270

Date of Disbursement

03 / 22 / 2006

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 21

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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

NAME OF COMMITTEE (In Full)  
Seniors Housing PAC

A. Full Name (Last, First, Middle Initial)  
Friends of Gordon Smith

Mailing Address 7675 SW Maple Drive

City Portland State OR Zip Code 97225

Purpose of Disbursement  
Debt Retirement

Candidate Name  
Gordon Smith

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 1996  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OR District: 2

Transaction ID: 13483332

Date of Disbursement

03 / 27 / 2006

Amount of Each Disbursement this Period

2500.00

Debt Retirement

B. Full Name (Last, First, Middle Initial)  
Nelson For U S Senate

Mailing Address PO Box 8666

City Omaha State NE Zip Code 68108

Purpose of Disbursement

Candidate Name  
Sen. Ben Nelson

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NE District: 2

Transaction ID: 13555319

Date of Disbursement

03 / 29 / 2006

Amount of Each Disbursement this Period

1000.00

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

3500.00

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

6500.00

Image# 26940180633

Form/Schedule: **F3XA**

To correct for a cash discprecany of ending balance from amended March Monthly report.

Transaction ID:

\*\*\*\*\*