

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Assisted Living Federation of America

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>		338882.41
(b) Cash on Hand at Beginning of Reporting Period.....	480884.11	
(c) Total Receipts (from Line 19)	8150.13	254388.51
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	489034.24	593270.92
7. Total Disbursements (from Line 31).....	15217.62	120154.30
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	473816.62	473116.62
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Assisted Living Federation of America

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2013 To: M M / D D / Y Y Y Y 10 / 31 / 2013

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).....	6807.00	198843.38
(ii) Unitemized	450.34	31687.64
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	7257.34	230531.02
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	7257.34	240531.02
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).....	892.79	4207.49
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	9650.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	8150.13	254388.51
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	8150.13	254388.51

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	717.62	3804.30
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	717.62	3804.30
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	14500.00	115500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	850.00
(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	850.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	15217.62	120154.30
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15217.62	120154.30

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)	7257.34	240531.02
34. Total Contribution Refunds (from Line 28(d))	0.00	850.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7257.34	239681.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	717.62	3804.30
37. Offsets to Operating Expenditures (from Line 15, page 3).....	892.79	4207.49
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	-175.17	-403.19

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

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

FOR LINE NUMBER: PAGE 6 OF 22
(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)
Assisted Living Federation of America

Full Name (Last, First, Middle Initial)
A. Christopher Belford

Mailing Address 1421 Shady Hollow Ct

City State Zip Code
 Keller TX 76248

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

Name of Employer Occupation
 Emeritus Senior Living-NA Senior VP of Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1145.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 22 / 2013

Transaction ID : C2451933

Amount of Each Receipt this Period
 125.00

Full Name (Last, First, Middle Initial)
B. Christopher Belford

Mailing Address 1421 Shady Hollow Ct

City State Zip Code
 Keller TX 76248

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

Name of Employer Occupation
 Emeritus Senior Living-NA Senior VP of Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1145.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 22 / 2013

Transaction ID : C2451952

Amount of Each Receipt this Period
 125.00

Full Name (Last, First, Middle Initial)
C. Christopher Belford

Mailing Address 1421 Shady Hollow Ct

City State Zip Code
 Keller TX 76248

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

Name of Employer Occupation
 Emeritus Senior Living-NA Senior VP of Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1145.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 22 / 2013

Transaction ID : C2451967

Amount of Each Receipt this Period
 125.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 375.00

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

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

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FOR LINE NUMBER: PAGE 7 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Assisted Living Federation of America

Full Name (Last, First, Middle Initial)
A. John Cincotta

Mailing Address 22315 6th Ave S
B-304

City Des Moines State WA Zip Code 98198-6859

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

Name of Employer Emeritus Occupation SVP of Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2013
Transaction ID : C2451934

Amount of Each Receipt this Period
75.00

Full Name (Last, First, Middle Initial)
B. John Cincotta

Mailing Address 22315 6th Ave S
B-304

City Des Moines State WA Zip Code 98198-6859

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

Name of Employer Emeritus Occupation SVP of Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2013
Transaction ID : C2451953

Amount of Each Receipt this Period
75.00

Full Name (Last, First, Middle Initial)
C. John Cincotta

Mailing Address 22315 6th Ave S
B-304

City Des Moines State WA Zip Code 98198-6859

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

Name of Employer Emeritus Occupation SVP of Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2013
Transaction ID : C2451968

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00

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

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

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FOR LINE NUMBER: PAGE 8 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Assisted Living Federation of America

Full Name (Last, First, Middle Initial)
A. Caroline Cline

Mailing Address 7958 E. Journey Lane

City State Zip Code
 Scottsdale AZ 85255

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

Name of Employer Occupation
 Emeritus Senior Living-n/a Regional Director of Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2013

Transaction ID : C2451941

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
B. Caroline Cline

Mailing Address 7958 E. Journey Lane

City State Zip Code
 Scottsdale AZ 85255

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

Name of Employer Occupation
 Emeritus Senior Living-n/a Regional Director of Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2013

Transaction ID : C2451960

Amount of Each Receipt this Period
 25.00

Full Name (Last, First, Middle Initial)
C. Caroline Cline

Mailing Address 7958 E. Journey Lane

City State Zip Code
 Scottsdale AZ 85255

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

Name of Employer Occupation
 Emeritus Senior Living-n/a Regional Director of Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2013

Transaction ID : C2451974

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Assisted Living Federation of America

Full Name (Last, First, Middle Initial)
A. Pamela Engle

Mailing Address 6801 NE 204th St
#206

City State Zip Code
Kenmore WA 98028

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

Name of Employer Occupation
Emeritus Senior Living VP Benefits & Comp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 22 / 2013
Transaction ID : C2451935

Amount of Each Receipt this Period
25.00

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

Mailing Address 6801 NE 204th St
#206

City State Zip Code
Kenmore WA 98028

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

Name of Employer Occupation
Emeritus Senior Living VP Benefits & Comp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 22 / 2013
Transaction ID : C2451954

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Pamela Engle

Mailing Address 6801 NE 204th St
#206

City State Zip Code
Kenmore WA 98028

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

Name of Employer Occupation
Emeritus Senior Living VP Benefits & Comp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 22 / 2013
Transaction ID : C2451969

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

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

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

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

FOR LINE NUMBER: PAGE 10 OF 22
(check only one)

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NAME OF COMMITTEE (In Full)
Assisted Living Federation of America

A. Lisa Fordyce
Full Name (Last, First, Middle Initial)
Mailing Address 5449 Rosewick Dr
City Dublin State OH Zip Code 43016-8393
FEC ID number of contributing federal political committee. **C**
Name of Employer Emeritus Senior Living, Inc.-Midwest Occupation VPO Midwest Division
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 22 / 2013
Transaction ID : C2451936
Amount of Each Receipt this Period 50.00

B. Lisa Fordyce
Full Name (Last, First, Middle Initial)
Mailing Address 5449 Rosewick Dr
City Dublin State OH Zip Code 43016-8393
FEC ID number of contributing federal political committee. **C**
Name of Employer Emeritus Senior Living, Inc.-Midwest Occupation VPO Midwest Division
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 22 / 2013
Transaction ID : C2451955
Amount of Each Receipt this Period 50.00

C. Lisa Fordyce
Full Name (Last, First, Middle Initial)
Mailing Address 5449 Rosewick Dr
City Dublin State OH Zip Code 43016-8393
FEC ID number of contributing federal political committee. **C**
Name of Employer Emeritus Senior Living, Inc.-Midwest Occupation VPO Midwest Division
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 22 / 2013
Transaction ID : C2451970
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 22
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	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Assisted Living Federation of America

A. Richard Grimes
Full Name (Last, First, Middle Initial)

Mailing Address 5265 Cozy Glen Ln

City Alexandria State VA Zip Code 22312-3911

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

Name of Employer Assisted Living Federation of America Occupation President/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2013

Transaction ID : C2451948

Amount of Each Receipt this Period
 2000.00

B. Chris Hollister
Full Name (Last, First, Middle Initial)

Mailing Address 10160 Gaywood Drive

City Dallas State TX Zip Code 75229

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2013

Transaction ID : C2454211

Amount of Each Receipt this Period
 500.00

C. Justin Hutchens
Full Name (Last, First, Middle Initial)

Mailing Address 1537 Avellino Cir

City Murfreesboro State TN Zip Code 37130-7610

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

Name of Employer NHI Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2013

Transaction ID : C2457147

Amount of Each Receipt this Period
 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) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 22
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Assisted Living Federation of America

Full Name (Last, First, Middle Initial)
A. Steve Johnson

Mailing Address 2700 Lawndale Dr

City Plano	State TX	Zip Code 75023-7926
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FEC ID number of contributing federal political committee. **C**

Name of Employer Five Star Quality Care, Inc.-N/A	Occupation Divisional Vice President
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	11	/	2013

Transaction ID : C2446168

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Steve Johnson

Mailing Address 2700 Lawndale Dr

City Plano	State TX	Zip Code 75023-7926
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FEC ID number of contributing federal political committee. **C**

Name of Employer Five Star Quality Care, Inc.-N/A	Occupation Divisional Vice President
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2013

Transaction ID : C245339

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. Jyl Pruss

Mailing Address 831 Greenwood Dr

City Lindenhurst	State IL	Zip Code 60046
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FEC ID number of contributing federal political committee. **C**

Name of Employer Emeritus Senior Living	Occupation National Dir of HR
--	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2013

Transaction ID : C2451942

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional).....▶	210.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Assisted Living Federation of America

A. Jyl Pruss
Full Name (Last, First, Middle Initial)
Mailing Address 831 Greenwood Dr
City Lindenhurst State IL Zip Code 60046
FEC ID number of contributing federal political committee. **C**
Name of Employer Emeritus Senior Living Occupation National Dir of HR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 310.00

Date of Receipt 10 / 22 / 2013
Transaction ID : C2451961
Amount of Each Receipt this Period 100.00

B. Jyl Pruss
Full Name (Last, First, Middle Initial)
Mailing Address 831 Greenwood Dr
City Lindenhurst State IL Zip Code 60046
FEC ID number of contributing federal political committee. **C**
Name of Employer Emeritus Senior Living Occupation National Dir of HR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 310.00

Date of Receipt 10 / 22 / 2013
Transaction ID : C2451975
Amount of Each Receipt this Period 100.00

C. Sylvia Rocker
Full Name (Last, First, Middle Initial)
Mailing Address 4046 Saint Christopher Ln
City Dallas State TX Zip Code 75287-6449
FEC ID number of contributing federal political committee. **C**
Name of Employer Emeritus Senior Living Occupation Information Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 900.00

Date of Receipt 10 / 22 / 2013
Transaction ID : C2451930
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 14 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Assisted Living Federation of America

Full Name (Last, First, Middle Initial)
A. Sylvia Rocker

Mailing Address 4046 Saint Christopher Ln

City State Zip Code
 Dallas TX 75287-6449

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

Name of Employer Occupation
 Emeritus Senior Living Information Requested

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2013
Transaction ID : C2451949

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Sylvia Rocker

Mailing Address 4046 Saint Christopher Ln

City State Zip Code
 Dallas TX 75287-6449

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

Name of Employer Occupation
 Emeritus Senior Living Information Requested

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2013
Transaction ID : C2451979

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. Liberty Stansbery

Mailing Address 10031 Wallingford Ave N

City State Zip Code
 Seattle WA 98133-9438

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

Name of Employer Occupation
 Emeritus Senior Living Vice President of Human Resources

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2013
Transaction ID : C2451937

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **250.00**

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

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

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

FOR LINE NUMBER: PAGE 15 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Assisted Living Federation of America

Full Name (Last, First, Middle Initial)
A. Liberty Stansberry

Mailing Address 10031 Wallingford Ave N

City State Zip Code
 Seattle WA 98133-9438

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

Name of Employer Occupation
 Emeritus Senior Living Vice President of Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2013

Transaction ID : C2451956

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
B. Liberty Stansberry

Mailing Address 10031 Wallingford Ave N

City State Zip Code
 Seattle WA 98133-9438

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

Name of Employer Occupation
 Emeritus Senior Living Vice President of Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2013

Transaction ID : C2451971

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
c. Steven C. Tarr

Mailing Address 20214 NE 38th Ct

City State Zip Code
 Sammamish WA 98074-4306

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

Name of Employer Occupation
 Emeritus Senior Living Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 756.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2013

Transaction ID : C2451938

Amount of Each Receipt this Period
 84.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **184.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Assisted Living Federation of America

A. Steven C. Tarr
Full Name (Last, First, Middle Initial)

Mailing Address 20214 NE 38th Ct

City Sammamish State WA Zip Code 98074-4306

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

Name of Employer Emeritus Senior Living Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **756.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 22 / 2013

Transaction ID : C2451957

Amount of Each Receipt this Period
84.00

B. Steven C. Tarr
Full Name (Last, First, Middle Initial)

Mailing Address 20214 NE 38th Ct

City Sammamish State WA Zip Code 98074-4306

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

Name of Employer Emeritus Senior Living Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **756.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 22 / 2013

Transaction ID : C2451972

Amount of Each Receipt this Period
84.00

C. Melanie Werdel
Full Name (Last, First, Middle Initial)

Mailing Address 7350 West Mercer Way

City Mercer Island State WA Zip Code 98040

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

Name of Employer Emeritus Senior Living Occupation Executive Vice President Administratio

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1900.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 22 / 2013

Transaction ID : C2451939

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)..... **468.00**

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

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

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

FOR LINE NUMBER: PAGE 17 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Assisted Living Federation of America

Full Name (Last, First, Middle Initial)
A. Melanie Werdel

Mailing Address 7350 West Mercer Way

City State Zip Code
Mercer Island WA 98040

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

Name of Employer Occupation
Emeritus Senior Living Executive Vice President Administratio

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2013
Transaction ID : C2451958

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. Wendy Whitney

Mailing Address 904 Hollyfax Circle

City State Zip Code
Atlanta GA 30350-6248

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

Name of Employer Occupation
Emeritus - The Gardens at Sandy Spring Executive Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2013
Transaction ID : C2451945

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Wendy Whitney

Mailing Address 904 Hollyfax Circle

City State Zip Code
Atlanta GA 30350-6248

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

Name of Employer Occupation
Emeritus - The Gardens at Sandy Spring Executive Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2013
Transaction ID : C2451962

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

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

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

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

FOR LINE NUMBER: PAGE 18 OF 22
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Assisted Living Federation of America

A. Wendy Whitney
Full Name (Last, First, Middle Initial)
Mailing Address 904 Hollyfax Circle
City Atlanta State GA Zip Code 30350-6248
FEC ID number of contributing federal political committee. **C**
Name of Employer Emeritus - The Gardens at Sandy Spring Occupation Executive Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 22 / 2013
Transaction ID : C2451976
Amount of Each Receipt this Period 25.00

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	25.00
TOTAL This Period (last page this line number only).....▶	6807.00

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

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

FOR LINE NUMBER: PAGE 19 OF 22
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Assisted Living Federation of America

A. Assisted Living Federation of America
Full Name (Last, First, Middle Initial)
Mailing Address 1650 King St
Ste 602
City Alexandria State VA Zip Code 22314-2747
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
4207.49

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 30 / 2013
Transaction ID : C2461416
Amount of Each Receipt this Period
336.60
Reimbursement For Credit Card Fees

B. Assisted Living Federation of America
Full Name (Last, First, Middle Initial)
Mailing Address 1650 King St
Ste 602
City Alexandria State VA Zip Code 22314-2747
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
4207.49

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 30 / 2013
Transaction ID : C2486428
Amount of Each Receipt this Period
556.19
Reimbursement For Credit Card Fees

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	892.79
TOTAL This Period (last page this line number only).....▶	892.79

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Assisted Living Federation of America

Full Name (Last, First, Middle Initial)

A. SunTrust Bank

Mailing Address 1445 New York Ave NW

City Washington State DC Zip Code 20005-2134

Purpose of Disbursement
Credit Card Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 30 / 2013

Transaction ID : D150403

Amount of Each Disbursement this Period

369.83

Full Name (Last, First, Middle Initial)

B. SunTrust Bank

Mailing Address 1445 New York Ave NW

City Washington State DC Zip Code 20005-2134

Purpose of Disbursement
Credit Card Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2013

Transaction ID : D150404

Amount of Each Disbursement this Period

346.79

Full Name (Last, First, Middle Initial)

C. SunTrust Bank

Mailing Address 1445 New York Ave NW

City Washington State DC Zip Code 20005-2134

Purpose of Disbursement
Credit Card Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 30 / 2013

Transaction ID : D150413

Amount of Each Disbursement this Period

1.00

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

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

717.62

717.62

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Assisted Living Federation of America

Full Name (Last, First, Middle Initial)

A. EVERY REPUBLICAN IS CRUCIAL (ERICPAC)

Mailing Address 25 East Main Street, Suite 200

City Richmond State VA Zip Code 23219

Purpose of Disbursement
Contribution to FED committee

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 08 / 2013

Transaction ID : D148835

Amount of Each Disbursement this Period

5000.00

Category/
Type

Full Name (Last, First, Middle Initial)

B. MARKEY COMMITTEE, THE

Mailing Address PO Box 526

City Medford State MA Zip Code 02155

Purpose of Disbursement
Contribution to FED Committee

Candidate Name

Rep. Edward J. Markey

Office Sought: House Senate President

State: MA District: 07

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2013

Transaction ID : D148836

Amount of Each Disbursement this Period

2500.00

Category/
Type

Full Name (Last, First, Middle Initial)

C. KAPTUR FOR CONGRESS

Mailing Address P.O. Box 899

City Toledo State OH Zip Code 43697

Purpose of Disbursement
Contribution to FED Committee

Candidate Name

Rep. Marcy Kaptur

Office Sought: House Senate President

State: OH District: 09

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 28 / 2013

Transaction ID : D148906

Amount of Each Disbursement this Period

1000.00

Category/
Type

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

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

8500.00

**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)

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

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NAME OF COMMITTEE (In Full)
Assisted Living Federation of America

Full Name (Last, First, Middle Initial)

A. JEFF MERKLEY FOR OREGON

Mailing Address PO BOX 42307

City PORTLAND State OR Zip Code 97242

Purpose of Disbursement
Contribution to FED Committee

Candidate Name
Sen. Jeff Merkley

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: OR District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2013

Transaction ID : D148859

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF ROY BLUNT

Mailing Address PO BOX 10178

City COLUMBIA State MO Zip Code 65205

Purpose of Disbursement
Contribution to FED Committee

Candidate Name
Sen. Roy Blunt

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: MO District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2013

Transaction ID : D148858

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

6000.00

14500.00
