



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Advocat Inc. Political Action Committee**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>	<input type="text" value="35460.21"/>	<input type="text" value="35460.21"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="57342.65"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="16767.52"/>	<input type="text" value="38649.96"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="74110.17"/>	<input type="text" value="74110.17"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="35250.00"/>	<input type="text" value="35250.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="38860.17"/>	<input type="text" value="38860.17"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Advocat Inc. Political Action Committee**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	16717.24	36255.80
(ii) Unitemized .....	50.28	2394.16
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	16767.52	38649.96
(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) .....	16767.52	38649.96
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total 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))..... ▶	16767.52	38649.96
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	16767.52	38649.96

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	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.....	30000.00	30000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	5250.00	5250.00
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)) ..	35250.00	35250.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	35250.00	35250.00

**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) .....	16767.52	38649.96
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	16767.52	38649.96
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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN  
Transaction ID :

Samuel Wright, who itemizes twice on this report, changed his payroll deduction amount which is indicated below.

Form/Schedule:  
Transaction ID:

**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 7 OF 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

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

Mailing Address 84 Providence Ridge Rd

City Alexander City	State AL	Zip Code 35010-4923
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FEC ID number of contributing federal political committee. **C**

Name of Employer Diversicare Management Services	Occupation AI CQI Nurse
---	----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 20 / 2013**

**Transaction ID : A37C282C1EF7D4101BDA**

Amount of Each Receipt this Period  
**130.00**

Payroll Deduction: \$10.00/Bi-Weekly

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

Mailing Address 4381 Highway 7

City Bismarck	State AR	Zip Code 71929-7163
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **239.40**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 25 / 2013**

**Transaction ID : A866293E1C2C0475F8CC**

Amount of Each Receipt this Period  
**31.92**

Payroll Deduction: \$15.96/Bi-Weekly

Full Name (Last, First, Middle Initial)  
**c. Lisa L. Benning**

Mailing Address 4381 Highway 7

City Bismarck	State AR	Zip Code 71929-7163
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FEC ID number of contributing federal political committee. **C**

Name of Employer Diversicare Leasing Corporation	Occupation Admin Administrator-exemp
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **287.76**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 05 / 2013**

**Transaction ID : A45B8422B481145F688F**

Amount of Each Receipt this Period  
**48.36**

Payroll Deduction: \$16.12/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>210.28</b>
<b>TOTAL</b> 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 8 OF 26  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Mailing Address PO Box 16

City Bogata State TX Zip Code 75417-0016

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

Name of Employer Occupation  
Diversicare Leasing Corporation Admin Administrator-exemp

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **657.72**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 29 / 2013  
**Transaction ID : A216D60055A9541E88B0**

Amount of Each Receipt this Period  
 182.70

Payroll Deduction: \$36.54/Bi-Weekly

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

Mailing Address 3200 Highway 460 W

City West Liberty State KY Zip Code 41472-7450

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

Name of Employer Occupation  
Diversicare Leasing Corporation Admin Administrator-exemp

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 26 / 2013  
**Transaction ID : A7AED92D722AB41DAB4B**

Amount of Each Receipt this Period  
 120.00

Payroll Deduction: \$10.00/Bi-Weekly

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

Mailing Address 1017 Riverchase Rd SE

City Huntsville State AL Zip Code 35803-2327

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

Name of Employer Occupation  
Diversicare Leasing Corporation Admin Administrator-exemp

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **773.10**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2013  
**Transaction ID : A35234AB8FDF841A2960**

Amount of Each Receipt this Period  
 388.05

Payroll Deduction: \$29.85/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **690.75**

**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 9 OF 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Joseph A. Deans**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1030 Sunset Rd  
 City Brentwood State TN Zip Code 37027-8276  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Diversicare Management Services Occupation VP, Bd and Acquisition  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1349.92**

Date of Receipt **12 / 20 / 2013**  
**Transaction ID : A14E2811AAC1D4951836**  
 Amount of Each Receipt this Period **674.96**  
 Payroll Deduction: \$51.92/Bi-Weekly

**B. Edana Y. Duff**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 1650  
 City Mount Ida State AR Zip Code 71957-1650  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Diversicare Management Services Occupation DMS Clinical Support Mgr  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **825.50**

Date of Receipt **12 / 20 / 2013**  
**Transaction ID : A024B381B73E34A27BF0**  
 Amount of Each Receipt this Period **396.24**  
 Payroll Deduction: \$33.02/Bi-Weekly

**C. Kathi B. Duke**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 35 Barlow Rd  
 City Equality State AL Zip Code 36026-2765  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Diversicare Management Services Occupation Alabama CQI Director  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1003.48**

Date of Receipt **12 / 20 / 2013**  
**Transaction ID : A6E317005E7B648C5945**  
 Amount of Each Receipt this Period **501.93**  
 Payroll Deduction: \$38.61/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1573.13</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 26
	<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)  
**Advocat Inc. Political Action Committee**

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

Mailing Address 8609 Savage Br

City Catlettsburg State KY Zip Code 41129-8131

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

Name of Employer Diversicare Management Services Occupation Kentucky Marketing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **800.02**

Date of Receipt **12 / 20 / 2013**

**Transaction ID : A21FDAA219B934D8998D**

Amount of Each Receipt this Period **400.01**

Payroll Deduction: \$30.77/Bi-Weekly

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

Mailing Address 21634 Longwood

City San Antonio State TX Zip Code 78259-2128

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

Name of Employer Diversicare Management Services Occupation Texas Mds Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **630.48**

Date of Receipt **12 / 06 / 2013**

**Transaction ID : A697FA190A5AC43E3ACD**

Amount of Each Receipt this Period **288.97**

Payroll Deduction: \$26.27/Bi-Weekly

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

Mailing Address 377 Hutchens Rd

City Martin State TN Zip Code 38237-5377

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **664.93**

Date of Receipt **12 / 26 / 2013**

**Transaction ID : ACEF8FB35D283465BBBA**

Amount of Each Receipt this Period **320.04**

Payroll Deduction: \$26.67/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... **1009.02**

**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 26
	<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)  
**Advocat Inc. Political Action Committee**

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

Mailing Address 1621 Galleria Blvd

City Brentwood	State TN	Zip Code 37027-2926
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FEC ID number of contributing federal political committee. **C**

Name of Employer Diversicare Management Services	Occupation CEO/President
---	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4807.75

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	06	/	2013

**Transaction ID : ACB0A482DC89A4062970**

Amount of Each Receipt this Period  
2307.72

Payroll Deduction: \$192.31/Bi-Weekly

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

Mailing Address 1621 Galleria Blvd

City Brentwood	State TN	Zip Code 37027-2926
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FEC ID number of contributing federal political committee. **C**

Name of Employer Diversicare Management Services	Occupation CEO/President
---	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	20	/	2013

**Transaction ID : A5D67410E0F8C4028B13**

Amount of Each Receipt this Period  
192.25

Payroll Deduction: \$192.25/Bi-Weekly

**c. Joyce D. Griffith**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 62

City Grayson	State KY	Zip Code 41143-0062
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FEC ID number of contributing federal political committee. **C**

Name of Employer Diversicare Management Services	Occupation Kentucky Reboc
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1050.00

Date of Receipt  

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

**Transaction ID : A1F98DA803B9F4F99B6D**

Amount of Each Receipt this Period  
400.00

Payroll Deduction: \$50.00/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2899.97
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 26
	<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"/>	<input type="checkbox"/> 17

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

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

Mailing Address PO Box 62

City Grayson State KY Zip Code 41143-0062

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

Name of Employer Diversicare Management Services Occupation Kentucky Rebock

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1150.00**

Date of Receipt **12 / 20 / 2013**

**Transaction ID : A82F2CFD1586849CFABE**

Amount of Each Receipt this Period **100.00**

Payroll Deduction: \$20.00/Bi-Weekly

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

Mailing Address 6151 US Highway 278 E

City Gadsden State AL Zip Code 35903-7001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.25**

Date of Receipt **12 / 05 / 2013**

**Transaction ID : AA71D506C248545DFA59**

Amount of Each Receipt this Period **360.12**

Payroll Deduction: \$30.01/Bi-Weekly

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

Mailing Address 6151 US Highway 278 E

City Gadsden State AL Zip Code 35903-7001

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **780.56**

Date of Receipt **12 / 19 / 2013**

**Transaction ID : A195D8F0CB48D40FA980**

Amount of Each Receipt this Period **30.31**

Payroll Deduction: \$30.31/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... **490.43**

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

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

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

FOR LINE NUMBER: PAGE 13 OF 26  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Janice L. Horton**  
 Mailing Address 4527 SE Highway 70  
 City Arcadia State FL Zip Code 34266-7787  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Diversicare Leasing Corporation Admin Administrator-exemp  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 797.26

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 19 / 2013  
**Transaction ID : AB98CD863750F4CA7879**  
 Amount of Each Receipt this Period  
 399.23  
 Payroll Deduction: \$30.71/Bi-Weekly

Full Name (Last, First, Middle Initial)  
**B. Vicki L. Hughes**  
 Mailing Address 134 Polk 617  
 City Mena State AR Zip Code 71953-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Diversicare Leasing Corporation Admin Administrator-exemp  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 548.82

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 05 / 2013  
**Transaction ID : A8ABC4F778F664E98BEE**  
 Amount of Each Receipt this Period  
 152.45  
 Payroll Deduction: \$30.49/Bi-Weekly

Full Name (Last, First, Middle Initial)  
**C. Rory L. Jones**  
 Mailing Address 1725 Vp Lunn Dr  
 City Spring Hill State TN Zip Code 37174-5503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Diversicare Management Services VP Purchasing & Property  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 484.68

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 11 / 2013  
**Transaction ID : A5718661A7FA64556B34**  
 Amount of Each Receipt this Period  
 184.64  
 Payroll Deduction: \$23.08/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 736.32  
**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 26  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

Full Name (Last, First, Middle Initial)  
**A. Thomas Killingsworth**  
 Mailing Address 2667 Vista Del Arroyo Dr  
 City State Zip Code  
 San Angelo TX 76904-6212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Diversicare Leasing Corporation Admin Administrator-exemp  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 849.94

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2013  
**Transaction ID : AF0DF290126714716887**  
 Amount of Each Receipt this Period  
 424.97  
 Payroll Deduction: \$32.69/Bi-Weekly

Full Name (Last, First, Middle Initial)  
**B. Randi M. Kiphen**  
 Mailing Address 10880 Gallia Pike Rd  
 City State Zip Code  
 Wheelersburg OH 45694-8443  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Diversicare Leasing Corporation Admin Administrator-exemp  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 960.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 26 / 2013  
**Transaction ID : A28714EC8AA534980A0D**  
 Amount of Each Receipt this Period  
 460.80  
 Payroll Deduction: \$38.40/Bi-Weekly

Full Name (Last, First, Middle Initial)  
**C. Robin R. LeBlanc**  
 Mailing Address 7030 Fountain Lilly Dr  
 City State Zip Code  
 Humble TX 77346-3355  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Diversicare Management Services Director, Case Management  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2013  
**Transaction ID : A3F2BC8982AFA433B88B**  
 Amount of Each Receipt this Period  
 130.00  
 Payroll Deduction: \$10.00/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ► 1015.77  
**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 26  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

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

Mailing Address PO Box 1813

City State Zip Code  
Olive Hill KY 41164-1813

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

Name of Employer Occupation  
Diversicare Management Services Kentucky Cqi

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
950.56

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2013  
**Transaction ID : A9F12238546AD4C2FAAB**

Amount of Each Receipt this Period  
475.28

Payroll Deduction: \$36.56/Bi-Weekly

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

Mailing Address 1339 Buckingham Cir

City State Zip Code  
Franklin TN 37064-5420

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

Name of Employer Occupation  
Diversicare Management Services VP Quality Management

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
986.10

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2013  
**Transaction ID : A932566669D0F48358AA**

Amount of Each Receipt this Period  
131.48

Payroll Deduction: \$65.74/Bi-Weekly

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

Mailing Address 921 Charmont Dr

City State Zip Code  
Charleston AR 72933-9083

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

Name of Employer Occupation  
Diversicare Management Services Arkansas Director Ops

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
721.04

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2013  
**Transaction ID : A670A71D697BD49DABD6**

Amount of Each Receipt this Period  
400.01

Payroll Deduction: \$30.77/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1006.77

**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 26
	<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)  
**Advocat Inc. Political Action Committee**

**A. Christina McClung**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 476  
 City Mammoth Spring State AR Zip Code 72554-0476  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Diversicare Leasing Corporation Occupation Nursing Admin Don-exempt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 217.44

Date of Receipt 09 / 05 / 2013  
**Transaction ID : A83AAFF27396F4D2094F**  
 Amount of Each Receipt this Period 60.40  
 Payroll Deduction: \$12.08/Bi-Weekly

**B. Linda McKay**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20177 Lakeside Dr  
 City Porter State TX Zip Code 77365-3207  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Diversicare Management Services Occupation DMS Clinical Support Mgr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 480.75

Date of Receipt 12 / 20 / 2013  
**Transaction ID : AE97BE30A5D354E8A9A2**  
 Amount of Each Receipt this Period 230.76  
 Payroll Deduction: \$19.23/Bi-Weekly

**C. James R. McKnight Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1621 Galleria Blvd  
 City Brentwood State TN Zip Code 37027-2926  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Advocat, Inc. Occupation CFO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1990.42

Date of Receipt 12 / 20 / 2013  
**Transaction ID : AB593758BAF014FCD94A**  
 Amount of Each Receipt this Period 1125.02  
 Payroll Deduction: \$86.54/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1416.18
<b>TOTAL</b> 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 26
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Wanda C. Meade**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3728 State Route 3  
City Catlettsburg State KY Zip Code 41129-9340  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Diversicare Management Services Occupation Kentucky Rvp  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1799.98

Date of Receipt 12 / 20 / 2013  
**Transaction ID : AC745A4F37753423F80A**  
Amount of Each Receipt this Period 899.99  
Payroll Deduction: \$69.23/Bi-Weekly

**B. Glenda Nelson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2600 Cole Ave Apt 112  
City Dallas State TX Zip Code 75204-4040  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Diversicare Management Services Occupation Texas CQI Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 537.42

Date of Receipt 12 / 20 / 2013  
**Transaction ID : A17D8900E08424F6C9D8**  
Amount of Each Receipt this Period 268.71  
Payroll Deduction: \$20.67/Bi-Weekly

**C. Treieva Oakley**  
Full Name (Last, First, Middle Initial)  
Mailing Address 901 Camellia Rd  
City Oneonta State AL Zip Code 35121-1902  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Diversicare Management Services Occupation DMS Training Coordinator  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 808.08

Date of Receipt 12 / 20 / 2013  
**Transaction ID : A3F79BD478BA14AE8B1D**  
Amount of Each Receipt this Period 404.04  
Payroll Deduction: \$31.08/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1572.74  
**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 18 OF 26
	<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	<input type="checkbox"/> 17

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

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

Mailing Address 5383 Southern Blvd  
Apt 176

City Dallas State TX Zip Code 75240-7389

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

Name of Employer Diversicare Management Services Occupation Texas Case Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **689.52**

Date of Receipt **12 / 20 / 2013**

**Transaction ID : A1E32A1E2B2F247008E4**

Amount of Each Receipt this Period **344.76**

Payroll Deduction: \$26.52/Bi-Weekly

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

Mailing Address 391 Laurel Ave

City Ashland State KY Zip Code 41101-7250

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

Name of Employer Diversicare Leasing Corporation Occupation Admin Administrator-exemp

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **596.05**

Date of Receipt **10 / 17 / 2013**

**Transaction ID : A7D246E3D25DE4C478C3**

Amount of Each Receipt this Period **228.24**

Payroll Deduction: \$28.53/Bi-Weekly

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

Mailing Address 3055 Michele Dr

City Mobile State AL Zip Code 36605-4462

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

Name of Employer Diversicare Leasing Corporation Occupation Admin Administrator-exemp

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **715.35**

Date of Receipt **09 / 12 / 2013**

**Transaction ID : A0C06F18BB41948BD9FE**

Amount of Each Receipt this Period **225.90**

Payroll Deduction: \$37.65/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... **798.90**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 OF 26
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Laura A. Saxon**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3055 Michele Dr  
City State Zip Code  
Mobile AL 36605-4462  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Diversicare Leasing Corporation Admin Administrator-exemp  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
**981.49**

Date of Receipt  
**12 / 19 / 2013**  
**Transaction ID : AF913DCE1B82C47BDA6E**  
Amount of Each Receipt this Period  
**266.14**  
Payroll Deduction: \$38.02/Bi-Weekly

**B. Trescha A. Snyder**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1124 Craig Rd  
City State Zip Code  
Knoxville TN 37919-8238  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Diversicare Management Services Director, Dietary Service  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
**1133.34**

Date of Receipt  
**12 / 20 / 2013**  
**Transaction ID : A36DA197972F44D56970**  
Amount of Each Receipt this Period  
**566.67**  
Payroll Deduction: \$43.59/Bi-Weekly

**C. Kathie Sullivan**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2469 Ar 115  
City State Zip Code  
Smithville AR 72466-0000  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Diversicare Management Services Arkansas Cqi Director  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
**529.28**

Date of Receipt  
**08 / 02 / 2013**  
**Transaction ID : AC37F949F5AEF485DA18**  
Amount of Each Receipt this Period  
**99.24**  
Payroll Deduction: \$33.08/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... **932.05**  
**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 20 OF 26
	<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)  
**Advocat Inc. Political Action Committee**

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

Mailing Address 2149 W Highway 84

City Amity State AR Zip Code 71921-8640

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

Name of Employer Diversicare Management Services Occupation Arkansas Marketing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **08 / 02 / 2013**

**Transaction ID : A826E1702EEDC4DB78DC**

Amount of Each Receipt this Period **75.00**

Payroll Deduction: \$25.00/Bi-Weekly

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

Mailing Address 410 Patton Cv

City Bastrop State TX Zip Code 78602-6641

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

Name of Employer Diversicare Leasing Corporation Occupation Admin Administrator-exemp

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **684.60**

Date of Receipt **10 / 01 / 2013**

**Transaction ID : AAE7874ED50B04D57855**

Amount of Each Receipt this Period **239.61**

Payroll Deduction: \$34.23/Bi-Weekly

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

Mailing Address 575 3rd St NE

City Bogata State TX Zip Code 75417-5209

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **828.10**

Date of Receipt **12 / 19 / 2013**

**Transaction ID : A2F761F9E54494E94A27**

Amount of Each Receipt this Period **414.05**

Payroll Deduction: \$31.85/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... **728.66**

**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 21 OF 26
	<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)  
**Advocat Inc. Political Action Committee**

**A. Matthew J. Weishaar**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1621 Galleria Blvd  
 City Brentwood State TN Zip Code 37027-2926  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Diversicare Management Services Occupation VP Finance & Controller  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1603.94**

Date of Receipt **12 / 20 / 2013**  
**Transaction ID : A60705C548E894482B8B**  
 Amount of Each Receipt this Period **801.97**  
 Payroll Deduction: \$61.69/Bi-Weekly

**B. Brenda L. Wimsatt**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6216 Palomar Ct  
 City Nashville State TN Zip Code 37211-7482  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Diversicare Management Services Occupation Director of Corp Affairs  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **260.00**

Date of Receipt **12 / 20 / 2013**  
**Transaction ID : A95BCE620591B4E4B814**  
 Amount of Each Receipt this Period **130.00**  
 Payroll Deduction: \$10.00/Bi-Weekly

**c. Chyra D. Worthington**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1723 Royal Oaks Dr  
 City Malvern State AR Zip Code 72104-5752  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Diversicare Leasing Corporation Occupation Admin Administrator-exemp  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **544.98**

Date of Receipt **09 / 05 / 2013**  
**Transaction ID : A8321E1472F2C4C93A99**  
 Amount of Each Receipt this Period **151.55**  
 Payroll Deduction: \$30.31/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1083.52</b>
<b>TOTAL</b> 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 22 OF 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

**A. Samuel R. Wright II**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7863 Highway 828

City Louisa	State KY	Zip Code 41230-5525
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **670.89**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 18 / 2013**

**Transaction ID : A53FB873045FA4C93A5B**

Amount of Each Receipt this Period  
**211.86**

Payroll Deduction: \$35.31/Bi-Weekly

**B. Samuel R. Wright II**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7863 Highway 828

City Louisa	State KY	Zip Code 41230-5525
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **884.85**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 24 / 2013**

**Transaction ID : AFBC56DA381BF4DCB945**

Amount of Each Receipt this Period  
**213.96**

Payroll Deduction: \$35.66/Bi-Weekly

**C. Sarah J. Wright**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1193 Midway Rd

City Hoxie	State AR	Zip Code 72433-9013
---------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **589.97**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 02 / 2013**

**Transaction ID : A9D6123120C824901855**

Amount of Each Receipt this Period  
**126.93**

Payroll Deduction: \$42.31/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>552.75</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>16717.24</b>

**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)  
**Advocat Inc. Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. AMERICAN HEALTH CARE ASSOCIATION POLITICAL ACTION COMMITTEE**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			12			2013			

Mailing Address 1201 L STREET, NW

**Transaction ID : B8C401CA3088F4A33B48**

City State Zip Code  
WASHINGTON DC 20005

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement  
Political Contribution

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2013  
 Primary  General  
 Other (specify) ▼

State: District: Other2013

Full Name (Last, First, Middle Initial)

**B. Boehner for Speaker Committee**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
07			08			2013			

Mailing Address 631-B Pennsylvania Ave SE

**Transaction ID : B3ED61128C59F4EE28CB**

City State Zip Code  
Washington DC 20003

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement  
Political Contribution

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Boehner for Speaker Committee**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
07			08			2013			

Mailing Address 631-B Pennsylvania Ave SE

**Transaction ID : B24A7BF4602824F2EA1B**

City State Zip Code  
Washington DC 20003

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement  
Political Contribution

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

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

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

15000.00
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**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)  
**Advocat Inc. Political Action Committee**

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  
Political Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2013  
 Primary  General  
 Other (specify) ▼  
Other2013

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			12			2013			

**Transaction ID : B23723EC75E704FC1A8F**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**B. Friends For Harry Reid**

Mailing Address 426 C Street, NE, Rear Building

City Washington State DC Zip Code 20002-5840

Purpose of Disbursement  
NV US Senate

Candidate Name

**Sen. Harry Reid**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			12			2013			

**Transaction ID : B94F78704C03C47A3B8B**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**C. THE FREEDOM PROJECT**

Mailing Address 320 1ST STREET SE

City Washington State DC Zip Code 20003-1838

Purpose of Disbursement  
Political Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2013  
 Primary  General  
 Other (specify) ▼  
Other2013

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
07			08			2013			

**Transaction ID : B6C7ECAD220804CD0A21**

Amount of Each Disbursement this Period

5000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

15000.00
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**TOTAL** This Period (last page this line number only)..... ▶

30000.00
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**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

**A. Jimmy Higdon for State Senate**

Mailing Address 344 North Spalding

City Lebanon State KY Zip Code 40033-1563

Purpose of Disbursement  
Political Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2013

Transaction ID : **BB612AAA975004115B55**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Joe Bowen for State Senate**

Mailing Address 2031 Fieldcrest Drive

City Owensboro State KY Zip Code 42301-4318

Purpose of Disbursement  
Political Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2013

Transaction ID : **BB7C54C1AA2D041A981D**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. KENTUCKY SENATE REPUBLICAN CAUCUS CAMPAIGN CMTE**

Mailing Address P.O. BOX 1068

City FRANKFORT State KY Zip Code 40604

Purpose of Disbursement  
Political Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2013  
 Primary  General  
 Other (specify) ▼

State: District: Other2013

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2013

Transaction ID : **BE8154951EE774207871**

Amount of Each Disbursement this Period

2500.00

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

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

4000.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

**A. Representative Jill York Campaign**

Mailing Address P.O. Box 591

City Grayson State KY Zip Code 41143

Purpose of Disbursement  
Political Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 26 / 2013

Transaction ID : B9032C7AB8B5B4F01B65

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Representative Tanya Pullin Campaign**

Mailing Address 1026 Johnson Lane

City South Shore State KY Zip Code 41175

Purpose of Disbursement  
Political Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 23 / 2013

Transaction ID : BADD0DE8F3E334A4997C

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Steve Riggs for State Representative**

Mailing Address Post Office Box 24586

City Louisville State KY Zip Code 40224-0586

Purpose of Disbursement  
Political Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 24 / 2013

Transaction ID : B1AB48A1B9B224BB78C2

Amount of Each Disbursement this Period

500.00

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

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

1250.00

5250.00