FEC FORM 3X	AN	PORT O D DISBU Other Than An	RSEM	ENTS	ee		Office Use Only	
1. NAME OF COMMITTEE (in f		FEC MAILING LA YPE OR PRINT 👻		ample:If typing er the lines	, type			
	al Action Commi	ittee						· · · · · · · ·
ADDRESS (number and	street)	21 Galleria Blvd						
Check if different than previous reported. (AC	y Br	rentwood					37027	
2. FEC IDENTIFICA	ION NUMBER	▼	CITY 🛋		S	STATE	ZIPCOL)e 🔺
C00421735	• • • •]	3. IS THIS REPORT		NEW N) OR	AM (A)	ENDED	
July 15 Quarterly October Quarterly January Quarterly July 31 M Report(N Year Onl	orts: Report(Q1) Report(Q2) 15 Report(Q3) 31 Report(YE) Iid-Year on-election	(d) 30-Day Post -Elec Report for t	the:		12C)	Sep 2	2G) in the State o	Special (30S)
5. Covering Period I certify that I have exam Type or Print Name of T Signature of Treasurer NOTE : Submission of	reasurer <u>W</u> Electronically	Villiam R. Council I Filed by William	my knowledge II R. Council III		D	ate 01		2 0 1 0 S.C 437g.
Office Use Only							FEC FOR (Rev. 12/200	

Image# 10930260688

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Write or Type Committee Name Advocat Inc. Political Action Committee D D ΥΨ ММ D м M D 07 01 2009 12 31 2009 From: Report Covering the Period: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 6. 20⁰09[°] Υ 7017.93 January 1 (b) Cash on Hand at 4430.51 Begining of Reporting Period 29342.20 56754.78 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 33772.71 63772.71 6(a) and 6(c) for Column B) 29000.00 59000.00 Total Disbursements (from Line 31) 7. Cash on Hand at Close of 8. **Reporting Period** 4772.71 4772.71 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed то the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed ΒY the committee (Itemize all on 0.00 Schedule C and/or Schedule D)

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

For further information contact:

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

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

FE6AN026

Image# 10930260689

DETAILED SUMMARY PAGE OF RECEIPTS

3 / 240

FEC Form 3X (Rev. 06/2004)	3 / 240	
Write or Type Committee Name Advocat Inc. Political Action Committee		
Report Covering the Period: From:	D D Y Y W Y 01 2009	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)	27460.37	43225.40
(ii) Unitemized	881.83	12529.38
(iii) TOTAL (add Lines 11(a)(i) and (ii) 🕨	28342.20	55754.78
(b) Political Party Committees	0.00	0.00
 (c) Other Political Committees (such as PACs) (d) Total Contributions (add Lines 	0.00	0.00
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ►	28342.20	55754.78
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
 Loan Repayments Received Offsets To Operating Expenditures 	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
to Federal candidates and Other Political Committees	1000.00	1000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	29342.20	56754.78
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	29342.20	56754.78

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DETAILED SUMMARY PAGE

of Disbursements

4 / 240

FEC Form 3X (Rev. 02/2003)	of Disbursements	4 / 240 COLUMN B Calendar Year-to-Date		
II. DISBURSEMENTS	COLUMN A Total This Period			
1. Operating Expenditures: (a) Shared Federal/Non-Federal				
(a) Shared Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating Expenditures	0.00	0.00		
 (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) 	0.00	0.00		
2. Transfers to Affiliated/Other Party Committees	0.00	0.00		
3. Contributions to Federal Candidates/Committees and Other Political Committees	26500.00	56500.00		
 Independent Expenditure (use Schedule E) 	0.00	0.00		
5. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00		
6. Loan Repayments Made	0.00	0.00		
7. Loans Made	0.00	0.00		
 Refunds of Contributions To: (a) Individuals/Persons Other 	0.00	0.00		
Than Political Committees	0.00	0.00		
(c) Other Political Committees	0.00	0.00		
(such as PACs) (d) Total Contribution Refunds	0.00	0.00		
(add Lines 28(a), (b), and (c)) 🕨				
9. Other Disbursements	2500.00	2500.00		
Federal Election Activity (2 U.S.C 431(20))(a) Shared Federal Election Activity				
(from Schedule H6) (i) Federal Share	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00		
1. Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	29000.00	59000.00		
 Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) 				
from Line 31)	29000.00	59000.00		

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DETAILED SUMMARY PAGE

of Disbursements FEC Form 3X (Rev. 02/2003)

5 / 240

	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)	28342.20	55754.78
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	28342.20	55754.78
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
7.	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

FE6AN026

Π	CHEDULE A (FEC Form 3X EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 240 (check only one)
	ny information copied from such Reports and for commercial purposes, other than using NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	the name and ad	ay not be sold or used by any pers Idress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) David T. Barker Mailing Address 4512 Austin Drive			Date of Receipt
				07 10 2009
	City North Little Rock	State AR	Zip Code	Transaction ID: AC1A53EC9537640B18
	FEC ID number of contributing federal political committee.	C	72116-7018	Amount of Each Receipt this Period
	Name of Employer Diversicare Management Se- rvices	Occupatio Arkansa		_
	Receipt For:	Aggregat	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	704.99	
	Full Name (Last, First, Middle Initial) David T. Barker			Date of Receipt
	Mailing Address 4512 Austin Drive			07 / ^D D / <u>Y</u> Y Y 24 2009
	City	State	Zip Code	Transaction ID: AB9E6ADDBEEF443698
	North Little Rock	AR	72116-7018	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		54.23
	Name of Employer Diversicare Management Se- rvices	Occupatio Arkansa	s Rvp	
	Receipt For: Primary General Other (specify) ▼	Aggregat	e Year-to-Date ▼ 759.22	
	Full Name (Last, First, Middle Initial) David T. Barker			Date of Receipt
	Mailing Address 4512 Austin Drive			0 8 0 7 2 0 0 9
	City	State	Zip Code	Transaction ID: A57B6DFBB3CBA4F2A
	North Little Rock	AR	72116-7018	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		54.23
	Name of Employer Diversicare Management Se- rvices	Occupatio Arkansa	s Rvp	
	Receipt For: Primary General Other (specify) ▼	Aggregat	e Year-to-Date ▼ 813.45	
[UBTOTAL of Receipts This Page (optional	I		162.69

	SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 240 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	d Statements may not be sold or used by any pers the name and address of any political committee t ittee	son for the purpose of soliciting contributions
Z A.	Full Name (Last, First, Middle Initial) David T. Barker Mailing Address 4512 Austin Drive		Date of Receipt
	City	State Zip Code	Transaction ID: A99E255FF4D394D2BA3A
	North Little Rock FEC ID number of contributing federal political committee.	AR 72116-7018	Amount of Each Receipt this Period 54.23
	Name of Employer Diversicare Management Se- rvices Receipt For: Primary General Other (specify)	Occupation Arkansas Rvp Aggregate Year-to-Date ▼ 867.68	
– B.	Full Name (Last, First, Middle Initial) David T. Barker Mailing Address 4512 Austin Drive		Date of Receipt
	City	State Zip Code	0 9 0 4 2 0 0 9 Transaction ID: A9C23DE4FE6C44EE28B4
	North Little Rock	AR 72116-7018	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	54.23
	Name of Employer Diversicare Management Se- rvices	Occupation Arkansas Rvp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 921.91	
– C.	Full Name (Last, First, Middle Initial) David T. Barker		Date of Receipt
	Mailing Address 4512 Austin Drive		09 / D D / Y Y Y Y 09 18 2009
	City	State Zip Code	Transaction ID: A08BF27FA321045D295E
	North Little Rock FEC ID number of contributing federal political committee.	AR 72116-7018	Amount of Each Receipt this Period 54.23
	Name of Employer Diversicare Management Se- rvices	Occupation Arkansas Rvp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 976.14	
Γ	SUBTOTAL of Receipts This Page (optional)	162.69

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8/2 (check only one) 11a 11b 11c 12 13 14 15 16	2
	ny information copied from such Reports and r for commercial purposes, other than using the	Statements may	/ not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contribution	ns
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commit	tee			
. Ľ	Full Name (Last, First, Middle Initial) David T. Barker			Date of Receipt	
	Mailing Address 4512 Austin Drive			10 02 200	
	City	State	Zip Code	Transaction ID: A54BB8DAC24	4B14D50
	North Little Rock	AR	72116-7018	Amount of Each Receipt this Perio	d
	FEC ID number of contributing federal political committee.	C		54.2	23
	Name of Employer Diversicare Management Se- rvices	Occupatio Arkansas			
	Receipt For:	Aggregate	Year-to-Date		
	Primary General Other (specify) ▼	0 0	1030.37]	
	Full Name (Last, First, Middle Initial) David T. Barker			Date of Receipt	
	Mailing Address 4512 Austin Drive			M M / D D / Y Y Y 10 16 200	
	City	State	Zip Code	Transaction ID: A08172D98A5	064B3D8
	North Little Rock	AR	72116-7018	Amount of Each Receipt this Perio	d
	FEC ID number of contributing federal political committee.	C		54.:	23
	Name of Employer Diversicare Management Se-	Occupatio			
	rvices Receipt For:	Arkansas	Year-to-Date V		
	Primary General Other (specify) ▼		1084.60]	
	Full Name (Last, First, Middle Initial) David T. Barker			Date of Receipt	
	Mailing Address 4512 Austin Drive			M M / D D / Y Y Y 10 30 200	
	City	State	Zip Code	Transaction ID: AAAF56B63E1	
	North Little Rock	AR	72116-7018	Amount of Each Receipt this Perio	d
	FEC ID number of contributing federal political committee.	C		54.:	23
	Name of Employer Diversicare Management Se- rvices	Occupatio Arkansas	s Rvp		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1138.83]	
	SUBTOTAL of Receipts This Page (optional)	1		162.0	<u> </u>

SCHEDULE A (FEC Form			Use separate for each cate			DR LINE	-		R:	PAC	GE 9	9 / 24	<u>)</u>	
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	NAME OF COMMITTEE (In Full)													
\mathbb{Z}		ee												
	Full Name (Last, First, Middle Initial) David T. Barker					Date of	f Re	ceipt						
	Mailing Address 4512 Austin Drive					м м 11	/	D 1	D 3	/ Y		0 0 9		
	City	State	Zip Code			Transa	ctio	_		10AA				5F6
	North Little Rock	AR	72116-7018	8		Amour	nt of	Each	Rec	eipt th	is P	eriod		
	FEC ID number of contributing federal political committee.	C									į	54.23	;	
	Name of Employer Diversicare Management Se-	Occupatio												
	rvices Receipt For:	Arkansa	s Rvp e Year-to-Date ▼	,	_									
	Primary General	Aggregat		1 1 1 1										
	Other (specify)	0 0	0 0 0 0	1193.06										
	Full Name (Last, First, Middle Initial) David T. Barker					Date of	f Re	ceipt						
	Mailing Address 4512 Austin Drive					M M	_	D	D 7	/ Y		Y 0 0 9		
	City	State	Zip Code			Transa	ctio			7508				170
	North Little Rock	AR	72116-7018	8		Amour								
	FEC ID number of contributing federal political committee.	C		0 0				1			Į	54.23	;	
	Name of Employer Diversicare Management Se-	Occupatio												
	rvices Receipt For:	Arkansa	s Rvp e Year-to-Date ▼	,										
	Primary General Other (specify) ▼	Aggregate	e rear-io-Dale •	1247.29	1									
	Full Name (Last, First, Middle Initial)				-									
	David T. Barker					Date of	f Re	ceipt						
	Mailing Address 4512 Austin Drive					^м 1 2	/		D 1	/ Y	ү 2	0 0 S	y	
	City	State	Zip Code			Transa	ctio	n ID:	A5	2312/	4C8	DAB	34	E59
	North Little Rock	AR	72116-7018	8		Amour	nt of	Each	Rec	eipt th	is P	eriod	_	
	FEC ID number of contributing federal political committee.	C		1							Į	54.23	;	
	Name of Employer Diversicare Management Se-	Occupatio												
	rvices Receipt For:	Arkansa	s Rvp e Year-to-Date ▼	,	-									
	Primary General Other (specify) ▼			1301.52										
	SUBTOTAL of Receipts This Page (optional) .				 ▶						16	62.69)	
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	TOTAL This Period (last page this line number	()(i)(y)												

SCHEDULE A (FEC Form 3X		FOR LINE NUMBER: PAGE 10 / 240 (check only one)							
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$							
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any pers the name and address of any political committee t	son for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commi	ittee								
Full Name (Last, First, Middle Initial) David T. Barker		Date of Receipt							
Mailing Address 4512 Austin Drive		12 24 2009							
City	State Zip Code	Transaction ID: AE60AB52A436146558							
North Little Rock	AR 72116-7018	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C	54.23							
Name of Employer Diversicare Management Se-	Occupation Arkansas Rvp								
<u>rvices</u> Receipt For:	Aggregate Year-to-Date V								
Primary General Other (specify) ▼	1355.75								
Full Name (Last, First, Middle Initial) Wendy Bell		Date of Receipt							
Mailing Address 2615 White Moon D	r	M M / D D / Y							
City	State Zip Code	Transaction ID: A309A02BE9EC84001A							
Harker Heights	TX 76548-2810	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C	29.20							
Name of Employer Diversicare Leasing Corpo- ration	Occupation Admin Administrator-exemp								
Receipt For:	Aggregate Year-to-Date ▼								
Other (specify)	408.80								
Full Name (Last, First, Middle Initial) Barry C. Bell		Date of Receipt							
Mailing Address 6107 Co Rd 122		07 10 Y Y Y Y 2009							
City Pisgah	State Zip Code AL 35765-9371	Transaction ID: A3AA8ECF9BB7E423E							
FEC ID number of contributing	AL 35765-9371	Amount of Each Receipt this Period 40.50							
federal political committee.	Occupation								
Name of Employer Diversicare Management Se- rvices	AL/TN Executive Director								
Receipt For: Primary General	Aggregate Year-to-Date	-							
Other (specify)	510.90								
SUBTOTAL of Receipts This Page (optional))	123.93							
TOTAL This Period (last page this line numb		•							

	Detailed Summary Page	X 11a 11b 11c 12
Any information copied from such Reports ar	nd Statements may not be sold or used by any per-	13 14 15 16 17
NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm		to solicit contributions from such committee.
, Full Name (Last, First, Middle Initial) Wendy Bell		Date of Receipt
Mailing Address 2615 White Moon I	Dr	M M / D D / Y Y Y Y 07 23 2009
City	State Zip Code	Transaction ID: A08ED7C90D92E4ED8
Harker Heights	TX 76548-2810	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	29.20
Name of Employer Diversicare Leasing Corpo-	Occupation	
ration	Admin Administrator-exemp	
Receipt For: Primary General	Aggregate Year-to-Date ▼	-1
Other (specify) ▼	438.00	
Full Name (Last, First, Middle Initial) Barry C. Bell		Date of Receipt
Mailing Address 6107 Co Rd 122		M M / D D / Y Y Y Y 07 24 2009
City	State Zip Code	Transaction ID: AB7E016166A8F49BB8
Pisgah	AL 35765-9371	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		40.50
Name of Employer Diversicare Management Se-	Occupation	
rvices Receipt For:	AL/TN Executive Director	
Primary General Other (specify)	551.40	
Full Name (Last, First, Middle Initial) Wendy Bell		Date of Receipt
Mailing Address 2615 White Moon I	Dr	08 06 Y Y Y Y 08 06 2009
City	State Zip Code	Transaction ID: A4583139011B84F1CA
Harker Heights	TX 76548-2810	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		29.20
Name of Employer Diversicare Leasing Corpo- ration	Occupation Admin Administrator-exemp	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	467.20	
SUBTOTAL of Receipts This Page (optiona	۱	98.90
ODIVIAL OF RECEIPTS THIS FAGE (OPTIONAL	,	

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 x 10 11 11b 17 12			
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any pers the name and address of any political committee t	13 14 15 16 17 son for the purpose of soliciting contributions to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commi	ittee				
Full Name (Last, First, Middle Initial) Barry C. Bell		Date of Receipt			
Mailing Address 6107 Co Rd 122		0 8 0 7 Y Y Y Y 0 8 0 7 2 0 0 9			
City	State Zip Code	Transaction ID: A7B27ADCEB9C840D49			
<u>Pisgah</u>	AL 35765-9371	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	40.50			
Name of Employer Diversicare Management Se- rvices	Occupation AL/TN Executive Director				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General Other (specify)	591.90				
Full Name (Last, First, Middle Initial) Wendy Bell		Date of Receipt			
Mailing Address 2615 White Moon D	r	M M / D D / Y Y Y Y 08 20 2009			
City	State Zip Code	Transaction ID: A43904D50CB48446E9			
Harker Heights	TX 76548-2810	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	29.20			
Name of Employer Diversicare Leasing Corpo-	Occupation Admin Administrator-exemp				
ration Receipt For:	Aggregate Year-to-Date V				
Primary General Other (specify) ▼	496.40				
Full Name (Last, First, Middle Initial) Barry C. Bell					
Mailing Address 6107 Co Rd 122		0 8 / D D / Y Y Y Y 0 8 2 1 2 0 0 9			
City	State Zip Code	Transaction ID: A5F9DAB364E614E0EA			
Pisgah	AL 35765-9371	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	40.50			
Name of Employer Diversicare Management Se- rvices	Occupation AL/TN Executive Director				
Receipt For:	Aggregate Year-to-Date ▼	-1			
Primary General Other (specify)	632.40				
SUBTOTAL of Receipts This Page (optional)	110.20			
TOTAL This Period (last page this line numb	·				

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13/240 (check only one)
	Any information copied from such Reports and 5 or for commercial purposes, other than using th NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committ	Statements may not be sold or used by any pers e name and address of any political committee t ee	son for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A.	Full Name (Last, First, Middle Initial) Wendy Bell Mailing Address 2615 White Moon Dr		Date of Receipt
	0.1		09 03 2009
	City Harker Heights	State Zip Code TX 76548-2810	Transaction ID: A485CCA4B30F24FEA9C
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
	Name of Employer Diversicare Leasing Corpo- ration Receipt For:	Occupation Admin Administrator-exemp Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	S25.60	
- В.	Full Name (Last, First, Middle Initial) Barry C. Bell Mailing Address 6107 Co Rd 122		Date of Receipt
			09 04 2009
	City	State Zip Code	Transaction ID: ACA012D164FC44AE1A6
	<u>Pisgah</u>	AL 35765-9371	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.50
	Name of Employer Diversicare Management Se-	Occupation AL/TN Executive Director	
	rvices Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 672.90	7
– C.	Full Name (Last, First, Middle Initial) Wendy Bell		Date of Receipt
0.	Mailing Address 2615 White Moon Dr		M M / D D / Y
	City	State Zip Code	Transaction ID: AC2862DD841DD40B8AE
	Harker Heights	TX 76548-2810	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		29.20
	Name of Employer Diversicare Leasing Corpo-	Occupation Admin Administrator-exemp	
	ration Receipt For:	Aggregate Year-to-Date V	
	Primary General Other (specify) ▼	554.80	
ſ	SUBTOTAL of Receipts This Page (optional) .	-	98.90
F	TOTAL This Period (last page this line numbe	r only)	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	for each category of the	FOR LINE NUMBER: PAGE 14/240 (check only one) 112
	Detailed Summary Page	A Ha Hb Hc H2 13 14 15 16 17
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may not be sold or used by any per the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	ittee	
Full Name (Last, First, Middle Initial) Barry C. Bell		Date of Receipt
Mailing Address 6107 Co Rd 122		0 9 1 8 2 0 0 9
City	State Zip Code	Transaction ID: A9708B3C1F329412E89
Pisgah	AL 35765-9371	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.50
Name of Employer Diversicare Management Se- rvices	Occupation AL/TN Executive Director	
Receipt For:	Aggregate Year-to-Date ▼	
Other (specify)	713.40	
Full Name (Last, First, Middle Initial) Barry C. Bell		Date of Receipt
Mailing Address 6107 Co Rd 122		10 ^{//} 02 [/] 2009
City	State Zip Code	Transaction ID: ADDEEFBE16EB54590B
<u>Pisgah</u>	AL 35765-9371	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.50
Name of Employer Diversicare Management Se- rvices	Occupation AL/TN Executive Director	
Receipt For:	Aggregate Year-to-Date ▼	
Other (specify)	753.90	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 2615 White Moon D)r	10 [/] 15 [/] 2009
City	State Zip Code	Transaction ID: AF9576E7DB5844B878F
Harker Heights	TX 76548-2810	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		29.20
Name of Employer Diversicare Leasing Corpo-	Occupation Admin Administrator-exemp	
ration Receipt For:	Aggregate Year-to-Date V	
Primary General Other (specify) ▼	613.20	
SUBTOTAL of Receipts This Page (optional	I	110.20
TOTAL This Period (last page this line numb		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	d Statements may	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 240 (check only one) I1a X 11a 13 14 15 16 17 on for the purpose of soliciting contributions
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commit		dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Wendy Bell			Date of Receipt
Mailing Address 2615 White Moon Dr	ſ		10 ^{//} 15 [/] 2009
City	State	Zip Code	Transaction ID: A9360805196594E06888
Harker Heights	TX	76548-2810	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		29.20
Name of Employer Diversicare Leasing Corpo-	Occupation	า	_
ration		dministrator-exemp	_
Receipt For:	Aggregate	Year-to-Date	
Other (specify) ▼		613.20	
Full Name (Last, First, Middle Initial) Barry C. Bell			Date of Receipt
Mailing Address 6107 Co Rd 122			M M / D D / Y Y Y Y 10 16 2009
City	State	Zip Code	Transaction ID: AD1D99C1CB6104A70B0
<u>Pisgah</u>	AL	35765-9371	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.50
Name of Employer Diversicare Management Se- rvices	Occupation	n kecutive Director	
Receipt For:	Aggregate	Year-to-Date 🔻	
Primary General Other (specify) ▼	0 0	794.40]
Full Name (Last, First, Middle Initial) Barry C. Bell			Date of Receipt
Mailing Address 6107 Co Rd 122			M M / D D / Y Y Y Y 10 30 2009
City	State	Zip Code	Transaction ID: ABCB94DA986364A62A
<u>Pisgah</u>	AL	35765-9371	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.50
Name of Employer Diversicare Management Se- rvices	Occupation AL/TN E>	n kecutive Director	
Receipt For:	Aggregate	Year-to-Date 🔻	_
Primary General Other (specify) ▼		834.90]
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\sum	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committed	tee											
_ /	Full Name (Last, First, Middle Initial) Barry C. Bell				Date o	f Re	ceipt						
	Mailing Address 6107 Co Rd 122				м м 11	/		D 3	Y		0 [°] 0 9		
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	Name of Employer Diversicare Management Se- rvices	Occupatio	n xecutive Director										
	Receipt For:	Aggregate	e Year-to-Date V										
	Primary General Other (specify) ▼		875.40										
	Full Name (Last, First, Middle Initial) Barry C. Bell				Date o	f Re	ceipt						
	Mailing Address 6107 Co Rd 122				^M 1 1	/		D 7	Y		0 [°] 0 9		
	City	State	Zip Code		Transa	ctio	n ID:	A6E	398F	B26	EC6	F46	02A
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	Full Name (Last, First, Middle Initial) Barry C. Bell				Date o	f Re	ceipt						
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	Name of Employer Diversicare Management Se- rvices	Occupatio AL/TN E	n xecutive Director										
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 956.40										
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l	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 240 (check only one) 11a X 11a 13 14 15 16
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commit	Statements may not be sold or used by any pers the name and address of any political committee to tee	on for the purpose of soliciting contributions o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Barry C. Bell Mailing Address 6107 Co Rd 122		Date of Receipt
			12 24 2009
	City	State Zip Code	Transaction ID: A135453AB407443938CE
	Pisgah FEC ID number of contributing federal political committee.	AL 35765-9371	Amount of Each Receipt this Period 40.50
	Name of Employer Diversicare Management Se- rvices	Occupation AL/TN Executive Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 996.90]
- В.	Full Name (Last, First, Middle Initial) Bobbie Bice Mailing Address 1310 Dove Ln		Date of Receipt
			07 09 2009
	City Lockhart	State Zip Code TX 78644-2459	Transaction ID: A3939D2ACD4A84D3BAFI
	FEC ID number of contributing federal political committee.	TX 78644-2459	Amount of Each Receipt this Period
	Name of Employer Diversicare Leasing Corpo- ration Receipt For:	Occupation Nursing Admin Don-exempt	
	Primary General Other (specify) v	Aggregate Year-to-Date ▼ 407.89]
- C.	Full Name (Last, First, Middle Initial) Bobbie Bice		Date of Receipt
	Mailing Address 1310 Dove Ln		07 23 Y Y Y Y 2009
	City	State Zip Code	Transaction ID: ACAD5CF3E499F46E490F
	Lockhart FEC ID number of contributing federal political committee.	TX 78644-2459	Amount of Each Receipt this Period 29.42
	Name of Employer Diversicare Leasing Corpo- ration	Occupation Nursing Admin Don-exempt	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 437.31]
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S	CHEDULE A (FEC Form 3X)			FC	OR LINE	E NU	IMBE	R: PA	GE	18/2	40		
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1	Any information copied from such Reports and	Statements ma	y not be sold or used by any pers	on for	the pur	pose	e of so	liciting co	ntrib	utions			
0	or for commercial purposes, other than using th	e name and ad	Idress of any political committee to	o solic	it contri	butic	ons fro	m such c	omm	nittee.			
	NAME OF COMMITTEE (In Full)												
	angle Advocat Inc. Political Action Commit	tee											
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	Full Name (Last, First, Middle Initial)				_								
	Bobbie Bice				Date o	f Re	ceipt						
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	Primary General	Aggregate	e Year-to-Date 🔻	- L									
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	Maining Address 1510 Dove En				08	' <i>'</i>		0		009			
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	FEC ID number of contributing federal political committee.	C							2	29.42	2		
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	Primary General		400.45	11									
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	Mailing Address 1310 Dove Ln				MM	1 /	D			Y			
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	federal political committee.									23.72			
	Name of Employer	Occupatio	22	_									
	Name of Employer Diversicare Leasing Corpo-												
	ration	×	Admin Don-exempt	_									
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	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committee		
A.	Full Name (Last, First, Middle Initial) Bobbie Bice Mailing Address 1310 Dove Ln		
			09 17 2009
	City	State Zip Code	Transaction ID: A60B683DE0E4D46C0AB8
	Lockhart FEC ID number of contributing federal political committee.	TX 78644-2459	Amount of Each Receipt this Period 29.42
	Name of Employer Diversicare Leasing Corpo- ration	Occupation Nursing Admin Don-exempt	
	Receipt For: Primary General Other (specify) \bigtriangledown	Aggregate Year-to-Date ▼ 554.99	
- B.	Full Name (Last, First, Middle Initial) Bobbie Bice		Date of Receipt
	Mailing Address 1310 Dove Ln		10 ^M 15 ^V 2009
	City	State Zip Code	Transaction ID: A62270D46307F4C9885B
	Lockhart	TX 78644-2459	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		29.42
	Name of Employer Diversicare Leasing Corpo- ration Receipt For:	Occupation Nursing Admin Don-exempt Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	613.83	
- C.	Full Name (Last, First, Middle Initial) Bobbie Bice		Date of Receipt
	Mailing Address 1310 Dove Ln		M M / D D / Y Y Y Y 10 15 / 2009
	City	State Zip Code	Transaction ID: AE04360F9A8CD4852B65
	Lockhart	TX 78644-2459	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	29.42
	Name of Employer Diversicare Leasing Corpo-	Occupation Nursing Admin Don-exempt	
	ration Receipt For:	Aggregate Year-to-Date V	
	Primary General Other (specify) ▼	613.83	
ſ	SUBTOTAL of Receipts This Page (optional)		▶ 88.26
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	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 240 (check only one) 11c X 11a 11b 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commit	ne name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Bobbie Bice Mailing Address 1310 Dove Ln			Date of Receipt
	City	State	Zip Code	10 29 2009 Transaction ID: A70288674DFC848B5AD2
	Lockhart FEC ID number of contributing federal political committee.	TX C	78644-2459	Amount of Each Receipt this Period 29.42
	Name of Employer Diversicare Leasing Corpo- ration Receipt For: Primary General Other (specify) v		n Admin Don-exempt e Year-to-Date 🔻 643.25	
- В.	Full Name (Last, First, Middle Initial) Bobbie Bice Mailing Address 1310 Dove Ln			Date of Receipt
	City	State	Zip Code	1 1 1 2 2 0 0 9 Transaction ID: ADE3DBE7DF4DA4D2C955
	Lockhart FEC ID number of contributing federal political committee.	TX C	78644-2459	Amount of Each Receipt this Period 29.42
	Name of Employer Diversicare Leasing Corpo- ration Receipt For: Primary General Other (specify) ▼		n Admin Don-exempt e Year-to-Date 🔻 672.67	
- C.	Full Name (Last, First, Middle Initial) Bobbie Bice			Date of Receipt
	Mailing Address 1310 Dove Ln			M M / D D / Y Y Y Y 11 / 25 / 2009
	City Lockhart	State TX	Zip Code 78644-2459	Transaction ID: A880AB7DF36764AD4A51 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		29.42
	Name of Employer Diversicare Leasing Corpo- ration Receipt For: Primary General	×	n Admin Don-exempt ∋ Year-to-Date ▼ 702.09	1
	Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		· · · · · · · · · · · ·	88.26

ľ	SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	d Statements may	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 240 (check only one) 11 X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions 11 11 12
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commi	the name and add	fress of any political committee to	solicit contributions from such committee.
Z A.	Full Name (Last, First, Middle Initial) Bobbie Bice Mailing Address 1310 Dove Ln			Date of Receipt
	City	State	Zip Code	Transaction ID: ACCB4B3A7FE6D436A94
	Lockhart	TX	78644-2459	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		29.42
	Name of Employer Diversicare Leasing Corpo- ration	~	Admin Don-exempt	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 731.51]
– В.	Full Name (Last, First, Middle Initial) Bobbie Bice Mailing Address 1310 Dove Ln			Date of Receipt
	Mailing Address 1310 Dove Ln			12 24 Y Y Y Y 12 24 2009
	City	State	Zip Code	Transaction ID: A77E4E4711C8D4FC5B18
	Lockhart	TX	78644-2459	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		29.42
	Name of Employer Diversicare Leasing Corpo- ration	¥ ¥	Admin Don-exempt	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V 760.93]
- C.	Full Name (Last, First, Middle Initial) Michael P. Bonner			Date of Receipt
	Mailing Address 4919 Darlington Driv	/e		M M / D D / Y Y Y Y 07 10 2009
	City	State	Zip Code	Transaction ID: AA832F64E5F4340F78C5
	Nashville	TN	37211-5106	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		46.15
	Name of Employer Diversicare Management Se- rvices		cial Reporting	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 553.85]
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NAME OF COMMITTEE (In Full)	r doing the name and ad								·	
Advocat Inc. Political Action	Committee									
Full Name (Last, First, Middle Initia Michael P. Bonner	J)		D	ate of	Receipt					
Mailing Address 4919 Darling	on Drive			м м 07		^D 4	Y	Y Y 200		
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rvices Receipt For:		e Year-to-Date V								
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Full Name (Last, First, Middle Initia Michael P. Bonner	ໄ ປ)			ate of	Receipt					
Mailing Address 4919 Darling	on Drive			м м 08	/ D	^D /21	Y	Y Y 200		
City	State	Zip Code		_	ction ID:		137B			249
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	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	-	R LINE eck only 11a 13	/ one)		R: PA	_	<u>23 / 24</u> 12 16	<u>40</u>	117
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∠ A.	Full Name (Last, First, Middle Initial) Michael P. Bonner Mailing Address 4919 Darlington Drive				Date of		eipt D			v 0 0 9		
	City	State	Zip Code			tion	P	AF5F45				14B2
	Nashville	TN	37211-5106					Receipt t				
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	City Nashville	State TN	Zip Code 37211-5106					ADE13			241	A2B9
	FEC ID number of contributing federal political committee.	C			Amount			Receipt t	-	46.15	;	
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	Primary General Other (specify) ▼		e Year-to-Date ▼ 784.60									
- C.	Full Name (Last, First, Middle Initial) Michael P. Bonner				Date of	_	· .					
	Mailing Address 4919 Darlington Drive				1 0 ^M	/	D 0			0 [°] 09		
	City	State	Zip Code	т	ransac	tion	ID: /	A27EE	45EI	3AB2	14()6BAF
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	NAME OF COMMITTEE (In Full)								
	Advocat Inc. Political Action Committee	e							
	Full Name (Least First Middle Initial)								
A.	Full Name (Last, First, Middle Initial) Elizabeth A. Carroll			Date of Receipt					
	Mailing Address 3540 Calais Circle			M M / D D / Y Y Y Y					
				07 02 2009					
	City	State	Zip Code	Transaction ID: AC77C8FCD07FE4C868					
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В.	Elizabeth A. Carroll			Date of Receipt					
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	City	State	Zip Code	Transaction ID: A821E8F79F8BA41BD93					
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C.	Elizabeth A. Carroll			Date of Receipt					
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NAME OF COMMITTEE (In Full)		
Advocat Inc. Political Action Comm	nittee	
/		
Full Name (Last, First, Middle Initial)		
Elizabeth A. Carroll		Date of Receipt
Mailing Address 3540 Calais Circle		M M / D D / Y Y Y Y
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City	State Zip Code	Transaction ID: A32F0E17B150D4BA
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Elizabeth A. Carroll		Date of Receipt
Mailing Address 3540 Calais Circle		
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Name of Employer	Occupation	
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Diversicare Leasing Corp Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Elizabeth A. Carroll	Admin Administrator-exemp Aggregate Year-to-Date	Date of Receipt
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Diversicare Leasing Corp Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Elizabeth A. Carroll Mailing Address 3540 Calais Circle	Admin Administrator-exemp Aggregate Year-to-Date 522.83	M M / D D / Y Y Y Y 09 / 10 / 2009
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	Full Name (Last, First, Middle Initial) Maryann M. Cook					Date o	f Rec	eipt						
	Mailing Address 155 E Foster Court					м м 07	_	D	D / 0	Y		v 0 0 9		
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	Maryann M. Cook				_	Date o	_		_					
	Mailing Address 155 E Foster Court					07	/	2		Y		0 0 9		
	City	State	Zip Code		_	Transa	ul li							റാ
	Lecanto	FL	34461-8107		_								945	900
		1 6	34401-0107			Amour		ach i	Receip	ot triis	s Pe	FIOD	_	_
	FEC ID number of contributing federal political committee.	C									2	25.00)	
	Name of Employer Diversicare Management Se-	Occupatio	on		\neg									
	Diversicare Management Se- rvices	Florida F	Rvp											
	Receipt For:	Aggregat	e Year-to-Date 🔻											
	Primary General		1 1 1 1 1		11.									
	Other (specify)		0 0 0 0 0	350.00										
										• •	8	1.39)	7
F	SUBTOTAL of Receipts This Page (optional) .			••••••	-									7
т	TOTAL This Period (last page this line number	r only)		Þ	•	L								

	SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	for De	e separate schedule(s) each category of the stailed Summary Page	FOR LINE NUMBER: PAGE 31 / 240 (check only one)
	Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	g the name and address	e sold or used by any perso of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Maryann M. Cook Mailing Address 155 E Foster Court	•		Date of Receipt
				08 07 2009
	City Lecanto		Zip Code 34461-8107	Transaction ID: ABD398830D68748B39A Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		
	Name of Employer Diversicare Management Se- rvices Receipt For:	Occupation Florida Rvp Aggregate Year-	-to-Date ▼	
	PrimaryGeneralOther (specify)		375.00]
- В.	Full Name (Last, First, Middle Initial) Maryann M. Cook			Date of Receipt
Б.	Mailing Address 155 E Foster Court	t		M M / D D / Y Y Y Y 0 8 2 1 2 0 0 9
	City	State Z	Zip Code	Transaction ID: A9ABDC3340E444FF8AC
	Lecanto	FL:	34461-8107	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer Diversicare Management Se- rvices	Occupation Florida Rvp		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year	-to-Date ▼ 400.00]
- C.	Full Name (Last, First, Middle Initial) Maryann M. Cook			Date of Receipt
	Mailing Address 155 E Foster Court	t		M M / D D / Y Y Y Y 09 04 2009
	City		Zip Code	Transaction ID: A0D36E9C3A47543A6B9
	Lecanto	FL :	34461-8107	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer Diversicare Management Se- rvices	Occupation Florida Rvp	_	
	Receipt For: Primary General Other (specify) $rightarrow$	Aggregate Year	to-Date ♥ 425.00]
ſ	SUBTOTAL of Receipts This Page (optional	I		75.00

	SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 240 (check only one) X X 11a 11b 11c 12 13 14 15 16
	Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	d Statements may not be sold or used by any pers the name and address of any political committee t ittee	son for the purpose of soliciting contributions to solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Maryann M. Cook Mailing Address 155 E Foster Court		Date of Receipt
	City	State Zip Code	0 9 1 8 2 0 0 9 Transaction ID: A8B259BC3251A4F009ED
	Lecanto FEC ID number of contributing	FL 34461-8107	Amount of Each Receipt this Period
	federal political committee.	Occupation	
	Name of Employer Diversicare Management Se- rvices	Florida Rvp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 450.00	
– В.	Full Name (Last, First, Middle Initial) Maryann M. Cook Mailing Address 155 E Foster Court		Date of Receipt
	City	State Zip Code	10022009 Transaction ID: A103DC97930CC4D3DA76
	Lecanto	FL 34461-8107	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer Diversicare Management Se- rvices Receipt For: Primary General Other (specify) ▼	Occupation Florida Rvp Aggregate Year-to-Date ▼ 475.00	
– c.	Full Name (Last, First, Middle Initial) Maryann M. Cook		Date of Receipt
	Mailing Address 155 E Foster Court		10 ¹ ¹ ⁰ ¹
	City Lecanto	State Zip Code FL 34461-8107	Transaction ID: A0F476E8484664D87972
	FEC ID number of contributing federal political committee.	FL 34461-8107	Amount of Each Receipt this Period
	Name of Employer Diversicare Management Se- rvices	Occupation Florida Rvp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Γ	SUBTOTAL of Receipts This Page (optional)	75.00

	SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 240 (check only one) X X 11a 11b 11c
	Any information copied from such Reports and or for commercial purposes, other than using the second second second second second second second second second	d Statements ma the name and ad	v not be sold or used by any pers	13 14 15 16 17 on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commi	ttee		
. Z	Full Name (Last, First, Middle Initial) Maryann M. Cook			Date of Receipt
	Mailing Address 155 E Foster Court			10 0 V V V V V 10 30 2009
	City	State	Zip Code	Transaction ID: AF2920A4E3CD14F808
	Lecanto	FL	34461-8107	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer Diversicare Management Se- rvices	Occupatio Florida F		
	Receipt For:	Aggregat	e Year-to-Date 🔻	
	Primary General Other (specify)	0 0	525.00	
_	Full Name (Last, First, Middle Initial) Maryann M. Cook			Date of Receipt
	Mailing Address 155 E Foster Court			1 1 1 3 2 0 0 9
	City	State	Zip Code	Transaction ID: A2A8E13FF60CC49919
	Lecanto	FL	34461-8107	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer Diversicare Management Se- rvices	Occupatio Florida F		
	Receipt For: Primary General Other (specify) ▼	Aggregat	e Year-to-Date 550.00	
_	Full Name (Last, First, Middle Initial) Maryann M. Cook			Date of Receipt
	Mailing Address 155 E Foster Court			M M / D D / Y Y Y Y 1 1 2 7 2009
	City	State	Zip Code	Transaction ID: AEB483D46B4EB44B8
	Lecanto	FL	34461-8107	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer Diversicare Management Se- rvices	Occupatio Florida F		
	Receipt For: Primary General Other (specify) ▼	Aggregat	e Year-to-Date V 575.00]
Γ	SUBTOTAL of Receipts This Page (optional			75.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	X) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 240 (check only one)
Any information copied from such Reports a or for commercial purposes, other than usir	and Statements may not be sold or used by any persong the name and address of any political committee to	13 14 15 16 17
NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Com	•	
Full Name (Last, First, Middle Initial) Maryann M. Cook		Date of Receipt
Mailing Address 155 E Foster Cour	t	M M / D D / Y Y Y Y 12 11 2009
City	State Zip Code	Transaction ID: AB4F804A6F2584E4782
Lecanto	FL 34461-8107	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Diversicare Management Se-	Occupation	
rvices Receipt For:	Florida Rvp Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate Year-to-Date •]
Full Name (Last, First, Middle Initial) Maryann M. Cook		Date of Receipt
Mailing Address 155 E Foster Cour	t	M M / D D / Y Y Y Y 12 24 2009
City	State Zip Code	Transaction ID: AC5845CE3FCD54DF39
Lecanto	FL 34461-8107	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Diversicare Management Se-	Occupation Florida Rvp	
rvices Receipt For:	Aggregate Year-to-Date V	
Primary General Other (specify) ▼	625.00]
Full Name (Last, First, Middle Initial) William R. Council III		Date of Receipt
Mailing Address 9533 Thoroughbre	ed Way	M M / D D / Y Y Y Y 07 10 2009
City	State Zip Code	Transaction ID: A774ECAAB116246EC9
Brentwood	TN 37027-8922	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.30
Name of Employer Diversicare Management Se- rvices	Occupation CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Other (specify) ▼	2499.90]
SUBTOTAL of Receipts This Page (optior	ial)	242.30
TOTAL This Period (last page this line nur	nber only)	

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 240 (check only one) Image: Check only one) X 11a 11b 11c 12 I3 14 15 16 17
or f	y information copied from such Reports a or commercial purposes, other than using NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comr	g the name and ad	y not be sold or used by any pers dress of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
۹.	Full Name (Last, First, Middle Initial) William R. Council III Mailing Address 9533 Thoroughbre	d Way		Date of Receipt
		-	7.0.1	07 24 2009
	City Brentwood	State TN	Zip Code 37027-8922	Transaction ID: AD92318E8DD9F4D86A
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer Diversicare Management Se- rvices	Occupatio CEO	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2692.20	
	Full Name (Last, First, Middle Initial) William R. Council III Mailing Address 9533 Thoroughbre	d Way		Date of Receipt
	City	State	Zip Code	
	Brentwood	TN	37027-8922	Transaction ID: A434F109919BC4716878 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer Diversicare Management Se- rvices	Occupatio CEO		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2884.50	
	Full Name (Last, First, Middle Initial) William R. Council III			Date of Receipt
	Mailing Address 9533 Thoroughbre	d Way		M M / D D / Y Y Y Y 08 21 2009
	City	State	Zip Code	Transaction ID: ADA4971F80AF840CAB
	Brentwood	TN	37027-8922	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer Diversicare Management Se- rvices	Occupatio CEO		
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 3076.80	
	JBTOTAL of Receipts This Page (option			576.90

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 240 (check only one) X X 11a 13 14 15 16 17
A	ny information copied from such Reports and r for commercial purposes, other than using the transmission of the second seco	Statements may not be sold or used by any per ne name and address of any political committee	son for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commit	tee	
Z	Full Name (Last, First, Middle Initial) William R. Council III		Date of Receipt
	Mailing Address 9533 Thoroughbred	Way	0 9 0 4 Y Y Y Y 0 9 0 4 2 0 0 9
	City	State Zip Code	Transaction ID: A7CEB3E4A9755444E
	Brentwood	TN 37027-8922	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	192.30
	Name of Employer Diversicare Management Se- rvices	Occupation CEO	
	Receipt For:	Aggregate Year-to-Date V	
	Other (specify)	3269.10	
	Full Name (Last, First, Middle Initial) William R. Council III		Date of Receipt
	Mailing Address 9533 Thoroughbred	Way	09 / D D / Y Y Y Y 09 18 2009
	City	State Zip Code	Transaction ID: A798E178AEB844052
	Brentwood	TN 37027-8922	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	192.30
	Name of Employer Diversicare Management Se-	Occupation CEO	
	rvices Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	3461.40	
	Full Name (Last, First, Middle Initial) William R. Council III		Date of Receipt
	Mailing Address 9533 Thoroughbred	Way	10 [/] 02 [/] 2009
	City	State Zip Code	Transaction ID: AAF77375C70D44BF0
	Brentwood	TN 37027-8922	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	192.30
	Name of Employer Diversicare Management Se- rvices	Occupation CEO	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary General Other (specify) ▼	3653.70	
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	SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 240 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17
	or for commercial purposes, other than using t NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personal statements may not be sold or used by any personal he name and address of any political committee to	son for the purpose of soliciting contributions
Z	Advocat Inc. Political Action Commi	Itee	
Α.	William R. Council III Mailing Address 9533 Thoroughbred	Way	Date of Receipt
	City	State Zip Code	Transaction ID: AA2259D4E2CA54F639A
	Brentwood	TN 37027-8922	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	192.30
	Name of Employer Diversicare Management Se- rvices	Occupation CEO	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	3846.00	
- 3.	Full Name (Last, First, Middle Initial) William R. Council III		Date of Receipt
	Mailing Address 9533 Thoroughbred	Way	10 ^M 4 ^D 5 ^D 7 ^Y 4
	City	State Zip Code	Transaction ID: AAC2811E1FC9C4712B
	Brentwood	TN 37027-8922	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	192.30
	Name of Employer Diversicare Management Se- rvices	Occupation CEO	
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 4038.30	
-).	Full Name (Last, First, Middle Initial) William R. Council III	_I	Date of Receipt
	Mailing Address 9533 Thoroughbred	Way	M M / D D / Y Y Y Y 111 13 2009
	City	State Zip Code	Transaction ID: A48A2F8EFC1AB4530A5
	Brentwood	TN 37027-8922	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	192.30
	Name of Employer Diversicare Management Se- rvices	Occupation CEO	
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 4230.60	
Γ	SUBTOTAL of Receipts This Page (optional)		576.90

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS						FOR LINE NUMBER: PAGE 38 / 240 (check only one)										
		Detailed Summary Page			11b		11c 15	12		ק ר ר						
Any information copied from such Repo	rts and Statements ma	v not be sold or used by any pers	on for th	13 le purp	14 Dose of so	olicitin	ig con	tribution	IS	17						
or for commercial purposes, other than	using the name and ad	dress of any political committee to	o solicit o	contrib	outions fro	om su	ich coi	mmittee								
Advocat Inc. Political Action C	ommittee															
Advocat Inc. Political Action C	ommillee															
Full Name (Last, First, Middle Initial) William R. Council III								Date of Receipt								
Mailing Address 9533 Thoroug	bred Way			м м 11		^D /27	Y	200								
City	State	Zip Code	Tr	ransad	ction ID:		BB89			8CD						
Brentwood	TN	37027-8922			t of Each											
FEC ID number of contributing federal political committee.	C							192.3	80							
Name of Employer Diversicare Management Se- rvices	Occupatio CEO	n														
Receipt For:	Aggregate	e Year-to-Date 🔻														
Primary General Other (specify) ▼		4422.90														
Full Name (Last, First, Middle Initial, William R. Council III	I			Date of	Receipt											
Mailing Address 9533 Thoroughbred Way						D /	Y	Y Y 200								
City	State	Zip Code		12 ransa	ction ID:		F9D1		_	089						
Brentwood	TN			t of Each												
FEC ID number of contributing federal political committee.								192.3	80							
Name of Employer Diversicare Management Se- rvices	Occupatio CEO	n														
Receipt For:	Aggregate	e Year-to-Date 🔻														
Primary General Other (specify)		4615.20														
Full Name (Last, First, Middle Initial) William R. Council III				Date of	Receipt											
Mailing Address 9533 Thoroug	bred Way			м м 12		^D /24	Y	Y Y 200								
City	State	Zip Code		_	ction ID:		3DC		_	4FA8						
Brentwood	TN	37027-8922			t of Each											
FEC ID number of contributing federal political committee.	C			1				192.3	80							
Name of Employer Diversicare Management Se- rvices	Occupatio CEO	n														
Receipt For:	Aggregate	e Year-to-Date 🔻														
Primary General Other (specify) ▼	0 0	4807.50														
SUBTOTAL of Receipts This Page (o	utional)					,		576.9	0							
,			- F	*		*										
TOTAL This Period (last page this line	e number only)															

Detailed Summary Page A The transmitter is the transme and address of any political committee to solicit contributions from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee. NAME OF COMMITTEE (In Full) Advise of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committee Advocat Inc. Political Action Committee Full Name (Last, First, Middle Initial) John E. Dugan Date of Receipt Mailing Address 120 Lochness Ln City State Zip Code Garland TX 75044-3426 FEC ID number of contributing federal political committee. Occupation Admin Administrator-exemp Aggregate Year-to-Date ▼ Primary General Occupation Maing Address 120 Lochness Ln Transaction ID: AF63EEBB0B0F744889 Full Name (Last, First, Middle Initial) Admin Administrator-exemp Admount of Each Receipt this Period Full Name (Last, First, Middle Initial) Maing Address 120 Lochness Ln Transaction ID: AF63EEBB0B0F744889 Full Name (Last, First, Middle Initial) Admin Administrator-exemp Admount of Each Receipt this Period FEC ID number of contr											
ITEMIZED RECEIPTS Dreach category of the Delaid Summary Page Ita Ita<	SCHEDULE A (FEC Form	3X) Use separate schedule(s)									
Any information copied from such Reports and Statement and address of any political committee is solicil controlutions from such committees NMAE OF COMMITTEE (In Full) Advocat Inc. Political Action Committee Full Name (Last, First, Middle Initial) Jahn E Dugan Mailing Address 1206 Lochness Ln City State State Zip Code Receipt For: Occupation Primary: General Other (specify) State Foil Name (Last, First, Middle Initial) Administrator-exemp Administ Address 1206 Lochness Ln City General Occupation Administrator-exemp Receipt For: Administrator-exemp Primary: General Other (specify) State Zip Code Transaction ID: AFGSEB8800FB0EDF74489 Receipt For: Aggregate Year-to-Date I Primary: General Other (specify) Aggregate Year-to Date I Mailing Address 120 Lochness Ln City State Zip Code Administrator-exemp Aggregate Year-to Date I Receipt For: <th>ITEMIZED RECEIPTS</th> <th></th> <th></th>	ITEMIZED RECEIPTS										
any information coded from such Reports and Statements may not be sold or used by any person for the purpose, other than using the name and address of any polical committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) Advocat Inc. Political Action Committee Full Name (Last, First, Middle Initial) John E: Dugan Maling Address 1206 Lochness Ln City State Zip Code Garland TX PCI Dumber of contributing tederal polical committee Occupation Maling Address 1206 Lochness Ln City State Zip Code Maren of Employee Occupation Admin Administrator-exemp Robit For: Aggregate Year-to-Date ▼ Primary City State Zip Code Maling Address 1206 Lochness Ln Minin Administrator-exemp Robit For: Aggregate Year-to-Date ▼ Primary City State Zip Code Maling Address 1206 Lochness Ln Minin Administrator-exemp Roceipt For: Occupation Admin Administrator-exemp Maling Address 1206 Corpo- Admin Administrator-exemp Mal		Detailed Summary Page									
NAME OF COMMITTEE (in Full) Advocat Inc. Political Action Committee Full Name (Last, First, Middle Initial) John E. Dugan Maling Address 1206 Lochness Ln City Garland TX TX Point E. Dugan Maling Address 1206 Lochness Ln City Garland TX TS Agregate Year-to-Date ▼ Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) John E. Dugan Maling Address Maling Address 1206 Lochness Ln City Garland TX 75944-3426 Full Name (Last, First, Middle Initial) John E. Dugan Maling Address 1206 Lochness Ln City State 21p Code TX 75944-3426 Full Name (Last, First, Middle Initial) Occupation Adminal Administrator-exemp Aggregate Year-to-Date ▼ Primary General Occupation Other (specify) ▼ <td< td=""><td>Any information copied from such Repor</td><td>ts and Statements may not be sold or used by any perso sing the name and address of any political committee to</td><td>n for the purpose of soliciting contributions</td></td<>	Any information copied from such Repor	ts and Statements may not be sold or used by any perso sing the name and address of any political committee to	n for the purpose of soliciting contributions								
Advocat Inc. Political Action Committee Full Name (Last, First, Middle Initial) John E Dugan Mailing Address 1206 Lochness Ln City State Zip Code Garland TX 75044/3426 PEC ID number of contributing federal political committee Occupation Name of Employer Pattern I Example Corpo- rational Committee Occupation Admin Administrator-exemp Recipt For: Aggregate Varia-to Date ♥ Political committee Occupation Mailing Address 1206 Lochness Ln Full Name (Last, First, Middle Initial) John E Dugan Mailing Address 1206 Lochness Ln City State Zip Code Garland TX 75044-3426 FEC ID number of contributing federal political committee. Occupation Admin Administrator-exemp Receipt For: Aggregate Yar-to-Date ♥ Date of Receipt Other (specify) ♥ Garland TX 75044-3426 FEC ID number of contributing federal political committee. Occupation Admin Administrator-exemp Transaction ID: AAF632EEDB06/74489 Receipt For: Garland TX 75044-3426 TX											
✓ Full Name (Last, First, Middle Initial) John E: Dugan Date of Receipt Mailing Address 1206 Lochness Ln City State Zip Code Garland TX 75044/3426 FEC ID number of contributing federal political committee. Occupation Admin Administrator-exemp Aggregate Year-to-Date ▼ Primary General Occupation Admin Administrator-exemp Date of Receipt Full Name (Last, First, Middle Initial) Aggregate Year-to-Date ▼ Transaction ID: AF63EEBD80774489 Af62 Basing Corpo- ration Receipt For: Occupation Admin Administrator-exemp Full Name (Last, First, Middle Initial) Date of Receipt John E: Dugan Date of Receipt Mailing Address 1206 Lochness Ln City State Zip Code Transaction ID: AF63EEBD80774489 Amount of Each Receipt His Period FeC ID number of contributing federal political committee. Occupation Admin Administrator-exemp Aggregate Year-to Date ✓ Primary General Occupation Admin Administrator-exemp Mailing Address 1206 Lochness Ln Transaction ID: AF63EEBD80724489 Full Name (Last, First, M		mmittee									
Jehn E. Dugan Date of Receipt Mailing Address 1206 Lochness Ln 0,7 ' 0,9 2,0,9 City State Zip Code Garland TX 75044.3426 FEC ID number of contributing federal political committee. C Amount of Each Receipt this Period Date of Receipt Occupation Admin Administrator-exemp Aggregate Year-to-Date ▼ Prinary General Other (specify) ▼ City State Zip Code Garland TX 75044.3426 Full Name (Last, First, Middle Initial) Joth E. Dugan Aggregate Year-to-Date ▼ Mailing Address 1206 Lochness Ln City State Zip Code Garland TX 75044.3426 FeC ID number of contributing federal political committee. C Date of Receipt Mis Period Aggregate Year-to-Date ▼ Prinary General Occupation Aggregate Year-to-Date Transaction ID: AF63EEBB0F744893 Full Name (Last, First, Middle Initial) Joth E. Dugan Aggregate Year-to-Date ▼ Mailing Address 1206 Lochness Ln City State Zip Code Garland TX 75044.3426 Full Name (Last, First, Middle Initial) Joth E. Dugan Aggregate Year-to-Date ▼ Other (specify)	Advocat me. I ontical Action of										
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or	for commercial purposes, other than using t	he name and ad	dress of any political committee to	solicit contributions from such committe	e.								
	NAME OF COMMITTEE (In Full)												
	Advocat Inc. Political Action Commit	ttee											
	Full Name (Last, First, Middle Initial)												
	John E. Dugan			Date of Receipt									
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$\langle \rangle$	Advocat Inc. Political Action Comm	ittee		
	Full Name (Last, First, Middle Initial) John E. Dugan			Date of Receipt
	Mailing Address 1206 Lochness Ln			M M / D D / Y Y Y Y 111 12 2009
	City	State	Zip Code	Transaction ID: AFC676BCAF5854D83
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	John E. Dugan Mailing Address 1206 Lochness Ln			Date of Receipt
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•	John E. Dugan				Date of	f Rece	ipt						
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	Deborah R. Farris			_	Date of		•						
	Mailing Address 1206 Chilton			07	/	D 1			009				
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	City	State	Zip Code		Transa						B448		
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	federal political committee.									20.00	<u> </u>		
	Name of Employer	Occupatio	20	_									
	Diversicare Management Se-		lds Specialist										
	rvices Receipt For:	- 1 · · · · · · · · · · · · · · · · · ·	•	_									
	Primary General	Aggregat	e Year-to-Date 🔻	- 1									
	Other (specify)		325.00										
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	Full Name (Last, First, Middle Initial)			+									
	Deborah R. Farris				Date of	f Rece	ipt						
	Mailing Address 1206 Chilton				MM	_	D			Y	V		
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	FEC ID number of contributing federal political committee.	C								25.00)		
	Name of Employer	Occupatio	ิวท										
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	Receipt For:		e Year-to-Date 🔻										
	Primary General	00 014											
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	SUBTOTAL of Receipts This Page (optional)								3	88.06	5		
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)				FOR LINE NUMBER: PAGE 44 / 240									
			for each category of the	(check only one)												
	EIMIZED RECEIPTS		Detailed Summary Page	<u>></u>	-	Ш	11b		╘┝	-						
	av information conied from auch Deports and	Statamanta ma			13		14	15			6					
0	ny information copied from such Reports and for commercial purposes, other than using th	ne name and add	dress of any political committee to	solic	it contril	outic	ns fro	m such	com	mitte	ee.					
$\left \right $	NAME OF COMMITTEE (In Full)															
	Advocat Inc. Political Action Commit	tee														
Z	Full Name (Last, First, Middle Initial)															
	Deborah R. Farris		Date o	f Re	ceipt											
	Mailing Address 1206 Chilton				м м 0 8	/		^D /		2 0						
	City	State	Zip Code	-	Transa	_ ctio	P			_	_					
	San Antonio	ТΧ	78251-2966					Receipt								
	FEC ID number of contributing									-	-	Ű				
	federal political committee.	C								25.	.00					
	Name of Employer	Occupatio	n													
	Diversicare Management Se- rvices	Texas M	ds Specialist													
	Receipt For:	Aggregate	e Year-to-Date 🔻													
	Primary General		375.00													
	Other (specify)	1														
	Full Name (Last, First, Middle Initial)															
	Deborah R. Farris			_	Date of	_										
	Mailing Address 1206 Chilton						D 2			γ 2 0		*				
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	San Antonio		Amour	t of	Each	Receipt	this	Perio	od							
	FEC ID number of contributing							25	.00							
	federal political committee.	C						<u> </u>		20.		-				
	Name of Employer Diversicare Management Se-	Occupatio														
	rvices	- 1 · ·	ds Specialist													
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	Other (specify)		400.00													
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	Full Name (Last, First, Middle Initial)				Data		:									
	Deborah R. Farris Mailing Address 1206 Chilton			-	Date o	_	Серг	D /	γ	ΥY	Y					
					09			4		20	0 9					
	City	State	Zip Code		Transa							44F				
	San Antonio	ТХ	78251-2966		Amour	it of	Each	Receipt	this	Perio	od					
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		lame of Employer Occupation Occupation Uversicare Management Se-														
	rvices Receipt For:		e Year-to-Date V	\neg												
	Primary General															
	Other (specify)	0 0	425.00													
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SCHEDULE A (FEC Form ITEMIZED RECEIPTS	3X) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 240 (check only one) X X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than us	s and Statements may not be sold or used by any point be sold or used by any point the name and address of any political committee	erson for the purpose of soliciting contributions
Advocat Inc. Political Action Cor	nmittee	
Full Name (Last, First, Middle Initial) Deborah R. Farris		Date of Receipt
Mailing Address 1206 Chilton		M M / D D / Y Y Y Y 09 18 2009
City	State Zip Code	Transaction ID: AD9D19739E55346FE8
San Antonio	TX 78251-2966	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Diversicare Management Se-	Occupation Texas Mds Specialist	
rvices Receipt For:	Aggregate Year-to-Date V	—
Primary General Other (specify) ▼	450.00	
Full Name (Last, First, Middle Initial) Deborah R. Farris		Date of Receipt
Mailing Address 1206 Chilton		10 ^{//} 10 ^{//} 10 ^{//} 2009
City	State Zip Code	Transaction ID: A62BBE1B8F49B40C1E
San Antonio	TX 78251-2966	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		25.00
Name of Employer Diversicare Management Se-	Occupation	
rvices Receipt For:	Texas Mds Specialist Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	475.00	
Full Name (Last, First, Middle Initial) Deborah R. Farris		Date of Receipt
Mailing Address 1206 Chilton		10 16 2009
City	State Zip Code	Transaction ID: AEC392F4BCCF44FE0
San Antonio	TX 78251-2966	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Diversicare Management Se- rvices	Occupation Texas Mds Specialist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (opti	onal)	75.00
	number only)	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 46 / 240 (check only one)									
п	EMIZED RECEIPTS		for each category of the	X 11a 11b 11c 12									
••			Detailed Summary Page				-	Н			ł		
A	ny information copied from such Reports and r for commercial purposes, other than using th	Statements ma	y not be sold or used by any pers	on fo	13 r the pur cit contri	pose butic	14 e of so	licitir	15 ng cor	ntrib	16 utions	_	17
	NAME OF COMMITTEE (In Full)			0.001									
	Advocat Inc. Political Action Commit	tee											
~	Full Name (Last, First, Middle Initial) Deborah R. Farris		Date of Receipt										
	Mailing Address 1206 Chilton				^M 1 0	/	D 3	D 0	Y		0 [°] 0 9		
	City	State	Zip Code		Transa	ictio	n ID:	A9A	285	EB1	151E	646F	BB
	San Antonio	ТХ	78251-2966		Amou	nt of	Each	Rec	eipt th	is P	eriod		
	FEC ID number of contributing federal political committee.	C								2	25.00)	
	Name of Employer Diversicare Management Se- rvices	Occupatio Texas M	n ds Specialist										
	Receipt For:		e Year-to-Date 🔻										
	Primary General Other (specify) ▼		525.00										
	Full Name (Last, First, Middle Initial) Deborah R. Farris				Date c	f Re	ceipt						
	Mailing Address 1206 Chilton					/		^D З	Y		0 [°] 0 9		
	City	Zip Code		Transa	ictio	n ID:	A66	D6C	16F	-499	8409	FB	
	San Antonio	78251-2966		Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	C	25.00										
	Name of Employer Diversicare Management Se- rvices	Occupatio Texas M	n ds Specialist										
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date V 550.00										
	Full Name (Last, First, Middle Initial) Deborah R. Farris				Date c	f Re	ceipt						
	Mailing Address 1206 Chilton				1 1		D	D 7	Y		0 [°] 0 9		
	City	State	Zip Code		Transa	ictio	n ID:	A07	'83C	184	C978	840E	08
	San Antonio	ТХ	78251-2966		Amou	nt of	Each	Rec	eipt th	is P	eriod		-
	FEC ID number of contributing federal political committee.	C					1			2	25.00)	
	Name of Employer Diversicare Management Se- rvices	Occupatio Texas M	n ds Specialist										
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date V 575.00										
Γ	SUBTOTAL of Receipts This Page (optional)			 ▶						7	75.00	<u>ו</u>	٦

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 240 (check only one) X X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	nd Statements may not be sold or used by any person the name and address of any political committee to nittee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Deborah R. Farris Mailing Address 1206 Chilton		Date of Receipt
		1 2 / D D / Y Y Y Y 1 2 / 1 1 / 2 0 0 9
City	State Zip Code	Transaction ID: A70BBDE7EF1EC47F79
San Antonio FEC ID number of contributing	TX 78251-2966	Amount of Each Receipt this Period
federal political committee.		25.00
Name of Employer Diversicare Management Se-	Occupation	
rvices Receipt For:	Texas Mds Specialist Aggregate Year-to-Date ▼	_
Primary General	600.00	
Other (specify) ▼		
Full Name (Last, First, Middle Initial) Deborah R. Farris		Date of Receipt
Mailing Address 1206 Chilton		M M / D D / Y Y Y Y
City	State Zip Code	
San Antonio	TX 78251-2966	Transaction ID: A330680A7CCE5425D8
FEC ID number of contributing federal political committee.		25.00
Name of Employer Diversicare Management Se-	Occupation	-
rvices Receipt For:	Texas Mds Specialist Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	625.00	
Full Name (Last, First, Middle Initial) Anne M. Freeman		Date of Receipt
Mailing Address 25059 Us Hwy 80		
City	State Zip Code	0 8 2 1 2 0 0 9 Transaction ID: A7F8E972915FE4F31A
Opelika	AL 36804-7936	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	12.75
Name of Employer Diversicare Management Se-	Occupation AI Mds Specialist	
rvices Receipt For:	Al Mos Specialist Aggregate Year-to-Date V	-1
Primary General Other (specify) ▼	201.50	
SUBTOTAL of Receipts This Page (optiona	۲ ۱)	62.75
TOTAL This Period (last page this line num	iber only)	

ſ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Statements may not be	e separate schedule(s) each category of the ailed Summary Page e sold or used by any pers	FOR LINE NUMBER: PAGE 48 / 240 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions for the purpose of soliciting contributions
	or for commercial purposes, other than using th NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committ		f any political committee to	o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Anne M. Freeman Mailing Address 25059 Us Hwy 80			Date of Receipt
				09 04 2009
	City Opelika		p Code	Transaction ID: A0943D5B0E5FD49CE87
	FEC ID number of contributing federal political committee.	C	6804-7936	Amount of Each Receipt this Period
	Name of Employer Diversicare Management Se- rvices Receipt For:	Occupation AI Mds Special Aggregate Year-t		
	Primary General Other (specify) ▼		214.25]
- В.	Full Name (Last, First, Middle Initial) Anne M. Freeman			Date of Receipt
	Mailing Address 25059 Us Hwy 80			09 18 2009
	City	State Z	ip Code	Transaction ID: AE716AC50E0E449FFAC
	Opelika	AL 3	6804-7936	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.75
	Name of Employer Diversicare Management Se- rvices	Occupation AI Mds Special	list	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-t	o-Date ▼ 227.00]
– c.	Full Name (Last, First, Middle Initial) Anne M. Freeman			Date of Receipt
	Mailing Address 25059 Us Hwy 80			M M / D D / Y Y Y Y 10 02 2009
	City		p Code	Transaction ID: A5055C932554041709E0
	<u>Opelika</u>	AL 3	6804-7936	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.75
	Name of Employer Diversicare Management Se- rvices	Occupation AI Mds Special		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-t	o-Date ▼ 239.75	
Γ	SUBTOTAL of Receipts This Page (optional).	-1		38.25

I	SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	d Statements ma	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any pers	FOR LINE NUMBER: PAGE 49 / 240 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions 11 11 11
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	the name and ad	dress of any political committee t	o solicit contributions from such committee.
2 A.	Full Name (Last, First, Middle Initial) Anne M. Freeman Mailing Address 25059 Us Hwy 80			Date of Receipt
	City	State	Zip Code	
	Opelika	AL	36804-7936	Transaction ID: ACE2544D456B74D13B0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.75
	Name of Employer Diversicare Management Se- rvices	Occupatio Al Mds S		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 252.50	
- 3.	Full Name (Last, First, Middle Initial) Anne M. Freeman			Date of Receipt
	Mailing Address 25059 Us Hwy 80	M M / D D / Y Y Y Y 10 30 2009		
	City	State	Zip Code	Transaction ID: A05E83A64952647BBA0
	Opelika	AL	36804-7936	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.75
	Name of Employer Diversicare Management Se- rvices	Occupatio Al Mds S	specialist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 265.25	
- ;.	Full Name (Last, First, Middle Initial) Anne M. Freeman			Date of Receipt
	Mailing Address 25059 Us Hwy 80			M M / D D / Y Y Y Y 111 13 2009
	City	State	Zip Code	Transaction ID: A92568A6687564395B2E
	Opelika	AL	36804-7936	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.75
	Name of Employer Diversicare Management Se- rvices		specialist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 278.00	
Γ	SUBTOTAL of Receipts This Page (optional)		38.25

•	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 50 / 240
	• • •		Use separate schedule(s) for each category of the	(check only one)
	ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
_				13 14 15 16 17
	Any information copied from such Reports and S	Statements ma	y not be sold or used by any pers	on for the purpose of soliciting contributions
	or for commercial purposes, other than using the	e name and ad	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	Advocat Inc. Political Action Committee	ee		
Z	/			
	Full Name (Last, First, Middle Initial)			Date of Receipt
۹.	Anne M. Freeman Mailing Address 25059 Us Hwy 80			
	Mailing Address 25059 Us Hwy 80			1 1 27 2009
	City	State	Zip Code	Transaction ID: A01EC52F27231437F87
	Opelika	AL	36804-7936	Amount of Each Receipt this Period
			000017000	
	FEC ID number of contributing federal political committee.	C		12.75
	rederar pointear committee.			
	Name of Employer Diversicare Management Se-	Occupatio		
	Diversicare Management Se- rvices	Al Mds S	Specialist	
	Receipt For:	Aggregat	e Year-to-Date 🔻	
	Primary General		290.75	1
	Other (specify)	0 0	290.75	
_				
	Full Name (Last, First, Middle Initial)			Data of Descript
8.	Anne M. Freeman			Date of Receipt
	Mailing Address 25059 Us Hwy 80			12 11 2009
	City	State	Zip Code	
	Opelika	AL	•	Transaction ID: A8094BB6024424DF889
		AL	36804-7936	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.75
	rederar politicar committee.			
	Name of Employer Diversicare Management Se-	Occupatio	n	-
	Diversicare Management Se- rvices	Al Mds S	Specialist	
	Receipt For:	Aggregat	e Year-to-Date 🔻	
	Primary General			1
	Other (specify)		303.50	
_				
	Full Name (Last, First, Middle Initial)			
<i>.</i>	Anne M. Freeman			Date of Receipt
	Mailing Address 25059 Us Hwy 80			12 24 2009
	City	State	Zip Code	Transaction ID: AFCC31E5A07904FA29
	Opelika	AL	36804-7936	
			30804-7930	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		12.75
	rederal political committee.			
	Name of Employer Diversicare Management Se-	Occupatio	n	7
	rvices	Al Mds S	Specialist	
	Receipt For:	Aggregat	e Year-to-Date 🔻	
	Primary General		316.25	1
	Other (specify)		JID.20	
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	SUBTOTAL of Receipts This Page (optional)		·····	38.25
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	TOTAL This Period (last page this line number	only)		

ľ	SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 240 (check only one)
	Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	the name and add	r not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Jennie J. Goss			Date of Receipt
	Mailing Address 1037 Leonard Stree	et		07 02 Y Y Y Y 007 02 2009
	City	State	Zip Code	Transaction ID: A747C66A19D8E4FE0A1
	Camden	AR	71701-2790	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		26.92
	Name of Employer Diversicare Leasing Corp	Occupation Admin Admin	n dministrator-exemp	
	Receipt For:		Year-to-Date V	-
	Primary General Other (specify) ▼	0 0	337.90]
	Full Name (Last, First, Middle Initial) Jennie J. Goss			Date of Receipt
	Mailing Address 1037 Leonard Stree	ət		M M / D D / Y
	City	State	Zip Code	Transaction ID: A6A4822101738414D93E
	Camden AR		71701-2790	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		26.92
	Name of Employer Diversicare Leasing Corp	Occupation Admin Ad	n dministrator-exemp	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V 391.74	
_	Full Name (Last, First, Middle Initial) Jennie J. Goss			Date of Receipt
	Mailing Address 1037 Leonard Street			07 16 2009
	City	State	Zip Code	Transaction ID: A5BDD3E2C1BA24C82A
	Camden	AR	71701-2790	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		26.92
	Name of Employer Diversicare Leasing Corp	Occupation Admin Ad	n dministrator-exemp	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V 391.74]
Γ		I		80.76

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 240 (check only one) 11c 12 X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committee	e name and address of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Jennie J. Goss Mailing Address 1037 Leonard Street		Date of Receipt
			08 13 2009
	City Camden	State Zip Code AR 71701-2790	Transaction ID: AA80A9CEE9EE2491BAF4
	FEC ID number of contributing federal political committee.	AR 71701-2790	Amount of Each Receipt this Period 26.92
	Name of Employer Diversicare Leasing Corp Receipt For:	Occupation Admin Administrator-exemp	
	Primary General Other (specify) ▼	Aggregate Year-to-Date 418.66	
в.	Full Name (Last, First, Middle Initial) Jennie J. Goss Mailing Address 1037 Leonard Street	•	Date of Receipt
	City	State Zip Code	
	Camden	AR 71701-2790	Transaction ID: AF259D2C83B36454BABB Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	26.92
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 445.58	
- C.	Full Name (Last, First, Middle Initial) Jennie J. Goss Mailing Address 1037 Leonard Street	1	Date of Receipt
	City	State Zip Code	Transaction ID: AEDBEDD348A1643229D8
	Camden	AR 71701-2790	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	26.92
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 472.50	
ſ	SUBTOTAL of Receipts This Page (optional)		80.76
	TOTAL This Period (last page this line number	only)	

9	SCHEDULE A (FEC Form 3X)			F	FOR LINE NUMBER: PAGE 53 / 240							
	ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(C	(check only one)							
	TEMIZED RECEIPTS		Detailed Summary Page				X 11a 11b 11c 12					
			2 chance community r age		13		14	15		16	· ·	17
	Any information copied from such Reports and S	Statements mag	y not be sold or used by any pers	son fo	r the pu	rpose	e of so	liciting co	ntrib	utions		
	or for commercial purposes, other than using the	e name and ad	dress of any political committee	o solio	cit contr	ibutio	ons fro	m such c	omm	ittee.		
	NAME OF COMMITTEE (In Full)											
	Advocat Inc. Political Action Committee	ee										
Z	Full Name (Last, First, Middle Initial)			Т								
۹.	Jennie J. Goss						ceipt					
	Mailing Address 1037 Leonard Street				м 0 9	VI /		D / Y 4		0 [°] 0 9		
	City	State	Zip Code		Trans	actio	n ID:	A756F9	53A	.E82E	3456	398
	Camden	AR	71701-2790		Amou	nt of	Each	Receipt tl	nis P	eriod		
	FEC ID number of contributing						U					1
	federal political committee.	C							<u>2</u>	26.92	2	
	Name of Employer Diversicare Leasing Corp	Occupatio										
		Admin A	dministrator-exemp									
	Receipt For:	Aggregate	e Year-to-Date 🔻									
	Primary General		499.42									
	Other (specify)	0 0										
, –	Full Name (Last, First, Middle Initial) Jennie J. Goss				Date	of Do	ooint					
3.							· · ·	D ()(14	
	Mailing Address 1037 Leonard Street			м 1 0	VI /		D / Y 8		0 [°] 0 9			
	City	Zip Code		Trans	actio	n ID:	A70E83	E5E	3704F	-4A4	ΕA	
	Camden	n AR 71701-2					Each	Receipt tl	nis P	eriod		
	FEC ID number of contributing		· · · · · · ·				Ū.					٦.
	federal political committee.	C								26.92		
	Name of Employer	Occupatio	n									
	Diversicare Leasing Corp		dministrator-exemp									
	Receipt For:	1 1	e Year-to-Date V									
	Primary General	Aggregate		- 1								
	Other (specify)	0 0	526.34									
_	E. U.N. and A. and Elizab Mitchells (1991)											
).	Full Name (Last, First, Middle Initial) Jennie J. Goss				Date	of Re	ceint					
	Mailing Address 1037 Leonard Street					M /	D	D / Y	Y	Y	Y	
					10			2		009		
	City	State	Zip Code		Trans	actio	n ID:	A873AE	34DE	570C	E452	208
	Camden	AR	71701-2790		Amou	nt of	Each	Receipt tl	nis P	eriod		
	FEC ID number of contributing	0						1 1			,	1
	federal political committee.	C								26.92	_	
	Name of Employer Diversicare Leasing Corp	Occupatio										
		Admin A	dministrator-exemp									
	Receipt For:	Aggregate	e Year-to-Date 🔻									
	Primary General		553.26									
	Other (specify)											
ſ	SUBTOTAL of Receipts This Page (optional)	1							3	30.76	;	1
┝	SUBICIAL OF RECEIPTS THIS FAGE (OPTIONAL)			<u> </u>		0 Ú			-		•	í
	TOTAL This Period (last page this line number	only)			<u> </u>							
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ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for e Deta	separate schedule(s) ach category of the illed Summary Page	FOR LINE NUMBER: PAGE 54 / 240 (check only one) 11c X 11a 11b 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committee	e name and address of	sold or used by any pers any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Z A.	Full Name (Last, First, Middle Initial) Jennie J. Goss Mailing Address 1037 Leonard Street			Date of Receipt
				11 05 2009
	City Camden		Code	Transaction ID: A6FD880C5F60943BB88
	FEC ID number of contributing federal political committee.		701-2790	Amount of Each Receipt this Period 26.92
	Name of Employer Diversicare Leasing Corp	Occupation Admin Adminis	trator-exemp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to	-Date ▼ 580.18]
_ В.	Full Name (Last, First, Middle Initial) Jennie J. Goss Mailing Address 1037 Leonard Street	I		Date of Receipt
				11 19 2009
	City State		Code	Transaction ID: A94540F989AE745B48A
	Camden FEC ID number of contributing federal political committee.	AR 71	701-2790	Amount of Each Receipt this Period
	Name of Employer Diversicare Leasing Corp	Occupation Admin Adminis		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to	o-Date ▼ 607.10]
_ C.	Full Name (Last, First, Middle Initial) Jennie J. Goss Mailing Address 1037 Leonard Street	I		Date of Receipt
	City	State Zip	Code	Transaction ID: ACEF6B131F7C14CEA8
	Camden	AR 71	701-2790	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		26.92
	Name of Employer Diversicare Leasing Corp	Occupation Admin Adminis	•	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to	634.02	
Γ	SUBTOTAL of Receipts This Page (optional)			80.76
	TOTAL This Period (last page this line number	only)		

Use separate schedule(s) for each category of the Detailed Summary Page ements may not be sold or used by any persorme and address of any political committee to State Zip Code AR 71701-2790 C	Date of Receipt M M I I T Y		
Detailed Summary Page ements may not be sold or used by any persome and address of any political committee to State Zip Code AR 71701-2790 C	X 11a 11b 11c 12 13 14 15 16 17 n for the purpose of soliciting contributions solicit contributions from such committee. Date of Receipt 17 2009 Transaction ID: A8B56111162C84934954 Amount of Each Receipt this Period 26.92 Date of Receipt 16 26.92 Transaction ID: A264C2C50909A4CD389 Amount of Each Receipt this Period Amount of Each Receipt this Period		
State Zip Code AR 71701-2790 C Occupation Admin Administrator-exemp Aggregate Year-to-Date ▼ 660.94 State Zip Code AR 71701-2790	13 14 15 16 17 n for the purpose of soliciting contributions solicit contributions from such committee. Date of Receipt 12 17 2009 Transaction ID: A8B56111162C84934954 Amount of Each Receipt this Period 26.92 Date of Receipt 16 2009 Transaction ID: A8B56111162C84934954 Amount of Each Receipt this Period 26.92 Date of Receipt 26.92 M M 16 2009 Transaction ID: A264C2C50909A4CD389 Amount of Each Receipt this Period Amount of Each Receipt this Period		
State Zip Code AR 71701-2790 C Occupation Admin Administrator-exemp Aggregate Year-to-Date 660.94 State Zip Code AR 71701-2790	Date of Receipt M M I I T Y		
AR 71701-2790 C Occupation Admin Administrator-exemp Aggregate Year-to-Date Aggregate Year-to-Date ▼ 660.94 660.94 State Zip Code AR 71701-0264	M M / D 0 Y		
AR 71701-2790 C Occupation Admin Administrator-exemp Aggregate Year-to-Date Aggregate Year-to-Date ▼ 660.94 660.94 State Zip Code AR 71701-0264	M M / D 0 Y		
AR 71701-2790 C Occupation Admin Administrator-exemp Aggregate Year-to-Date Aggregate Year-to-Date ▼ 660.94 660.94 State Zip Code AR 71701-0264	M M / D 0 / Y		
AR 71701-2790 C Occupation Admin Administrator-exemp Aggregate Year-to-Date Aggregate Year-to-Date ▼ 660.94 660.94 State Zip Code AR 71701-0264	12 17 2009 Transaction ID: A8B56111162C84934954 Amount of Each Receipt this Period 26.92 Date of Receipt M / 07 16 2009 Transaction ID: A264C2C50909A4CD389 Amount of Each Receipt this Period		
AR 71701-2790 C Occupation Admin Administrator-exemp Aggregate Year-to-Date Aggregate Year-to-Date ▼ 660.94 660.94 State Zip Code AR 71701-0264	Amount of Each Receipt this Period 26.92 Date of Receipt 0 7 / 1 6 / Y Y Y Y 0 7 J 1 6 / Z 0 0 9 Transaction ID: A264C2C50909A4CD385 Amount of Each Receipt this Period		
C Occupation Admin Administrator-exemp Aggregate Year-to-Date ▼ 660.94 State Zip Code AR 71701-0264	Date of Receipt M M / D 1 6 Y Y Y Y 0 7 1 6 2 0 0 9 Transaction ID: A264C2C50909A4CD385 Amount of Each Receipt this Period		
Occupation Admin Administrator-exemp Aggregate Year-to-Date ▼ 660.94 State Zip Code AR 71701-0264	Date of Receipt M M M / D D / Y Y Y Y 07 / 16 / 2009 Transaction ID: A264C2C50909A4CD385 Amount of Each Receipt this Period		
Admin Administrator-exemp Aggregate Year-to-Date ▼ 660.94 State Zip Code AR 71701-0264	M M / D D / Y Y Y Y 0 7 1 6 2 0 0 9 Transaction ID: A264C2C50909A4CD385 Amount of Each Receipt this Period		
Aggregate Year-to-Date V 660.94 State Zip Code AR 71701-0264	M M / D D / Y Y Y Y 0 7 1 6 2 0 0 9 Transaction ID: A264C2C50909A4CD385 Amount of Each Receipt this Period		
660.94 State Zip Code AR 71701-0264	M M / D D / Y Y Y Y 0 7 1 6 2 0 0 9 Transaction ID: A264C2C50909A4CD385 Amount of Each Receipt this Period		
State Zip Code AR 71701-0264	M M / D D / Y Y Y Y 0 7 1 6 2 0 0 9 Transaction ID: A264C2C50909A4CD38 Amount of Each Receipt this Period		
AR 71701-0264	M M / D D / Y Y Y Y 0 7 1 6 2 0 0 9 Transaction ID: A264C2C50909A4CD38 Amount of Each Receipt this Period		
AR 71701-0264	07 16 2009 Transaction ID: A264C2C50909A4CD38 Amount of Each Receipt this Period		
AR 71701-0264	Amount of Each Receipt this Period		
	10.40		
	13.40		
Occupation Nursing Admin Don-exempt	_		
Aggregate Year-to-Date V			
201.00			
	Date of Receipt		
Connie Griffis Mailing Address Po Box 264			
State Zip Code	Transaction ID: AC5C239EF39774C4EB		
AR 71701-0264	Amount of Each Receipt this Period		
C	13.40		
Occupation Nursing Admin Don-exempt	_		
Aggregate Year-to-Date V	1		
201.00			
	53.72		
	State Zip Code AR 71701-0264 C Occupation Nursing Admin Don-exempt Aggregate Year-to-Date ▼		

SCHEDULE A (FEC F ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 240 (check only one) 11a X 11a 13 14 15 16			
Any information copied from such or for commercial purposes, other NAME OF COMMITTEE (In Fit Advocat Inc. Political Action	than using the name and ad ull)	ay not be sold or used by any pers Idress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.			
Full Name (Last, First, Middle I Connie Griffis	,		Date of Receipt			
Mailing Address Po Box 26	4		0 8 1 3 Y Y Y Y Y 0 9 1 3 2 0 0 9			
City	State	Zip Code	Transaction ID: AA9A011F737824D27B8			
Camden	AR	71701-0264	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		13.40			
Name of Employer Diversicare Leasing Corp	Occupatio					
Receipt For:			_			
Primary Genera Other (specify) ▼	00 0	e Year-to-Date ▼ 214.40]			
Full Name (Last, First, Middle I Connie Griffis	nitial)		Date of Receipt			
Mailing Address Po Box 26	4		0 8 / D D / Y Y Y Y 0 8 27 2009			
City	State	Zip Code	Transaction ID: A37A9FB17F55040D5B			
Camden	AR	71701-0264	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		13.40			
Name of Employer Diversicare Leasing Corp	v	Admin Don-exempt				
Receipt For: Primary Genera Other (specify) ▼		e Year-to-Date 🔻 227.80				
Full Name (Last, First, Middle I Rene" Gruendl	nitial)	Date of Receipt				
Mailing Address 9027 Fore	st Lawn Drive		07 10 Y Y Y Y 0.7 0.7			
City	State	Zip Code	Transaction ID: A56B9EA624FB047E080			
Brentwood	TN	37027-5227	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		24.96			
Name of Employer Diversicare Management Se-	Occupatio	on Iarketing Director				
rvices Receipt For:		e Year-to-Date V				
Primary Genera Other (specify) ▼		324.48]			
SUBTOTAL of Receipts This Pa	ge (optional)		51.76			
TOTAL This Period (last page th	is line number only)					

An	EMIZED RECEIPTS		se separate schedule(s)	
Ar or			or each category of the letailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
	ny information copied from such Reports and s for commercial purposes, other than using the	Statements may not e name and address	be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committ	ee		
<u> </u>	Full Name (Last, First, Middle Initial) Rene'' Gruendl			Date of Receipt
	Mailing Address 9027 Forest Lawn Dri	ve		07 / 24 / 2009
	City		Zip Code	Transaction ID: AF8857B38ED964C97E
	Brentwood	TN	37027-5227	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		24.96
	Name of Employer Diversicare Management Se-	Occupation	tine Director	
	rvices Receipt For:	TN/AL Marke	-	_
	Primary General Other (specify) v		349.44]
	Full Name (Last, First, Middle Initial) Rene'' Gruendl			Date of Receipt
	Mailing Address 9027 Forest Lawn Drive			
	City		Zip Code	Transaction ID: ABA928EAEB36748F69
	Brentwood	TN	37027-5227	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		24.96
	Name of Employer Diversicare Management Se-	Occupation TN/AL Marke	ting Director	
	rvices Receipt For:	Aggregate Yea	•	
	Primary General Other (specify) ▼		374.40]
	Full Name (Last, First, Middle Initial) Rene" Gruendl	Date of Receipt		
	Mailing Address 9027 Forest Lawn Dri	ve		M M / D D / Y Y Y Y 08 21 2009
	City		Zip Code	Transaction ID: A422763B29C0049599
	Brentwood	TN	37027-5227	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		24.96
	Name of Employer Diversicare Management Se- rvices	Occupation TN/AL Marke	ting Director	
	Receipt For: Primary General	Aggregate Yea	r-to-Date 🔻	
	Other (specify)		399.36	
s	UBTOTAL of Receipts This Page (optional).	1	_	74.88

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 240 (check only one) X X 11a 11b 11c 12 12 12 12		
	Any information copied from such Reports and or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	Statements ma ne name and ad	y not be sold or used by any pers dress of any political committee to	13 14 15 16 17 on for the purpose of soliciting contributions o solicit contributions from such committee.		
	Advocat Inc. Political Action Committ	tee				
Α.	Full Name (Last, First, Middle Initial) Rene'' Gruendl			Date of Receipt		
	Mailing Address 9027 Forest Lawn Dri	ive		M M / D D / Y Y Y Y 09 04 2009		
	City	State	Zip Code	Transaction ID: AC8C4F6B5D8564B9085		
	Brentwood	TN	37027-5227	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		24.96		
	Name of Employer Diversicare Management Se- rvices	Occupatio TN/AL N	on Iarketing Director	_		
	Receipt For:		e Year-to-Date 🔻			
	Primary General Other (specify) ▼	0 0 0 0	424.32]		
- В.	Full Name (Last, First, Middle Initial) Rene'' Gruendl	-		Date of Receipt		
	Mailing Address 9027 Forest Lawn Dri	ive		M M / D D / Y Y Y Y 09 18 2009		
	City	State	Zip Code	Transaction ID: A20BF350E6779422DBC		
	Brentwood	TN	37027-5227	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		24.96		
	Name of Employer Diversicare Management Se-	Occupatio	n Iarketing Director			
	rvices Receipt For:	- 1 · · · · · · · · · · · · · · · · · ·	e Year-to-Date V			
	Primary General Other (specify) ▼		449.28]		
- C.	Full Name (Last, First, Middle Initial) Rene'' Gruendl	Date of Receipt				
	Mailing Address 9027 Forest Lawn Dri	Mailing Address 9027 Forest Lawn Drive				
	City	State	Zip Code	Transaction ID: A2467F05D2A3B4CB1A1		
	Brentwood	TN	37027-5227	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		24.96		
	Name of Employer Diversicare Management Se- rvices	- 1 · ·	larketing Director			
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻			
	Other (specify)	0 0	474.24			
ſ	SUBTOTAL of Receipts This Page (optional)			74.88		
ŀ	TOTAL This Period (last page this line number		•			
L	IVIAL THIS FERIOU (IAST PAYE THIS IITE HUMDE	a Oniy)				

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 240 (check only one)
Any information copied from such Reports or for commercial purposes, other than us NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Cor	sing the name and add	not be sold or used by any perso ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Rene" Gruendl			Date of Receipt
Mailing Address 9027 Forest Law	<i>i</i> n Drive		10 ^{/ Y Y Y Y} 16 ^{/ 2009}
City	State	Zip Code	Transaction ID: A1F52E4D9AE0B4C0CB
Brentwood FEC ID number of contributing federal political committee.	TN	37027-5227	Amount of Each Receipt this Period 24.96
Name of Employer Diversicare Management Se- rvices Receipt For:	I	rketing Director Year-to-Date ▼	-
Primary General Other (specify) ▼	Aggregate	499.20]
Full Name (Last, First, Middle Initial) Vicki L. Hampton Mailing Address Po Box 123			Date of Receipt
			07 02 2009
City Delaplaine	State AR	Zip Code 72425-0123	Transaction ID: AE4B96F258B9D4A5C99
FEC ID number of contributing federal political committee.	FEC ID number of contributing		Amount of Each Receipt this Period 26.92
Name of Employer Diversicare Leasing Corp	V	dmin Don-exempt	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 337.90]
Full Name (Last, First, Middle Initial) Vicki L. Hampton			Date of Receipt
Mailing Address Po Box 123			07 / D D / Y Y Y Y 16 2009
City	State	Zip Code	Transaction ID: AA2B37222E69148AE81
Delaplaine	AR	72425-0123	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		26.92
Name of Employer Diversicare Leasing Corp		dmin Don-exempt	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 391.74]
SUBTOTAL of Receipts This Page (opti	onal)	······	78.80
TOTAL This Period (last page this line n	number only)		

	SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	for e	separate schedule(s) each category of the alled Summary Page	FOR LINE NUMBER: PAGE 60 / 240 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	the name and address of	sold or used by any pers any political committee to	on for the purpose of soliciting contributions
А.	Full Name (Last, First, Middle Initial) Vicki L. Hampton Mailing Address Po Box 123			Date of Receipt 07 / 16 / Y Y Y Y 2009
	City <u>Delaplaine</u> FEC ID number of contributing	AR 72	0 Code 2425-0123	Transaction ID: AC34BBEC417B2474FADB Amount of Each Receipt this Period
	federal political committee. Name of Employer Diversicare Leasing Corp Receipt For: Primary General Other (specify) ▼	C Occupation Nursing Admin Aggregate Year-to	· · · · · · · · · · · · · · · · · · ·	
в.	Full Name (Last, First, Middle Initial) Vicki L. Hampton Mailing Address Po Box 123			Date of Receipt 0 8 / D 0 / Y Y Y Y 2 0 0 9
	City <u>Delaplaine</u> FEC ID number of contributing federal political committee.		0 Code 2425-0123	Transaction ID: AE11BCBF4EE1C4010B80 Amount of Each Receipt this Period 26.92
	Name of Employer Diversicare Leasing Corp Receipt For: Primary General Other (specify)	Occupation Nursing Admin Aggregate Year-to]
- C.	Full Name (Last, First, Middle Initial) Vicki L. Hampton Mailing Address Po Box 123			Date of Receipt
	City Delaplaine FEC ID number of contributing federal political committee.		0 Code 2425-0123	0 8 2 7 2 0 0 9 Transaction ID: AF53FE476A62849E881C Amount of Each Receipt this Period 26.92
	Name of Employer Diversicare Leasing Corp	Occupation Nursing Admin	Don-exempt	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to		
	SUBTOTAL of Receipts This Page (optional)	······	80.76
	TOTAL This Period (last page this line num	per only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 240 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using th NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committ	Statements may not be sold or used by any pers e name and address of any political committee t	on for the purpose of soliciting contributions
A.	Full Name (Last, First, Middle Initial) Vicki L. Hampton Mailing Address Po Box 123		Date of Receipt
	Mailing Address Po Box 123		09 / 10 / Y Y Y Y 2009
	City	State Zip Code	Transaction ID: AC74D6967CBE14025BA
	Delaplaine	AR 72425-0123	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	26.92
	Name of Employer Diversicare Leasing Corp	Occupation Nursing Admin Don-exempt	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	472.50	
– В.	Full Name (Last, First, Middle Initial) Vicki L. Hampton		Date of Receipt
	Mailing Address Po Box 123		M = M / D = D / Y = Y = Y Y Y = Y Y Y Y = Y Y
	City	State Zip Code	Transaction ID: A905ABBBE04E94EED84
	Delaplaine	AR 72425-0123	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		26.92
	Name of Employer Diversicare Leasing Corp	Occupation Nursing Admin Don-exempt	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 499.42	
– C.	Full Name (Last, First, Middle Initial) Vicki L. Hampton		Date of Receipt
	Mailing Address Po Box 123		M M / D D / Y Y Y Y 10 08 2009
	City	State Zip Code	Transaction ID: A0F0802FBC3A64F49878
	Delaplaine	AR 72425-0123	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	26.92
	Name of Employer Diversicare Leasing Corp	Occupation Nursing Admin Don-exempt	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 526.34	
Γ	SUBTOTAL of Receipts This Page (optional)		80.76
	TOTAL This Period (last page this line numbe		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 240 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commit	Statements may not be sold or used by any person ne name and address of any political committee to tee	son for the purpose of soliciting contributions to solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Vicki L. Hampton Mailing Address Po Box 123		Date of Receipt
			10 22 2009
	City	State Zip Code	Transaction ID: AE0690C1B62EC424ABD6
	Delaplaine FEC ID number of contributing federal political committee.	AR 72425-0123	Amount of Each Receipt this Period 26.92
	Name of Employer Diversicare Leasing Corp	Occupation Nursing Admin Don-exempt	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 553.26	
в.	Full Name (Last, First, Middle Initial) Vicki L. Hampton Mailing Address Po Box 123		Date of Receipt
	City	State Zip Code	1 1 0 5 2 0 0 9 Transaction ID: A7FF5FD98B2EA4BDA909
	Delaplaine	AR 72425-0123	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	26.92
	Name of Employer Diversicare Leasing Corp	Occupation Nursing Admin Don-exempt	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 580.18	
- C.	Full Name (Last, First, Middle Initial) Vicki L. Hampton Mailing Address Po Box 123		Date of Receipt
	City	State Zip Code	Transaction ID: A8E22BA5D6729469DB2D
	Delaplaine	AR 72425-0123	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	26.92
	Name of Employer Diversicare Leasing Corp	Occupation Nursing Admin Don-exempt	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 607.10	
ſ	SUBTOTAL of Receipts This Page (optional)	•	▶ 80.76
	TOTAL This Period (last page this line number	er only)	

SCHEDULE A (FEC Form	1 3X) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 240 (check only one) X X 11a 13 14 15 16 17
Any information copied from such Repo	rts and Statements may not be sold or used by any pers using the name and address of any political committee t	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Advocat Inc. Political Action C		
Full Name (Last, First, Middle Initial) Vicki L. Hampton		Date of Receipt
Mailing Address Po Box 123		M M / D D / Y Y Y Y 12 03 2009
City	State Zip Code	Transaction ID: A5D5D8AD5F09B492EA
Delaplaine FEC ID number of contributing	AR 72425-0123	Amount of Each Receipt this Period
federal political committee.		
Name of Employer Diversicare Leasing Corp	Occupation Nursing Admin Don-exempt	
Receipt For:	Aggregate Year-to-Date ▼	
Other (specify) ▼	634.02	
Full Name (Last, First, Middle Initial) Vicki L. Hampton		Date of Receipt
Mailing Address Po Box 123		12 17 2009
City	State Zip Code	Transaction ID: A5B2EFB24795648719
Delaplaine	AR 72425-0123	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	26.92
Name of Employer Diversicare Leasing Corp	Occupation Nursing Admin Don-exempt	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	660.94	
Full Name (Last, First, Middle Initial) Edward F. Heenan	I	Date of Receipt
Mailing Address 2005 Boxwood	Drive	07 10 2009
City	State Zip Code	Transaction ID: A6EEE3EEBC4AE4B40
Franklin	TN 37069-6908	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		32.60
Name of Employer Diversicare Management Se- rvices	Occupation Training & Education Dire	
Receipt For: Primary General	Aggregate Year-to-Date ▼	_
Other (specify)	414.30	
	ational)	86.44
SUBTUTAL OF Receipts This Page (0	otional)	

				FC	RLINE	= NI		B∙ Þ₽	GF	64 / 2	40
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	-	neck on	-		1. [17		0472	
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•	Edward F. Heenan			Date of Receipt
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∽ A.	Full Name (Last, First, Middle Initial) David R. Hickman			Date of Receipt
	Mailing Address 801 Brownstone Cou	urt		M M / D D / Y Y Y Y 07 10 2009
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C.	David R. Hickman			Date of Receipt
	Mailing Address 801 Brownstone Cou	urt		08 07 2009
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Full Name (Last, First, Middle Initial) David R. Hickman Mailing Address 801 Brownstone C	ourt	Date of Receipt
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Name of Employer Diversicare Management Se- rvices	Occupation VP Human Resources	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1062.56	
Full Name (Last, First, Middle Initial) David R. Hickman Mailing Address 801 Brownstone C	ourt	Date of Receipt
		09 04 2009
City Nolensville	State Zip Code TN 37135-9720	Transaction ID: AB84D9E20CEB143009
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Name of Employer Diversicare Management Se- rvices	Occupation VP Human Resources	
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Full Name (Last, First, Middle Initial) David R. Hickman		Date of Receipt
Mailing Address 801 Brownstone C	ourt	09 18 2009
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Name of Employer Diversicare Management Se- rvices	Occupation VP Human Resources	
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Any information copied from such Reports	and Statements may not be sold or used by any perso	on for the purpose of soliciting contributions
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NAME OF COMMITTEE (In Full)		
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۷ A.	Full Name (Last, First, Middle Initial) Danielle Higdon Mailing Address 377 Hutchens Rd		Date of Receipt
			07 16 2009
	City	State Zip Code	Transaction ID: ADBF946ACD8B146D693
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- C.	Full Name (Last, First, Middle Initial) Danielle Higdon Mailing Address 377 Hutchens Rd	<u> </u>	Date of Receipt
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	SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 75 / 240 (check only one) 711a X 11a 11b 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	d Statements may not be sold or used by any pers the name and address of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A.	Full Name (Last, First, Middle Initial) Danielle Higdon Mailing Address 377 Hutchens Bd		Date of Receipt
	Mailing Address 377 Hutchens Rd		10 ²² ²² ²⁰⁰⁹
	City	State Zip Code	Transaction ID: A10DAC4EF1A9145FDB38
	Martin FEC ID number of contributing federal political committee.	TN 38237-5377	Amount of Each Receipt this Period 25.63
	Name of Employer Diversicare Leasing Corp	Occupation	
	Receipt For:	Nursing Admin Don-exempt Aggregate Year-to-Date	
	Other (specify)	533.82	
в.	Full Name (Last, First, Middle Initial) Danielle Higdon		Date of Receipt
	Mailing Address 377 Hutchens Rd		1 1 0 5 Y Y Y Y 1 1 1 0 5 2 0 0 9
	City	State Zip Code	Transaction ID: ABE252ED538654CE9B4F
	Martin	TN 38237-5377	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.63
	Name of Employer Diversicare Leasing Corp	Occupation Nursing Admin Don-exempt	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 559.45	
– C.	Full Name (Last, First, Middle Initial) Danielle Higdon		Date of Receipt
	Mailing Address 377 Hutchens Rd		M M / D D / Y Y Y Y 111 19 2009
	City	State Zip Code	Transaction ID: AAD98A3E6A91E4F1CAD
	Martin FEC ID number of contributing federal political committee.	TN 38237-5377	Amount of Each Receipt this Period
	Name of Employer Diversicare Leasing Corp	Occupation Nursing Admin Don-exempt	
	Receipt For:	Aggregate Year-to-Date ▼	
-	Other (specify)	585.08	
	SUBTOTAL of Receipts This Page (optional)	76.89
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	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(che	R LINE	-	e)	-	_		ie 7	10	40	
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	Any information copied from such Reports and or for commercial purposes, other than using t	d Statements may	y not be sold or used by any pers dress of any political committee t	on for th	ne purp contrib	oose	of ns f	solic	citing suc	g cor ch co	ntribu ommi	tions ttee.		
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commi													
۷ A .	Full Name (Last, First, Middle Initial) Danielle Higdon				Date of	Rec	ceip	t						
	Mailing Address 377 Hutchens Rd				^м 12	1	D	03	3	Y		0 [°] 0 9		
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- В.	Full Name (Last, First, Middle Initial) Danielle Higdon				Date of	Red	ceip	t						
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	Name of Employer Diversicare Leasing Corp	Occupatio												
	Receipt For:		Admin Don-exempt											
	Primary General Other (specify) ▼		636.34											
– c.	Full Name (Last, First, Middle Initial) Pamela R. Higgins				Date of	Red	ceip	t						
	Mailing Address 115 Polk 109				м м 09	/	D	24		Y		Y 0 0 9		
	City	State	Zip Code		ransa						EFA	.050		92991
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SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	X) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 77 / 240 (check only one)
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	Ind Statements may not be sold or used by any pers g the name and address of any political committee to	on for the purpose of soliciting contributions
Advocat Inc. Political Action Comr	nittee	
Full Name (Last, First, Middle Initial) Pamela R. Higgins		Date of Receipt
Mailing Address 115 Polk 109		10 ^{//} V V V V 10 ^{//} 08 ^{//} 2009
City	State Zip Code	Transaction ID: AF48F34AC57C748FCA
Mena	AR 71953-8577	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	13.79
Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
Receipt For:	Aggregate Year-to-Date V	7
Other (specify) ▼	225.28]
Full Name (Last, First, Middle Initial) Pamela R. Higgins		Date of Receipt
Mailing Address 115 Polk 109		10 ^{//} 22 [/] 2009
City	State Zip Code	Transaction ID: A5F358567F7F444798E
Mena	AR 71953-8577	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	13.79
Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 239.07]
Full Name (Last, First, Middle Initial) Pamela R. Higgins		Date of Receipt
Mailing Address 115 Polk 109		1 1 0 5 2 0 0 9
City	State Zip Code	Transaction ID: ACDCA21371AAA4B78
Mena	AR 71953-8577	Amount of Each Receipt this Period
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Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 252.86]
SUBTOTAL of Receipts This Page (option	al)	41.37
TOTAL This Period (last page this line nur	nber only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 78 / 240 (check only one) 11a X 11a 13 14 15 16
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commit	he name and add	not be sold or used by any pers ress of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Pamela R. Higgins Mailing Address 115 Polk 109			Date of Receipt
		0	7	11 19 2009
	City Mena	State AR	Zip Code 71953-8577	Transaction ID: A107DD0170BBE4A83B8 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		
	Name of Employer Diversicare Leasing Corp		ministrator-exemp	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 266.65	
- В.	Full Name (Last, First, Middle Initial) Pamela R. Higgins Mailing Address 115 Polk 109			Date of Receipt
	0.1			12 03 2009
	City Mena	State AR	Zip Code 71953-8577	Transaction ID: A814F27C9C5C64ECAB/ Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		13.79
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	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 280.44	
- C.	Full Name (Last, First, Middle Initial) Pamela R. Higgins Mailing Address 115 Polk 109			Date of Receipt
	City	State	Zip Code	Transaction ID: A6B535CEAC604413CB3
	Mena	AR	71953-8577	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		13.79
	Name of Employer Diversicare Leasing Corp Receipt For:		ministrator-exemp	
	Primary General Other (specify) ▼	Aggregate	Year-to-Date 294.23	
ſ	SUBTOTAL of Receipts This Page (optional)			41.37
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and Statem or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committee Full Name (Last, First, Middle Initial) Janice L. Horton	Use separate schedule(s) for each category of the Detailed Summary Page nents may not be sold or used by any perso he and address of any political committee to	FOR LINE NUMBER: PAGE 79 / 240 (check only one) 11c 12 X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions solicit contributions from such committee. 10 10 17
Any information copied from such Reports and Statem or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committee Full Name (Last, First, Middle Initial) Janice L. Horton	for each category of the Detailed Summary Page ments may not be sold or used by any perso	X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions
Any information copied from such Reports and Staten or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committee Full Name (Last, First, Middle Initial) Janice L. Horton	Detailed Summary Page ments may not be sold or used by any perso	13 14 15 16 17
or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committee Full Name (Last, First, Middle Initial) Janice L. Horton	nents may not be sold or used by any perso	13 14 15 16 17
or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committee Full Name (Last, First, Middle Initial) Janice L. Horton	nents may not be sold or used by any perso ne and address of any political committee to	on for the purpose of soliciting contributions
or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committee Full Name (Last, First, Middle Initial) Janice L. Horton	he 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) Janice L. Horton		
Advocat Inc. Political Action Committee Full Name (Last, First, Middle Initial) Janice L. Horton		
Full Name (Last, First, Middle Initial) Janice L. Horton		
Janice L. Horton		
Janice L. Horton		
		Date of Receipt
Mailing Address 4527 Se Hwy 70		
		07 09 2009
City	State Zip Code	Transaction ID: A3B120E9A7D8D4E8D
Arcadia	FL 34266-7787	Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	С	29.52
Name of Employer	Decupation	
Diversicare Leasing Corpo- ration	Admin Administrator-exemp	
	Aggregate Year-to-Date V	-
Primary General		1
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Janice L. Horton		Date of Receipt
Mailing Address 4527 Se Hwy 70		
		07 23 2009
City	State Zip Code	Transaction ID: AA7076379A9124AB18
Arcadia	FL 34266-7787	Amount of Each Receipt this Period
FEC ID number of contributing		20.50
federal political committee.	C	29.52
Name of Employer	Dccupation	
Diversicare Leasing Corpo- ration	Admin Administrator-exemp	
	Aggregate Year-to-Date 🔻	
Primary General		1
Other (specify)	433.66	
Full Name (Last, First, Middle Initial)		+
Janice L. Horton		Date of Receipt
Mailing Address 4527 Se Hwy 70		08 06 Y Y Y Y 08 06 2009
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ration Primary General	Admin Administrator-exemp Aggregate Year-to-Date 463.18	88.56

9	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 80 / 240
	· · ·		Use separate schedule(s) for each category of the	(check only one)
	TEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			Detailed Summary Fage	
Γ	Any information copied from such Reports and S	Statements ma	v not be sold or used by any perso	
	or for commercial purposes, other than using the	e name and ad	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	Advocat Inc. Political Action Committee	20		
Z	Full Name (Last, First, Middle Initial)			
Α.	Janice L. Horton			Date of Receipt
	Mailing Address 4527 Se Hwy 70			M M / D D / Y Y Y Y 08 20 2009
	City	State	Zip Code	Transaction ID: AE9027589249F48CDB5
	Arcadia	FL	34266-7787	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		29.52
				_
	Name of Employer Diversicare Leasing Corpo-	Occupatio		
	ration	1 1	dministrator-exemp	_
	Receipt For:	Aggregat	e Year-to-Date	
	Primary General		492.70	
	Other (specify) v	0.0		1
-	Full Name (Last, First, Middle Initial)			
3.	Janice L. Horton			Date of Receipt
	Mailing Address 4527 Se Hwy 70			M M / D D / Y Y Y Y 09 03 2009
	City	State	Zip Code	
			•	Transaction ID: AF1AFC8466BED4C389
	Arcadia	<u> </u>	34266-7787	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		29.52
	Name of Employer Diversicare Leasing Corpo-	Occupatio	n	-
	Diversicare Leasing Corpo- ration	Admin A	dministrator-exemp	
	Receipt For:	Aggregat	e Year-to-Date 🔻	
	Primary General			1
	Other (specify)		522.22	
-	Full Name (Last, First, Middle Initial)			+
) .	Janice L. Horton			Date of Receipt
	Mailing Address 4527 Se Hwy 70			0 9 1 7 2 0 0 9
	City	State	Zip Code	09172009 Transaction ID: A45585360FF634C609E
	Arcadia	FL	34266-7787	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		29.52
	Name of Employer Diversicare Leasing Corpo-	Occupatio	n	7
	Diversicare Leasing Corpo- ration	Admin A	dministrator-exemp	
	Receipt For:	Aggregat	e Year-to-Date 🔻	
	Primary General		EE1 74	1
	Other (specify)	0 0	551.74	1
Г				
	SUBTOTAL of Receipts This Page (optional)		•••••••••••••••••••••••••••••••••••••••	88.56
ſ	TOTAL This Daried (last page this line and			
L	TOTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 81 / 240 (check only one) 11a X 11a 13 14 15 16 17
	Any information copied from such Reports and so for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committed Strategy Advocat Inc.	e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Z 4.	Full Name (Last, First, Middle Initial) Janice L. Horton			Date of Receipt
	Mailing Address 4527 Se Hwy 70			10 ^{//} 15 [/] 2009
	City	State	Zip Code	Transaction ID: A2357716B80C0422E84
	Arcadia	<u> </u>	34266-7787	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		29.52
	Name of Employer Diversicare Leasing Corpo-	Occupatio	n	_
	ration		dministrator-exemp	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify)	0 0	610.78	
	Full Name (Last, First, Middle Initial) Janice L. Horton			Date of Receipt
	Mailing Address 4527 Se Hwy 70			$\frac{M}{10} \frac{M}{15} \frac{M}{2009}$
	City	State	Zip Code	Transaction ID: ABD9848FF90F24A56BI
	Arcadia	FL	34266-7787	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		29.52
	Name of Employer Diversicare Leasing Corpo- ration Receipt For:		dministrator-exemp	
	Primary General Other (specify) ▼		e Year-to-Date 610.78]
	Full Name (Last, First, Middle Initial) Janice L. Horton			Date of Receipt
	Mailing Address 4527 Se Hwy 70			10 ²⁹ 2009
	City	State	Zip Code	Transaction ID: A74EC4EE9F970416CA
	Arcadia	FL	34266-7787	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		29.52
	Name of Employer Diversicare Leasing Corpo- ration	Occupatio Admin A	n dministrator-exemp	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	640.30]
	SUBTOTAL of Receipts This Page (optional) .			88.56
	TOTAL This Period (last page this line numbe		•	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 82/240 (check only one) 11c 12 X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and s or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committ	e name and add		on for the purpose of soliciting contributions
A .	Full Name (Last, First, Middle Initial) Janice L. Horton Mailing Address 4527 Se Hwy 70 City <u>Arcadia</u> FEC ID number of contributing federal political committee.	State FL C	Zip Code 34266-7787	Date of Receipt M M / D / Y
_	Name of Employer Diversicare Leasing Corpo- ration Receipt For: Primary General Other (specify) ▼		n dministrator-exemp Year-to-Date ▼ 669.82	
З.	Full Name (Last, First, Middle Initial) Janice L. Horton Mailing Address 4527 Se Hwy 70 City	State	Zip Code	Date of Receipt 1 1 2 5 2 5 2 0 9 Transaction ID: A4C5C97991B75464EB6
	Arcadia FEC ID number of contributing federal political committee. Name of Employer Diversicare Leasing Corpo-	C Occupation		Amount of Each Receipt this Period 29.52
	ration Receipt For: Primary General Other (specify) ▼	1 1	dministrator-exemp Year-to-Date ▼ 699.34	
;.	Full Name (Last, First, Middle Initial) Janice L. Horton Mailing Address 4527 Se Hwy 70			Date of Receipt
	City <u>Arcadia</u> FEC ID number of contributing federal political committee.	State FL	Zip Code 34266-7787	Transaction ID: A9876B2E8EFDB4771AE Amount of Each Receipt this Period 29.52
	Name of Employer Diversicare Leasing Corpo- ration Receipt For: Primary General Other (specify)	1.1	dministrator-exemp Year-to-Date ▼ 728.86	
	SUBTOTAL of Receipts This Page (optional) .	·		88.56
	TOTAL This Period (last page this line numbe	r only)		

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SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 83 / 240											
· · · · ·		Use separate schedule(s) for each category of the	(check only one)											
ITEMIZED RECEIPTS		Detailed Summary Page	>	< 11a		11b	11c		12					
				13		14	15		16		17			
Any information copied from such Reports and S	Statements may	not be sold or used by any perso	on for	the pur	pose	of so	liciting co	ntrib	utions					
or for commercial purposes, other than using the	e name and add	lress of any political committee to	o solic	it contri	butio	ns fro	m such c	omm	ittee.					
NAME OF COMMITTEE (In Full)											_			
Advocat Inc. Political Action Committee	ee													
Full Name (Last, First, Middle Initial) Janice L. Horton				Date o	f Re	ceipt								
Mailing Address 4527 Se Hwy 70				^M 1 2	/	D 2			о О О 9					
City	State	Zip Code		Transa	otio	n ID:	A0B105	FB5	B74	5457	'9,			
Arcadia	FL	34266-7787					Receipt t							
		012001101		Amou		Lacin		113 1	chida	U	_			
FEC ID number of contributing federal political committee.	C					1		2	29.52	2				
Name of Employer	Occupation	1												
Diversicare Leasing Corpo- ration		dministrator-exemp												
Receipt For:		Year-to-Date V												
Primary General	riggiogato		1											
Other (specify)		758.38												
	0 0		- L											
Full Name (Last, First, Middle Initial)				D .							_			
Karen L. Johnson				Date o		ceipt								
Mailing Address 6437 Wexley Lane				^м 7	1		D / Y 0		0 [°] 0 9					
City	State	Zip Code		Transa	ictio	n ID:	A4BA05	5719	7EC	54E	29			
The Colony	ТХ	75056-7121					Receipt t				_			
							lieee.pr .	_		-	-			
FEC ID number of contributing federal political committee.	C							į	57.69)	_			
Name of Employer	Occupation]												
Diversicare Management Se-	Texas Rv													
rvices Receipt For:	1 1	Year-to-Date V												
Primary General	Aggregate													
Other (specify)		749.97												
	0 0		-											
Full Name (Last, First, Middle Initial)														
Karen L. Johnson				Date o	f Re	ceipt								
Mailing Address 6437 Wexley Lane				M N	/	D			Y					
,				07			4		009					
City	State	Zip Code		Transa	ictio	n ID:	A0820C	:141	6C97	7480	;6			
The Colony	ТХ	75056-7121		Amour	nt of	Each	Receipt tl	nis P	eriod		-			
FEC ID number of contributing						Ú.			-7.00					
federal political committee.	C							:	57.69	,				
Name of Employer Diversicare Management Se-	Occupation													
rvices	Texas Rv	•												
Receipt For:	Aggregate	Year-to-Date 🔻												
Primary General		807.66												
Other (specify)	1 1													
							· · ·				_			
SUBTOTAL of Receipts This Page (optional)		······	•					14	4.90) 	_			
			_								Ĩ			
TOTAL This Period (last page this line number	^r only)		•	L										

SCHEDULE A (FEC Form 3)	X)	FOR LINE NUMBER: PAGE 84 / 240										
•	Use separate schedule(s) for each category of the	(check only one)										
ITEMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12										
		13 14 15 16 17										
Any information copied from such Reports an	nd Statements may not be sold or used by any perso	on for the purpose of soliciting contributions										
or for commercial purposes, other than using	g the name and address of any political committee to	solicit contributions from such committee.										
NAME OF COMMITTEE (In Full)												
Advocat Inc. Political Action Comm	nittee											
Full Name (Last, First, Middle Initial)												
Karen L. Johnson		Date of Receipt										
Mailing Address 6437 Wexley Lane		M M / D D / Y Y Y Y										
		08 07 2009										
City	State Zip Code	Transaction ID: A62C2D39B26E04349										
The Colony	TX 75056-7121	Amount of Each Receipt this Period										
FEC ID number of contributing												
federal political committee.	C	57.69										
Name of Employer Diversicare Management Se-	Occupation											
rvices	Texas Rvp											
Receipt For:	Aggregate Year-to-Date ▼											
Primary General		1										
Other (specify)	865.35											
		1										
Full Name (Last, First, Middle Initial)												
Karen L. Johnson		Date of Receipt										
Mailing Address 6437 Wexley Lane		M M / D D / Y Y Y Y										
		08 21 2009										
City	State Zip Code	Transaction ID: A2D76A498655F4928										
The Colony	TX 75056-7121	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С	57.69										
Name of Employer Diversicare Management Se-	Occupation											
rvices	Texas Rvp											
Receipt For:	Aggregate Year-to-Date 🔻											
Primary General		1										
Other (specify)	923.04											
		1										
Full Name (Last, First, Middle Initial)	·											
Karen L. Johnson		Date of Receipt										
Mailing Address 6437 Wexley Lane		M M / D D / Y Y Y Y										
		09 04 2009										
City	State Zip Code	Transaction ID: A3C8241E14B514411										
The Colony	TX 75056-7121	Amount of Each Receipt this Period										
		57.00										
FEC ID number of contributing		57.69										
FEC ID number of contributing federal political committee.	C											
federal political committee.												
federal political committee.	Occupation											
federal political committee. Name of Employer Diversicare Management Se-	Occupation											
federal political committee.	Occupation Texas Rvp Aggregate Year-to-Date ▼	1										
federal political committee. Name of Employer Diversicare Management Se- rvices Receipt For:	Occupation Texas Rvp]										
federal political committee.	Occupation Texas Rvp Aggregate Year-to-Date ▼]										
federal political committee.	Occupation Texas Rvp Aggregate Year-to-Date ▼											
federal political committee. Name of Employer Diversicare Management Services Receipt For: Primary General Other (specify) ▼	Occupation Texas Rvp Aggregate Year-to-Date ▼	173.07										

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 85 / 240 (check only one) 11c X 11a 11b 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committee	e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Karen L. Johnson Mailing Address 6437 Wexley Lane			Date of Receipt
	City	State	Zip Code	0 9 1 8 2 0 0 9 Transaction ID: ABF8A570CB87D4169961
	The Colony FEC ID number of contributing federal political committee.	TX C	75056-7121	Amount of Each Receipt this Period 57.69
	Name of Employer Diversicare Management Se- rvices Receipt For: Primary General Other (specify) ▼	Occupatio Texas R Aggregate		1
В.	Full Name (Last, First, Middle Initial) Karen L. Johnson Mailing Address 6437 Wexley Lane	1		Date of Receipt
	City	State	Zip Code	10 02 2009 Transaction ID: A210C8CC697AE47EBAC5
	The Colony FEC ID number of contributing federal political committee.	TX C	75056-7121	Amount of Each Receipt this Period 57.69
	Name of Employer Diversicare Management Se- rvices Receipt For: Primary General Other (specify) ▼	Occupatio Texas R Aggregate]
C.	Full Name (Last, First, Middle Initial) Karen L. Johnson			Date of Receipt
	Mailing Address 6437 Wexley Lane			M M / D D / Y Y Y Y 10 16 2009
	City The Colony	State TX	Zip Code 75056-7121	Transaction ID: A418797D16D344A2AAA2 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		57.69
	Name of Employer Diversicare Management Se- rvices Receipt For:	Occupatio Texas R	vp	_
	Primary General Other (specify) ▼		e Year-to-Date ▼ 1153.80]
	SUBTOTAL of Receipts This Page (optional)		······	173.07
	TOTAL This Period (last page this line number	r only)		

	CHEDULE A (FEC Form 3) EMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 86 / 240 (check only one)			
A oi	ny information copied from such Reports ar r for commercial purposes, other than using	d Statements may the name and add	not be sold or used by any pers ress of any political committee t	13 14 15 16 17 son for the purpose of soliciting contributions o solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	ittee					
×	Full Name (Last, First, Middle Initial) Karen L. Johnson			Date of Receipt			
	Mailing Address 6437 Wexley Lane			10 30 Y Y Y Y 10 30 2009			
	City	State	Zip Code	Transaction ID: A090668D9FBCC40939			
	The Colony	TX	75056-7121	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		57.69			
	Name of Employer Diversicare Management Se- rvices	Occupation Texas Rv					
	Receipt For:	Aggregate	Year-to-Date 🔻				
	Other (specify)		1211.49				
	Full Name (Last, First, Middle Initial) Karen L. Johnson	I		Date of Receipt			
	Mailing Address 6437 Wexley Lane			M M / D D / Y Y Y Y 1 1 2 0 0 9			
	City	State	Zip Code	Transaction ID: A8319DC9C278B4CFE8			
	The Colony	TX	75056-7121	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		57.69			
	Name of Employer Diversicare Management Se- rvices	Occupation Texas Rv					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V 1269.18				
	Full Name (Last, First, Middle Initial) Karen L. Johnson			Date of Receipt			
	Mailing Address 6437 Wexley Lane			M M / D D / Y Y Y Y 111 27 2009			
	City	State	Zip Code	Transaction ID: AFA9AD99EB40C4AAC			
	The Colony	TX	75056-7121	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		57.69			
	Name of Employer Diversicare Management Se- rvices	Occupation Texas Rv	р				
	Receipt For: Primary General Other (specify) $rightarrow$	Aggregate	Year-to-Date ▼ 1326.87				
	SUBTOTAL of Receipts This Page (optiona	I		173.07			

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 87 / 240 (check only one) (check 11a) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using th NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committ	e name and address of any political committe	erson for the purpose of soliciting contributions
A.	Full Name (Last, First, Middle Initial) Karen L. Johnson Mailing Address 6437 Wexley Lane		Date of Receipt
	City	State Zip Code	Transaction ID: A7A99D06DDF144FBDBE
	The Colony	TX 75056-7121	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	57.69
	Name of Employer Diversicare Management Se- rvices	Occupation Texas Rvp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1384.56	
– В.	Full Name (Last, First, Middle Initial) Karen L. Johnson Mailing Address 6437 Wexley Lane		Date of Receipt
		12 24 2009	
	City	State Zip Code	Transaction ID: A7C7CC3FC5F524E6DBF
	The Colony	TX 75056-7121	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	57.69
	Name of Employer Diversicare Management Se- rvices	Occupation Texas Rvp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1442.25	
– C.	Full Name (Last, First, Middle Initial) Robin Jones		Date of Receipt
	Mailing Address 4674 Riverbend Road	I	M M / D D / Y Y Y Y 07 / 10 / 2009
	City	State Zip Code	Transaction ID: A42A9EDFF04C44161A1
	Trussville	AL 35173-3506	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	59.97
	Name of Employer Diversicare Management Se- rvices	Occupation Al & Tn Rvp	
	Receipt For: Primary General Other (specify) \blacksquare	Aggregate Year-to-Date 779.61	
ſ	SUBTOTAL of Receipts This Page (optional) .		175.35
	TOTAL This Period (last page this line numbe	r only)	

l	SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	for each category of the Detailed Summary Page	
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	the name and address of any political commit	tee to solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Robin Jones Mailing Address 4674 Riverbend Ro	ad	Date of Receipt
	City	State Zip Code	Transaction ID: A886C9D55915D4B89945
	Trussville	AL 35173-3506	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	59.97
	Name of Employer Diversicare Management Se- rvices	Occupation AI & Tn Rvp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 839.58	3
- В.	Full Name (Last, First, Middle Initial) Robin Jones Mailing Address 4674 Riverbend Ro	ad	Date of Receipt
			08 07 2009
	City	State Zip Code	Transaction ID: AB3DA8D6D75B544CDB9
	Trussville FEC ID number of contributing federal political committee.	AL 35173-3506	Amount of Each Receipt this Period
	Name of Employer Diversicare Management Se- rvices	Occupation AI & Tn Rvp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 899.55	5
- C.	Full Name (Last, First, Middle Initial) Robin Jones		Date of Receipt
	Mailing Address 4674 Riverbend Ro	ad	08 21 Y Y Y Y 08 21 2009
	City	State Zip Code	Transaction ID: AD160CBE92A414E4BBC
	Trussville	AL 35173-3506	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	59.97
	Name of Employer Diversicare Management Se- rvices	Occupation Al & Tn Rvp	
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 959.52	2
Γ	SUBTOTAL of Receipts This Page (optiona	· · · · · · · · · · · · · · · · · · ·	179.91

	CHEDULE A (FEC Form 3X FEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 89 / 240 (check only one) 11c 12 X 11a 11b 11c 12 13 14 15 16 17
	ny information copied from such Reports and r for commercial purposes, other than using t NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commi	the name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Rory L. Jones Mailing Address 1515 Henderson Road City Malvern FEC ID number of contributing federal political committee. Name of Employer Diversicare Management Se- rvices Receipt For:		State AR C Occupation Arkansas	Zip Code 72104-7950	Date of Receipt 0 9 0 4 2 0 0 9 Transaction ID: A65A474D127394854BF Amount of Each Receipt this Period 12.00
	Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Robin Jones Mailing Address 4674 Riverbend Road	0 0	204.00	Date of Receipt
	City Trussville FEC ID number of contributing federal political committee. Name of Employer Diversicare Management Services Receipt For: Primary General Other (specify) ▼	State AL C Occupation AI & Tn F Aggregate		09 04 2009 Transaction ID: AC30E25D43FCB43378 Amount of Each Receipt this Period 59.97
_	Full Name (Last, First, Middle Initial) Rory L. Jones Mailing Address 1515 Henderson Road City Malvern FEC ID number of contributing federal political committee. Name of Employer Diversicare Management Services Receipt For: Primary General Other (specify) ▼	State AR C Occupation Arkansas	Zip Code 72104-7950	Date of Receipt
	SUBTOTAL of Receipts This Page (optional))		83.97

	SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 90 / 240 (check only one)
	Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	nd Statements may not be sold or used by any perso the name and address of any political committee to nittee	n for the purpose of soliciting contributions solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Robin Jones Mailing Address 4674 Riverbend Rc	ad	Date of Receipt
			09 18 2009
	City	State Zip Code	Transaction ID: AB2FFA51CBED04F3594
	Trussville FEC ID number of contributing federal political committee.	AL 35173-3506	Amount of Each Receipt this Period 59.97
	Name of Employer Diversicare Management Se- rvices	Occupation AI & Tn Rvp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1079.46	
- B.	Full Name (Last, First, Middle Initial) Robin Jones Mailing Address 4674 Riverbend Rc	l	Date of Receipt
			10 02 2009
	City	State Zip Code	Transaction ID: ABF24E1A4EA714C5E8B
	Trussville FEC ID number of contributing federal political committee.	AL 35173-3506	Amount of Each Receipt this Period 59.97
	Name of Employer Diversicare Management Se- rvices	Occupation AI & Tn Rvp	_
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 1139.43	
- C.	Full Name (Last, First, Middle Initial) Rory L. Jones		Date of Receipt
	Mailing Address 1515 Henderson Re	oad	10 ^{DD} /YYYY 10222009
	City	State Zip Code	Transaction ID: AE439F3B8A0814AE9960
	Malvern	AR 72104-7950	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	12.00
	Name of Employer Diversicare Management Se- rvices Receipt For:	Occupation Arkansas Maintinence Aggregate Year-to-Date	_
	Primary General Other (specify)		
ſ	SUBTOTAL of Receipts This Page (optiona	al)	131.94

SCHEDULE A (FEC Form 3	MIZED BECFIPTS for each category of the		FOR LINE NUMBER: PAGE 91 / 240 (check only one)				
	C	etailed Summary Page	X 11a	11b 11c		1 7	
Any information copied from such Reports or for commercial purposes, other than using the second sec	and Statements may not	be sold or used by any person of any political committee to	on for the purpose	of soliciting co	ontributions	_ 	
NAME OF COMMITTEE (In Full)							
Advocat Inc. Political Action Com	mittee						
Full Name (Last, First, Middle Initial) Rory L. Jones			Date of Red	ceipt			
Mailing Address 1515 Henderson	Road		1 0 /	D D / Y 16	200		
City	State	Zip Code	Transactio	n ID: A80B1	D3A817	E4C0D	
Malvern	AR	72104-7950	Amount of	Each Receipt t	his Period		
FEC ID number of contributing federal political committee.	C				12.0	0	
Name of Employer Diversicare Management Se-	Occupation						
rvices	Arkansas Ma		_				
Receipt For: Primary General	Aggregate Yea	ir-to-Date ▼					
Other (specify)	0 0 0	240.00					
Full Name (Last, First, Middle Initial) Robin Jones			Date of Re	ceipt			
Mailing Address 4674 Riverbend F	load		1 0 [/]	D D / Y 16	200		
City	State	Zip Code	Transactio	n ID: AB1687	7CE2332	C40299	
Trussville	AL	35173-3506	Amount of	Each Receipt t	his Period		
FEC ID number of contributing federal political committee.	C				59.9	7	
Name of Employer Diversicare Management Se- rvices	Occupation AI & Tn Rvp						
Receipt For:	Aggregate Yea	r-to-Date 🔻					
Primary General Other (specify) ▼		1199.40]				
Full Name (Last, First, Middle Initial) Rory L. Jones			Date of Red	ceipt			
Mailing Address 1515 Henderson	Road		м м / 10	D D / Y 30	Y Y 200		
City	State	Zip Code		n ID: A21620		E42DAA	
Malvern	AR	72104-7950	Amount of	Each Receipt t	his Period		
FEC ID number of contributing federal political committee.	C				12.0	כי כי	
Name of Employer Diversicare Management Se-	Occupation						
rvices Receipt For:	Arkansas Ma Aggregate Yea						
Primary General Other (specify) v		252.00]				
SUBTOTAL of Receipts This Page (optio	nal)				83.9	7	
TOTAL This Period (last page this line nu	mber only)						

S	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s)	FOR LINE NUMBER: PAGE 92 / 240 (check only one)						
Π			for each category of the Detailed Summary Page	X 11a	11b			12		_
A	ny information copied from such Reports and for commercial purposes, other than using	d Statements ma the name and ad	y not be sold or used by any pers dress of any political committee to	n for the purpos	14 e of soli ons fron	15 citing co n such c	ntrib omm	16 utions ittee.		7
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commi									
	Full Name (Last, First, Middle Initial) Robin Jones			Date of Re	eceipt					
	Mailing Address 4674 Riverbend Roa	ad		M M / 1 0	3			у 0 0 9		
	City	State	Zip Code	Transactio	on ID: A	A13B4E	817E	0AC	6485	E85
	Trussville	AL	35173-3506	Amount of	Each F	Receipt th	nis P	eriod		
	FEC ID number of contributing federal political committee.	C					Į	59.97		
	Name of Employer Diversicare Management Se- rvices	Occupatio Al & Tn								
	Receipt For:	Aggregate	e Year-to-Date 🔻							
	Primary General Other (specify) ▼	0 0 0 0	1259.37]						
	Full Name (Last, First, Middle Initial) Rory L. Jones			Date of Re	eceipt					—
	Mailing Address 1515 Henderson Ro	мм/ 11	D [0 ^Y 09				
	City	State	Zip Code	Transactio	on ID: A	74830	4C2	B50[04E6/	٩B
	Malvern	AR	72104-7950	Amount of	Each F	Receipt th	nis P	eriod		_
	FEC ID number of contributing federal political committee.	C						12.00		
	Name of Employer Diversicare Management Se- rvices	Occupatio Arkansa	ⁿ s Maintinence							
	Receipt For: Primary General Other (specify) ▼	Aggregat	e Year-to-Date 264.00]						
	Full Name (Last, First, Middle Initial) Robin Jones			Date of Re	eceipt					_
	Mailing Address 4674 Riverbend Roa	ad		мм/ 11	D 1		, Y	۲ 0 0 9	Y)	
	City	State	Zip Code	Transactio	on ID: A	488424	93E	6984	4BDE	380
	Trussville	AL	35173-3506	Amount of	Each F	Receipt th	nis P	eriod		
	FEC ID number of contributing federal political committee.	C					Į	59.97		
	Name of Employer Diversicare Management Se- rvices	Occupatio Al & Tn	Rvp							
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 🔻 1319.34]						
	UBTOTAL of Receipts This Page (optional)					13	81.94		1

SCHEDULE A (FEC Form 3			
ITEMIZED RECEIPTS	for each category of Detailed Summary F		
Any information copied from such Reports a or for commercial purposes, other than usin	Ind Statements may not be sold or used by the name and address of any political cor	any person for the purpose of soliciting contributions mmittee to solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Com			
Full Name (Last, First, Middle Initial) Rory L. Jones		Date of Receipt	
Mailing Address 1515 Henderson F	load	<u> </u>	
City	State Zip Code	Transaction ID: A598421DE193A4336AE	
Malvern	AR 72104-7950	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	12.00	
Name of Employer Diversicare Management Se-	Occupation Arkansas Maintinence		
rvices Receipt For:	Aggregate Year-to-Date V		
Primary General Other (specify) ▼		6.00	
Full Name (Last, First, Middle Initial) Robin Jones		Date of Receipt	
Mailing Address 4674 Riverbend R	Mailing Address 4674 Riverbend Road		
City	State Zip Code	Transaction ID: A36699D4EA6CF46529	
Trussville	AL 35173-3506	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	59.97	
Name of Employer Diversicare Management Se- rvices	Occupation AI & Tn Rvp		
Receipt For:	Aggregate Year-to-Date ▼		
Primary General Other (specify) ▼	1379	9.31	
Full Name (Last, First, Middle Initial) Rory L. Jones		Date of Receipt	
Mailing Address 1515 Henderson F	load	1 2 1 1 2 0 0 9	
City	State Zip Code	Transaction ID: AAA6C240885F742DC8	
Malvern	AR 72104-7950	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	12.00	
Name of Employer Diversicare Management Se-	Occupation Arkansas Maintinence		
rvices Receipt For:	Aggregate Year-to-Date V		
Primary General Other (specify) ▼		8.00	
SUBTOTAL of Receipts This Page (option	al)	83.97	
TOTAL This Period (last page this line nur	nber only)		

l	SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 94 / 240 (check only one) X X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	nd Statements may not be sold or used by any pers the name and address of any political committee to nittee	on for the purpose of soliciting contributions o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Robin Jones		Date of Receipt
	Mailing Address 4674 Riverbend Ro	ad	1 2 / D D / Y Y Y Y 1 1 1 2 0 0 9
	City	State Zip Code	Transaction ID: A5FC5D1EC244C49D594I
	Trussville	AL 35173-3506	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	59.97
	Name of Employer Diversicare Management Se- rvices	Occupation AI & Tn Rvp	
	Receipt For:	Aggregate Year-to-Date ▼	_
	Primary General Other (specify) ▼	1439.28	
- В.	Full Name (Last, First, Middle Initial) Robin Jones		Date of Receipt
	Mailing Address 4674 Riverbend Ro	ad	12 24 YYYY 12 24 2009
	City	State Zip Code	Transaction ID: AB6366FEFF20445BD88E
	Trussville	AL 35173-3506	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	59.97
	Name of Employer Diversicare Management Se- rvices	Occupation AI & Tn Rvp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1499.25]
- C.	Full Name (Last, First, Middle Initial) Rory L. Jones		Date of Receipt
	Mailing Address 1515 Henderson Ro	bad	M M / D D / Y Y Y Y 12 24 2009
	City	State Zip Code	Transaction ID: A96842B46EDFC4D82A75
	Malvern	AR 72104-7950	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		12.00
	Name of Employer Diversicare Management Se- rvices	Occupation Arkansas Maintinence	
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 300.00	
Γ	SUBTOTAL of Receipts This Page (optiona	I	131.94

I	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 95 / 240 (check only one) 11c X 11a 13 14 15 16 17 on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committee	e name and address of any political committee t	o solicit contributions from such committee.
∠ A.	Full Name (Last, First, Middle Initial) Kimberly A. Keith		Date of Receipt
	Mailing Address 422 Jennifer Lane		07 16 Y Y Y Y 099
	City	State Zip Code	Transaction ID: AFE45E44F816042439A8
	Searcy	AR 72143-5060	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	13.73
	Name of Employer Diversicare Leasing Corp	Occupation	
		Admin Administrator-exemp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 203.52	
– B.	Full Name (Last, First, Middle Initial) Kimberly A. Keith		Date of Receipt
	Mailing Address 422 Jennifer Lane	07 16 Y Y Y Y 099	
	City	State Zip Code	Transaction ID: A097694977D664DC0A59
	Searcy	AR 72143-5060	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	13.73
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) Image: Constraint of the second	203.52]
– c.	Full Name (Last, First, Middle Initial) Kimberly A. Keith		Date of Receipt
	Mailing Address 422 Jennifer Lane		0 8 / D D / Y Y Y Y 0 8 1 3 2 0 0 9
	City	State Zip Code	Transaction ID: A2DD7A74D05934D4AA5
	Searcy	AR 72143-5060	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	13.73
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 217.25	
Γ	SUBTOTAL of Receipts This Page (optional)	1	41.19
	TOTAL This Period (last page this line number		

l	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS Any information copied from such Reports and		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:PAGE $96/240$ (check only one)(check only one)X11a11b1314151617con for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commit	he name and add	dress of any political committee to	solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Kimberly A. Keith			Date of Receipt
	Mailing Address 422 Jennifer Lane			08 27 YYYY 098 27
	City	State	Zip Code	Transaction ID: AB0EBFA53A5244C719AE
	Searcy	AR	72143-5060	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		13.73
	Name of Employer Diversicare Leasing Corp	Occupation		
			dministrator-exemp	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	-
	Other (specify)	0 0	230.98]
в.	Full Name (Last, First, Middle Initial) Kimberly A. Keith			Date of Receipt
	Mailing Address 422 Jennifer Lane			0 9 1 0 Y Y Y Y 0 9 1 0 2 0 0 9
	City	State	Zip Code	Transaction ID: ACE75B6B092B8461EA1F
	Searcy	AR	72143-5060	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		13.73
	Name of Employer Diversicare Leasing Corp	Occupation Admin A	n dministrator-exemp	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	244.71]
- c.	Full Name (Last, First, Middle Initial) Kimberly A. Keith			Date of Receipt
	Mailing Address 422 Jennifer Lane			09 24 2009
	City	State	Zip Code	Transaction ID: AA245A60BBF0E4D22997
	Searcy	AR	72143-5060	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		13.73
	Name of Employer Diversicare Leasing Corp	Occupation Admin A	n dministrator-exemp	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	258.44]
ſ	SUBTOTAL of Receipts This Page (optional)	 	I	41.19
	TOTAL This Period (last page this line numb		•	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 97 / 240 (check only one) (check 112) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and s or for commercial purposes, other than using th NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committ	e name and address of any political committee t	son for the purpose of soliciting contributions
A .	Full Name (Last, First, Middle Initial) Kimberly A. Keith	Date of Receipt	
	Mailing Address 422 Jennifer Lane		10 ⁰ 08 ⁷ 2009
	City	State Zip Code	Transaction ID: A18870D3B7A63471384C
	Searcy	AR 72143-5060	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	13.73
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	272.17	
- В.	Full Name (Last, First, Middle Initial) Kimberly A. Keith		Date of Receipt
	Mailing Address 422 Jennifer Lane	10 ^{//} 22 [/] 2009	
	City	State Zip Code	Transaction ID: AA700EDC66ACC4B28AE
	Searcy	AR 72143-5060	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	13.73
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 285.90	
- C.	Full Name (Last, First, Middle Initial) Kimberly A. Keith		Date of Receipt
	Mailing Address 422 Jennifer Lane		1 1 0 5 2 0 0 9
	City	State Zip Code	Transaction ID: A03B5E3DB436541BCBB0
	Searcy	AR 72143-5060	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	13.73
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 299.63	
ſ	SUBTOTAL of Receipts This Page (optional) .	•	41.19
f	TOTAL This Period (last page this line number	r only)	

SCHEDULE A (FEC Form 3)		FOR LINE NUMBER: PAGE 98 / 240 (check only one)							
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12							
Any information copied from such Reports a	Ind Statements may not be sold or used by any pers g the name and address of any political committee to	13 14 15 16 17 on for the purpose of soliciting contributions p solicit contributions from such committee							
NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm									
Full Name (Last, First, Middle Initial) Kimberly A. Keith		Date of Receipt							
Mailing Address 422 Jennifer Lane		M M / D D / Y Y Y Y 1 1 1 19 2009							
City	State Zip Code	Transaction ID: AFA958CBB2A374695B							
Searcy	AR 72143-5060	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C	13.73							
Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp								
Receipt For:	Aggregate Year-to-Date V								
Primary General Other (specify) ▼	313.36]							
Full Name (Last, First, Middle Initial) Randi M. Kiphen		Date of Receipt							
Mailing Address 10880 Gallia Pike	M M / D D / Y								
City	State Zip Code	Transaction ID: A891FC21FE23F48878							
Wheelersburg	OH 45694-8443	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C	36.54							
Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp								
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 475.02								
Full Name (Last, First, Middle Initial) Randi M. Kiphen		Date of Receipt							
Mailing Address 10880 Gallia Pike		07 16 2009							
City	State Zip Code	Transaction ID: A256D671C38624903B							
Wheelersburg	OH 45694-8443	Amount of Each Receipt this Period							
FEC ID number of contributing federal political committee.	C	36.54							
Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp								
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 548.10]							
SUBTOTAL of Receipts This Page (optional	al)	86.81							
TOTAL This Period (last page this line nun	nber only)								

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedu for each category of Detailed Summary P	
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commit	e name and address of any political con	any person for the purpose of soliciting contributions nmittee to solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Randi M. Kiphen Mailing Address 10880 Gallia Pike		
	City	State Zip Code	07 16 2009 Transaction ID: A236A94C55DB247CC9EI
	Wheelersburg	OH 45694-8443	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	36.54
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 548	3.10
- B.	Full Name (Last, First, Middle Initial) Randi M. Kiphen		Date of Receipt
	Mailing Address 10880 Gallia Pike		08 13 2009
	City	State Zip Code	Transaction ID: A6E64716B8DDC425FB07
	Wheelersburg	OH 45694-8443	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	36.54
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 584	1.64
- С.	Full Name (Last, First, Middle Initial) Randi M. Kiphen		Date of Receipt
	Mailing Address 10880 Gallia Pike		M M / D D / Y
	City Wheelersburg	State Zip Code OH 45694-8443	Transaction ID: A5BCE7A0152D048038FA
	FEC ID number of contributing federal political committee.	C	36.54
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date	1.18
	SUBTOTAL of Receipts This Page (optional)	•	
	TOTAL This Period (last page this line number	r only)	

	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 100 / 240
	ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12
_				13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using th	Statements ma	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	Advocat Inc. Political Action Commit	tee		
×	Full Name (Last, First, Middle Initial) Randi M. Kiphen			Date of Receipt
	Mailing Address 10880 Gallia Pike			M M / D D / Y Y Y Y 09 10 2009
	City	State	Zip Code	Transaction ID: AA8CF8296ACFC46D4A
	Wheelersburg	OH	45694-8443	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		36.54
	Name of Employer Diversicare Leasing Corp	Occupatio Admin A	n dministrator-exemp	-
	Receipt For:		e Year-to-Date V	-
	Primary General	, iggi ogai		1
	Other (specify)	0 0	657.72	
	Full Name (Last, First, Middle Initial) Randi M. Kiphen			Date of Receipt
	Mailing Address 10880 Gallia Pike			M M M / D D / Y Y Y Y Y 09 / 24 2009
	City	State	Zip Code	Transaction ID: A43CF73AE92704A7CB8
	Wheelersburg	OH	45694-8443	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		36.54
	Name of Employer Diversicare Leasing Corp	Occupatio Admin A	ⁿ dministrator-exemp	
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Primary General Other (specify) ▼		694.26]
-	Full Name (Last, First, Middle Initial) Randi M. Kiphen			Date of Receipt
-	Mailing Address 10880 Gallia Pike			10 08 2009
	City Wheelersburg	State OH	Zip Code 45694-8443	Transaction ID: A9A0F6613121C4C0595 Amount of Each Receipt this Period
			40074-0440	
	FEC ID number of contributing federal political committee.	C		36.54
	Name of Employer Diversicare Leasing Corp	Occupation Admin A	n dministrator-exemp	
	Receipt For:	Aggregate	e Year-to-Date 🔻	7
	Primary General Other (specify) ▼	0 0	730.80]
ſ	SUBTOTAL of Receipts This Page (optional)			109.62
	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number			109.62

	SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 101 / 240 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	d Statements may not be sold or used by any per- the name and address of any political committee ittee	son for the purpose of soliciting contributions to solicit contributions from such committee.
∠ A.	Full Name (Last, First, Middle Initial) Randi M. Kiphen Mailing Address 10880 Gallia Pike		Date of Receipt
	<u></u>		10 22 2009
	City Wheelersburg	State Zip Code OH 45694-8443	Transaction ID: A96C7A31466044A6B98 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	36.54
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 767.34	
– В.	Full Name (Last, First, Middle Initial) Randi M. Kiphen Mailing Address 10880 Gallia Pike		Date of Receipt
	Maning Address 10880 Gailla Pike		1 1 0 5 2 0 0 9
	City	State Zip Code	Transaction ID: A6B21997A70544418913
	Wheelersburg	OH 45694-8443	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	36.54
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 803.88	
-).	Full Name (Last, First, Middle Initial) Randi M. Kiphen		Date of Receipt
	Mailing Address 10880 Gallia Pike		M M / D D / Y Y Y Y 11 1 1 1 9 2009
	City	State Zip Code OH 45694-8443	Transaction ID: A268A9D8CB6C74CDF8
	Wheelersburg FEC ID number of contributing federal political committee.	OH 45694-8443	Amount of Each Receipt this Period 36.54
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 840.42	
Γ			109.62

9	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 102/240			
	ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)			
			Detailed Summary Page	X 11a 11b 11c 12			
_				13 14 15 16 17			
	Any information copied from such Reports and S	statements ma	y not be sold or used by any perso	on for the purpose of soliciting contributions			
	or for commercial purposes, other than using the	e name and ad	dress of any political committee to	solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full)						
	Advocat Inc. Political Action Committee	e					
	/						
	Full Name (Last, First, Middle Initial)						
Α.	Randi M. Kiphen			Date of Receipt			
	Mailing Address 10880 Gallia Pike			12 03 2009			
	City	State	Zip Code	Transaction ID: A6A6A8560F5154886948			
	-						
	Wheelersburg	OH	45694-8443	Amount of Each Receipt this Period			
	FEC ID number of contributing	С		36.54			
	federal political committee.	U					
	Name of Employer	Occupatio	n	-			
	Name of Employer Diversicare Leasing Corp		dministrator-exemp				
	Receipt For:	1 .	·				
	Primary General	Aggregate	e Year-to-Date 🔻				
	Other (specify)		876.96				
				1			
-	Full Name (Last, First, Middle Initial)	1		+			
В.	Randi M. Kiphen			Date of Receipt			
υ.	Mailing Address 10880 Gallia Pike						
	Maining Address 10000 Galila I Ike	12 17 2009					
	City	State	Zip Code	Transaction ID: AE253852B2D21444793			
	Wheelersburg	OH	45694-8443	Amount of Each Receipt this Period			
		011	10001 0110	Amount of Lach necept this renou			
	FEC ID number of contributing federal political committee.	C		36.54			
	rederal pointeal committee.						
	Name of Employer	Occupatio	n				
	Diversicare Leasing Corp	Admin A	dministrator-exemp				
	Receipt For:	Aggregate	e Year-to-Date 🔻				
	Primary General	33 - 3 -		1			
	Other (specify) 🔻		913.50				
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_	Full Name (Last, First, Middle Initial)						
C.	Steven F. Levato			Date of Receipt			
	Mailing Address 306 Cliftwood Loop			M M / D D / Y Y Y Y			
	-			07 02 2009			
	City	State	Zip Code	Transaction ID: AEFED96198B53449E87			
	Hot Springs	AR	71901-8735	Amount of Each Receipt this Period			
	FEC ID number of contributing			34.81			
	federal political committee.	С		54.01			
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	Name of Employer Diversicare Leasing Corp	Occupatio					
		1 .	dministrator-exemp				
	Receipt For:	Aggregate	e Year-to-Date				
	Primary General		452.53	11			
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	SUBTOTAL of Receipts This Page (optional)						
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SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 103 / 240 (check only one)					
ITEMIZED RECEIPTS	for each category of the	X 11a 11b 11c 12					
	Detailed Summary Page						
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any pers	on for the purpose of soliciting contributions					
NAME OF COMMITTEE (In Full)							
Advocat Inc. Political Action Committ	iee						
Full Name (Last, First, Middle Initial) Steven F. Levato		Date of Receipt					
Mailing Address 306 Cliftwood Loop		07 16 2009					
City	State Zip Code	Transaction ID: A1FAC87E9CBCE4C52/					
Hot Springs	AR 71901-8735	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	34.81					
Name of Employer Diversicare Leasing Corp	Occupation	_					
Receipt For:	Admin Administrator-exemp Aggregate Year-to-Date V						
Primary General							
Other (specify)	522.15						
Full Name (Last, First, Middle Initial) Steven F. Levato		Date of Receipt					
Mailing Address 306 Cliftwood Loop		07 / D D / Y Y Y Y 2009					
City	State Zip Code	Transaction ID: A2B1D57B0DF6442499					
Hot Springs	AR 71901-8735	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.		34.81					
Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp						
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify) ▼	522.15]					
Full Name (Last, First, Middle Initial) Steven F. Levato		Date of Receipt					
Mailing Address 306 Cliftwood Loop		0 8 1 3 2 0 0 9					
City	State Zip Code	Transaction ID: A687D00CFAA9B478BA					
Hot Springs	AR 71901-8735	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	34.81					
Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	1					
Receipt For:	Aggregate Year-to-Date V	1					
Primary General Other (specify) ▼	556.96]					
SUBTOTAL of Receipts This Page (optional)		104.43					
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	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 104 / 240 (check only one)
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commit	e name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) Steven F. Levato Mailing Address 306 Cliftwood Loop City Hot Springs FEC ID number of contributing federal political committee. Name of Employer Diversicare Leasing Corp Receipt For: Primary General Other (specify) ▼	State Zip Code AR 71901-8735 C Occupation Admin Administrator-exemp Aggregate Year-to-Date ▼ 591.77	Date of Receipt
В.	Full Name (Last, First, Middle Initial) Steven F. Levato Mailing Address 306 Cliftwood Loop City Hot Springs FEC ID number of contributing federal political committee. Name of Employer Diversicare Leasing Corp Receipt For: Primary General Other (specify) ▼	State Zip Code AR 71901-8735 C Occupation Admin Administrator-exemp Aggregate Year-to-Date ▼ 626.58	Date of Receipt
C.	Full Name (Last, First, Middle Initial) Steven F. Levato Mailing Address 306 Cliftwood Loop City Hot Springs FEC ID number of contributing federal political committee. Name of Employer Diversicare Leasing Corp Receipt For: Primary General Other (specify) ▼	State Zip Code AR 71901-8735 C Occupation Admin Administrator-exemp Aggregate Year-to-Date ▼ 661.39	Date of Receipt 0 9 / 2 4 / 2 0 0 9 Transaction ID: AD71B254CD3154865B03 Amount of Each Receipt this Period 34.81
-	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		▶ <u>104.43</u>

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Advocat Inc	2. Political Action Comm	ittee											
Full Name (La Steven F. Leva	ast, First, Middle Initial) tto					Date of	Re	ceipt					
Mailing Addre	ss 306 Cliftwood Loop					^M 1 0	1		D / 8		, 200		1
City		State	Zip Code			Transa	ctio	n ID:	A7EA	102E	3580A	\ 64	1524 <i>F</i>
Hot Springs	;	AR	71901-8735			Amoun	t of	Each	Receip	t this	Period	ł	
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Steven F. Leva	ss 306 Cliftwood Loop					м м 11	_	D	^D /	Y	, 200	9 9	1
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	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 106 / 240 (check only one)		
	Any information copied from such Reports and s or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committ	e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions		
A.	Full Name (Last, First, Middle Initial) Steven F. Levato			Date of Receipt		
	Mailing Address 306 Cliftwood Loop			M M / D D / Y Y Y Y 1 1 1 1 9 2 0 0 9		
	City	State	Zip Code	Transaction ID: A35BFE9BFF7C44EA79		
	Hot Springs FEC ID number of contributing federal political committee.	AR	71901-8735	Amount of Each Receipt this Period 34.81		
	Name of Employer Diversicare Leasing Corp		dministrator-exemp			
	Receipt For: Primary General Other (specify) ▼	Aggregat	e Year-to-Date 🔻 800.63]		
_ В.	Full Name (Last, First, Middle Initial) Steven F. Levato Mailing Address 306 Cliftwood Loop			Date of Receipt		
		12 03 2009				
	City Hot Springe	State AR	Zip Code	Transaction ID: A7A87E7ADAB63486A8		
	Hot Springs FEC ID number of contributing federal political committee.	C	71901-8735	Amount of Each Receipt this Period 34.81		
	Name of Employer Diversicare Leasing Corp	Occupatio Admin A	on Idministrator-exemp			
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date 🔻 835.44]		
– C.	Full Name (Last, First, Middle Initial) Steven F. Levato			Date of Receipt		
	Mailing Address 306 Cliftwood Loop			12 / Y Y Y Y 12 17 2009		
	City	State AR	Zip Code	Transaction ID: A200D5030AAF74243A1		
	Hot Springs FEC ID number of contributing federal political committee.	C	71901-8735	Amount of Each Receipt this Period 34.81		
	Name of Employer Diversicare Leasing Corp	Occupatio Admin A	on dministrator-exemp			
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date 🔻 870.25]		
	SUBTOTAL of Receipts This Page (optional) .			104.43		

				FOR LINE NUMBER: PAGE 107/240					
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 107 / 240 (check only one)					
l	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12					
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	Any information copied from such Reports and or for commercial purposes, other than using th	Statements mane name and ac	ay not be sold or used by any pers Idress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.					
Γ	NAME OF COMMITTEE (In Full)								
	Advocat Inc. Political Action Commit	tee							
∠ A.	Full Name (Last, First, Middle Initial) Sandra B. Loperfido			Date of Receipt					
	Mailing Address 270 Highland Avenue	9		07 02 YYYY 099 09					
	City	State	Zip Code	Transaction ID: A67ACE9FC4E074A47A					
	Raceland	KY	41169-1020	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		26.94					
	Name of Employer Diversicare Leasing Corp	Occupatio		_					
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	Receipt For: Primary General	Aggregat	e Year-to-Date 🔻	_					
	Other (specify) ▼	0 0	345.54						
- B.	Full Name (Last, First, Middle Initial) Sandra B. Loperfido			Date of Receipt					
	Mailing Address 270 Highland Avenue	e		07 16 Y Y Y Y Y 2009					
	City	State	Zip Code	Transaction ID: AAF04794D799B44A58E					
	Raceland	KY	41169-1020	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		26.94					
	Name of Employer Diversicare Leasing Corp	Occupatio Admin A	on Administrator-exemp	_					
	Receipt For:	- 1 · ·	e Year-to-Date V	—					
	Primary General Other (specify) ▼		399.42]					
- C.	Full Name (Last, First, Middle Initial) Sandra B. Loperfido			Date of Receipt					
0.	Mailing Address 270 Highland Avenue	Э		07 16 2009					
	City	State	Zip Code	Transaction ID: A3C0A5C5762C444C394					
	Raceland	KY	41169-1020	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C		26.94					
	Name of Employer Diversicare Leasing Corp	Occupation Admin A	on Administrator-exemp						
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l	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 108 / 240 (check only one) 11c X 11a 11b 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commit	Statements may not be sold or used by any pers ne name and address of any political committee to tee	on for the purpose of soliciting contributions o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Sandra B. Loperfido		Date of Receipt
	Mailing Address 270 Highland Avenue	2	0 8 / D D / Y Y Y Y 0 8 1 3 2 0 0 9
	City	State Zip Code	Transaction ID: A79E895446BC240978BF
	Raceland	KY 41169-1020	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	26.94
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary General Other (specify) ▼	426.36	
в.	Full Name (Last, First, Middle Initial) Sandra B. Loperfido		Date of Receipt
	Mailing Address 270 Highland Avenue	2	0 8 / D D / Y Y Y Y 0 8 27 2009
	City	State Zip Code	Transaction ID: A44E9AA8DA8904C75BE
	Raceland	KY 41169-1020	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	26.94
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 453.30]
- C.	Full Name (Last, First, Middle Initial) Sandra B. Loperfido Mailing Address 270 Highland Avenue	- 	Date of Receipt
	City	State Zip Code	Transaction ID: A505F72CA3CE248A3AD
	Raceland	KY 41169-1020	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	26.94
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 480.24]
	SUBTOTAL of Receipts This Page (optional)	·····	80.82
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An or	y information copied from such Reports and for commercial purposes, other than using	d Statements may	/ not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.				
	NAME OF COMMITTEE (In Full)							
	Advocat Inc. Political Action Comm	ittee						
<u> </u>	Full Name (Last, First, Middle Initial) Sandra B. Loperfido			Date of Receipt				
	Mailing Address 270 Highland Avenu	IG		M M / D D Y Y Y Y Y Y				
	City	State	Zip Code	Transaction ID: A8017ECBDC9494DFD				
	Raceland	KY	41169-1020	Amount of Each Receipt this Period				
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	Primary General	Ayyreyale		-				
	Other (specify)	0 0	507.18					
	Full Name (Last, First, Middle Initial) Sandra B. Loperfido	•		Date of Receipt				
	Mailing Address 270 Highland Avenu	Ie		M M / D D / Y Y Y Y Y 10 / 08 / 2009				
	City	State	Zip Code	Transaction ID: A7E191C45B9994C369				
	Raceland	KY	41169-1020	Amount of Each Receipt this Period				
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	Full Name (Last, First, Middle Initial) Sandra B. Loperfido			Date of Receipt				
	Mailing Address 270 Highland Avenu	IG		M M / D D / Y Y Y Y 10 22 2009				
	City	State	Zip Code	Transaction ID: AF8AA0B6670BC46828				
	Raceland	KY	41169-1020	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		26.94				
	Name of Employer Diversicare Leasing Corp	Occupatio Admin A	n dministrator-exemp					
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SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 110/240			
· · · ·	Use separate schedule(s) for each category of the	(check only one)			
ITEMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12			
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Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)					
Advocat Inc. Political Action Commit	tee				
Full Name (Last, First, Middle Initial) Sandra B. Loperfido		Date of Receipt			
Mailing Address 270 Highland Avenue)	1 1 0 5 2 0 0 9			
City	State Zip Code	Transaction ID: A2127BD74AE574523BI			
Raceland	KY 41169-1020	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	26.94			
Name of Employer Diversicare Leasing Corp	Occupation	_			
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Receipt For:	Aggregate Year-to-Date ▼	_			
 Primary General Other (specify) ▼ 	588.00				
Full Name (Last, First, Middle Initial) Sandra B. Loperfido	1	Date of Receipt			
Mailing Address 270 Highland Avenue)	M M / D D / Y Y Y Y 111 19 2009			
City	State Zip Code	Transaction ID: AB3E9C1A041CF48A19			
Raceland	KY 41169-1020	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	26.94			
Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp				
Receipt For:	Aggregate Year-to-Date ▼				
Primary General Other (specify) ▼	614.94]			
Full Name (Last, First, Middle Initial) Sandra B. Loperfido		Date of Receipt			
Mailing Address 270 Highland Avenue)	1 2 0 3 2 0 0 9			
City	State Zip Code	Transaction ID: A61ACB50C5D724B498			
Raceland	KY 41169-1020	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	26.94			
Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp				
Receipt For:	Aggregate Year-to-Date V				
Primary General Other (specify) ▼	641.88]			
SUBTOTAL of Receipts This Page (optional)		80.82			
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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)			FOR LINE NUMBER: PAGE 111/240						
ITEMIZED RECEIPTS		for each category of the									
		Detailed Summary Page	Х			1b		;	12		
Any information copied from such Reports and S	Statements may	y not be sold or used by any	y person	n for ti	13 he purp	ose o	4 f sol	15 citing c	ontrib	16 utions	1 ;
or for commercial purposes, other than using the	e name and add	dress of any political comm	ittee to s	solicit	contrib	utions	s fror	n such	comm	nittee.	
NAME OF COMMITTEE (In Full)	~~										
Advocat Inc. Political Action Committe	ee										
Full Name (Last, First, Middle Initial) Sandra B. Loperfido				1	Date of	Rece	ipt				
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Full Name (Last, First, Middle Initial) Lorey S. Lowe					Date of	Rece	ipt				
Mailing Address P O Box 1813					м м 0 7	_	D			0 0 9	
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Olive Hill	KY	41164-1813						Receipt			0++1-
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rvices	Kentucky	•		_							
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	SCHEDULE A (FEC Form 3X	.) [Use separate schedule(s)		DR LINE			R: [PAG	GE -	112/2	240	
ľ	ITEMIZED RECEIPTS		for each category of the Detailed Summary Page		X 11a 13	\square	, 11b 14	\square	11c 15	П	12 16		17
	Any information copied from such Reports and or for commercial purposes, other than using	d Statements may the name and add	not be sold or used by any perso ress of any political committee to	on for	the purp	ose butio	of so	licitir m su	nd co	ntribu omm	utions		17
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commi												
Z A.	Full Name (Last, First, Middle Initial) Lorey S. Lowe				Date of	Red	ceipt						
	Mailing Address P O Box 1813				0 8	/		D 7	Y		0 [°] 09		
	City	State	Zip Code		Transa	ctio	n ID:	AA2	2B98	ABC	0772	2412	4B0
	Olive Hill	KY	41164-1813		Amoun	t of	Each	Rece	eipt th	is P	eriod		
	FEC ID number of contributing federal political committee.	C					1			3	34.79		
	Name of Employer Diversicare Management Se- rvices	Occupation Kentucky											
	Receipt For:		Year-to-Date 🔻										
	Primary General Other (specify) ▼		501.95										
— З.	Full Name (Last, First, Middle Initial) Lorey S. Lowe				Date of	Red	ceipt						
	Mailing Address P O Box 1813				^м 8	/		D /	Y		0 [°] 09		
	City	State	Zip Code		Transa	ctio	n ID:	A30	061	CDO	BC6	1408	889
	Olive Hill	KY	41164-1813	_	Amoun	t of	Each	Rece	eipt th	is P	eriod		
	FEC ID number of contributing federal political committee.	C							<u> </u>	3	34.79		
	Name of Employer Diversicare Management Se- rvices	Occupation Kentucky											
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 536.74										
	Full Name (Last, First, Middle Initial) Lorey S. Lowe				Date of	Red	ceipt						
	Mailing Address P O Box 1813				м м 0 9	/		D 4	Y		0 [°] 09		
	City Olive Hill	State KY	Zip Code 41164-1813		Transa							4D1	1B3
	FEC ID number of contributing federal political committee.	C	41104-1813		Amoun	tor	Each	Rece	eipt tr	-	eriod 34.79	U	٦
	Name of Employer Diversicare Management Se-	Occupation Kentucky				_							
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Γ										10	4.37		_

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 113/240 (check only one) Image: Check only one) X 11a 11b 11c 12 Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one)
	or for commercial purposes, other than using	d Statements may not be sold or used by any pers the name and address of any political committee t	13 14 15 16 17 son for the purpose of soliciting contributions to solicit contributions from such committee.
	Advocat Inc. Political Action Comm	ittee	
ے م	Full Name (Last, First, Middle Initial) Lorey S. Lowe		Date of Receipt
	Mailing Address P O Box 1813		09 18 Y Y Y Y 2009
	City	State Zip Code	Transaction ID: AA60A2C9A64C0469390
	Olive Hill	KY 41164-1813	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	34.79
	Name of Employer Diversicare Management Se- rvices	Occupation Kentucky Cqi	
	Receipt For:	Aggregate Year-to-Date V	_
	Primary General Other (specify) ▼	606.32	
. –	Full Name (Last, First, Middle Initial) Lorey S. Lowe	1	Date of Receipt
	Mailing Address P O Box 1813		M M / D D / Y
	City	State Zip Code	Transaction ID: A9A4C285DFB5847CA89
	Olive Hill	KY 41164-1813	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		34.79
	Name of Employer Diversicare Management Se- rvices	Occupation Kentucky Cqi	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 641.11	
-	Full Name (Last, First, Middle Initial) Lorey S. Lowe		Date of Receipt
	Mailing Address P O Box 1813		10 [/] 16 [/] 2009
	City	State Zip Code	Transaction ID: ADD3B7978E2AB4DAD8
	Olive Hill	KY 41164-1813	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	34.79
	Name of Employer Diversicare Management Se- rvices	Occupation Kentucky Cqi	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 675.90	
Γ	SUBTOTAL of Receipts This Page (optional	I	104.37

	SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 114 / 240 (check only one)
-		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using t	d Statements may not be sold or used by any pers the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commit	ttee	
A.	Full Name (Last, First, Middle Initial) Lorey S. Lowe		Date of Receipt
	Mailing Address P O Box 1813		M M / D D / Y Y Y Y 10 30 2009
	City	State Zip Code	Transaction ID: A132910F41029422C97F
	Olive Hill	KY 41164-1813	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	34.79
	Name of Employer Diversicare Management Se- rvices	Occupation Kentucky Cgi	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	710.69	
- B.	Full Name (Last, First, Middle Initial) Lorey S. Lowe		Date of Receipt
	Mailing Address P O Box 1813		M M / D D / Y
	City	State Zip Code	Transaction ID: A7F164803625C49739C4
	Olive Hill	KY 41164-1813	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	34.79
	Name of Employer Diversicare Management Se- rvices	Occupation Kentucky Cqi	
	Receipt For:	Aggregate Year-to-Date V	
	Primary General Other (specify) ▼	745.48	
- C.	Full Name (Last, First, Middle Initial) Lorey S. Lowe		Date of Receipt
	Mailing Address P O Box 1813		M M / D D / Y Y Y Y 11 1 27 2009
	City	State Zip Code	Transaction ID: A0758E0FB1679484996E
	<u>Olive Hill</u>	KY 41164-1813	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		34.79
	Name of Employer Diversicare Management Se- rvices	Occupation Kentucky Cqi	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 780.27	
ſ	SUBTOTAL of Receipts This Page (optional)	۔ ۔	104.37
ľ	TOTAL This Period (last page this line numb	per only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 115/240 (check only one) 11c X 11a 11b 13 14 15 16 17 on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committee	e name and ad	dress of any political committee t	o solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) Lorey S. Lowe Mailing Address P O Box 1813 City	State	Zip Code	Date of Receipt
	Olive Hill	KY	41164-1813	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	41104-1013	34.79
	Name of Employer Diversicare Management Se- rvices	Occupation Kentucky		_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 815.06	
В.	Full Name (Last, First, Middle Initial) Lorey S. Lowe Mailing Address P O Box 1813			Date of Receipt
	City	State	Zip Code	Transaction ID: AB8DCF8D7FC004E70A99
	Olive Hill	KY	41164-1813	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		34.79
	Name of Employer Diversicare Management Se- rvices Receipt For:	Occupation Kentucky Aggregate		
	Primary General Other (specify)		849.85	
с.	Full Name (Last, First, Middle Initial) Deborah L. Mack	-		Date of Receipt
	Mailing Address 81 Walnut Road			M M M / D D / Y Y Y Y <
	City	State	Zip Code	Transaction ID: A6583499F27A34EB1BA0
	Glenwood	AR	71943-8653	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		16.15
	Name of Employer Diversicare Management Se- rvices	Occupatio Arkansa	on s Cqi Director	
	Receipt For:		e Year-to-Date 🔻	_
	Primary General Other (specify) ▼		202.95]
	SUBTOTAL of Receipts This Page (optional) .			85.73
	TOTAL This Period (last page this line numbe	r only)		

9	SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 116 / 240					
	ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)					
			Detailed Summary Page	X 11a 11b 11c 12					
_			, ,	13 14 15 16					
	Any information copied from such Reports and	Statements ma	y not be sold or used by any pers	on for the purpose of soliciting contributions					
	or for commercial purposes, other than using t	he name and ad	dress of any political committee t	o solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full)								
	Advocat Inc. Political Action Commit	ttee							
Z	/								
۱.	Full Name (Last, First, Middle Initial) Deborah L. Mack			Date of Receipt					
۰.	Mailing Address 81 Walnut Road								
	Maining Address 81 Wainut Road			07 24 2009					
	City	State	Zip Code	Transaction ID: A957056F6B6D64F1					
	Glenwood	AR	71943-8653	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		16.15					
	Name of Employer	Occupatio	on						
	Diversicare Management Se-	Arkansa	s Cqi Director						
	Receipt For:	Aggregat	e Year-to-Date 🔻						
	Primary General			T					
	Other (specify)		219.10						
				-					
_	Full Name (Last, First, Middle Initial)	•							
	Deborah L. Mack			Date of Receipt					
	Mailing Address 81 Walnut Road			M M / D D / Y Y Y					
				08 07 2009					
	City	State	Zip Code	Transaction ID: A6269F328562E463					
	Glenwood	AR	71943-8653	Amount of Each Receipt this Period					
	FEC ID number of contributing								
	federal political committee.	С		16.15					
	Name of Employer Diversicare Management Se-	Occupatio							
	rvices		s Cqi Director						
	Receipt For:	Aggregat	e Year-to-Date 🔻						
	Primary General		235.25						
	Other (specify)								
_									
	Full Name (Last, First, Middle Initial)								
-	Deborah L. Mack			Date of Receipt					
	Mailing Address 81 Walnut Road			0 8 2 1 2 0 0 9					
	City	State	Zip Code						
	-		•	Transaction ID: A1977A44BD50540D					
	Glenwood	AR	71943-8653	Amount of Each Receipt this Period					
	FEC ID number of contributing	С		16.15					
	federal political committee.								
	Name of Employer	Occupatio	n	-					
	Name of Employer Diversicare Management Se-		s Cqi Director						
	rvices Receipt For:	ł	e Year-to-Date V						
	Primary General	Ayyreyat							
	Other (specify)		251.40						
			0 0 0 0 0 0 0	-					
Г									
	SUBTOTAL of Receipts This Page (optional)			48.45					
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L		••••••••••••••••••••••••••••••••••••••							

I	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 117 / 240 (check only one) 11a X 11a 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commit	ne name and ad		
2 A.	Full Name (Last, First, Middle Initial) Deborah L. Mack Mailing Address 81 Walnut Road			Date of Receipt
	City	State	Zip Code	0 9 0 4 2 0 0 9 Transaction ID: AE71B6A65E2984BBCB3
	Glenwood	AR	71943-8653	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		16.15
	Name of Employer Diversicare Management Se- rvices		s Cqi Director	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 267.55	
- 3.	Full Name (Last, First, Middle Initial) Deborah L. Mack Mailing Address 81 Walnut Road			Date of Receipt
				09 18 2009
	City	State	Zip Code	Transaction ID: A6104006E91D74824938
	Glenwood	AR	71943-8653	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		16.15
	Name of Employer Diversicare Management Se-	Occupatio Arkansa	n s Cqi Director	
	rvices Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 283.70	
-	Full Name (Last, First, Middle Initial) Deborah L. Mack Mailing Address 81 Walnut Road			Date of Receipt
	City	State	Zip Code	10022009 Transaction ID: AD2689DB6258140A1BF
	Glenwood	AR	71943-8653	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		16.15
	Name of Employer Diversicare Management Se- rvices		s Cqi Director	
	Receipt For: Primary General Other (specify) \blacksquare	Aggregate	e Year-to-Date ▼ 299.85	
Γ	SUBTOTAL of Receipts This Page (optional)			48.45
	TOTAL This Period (last page this line number	er only)		

<u> </u>	SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 118 / 240
		1	Use separate schedule(s) for each category of the	(check only one)
	TEMIZED RECEIPTS		Detailed Summary Page	$\begin{array}{ c c c c c c c c } X & 11a & 11b & 11c & 12 \\ \hline & 13 & 14 & 15 & 16 & 17 \\ \hline \end{array}$
Γ	Any information copied from such Reports and or for commercial purposes, other than using the tranulation of the second se	Statements ma	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)			
	Advocat Inc. Political Action Commit	tee		
∠ A.	Full Name (Last, First, Middle Initial) Deborah L. Mack			Date of Receipt
	Mailing Address 81 Walnut Road			M M / D D / Y Y Y Y 10 16 2009
	City	State	Zip Code	Transaction ID: A5E69FC1453324F2D89
	Glenwood	AR	71943-8653	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		16.15
	Name of Employer Diversicare Management Se-	Occupatio		_
	rvices		s Cqi Director	
	Receipt For: Primary General	Aggregat	e Year-to-Date 🔻	
	Other (specify)	0 0	316.00	
– В.	Full Name (Last, First, Middle Initial) Deborah L. Mack			Date of Receipt
	Mailing Address 81 Walnut Road			1 0 3 0 2 0 0 9
	City	State	Zip Code	Transaction ID: A07548195C9D64FDE9I
	Glenwood	AR	71943-8653	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		16.15
	Name of Employer Diversicare Management Se-	Occupatio		_
	rvices Receipt For:		s Cqi Director	_
	Primary General	Aggregat	e Year-to-Date 🔻	-
	Other (specify) ▼	0 0	332.15	
- C.	Full Name (Last, First, Middle Initial) Deborah L. Mack			Date of Receipt
0.	Mailing Address 81 Walnut Road			M M / D D / Y Y Y Y 1 1 1 1 3 2009
	City	State	Zip Code	Transaction ID: A9A2ABF8AF94F4D18A
	Glenwood	AR	71943-8653	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		16.15
	Name of Employer Diversicare Management Se-	Occupatio		
	rvices		s Cqi Director	_
	Receipt For: Primary General	Aggregat	e Year-to-Date 🔻	-
	Other (specify) ▼	0 0	348.30	
ſ	SUBTOTAL of Receipts This Page (optional)			48.45
┝			•	
	TOTAL This Period (last page this line number	er only)		

	CHEDULE A (FEC Form 3) TEMIZED RECEIPTS	() Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 119 / 240 (check only one) 11c 12 X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	nd Statements may not be sold or used by any per the name and address of any political committee nittee	son for the purpose of soliciting contributions
a.	Full Name (Last, First, Middle Initial) Deborah L. Mack Mailing Address 81 Walnut Road		Date of Receipt
	City	State Zip Code	1 1 2 7 2 0 0 9 Transaction ID: A892E502857714A9E95
	Glenwood	AR 71943-8653	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	16.15
	Name of Employer Diversicare Management Se- rvices	Occupation Arkansas Cqi Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 364.45	
	Full Name (Last, First, Middle Initial) Jimmie D. Manning Mailing Address 149 Riverwood Driv	/e	Date of Receipt
			07 10 2009
	City	State Zip Code	Transaction ID: AB5C05005A0F6471398
	Franklin FEC ID number of contributing federal political committee.	TN 37069-4181	Amount of Each Receipt this Period
	Name of Employer Diversicare Management Se- rvices Receipt For:	Occupation VP Purchasing & Property Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	749.97	
	Full Name (Last, First, Middle Initial) Jimmie D. Manning		Date of Receipt
	Mailing Address 149 Riverwood Driv	/e	07 24 2009
	City	State Zip Code	Transaction ID: A4BCE0C2533CA42649
	Franklin	TN 37069-4181	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	57.69
	Name of Employer Diversicare Management Se- rvices	Occupation VP Purchasing & Property	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 807.66	
Γ	SUBTOTAL of Receipts This Page (optiona	1	131.53

<u>ح</u>	CHEDULE A (FEC Form 3)	0		FOR LINE NUMBER: PAGE 120 / 240				
			Use separate schedule(s)	(check only one)				
			for each category of the Detailed Summary Page	X 11a 11b 11c 12				
			Detailed Summary Fage					
A	ny information copied from such Reports an	d Statements may	not be sold or used by any pers	on for the purpose of soliciting contributions				
0	r for commercial purposes, other than using	the name and add	dress of any political committee to	o solicit contributions from such committee.				
∇	NAME OF COMMITTEE (In Full)							
1	Advocat Inc. Political Action Comm	ittee						
	Full Name (Last, First, Middle Initial)							
	Jimmie D. Manning			Date of Receipt				
	Mailing Address 149 Riverwood Driv	/e						
		-		08 07 2009				
	City	State	Zip Code	Transaction ID: A9EC814EB7153499E				
	Franklin	TN	37069-4181	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		57.69				
	Name of Employer Diversicare Management Se-	Occupatio	<u></u>					
	Diversicare Management Se- rvices	VP Purch	asing & Property					
	Receipt For:		Year-to-Date V	7				
	Primary General			-				
	Other (specify)		865.35					
		0 0	<u> </u>	-				
	Full Name (Last, First, Middle Initial)							
	Jimmie D. Manning			Date of Receipt				
	Mailing Address 149 Riverwood Driv	/e						
		0		08 21 2009				
	City	State	Zip Code	Transaction ID: A2F4D98D2B7014DA				
	Franklin	TN	37069-4181	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		57.69				
	lederal political committee.							
	Name of Employer Diversicare Management Se-	Occupation	า	-				
	Diversicare Management Se- rvices	VP Purch	asing & Property					
	Receipt For:	I	Year-to-Date V	-				
	Primary General	Aggregate		-				
	Other (specify)		923.04					
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	Full Name (Last, First, Middle Initial)							
	Jimmie D. Manning			Date of Receipt				
	Mailing Address 149 Riverwood Driv	'e		M M / D D / Y Y Y Y				
				09 04 2009				
	City	State	Zip Code	Transaction ID: A7DA00B2AE4B74D3				
	Franklin	TN	37069-4181	Amount of Each Receipt this Period				
	FEC ID number of contributing							
	federal political committee.	С		57.69				
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	Name of Employer Diversicare Management Se-	Occupatio						
	Diversicare Management Se- rvices	VP Purch	asing & Property					
	Receipt For:	Addregate	Year-to-Date V					
	Primary General	.gg gate		-				
	Other (specify)		980.73					
		0.0	<u> </u>	-				
_	SUBTOTAL of Receipts This Page (optiona	D.		173.07				

SCHEDULE A (FEC F	orm 3X)	Use separate schedule(s)	FOR LI		-	R: PA	GE 12	21/2	240
ITEMIZED RECEIPTS	,	for each category of the	(check		٦ [´]	_	_		
II EIVIIZED RECEIPI 3		Detailed Summary Page	X 11	Ia 🔄	11b	11c	Ш	12	_
			13	3	14	15		16	1
Any information copied from such	Reports and Statements ma	ay not be sold or used by any pers	on for the p	ourpos	e of so	liciting co	ontribut	tions	
or for commercial purposes, other	han using the name and ac	dress of any political committee to	o solicit cor	itributi	ons fro	m such c		tee.	
NAME OF COMMITTEE (In FL	II)								
Advocat Inc. Political Actio	n Committee								
Full Name (Last, First, Middle I	iitial)								
Jimmie D. Manning			Date	e of Re	eceipt				
Mailing Address 149 Riverv	Mailing Address 149 Riverwood Drive			M /		D / Y		Y	
			0			8	-	0 0 9	
City	State	Zip Code	Tran	sactio	on ID:	АСЗАС	8E87	51B	74234
Franklin	TN	37069-4181	Amo	ount of	Each	Receipt t	his Pe	riod	
FEC ID number of contributing					0	1	51	7 00	Ű
federal political committee.	C						5.	7.69	
			_		_			_	
Name of Employer Diversicare Management Se-	Occupatio								
rvices	VP Purc	hasing & Property							
Receipt For:	Aggregat	e Year-to-Date 🔻							
Primary Genera	00 0								
Other (specify)		1038.42							
	0.0		_						
Full Name (Last, First, Middle I	nitial)								
	Jimmie D. Manning			e of Re	eceipt				
Mailing Address 149 Riverwood Drive				M /		D / Y		Y	V
			1			2		0.9	
City	State	Zip Code	Trom			AE70B	_	_	
Franklin	TN	·							24347
FIGHKIII	IN	37069-4181		ount of	Each	Receipt t	nis Pei	rioa	
FEC ID number of contributing	С						5	7.69	
federal political committee.						<u> </u>			
Name of Employer	Occupati		_						
Diversicare Management Se-	Occupatio								
rvices	1	hasing & Property							
Receipt For:		e Year-to-Date 🔻							
Primary Genera		1096.11							
Other (specify)		1050.11							
Full Name (Last, First, Middle I	iitial)								
Jimmie D. Manning			Date	e of Re	eceipt				
Mailing Address 149 Riverv	ood Drive			M /				Y	
			1		_	6		0 0 9	
City	State	Zip Code	Tran	sactio	on ID:	AD9558	3DDF/	A6A	94844
Franklin	TN	37069-4181	Amo	ount of	Each	Receipt t	his Pe	riod	
FEC ID number of contributing									
federal political committee.	C						5	7.69	
					_			_	
Name of Employer Diversicare Management Se-	Occupatio	on							
Diversicare Management Se- rvices	VP Purc	hasing & Property							
Receipt For:	I I	e Year-to-Date 🔻							
Primary Genera									
Other (specify)		1153.80							
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							17	3.07	
SUBTOTAL of Receipts This Page	e (optional)						173	5.07	
			-					-	
TOTAL This Period (last page thi	s line number only)								
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		for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Ai	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commit	Statements may not be sold or used by any pers re name and address of any political committee t	on for the purpose of soliciting contributions
A.	Full Name (Last, First, Middle Initial) Jimmie D. Manning Mailing Address 149 Riverwood Drive		Date of Receipt
	City	State Zip Code	1 0 3 0 2 0 0 9 Transaction ID: AE6360F56EEB94F65A3
	Franklin	TN 37069-4181	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	57.69
	Name of Employer Diversicare Management Se- rvices Receipt For:	Occupation VP Purchasing & Property Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1211.49	
 В.	Full Name (Last, First, Middle Initial) Jimmie D. Manning Mailing Address 149 Riverwood Drive	•	Date of Receipt
			11 13 2009
	City	State Zip Code	Transaction ID: A546DDFC969FE4F2AA8
	Franklin	TN 37069-4181	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	57.69
	Name of Employer Diversicare Management Se- rvices Receipt For:	Occupation VP Purchasing & Property Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1269.18	
— C.	Full Name (Last, First, Middle Initial) Jimmie D. Manning		Date of Receipt
	Mailing Address 149 Riverwood Drive		1 1 ^D ^D ^D ^Y ^Y ^Y ^Y ^Y ^Y
	City	State Zip Code	Transaction ID: A7A94F5756D2E462D82
	Franklin	TN 37069-4181	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	57.69
	Name of Employer Diversicare Management Se- rvices Receipt For:	Occupation VP Purchasing & Property	
	Primary General Other (specify) ▼	Aggregate Year-to-Date 1326.87	
s	SUBTOTAL of Receipts This Page (optional)		173.07

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate sch for each category Detailed Summar	X 11a 11b 11c 12 ry Page I3 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using th NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committ	e name and address of any political of	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
∠ A.	Full Name (Last, First, Middle Initial) Jimmie D. Manning Mailing Address 149 Riverwood Drive		Date of Receipt
	City	State Zip Code	1 2 1 1 2 0 0 9 Transaction ID: A43A6452D764449A4E
	Franklin	TN 37069-4181	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	57.69
	Name of Employer Diversicare Management Se- rvices Receipt For:	Occupation VP Purchasing & Property Aggregate Year-to-Date ▼	,
	Primary General Other (specify)	13	384.56
В.	Full Name (Last, First, Middle Initial) Jimmie D. Manning Mailing Address 149 Riverwood Drive		Date of Receipt
	City	State Zip Code	Transaction ID: A86A5E53CD9624A46
	Franklin	TN 37069-4181	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	57.69
	Name of Employer Diversicare Management Se- rvices	Occupation VP Purchasing & Property	,
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	442.25
- C.	Full Name (Last, First, Middle Initial) Lisa A. Martens Mailing Address 1339 Buckingham Cir	cle	Date of Receipt
	City	State Zip Code	Transaction ID: ADC0E29B3784C47AD
	Franklin	TN 37064-5420	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	56.92
	Name of Employer Diversicare Management Se- rvices	Occupation VP Quality Management	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date	739.96
ſ	SUBTOTAL of Receipts This Page (optional)		172.30
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Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm Full Name (Last, First, Middle Initial) Lisa A. Martens Mailing Address 1339 Buckingham (Committee) City Franklin FEC ID number of contributing federal political committee. Name of Employer Diversicare Management Services Receipt For: Primary General Other (specify) ▼		Date of Receipt
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	Advocat Inc. Political Action Commit	tee	
<u> </u>	Full Name (Last, First, Middle Initial) Lisa A. Martens	Date of Receipt	
	Mailing Address 1339 Buckingham Ci	M M / D D / Y Y Y Y 09 04 2009	
	City	State Zip Code	Transaction ID: AF798FFA45CFD4B12
	Franklin	TN 37064-5420	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	56.92
	Name of Employer Diversicare Management Se-	Occupation	
	Diversicare Management Se- rvices	VP Quality Management	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	067.64	
	Other (specify)	967.64	
	Full Name (Last, First, Middle Initial)		
	Lisa A. Martens Mailing Address 1339 Buckingham Ci	Date of Receipt	
	Mailing Address 1339 Buckingham Ci	09 18 2009	
	City	State Zip Code	Transaction ID: A3E2EC43E488D4E47
	Franklin	TN 37064-5420	Amount of Each Receipt this Period
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	Name of Employer Diversicare Management Se-	Occupation	
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	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1024.56	
	Full Name (Last, First, Middle Initial) Lisa A. Martens		Date of Receipt
	Mailing Address 1339 Buckingham Ci	rcle	M M / D D / Y Y Y Y 10 02 2009
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	Franklin	TN 37064-5420	Amount of Each Receipt this Period
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	Name of Employer Diversicare Management Se-	Occupation	
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	Primary General Other (specify) ▼	1081.48	

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	Primary General		007.04	1			
	Other (specify)	0 0	227.84	1			
Γ							
	SUBTOTAL of Receipts This Page (optional)					30.:	27
	TOTAL This Period (last page this line number	er only)	N	. L.			
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	SCHEDULE A (FEC Form 3X))		FOR LINE NUMBER: PAGE 129 / 240
	ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	(check only one)
1			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using th			on for the purpose of soliciting contributions
h	NAME OF COMMITTEE (In Full)			
	Advocat Inc. Political Action Commit	tee		
, A.	Full Name (Last, First, Middle Initial) Christina McClung			Date of Receipt
	Mailing Address Po Box 476			12 ^{//} / ⁰³ / ^Y / ^Y ^Y ^Y / ₂ 009
	City	State	Zip Code	Transaction ID: A74A11823533240988B0
	Mammoth Spring	AR	72554-0476	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		10.09
	Name of Employer Diversicare Leasing Corp	Occupatio	n Admin Don-exempt	_
	Receipt For:		e Year-to-Date V	
	Primary General	, iggi ogui		
	Other (specify)		237.93	
в.	Full Name (Last, First, Middle Initial) Christina McClung	•		Date of Receipt
	Mailing Address Po Box 476			M M / D D / Y Y Y Y 12 17 2009
	City	State	Zip Code	Transaction ID: A5711AB4EB358464485
	Mammoth Spring	AR	72554-0476	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		10.09
	Name of Employer Diversicare Leasing Corp	Occupation Nursing	n Admin Don-exempt	
	Receipt For:		e Year-to-Date 🔻	
	Primary General Other (specify) ▼		248.02]
- C.	Full Name (Last, First, Middle Initial) Wanda C. Meade			Date of Receipt
	Mailing Address 15939 Lone Oak Driv	/e		07 10 Y Y Y Y 2009
	City	State	Zip Code	Transaction ID: AC9A259CFCF814E1795
	Catlettsburg	KY	41129-9290	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Name of Employer Diversicare Management Se-	Occupation Kentucky		
	rvices Receipt For:	·	e Year-to-Date V	-
	Primary General Other (specify) ▼		780.00]
ſ	SUBTOTAL of Receipts This Page (optional)			80.18
┢				
L	TOTAL This Period (last page this line number	# OHIY)		

I	SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS Any information copied from such Reports and	for each category of Detailed Summary P	the age X 11a 11b 11c 12 13 14 15 16 17 any person for the purpose of soliciting contributions
	or for commercial purposes, other than using t NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commi		nmittee to solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) Wanda C. Meade Mailing Address 15939 Lone Oak Dri	/6	Date of Receipt
			07 24 2009
	City <u>Catlettsburg</u>	State Zip Code KY 41129-9290	Transaction ID: AC920328378E8456F929 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	60.00
	Name of Employer Diversicare Management Se- rvices	Occupation Kentucky Rvp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 840	0.00
в.	Full Name (Last, First, Middle Initial) Wanda C. Meade Mailing Address 15939 Lone Oak Dri	/e	Date of Receipt
	City	State Zip Code	
	Catlettsburg	KY 41129-9290	Transaction ID: AF89A2F9B16E040F5923 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	60.00
	Name of Employer Diversicare Management Se- rvices	Occupation Kentucky Rvp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 900	0.00
- C.	Full Name (Last, First, Middle Initial) Wanda C. Meade Mailing Address 15939 Lone Oak Dri	/e	Date of Receipt
	City	State Zip Code	Transaction ID: A5600CCD53FD04F488F
	Catlettsburg	KY 41129-9290	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	60.00
	Name of Employer Diversicare Management Se- rvices Receipt For:	Occupation Kentucky Rvp	
	Primary General Other (specify) ▼	Aggregate Year-to-Date 960	0.00
ſ	SUBTOTAL of Receipts This Page (optional)		180.00
ľ	TOTAL This Period (last page this line numb	er only)	

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 131 / 240 (check only one)	
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$	
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any personance and address of any political committee to	on for the purpose of soliciting contributions	
NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committee			
Full Name (Last, First, Middle Initial) Wanda C. Meade	Date of Receipt		
Mailing Address 15939 Lone Oak Drive		0 9 0 4 2 0 0 9	
City	State Zip Code	Transaction ID: A66BC906BC8714672	
Catlettsburg	KY 41129-9290	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	60.00	
Name of Employer Diversicare Management Se-	Occupation Kentucky Rvp	_	
rvices Receipt For:	Aggregate Year-to-Date ▼		
Primary General Other (specify) ▼	1020.00]	
Full Name (Last, First, Middle Initial) Wanda C. Meade	I	Date of Receipt	
Mailing Address 15939 Lone Oak Drive	M • M / D • D / Y • Y • Y • Y Y Y • Y • Y Y Y • Y • Y Y Y • Y • Y Y Y • Y • Y Y Y • Y • Y Y Y • Y • Y Y Y • Y • Y Y Y • Y • Y Y Y • Y • Y Y Y • Y • Y Y Y • Y • Y Y Y • Y • Y Y Y • Y • Y Y Y • Y • Y Y Y • Y • Y Y Y • Y • Y Y Y • Y • Y Y Y • Y • Y Y Y • Y • Y Y • Y • Y Y • Y • Y Y • Y • Y Y • Y • Y • Y Y • Y • Y • Y Y • Y • Y • Y Y • Y • Y • Y Y • Y • Y • Y Y • Y • Y • Y Y • Y • Y • Y • Y Y • Y • Y • Y • Y Y • Y • Y • Y • Y • Y • Y • Y • Y • Y •		
City	State Zip Code	Transaction ID: AA909560D5AC94C66	
Catlettsburg	KY 41129-9290	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	60.00	
Name of Employer Diversicare Management Se- rvices	Occupation Kentucky Rvp		
Receipt For:	Aggregate Year-to-Date V		
Other (specify) ▼	1080.00]	
Full Name (Last, First, Middle Initial) Wanda C. Meade			
Mailing Address 15939 Lone Oak Drive		Date of Receipt 1 0 0 2 2 0 0 9	
City	State Zip Code	Transaction ID: A200865C344EA4C72	
Catlettsburg	KY 41129-9290	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	60.00	
Name of Employer Diversicare Management Se- rvices	Occupation Kentucky Rvp		
Receipt For:	Aggregate Year-to-Date V		
Other (specify)	1140.00]	
SUBTOTAL of Receipts This Page (optional)	l	180.00	
TOTAL This Period (last page this line number			

l	SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 132 / 240 (check only one) 11c X 11a 11b 13 14 15 16 17
	Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	d Statements may not be sold or used by any per- the name and address of any political committee ittee	son for the purpose of soliciting contributions o solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Wanda C. Meade Mailing Address 15939 Lone Oak Dr	ive	Date of Receipt
			10 16 2009
	City <u>Catlettsburg</u>	State Zip Code KY 41129-9290	Transaction ID: A0F11687B6F7B4D7D8DI
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 60.00
	Name of Employer Diversicare Management Se- rvices	Occupation Kentucky Rvp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	
- В.	Full Name (Last, First, Middle Initial) Wanda C. Meade Mailing Address 15939 Lone Oak Dr	ive	Date of Receipt
	-		10 30 2009
	City <u>Catlettsburg</u>	State Zip Code KY 41129-9290	Transaction ID: AA1A16E6252F24CEA97
	FEC ID number of contributing federal political committee.	C	60.00
	Name of Employer Diversicare Management Se- rvices	Occupation Kentucky Rvp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1260.00	
- C.	Full Name (Last, First, Middle Initial) Wanda C. Meade Mailing Address 15939 Lone Oak Dr	ive	Date of Receipt
	City	State Zip Code	Transaction ID: A3B3D24EDD7F642FB8A
	Catlettsburg	KY 41129-9290	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	60.00
	Name of Employer Diversicare Management Se-	Occupation Kentucky Rvp	
	rvices Receipt For:	Aggregate Year-to-Date V	
	Primary General Other (specify) ▼	1320.00	
ſ	SUBTOTAL of Receipts This Page (optiona	l)	180.00
	TOTAL This Period (last page this line num	ber only)	

	SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	·	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 133 / 240 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	the name and ac	ay not be sold or used by any pers Idress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Wanda C. Meade Mailing Address 15939 Lone Oak Dri	ive		Date of Receipt
	City	State	Zip Code	
	Catlettsburg	KY	41129-9290	Transaction ID: A3C1EA477E5B44FAC98C Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Name of Employer Diversicare Management Se- rvices	Occupation Kentuck		
	Receipt For: Primary General Other (specify) ▼	Aggregat	e Year-to-Date V 1380.00	
в.	Full Name (Last, First, Middle Initial) Wanda C. Meade Mailing Address 15939 Lone Oak Dri	ive		Date of Receipt
	City	State	Zip Code	
	<u>Catlettsburg</u>	KY	41129-9290	Transaction ID: AEAE76AB9022E4DB084B Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Name of Employer Diversicare Management Se- rvices	Occupation Kentuck	y Rvp	
	Receipt For: Primary General Other (specify) ▼	Aggregat	e Year-to-Date V 1440.00]
- C.	Full Name (Last, First, Middle Initial) Wanda C. Meade Mailing Address 15939 Lone Oak Dri	ive		Date of Receipt
	City	State	Zip Code	Transaction ID: A3BA4819665A94CDA97B
	Catlettsburg	KY	41129-9290	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		60.00
	Name of Employer Diversicare Management Se- rvices	Occupation Kentuck	y Rvp	
	Receipt For: Primary General Other (specify) ▼	Aggregat	e Year-to-Date V 1500.00]
ſ	SUBTOTAL of Receipts This Page (optional)		180.00
Ī	TOTAL This Period (last page this line numb	oer only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 134 / 240 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commit	ne name and ad	ly not be sold or used by any persideres of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Jeffery A. Merry Mailing Address 1152 Rock Creek Dr			Date of Receipt 0 9 0 3 2 0 0 9
	City	State	Zip Code	Transaction ID: AE05AECC071F74F7FB5
	Garland	TX	75040-6941	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		35.77
	Name of Employer Diversicare Leasing Corpo- ration Receipt For: Primary General Other (specify) ▼		on Admin Don-exempt e Year-to-Date ▼ 214.62]
– B.	Full Name (Last, First, Middle Initial) Jeffery A. Merry Mailing Address 1152 Rock Creek Dr			Date of Receipt
	Maining Address 1152 NOCK CIEEK DI			09 17 2009
	City	State	Zip Code	Transaction ID: A9DD553FF9931433F956
	Garland	TX	75040-6941	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		35.77
	Name of Employer Diversicare Leasing Corpo- ration Receipt For: Primary General Other (specify) ▼		on Admin Don-exempt e Year-to-Date ▼ 250.39]
_).	Full Name (Last, First, Middle Initial) Jeffery A. Merry			Date of Receipt
	Mailing Address 1152 Rock Creek Dr			M M / D D / Y Y Y Y 10 15 2009
	City	State	Zip Code	Transaction ID: A31EC5674A8A248B998
	Garland	TX	75040-6941	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		35.77
	Name of Employer Diversicare Leasing Corpo-	Occupatio		
	ration Receipt For:	~ ~ ~ ~ ~ ~	Admin Don-exempt e Year-to-Date 🔻	
	Primary General Other (specify)		321.93]
	SUBTOTAL of Receipts This Page (optional)			107.31
	TOTAL This Period (last page this line number	er only)		

Use separate schedule(s) for each category of the Detailed Summary Page ments may not be sold or used by any person he and address of any political committee to State Zip Code TX 75040-6941	FOR LINE NUMBER: PAGE 135 / 240 (check only one) Image: Additional stress of the stress o
for each category of the Detailed Summary Page nents may not be sold or used by any person a and address of any political committee to State Zip Code	X 11a 11b 11c 12 13 14 15 16 17 n for the purpose of soliciting contributions solicit contributions from such committee. 10 17 Date of Receipt M M D V V V V
Detailed Summary Page nents may not be sold or used by any person te and address of any political committee to State Zip Code	13 14 15 16 17 n for the purpose of soliciting contributions solicit contributions from such committee. 13 14 15 16 17 Date of Receipt M M D Y Y Y Y
nents may not be sold or used by any person le and address of any political committee to State Zip Code	Date of Receipt
State Zip Code	Date of Receipt
State Zip Code	Date of Receipt
-	M M / D D / Y Y Y Y
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-	10 13 2009
-	Transaction ID: AE44A5E7E82FE43D2
1// / 5040 0341	Amount of Each Receipt this Period
C	35.77
Dccupation	-
Jursing Admin Don-exempt	
Aggregate Year-to-Date 🔻	
321.93	
	1
	Date of Receipt
	10 ²⁹ 2009
State Zip Code	Transaction ID: A4B051330C3444AA5
I I	
73040-0341	Amount of Each Receipt this Period
C	35.77
Decupation	-
Nursing Admin Don-exempt	
Aggregate Year-to-Date V	
357.70	
	Date of Receipt
	11 12 2009
State Zip Code	Transaction ID: A0BDEA50B82594FD5
TX 75040-6941	Amount of Each Receipt this Period
	35.77
Decupation	-
Nursing Admin Don-exempt	
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393.47	
·····	107.31
	Decupation Jursing Admin Don-exempt Aggregate Year-to-Date ▼ 357.70 State Zip Code

ITEMIZEI	LE A (FEC Form 3) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any pers	FOR LINE NUMBER: (check only one) X 11a 11b 13 14	PAGE 136 / 240 11c 12 15 16 17 iting contributions 17
or for commer	COMMITTEE (In Full) Inc. Political Action Comm	the name and ad	dress of any political committee to	solicit contributions from	such committee.
Full Name Jeffery A. Mailing Ad		r		Date of Receipt	/ Y Y Y Y 2009
City		State	Zip Code		49CC14C7ABEA40BA93
Garland		ТХ	75040-6941	Amount of Each Re	
	mber of contributing itical committee.	C			35.77
Name of E Diversicare ration Receipt Fo	e Leasing Corpo-		Admin Don-exempt	_	
Prim			e Year-to-Date 429.24		
Full Name Jeffery A. M Mailing Ad	-			Date of Receipt	
Mailing Ad	dress 1152 Rock Creek D	r		12 ¹⁰	/ Y Y Y Y 2009
City		State	Zip Code	Transaction ID: A	577BFB90EB4048D099
<u>Garland</u>		ТХ	75040-6941	Amount of Each Re	eceipt this Period
	mber of contributing itical committee.	C			35.77
ration	mployer e Leasing Corpo-		Admin Don-exempt		
Receipt Fo Prime Othe		Aggregat	e Year-to-Date ▼ 465.01		
Full Name Jeffery A. M Mailing Ad		r		Date of Receipt	/
City		State	Zip Code	Transaction ID: A	2 0 0 9 C62438D42165441A96A
Garland		TX	75040-6941	Amount of Each Re	
	mber of contributing itical committee.	C			35.77
ration	mployer e Leasing Corpo-		Admin Don-exempt		
Receipt Fo Prima Othe		Aggregat	e Year-to-Date 500.78		
SUBTOTAL	of Receipts This Page (optiona	l)			107.31
TOTAL This	Period (last page this line num	ber only)			

C	CHEDULE A (FEC Form 3X)			FOR	LINE	NU	MRF	R٠	PA	GE	137 /	240	n		
· · /			Use separate schedule(s) for each category of the			FOR LINE NUMBER: PAGE 137 / 240 (check only one)									
	ITEMIZED RECEIPTS		Detailed Summary Page	X	X 11a 11b 11c 12								_		
_					13		14		15		16		1		
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may name and add	not be sold or used by any pers dress of any political committee to	on for th o solicit o	e purp contrib	ose utio	of so ns fro	olicit om s	ing co such c	ntrib omm	ution hittee	S			
	NAME OF COMMITTEE (In Full)														
	Advocat Inc. Political Action Committee	e													
	Full Name (Last, First, Middle Initial) Kelli K. Montelongo				ate of	Rec	eipt								
	Mailing Address 421 Big Timber Drive				м м 07		D	D 0	/ Y		0 0		1		
	City	State	Zip Code		ansad	ctior		_	7276	-	-	-	404		
	Temple	ТХ	76502-5295		mount										
	FEC ID number of contributing federal political committee.	C									20.9	6			
	Name of Employer Diversicare Management Se-	Occupatio													
	rvices	Texas Re													
	Receipt For: Primary General	Aggregate	Year-to-Date V	_											
	Other (specify) ▼		272.48												
	Full Name (Last, First, Middle Initial) Kelli K. Montelongo				ate of	Rec	eipt								
	Mailing Address 421 Big Timber Drive				м м 07	/	D	D 4	/ Y		0 °		1		
	City	State	Zip Code		ansad	ctior	_	_	9FB1	9FC	D79	944	3EI		
	Temple	ТХ	76502-5295		mount										
	FEC ID number of contributing federal political committee.	C									20.9	6			
	Name of Employer Diversicare Management Se-	Occupatio													
	rvices	Texas Re													
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 293.44												
	Full Name (Last, First, Middle Initial) Kelli K. Montelongo				ate of	Por	oint								
	Mailing Address 421 Big Timber Drive				мм		D	D	/ Y		Y		1		
	City	State	Zip Code		08 ansao	tion		07 4F	6301	-	0 0		ן 4ח/		
	Temple	TX	76502-5295		mount								-0-		
	FEC ID number of contributing federal political committee.	C									20.9				
	Name of Employer Diversicare Management Se- rvices	Occupation Texas Re													
	Receipt For:	Aggregate	Year-to-Date 🔻												
	Primary General Other (specify) ▼		314.40	1											
	-					_		_		_	_	_	_		
				- E		-					52.8	~			

	CHEDULE A (FEC Form 3X EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 138 / 240 (check only one) X X 11a 11b 11c
A	ny information copied from such Reports an	d Statements may not be sold or used by any pers the name and address of any political committee t	13 14 15 16 17 son for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm		
Z	Full Name (Last, First, Middle Initial) Kelli K. Montelongo		Date of Receipt
	Mailing Address 421 Big Timber Driv	/e	M M / D D / Y Y Y Y 0 8 2 1 2 0 0 9
	City	State Zip Code	Transaction ID: A35C16E3A7E444ABEE
	Temple	TX 76502-5295	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.96
	Name of Employer Diversicare Management Se-	Occupation	
	rvices Receipt For:	Texas Reboc	
	Primary General Other (specify) ▼	Aggregate Year-to-Date V 335.36	
	Full Name (Last, First, Middle Initial) Kelli K. Montelongo		Date of Receipt
	Mailing Address 421 Big Timber Driv	/e	0 9 0 4 2 0 0 9
	City	State Zip Code	Transaction ID: A2F484B44EA4C4458E
	Temple	TX 76502-5295	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.96
	Name of Employer Diversicare Management Se- rvices	Occupation Texas Reboc	
	Receipt For:	Aggregate Year-to-Date ▼	
	Other (specify)	356.32	
	Full Name (Last, First, Middle Initial) Kelli K. Montelongo		Date of Receipt
	Mailing Address 421 Big Timber Driv	/e	M M / D D / Y Y Y Y 09 18 2009
	City	State Zip Code	Transaction ID: AFAE8F931976647728
	Temple	TX 76502-5295	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.96
	Name of Employer Diversicare Management Se- rvices	Occupation Texas Reboc	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 377.28	
Γ	SUBTOTAL of Receipts This Page (optiona		62.88

SCHEDULE A (FEC Form 3X	Use separate schedule(s)	FOR LINE NUMBER: PAGE 139 / 240 (check only one)
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any pers the name and address of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commi		
Full Name (Last, First, Middle Initial) Kelli K. Montelongo		Date of Receipt
Mailing Address 421 Big Timber Driv	e	10 02 2009
City	State Zip Code	Transaction ID: A73CC7B2705F347698
Temple	TX 76502-5295	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.96
Name of Employer Diversicare Management Se-	Occupation Texas Reboc	
rvices Receipt For:	Aggregate Year-to-Date V	-
Primary General Other (specify) ▼	398.24]
Full Name (Last, First, Middle Initial) Kelli K. Montelongo		Date of Receipt
Mailing Address 421 Big Timber Driv	e	10 ^{//} 16 [/] 2009
City	State Zip Code	Transaction ID: A281CD8E216E14D08
Temple	TX 76502-5295	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.96
Name of Employer Diversicare Management Se- rvices	Occupation Texas Reboc	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	419.20]
Full Name (Last, First, Middle Initial) Kelli K. Montelongo		Date of Receipt
Mailing Address 421 Big Timber Driv	е	M M / D D / Y Y Y Y 10 30 2009
City	State Zip Code	Transaction ID: AC4F8742CEC804F49
Temple	TX 76502-5295	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.96
Name of Employer Diversicare Management Se- rvices	Occupation Texas Reboc	
Receipt For:	Aggregate Year-to-Date V	
Other (specify) ▼	440.16]
SUBTOTAL of Receipts This Page (optional)	62.88
TOTAL This Period (last page this line numb	•	

ç	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 140 / 240								
			for each category of the	(check only one)								
1	I EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12								
	Any information copied from such Reports and s or for commercial purposes, other than using the	Statements ma	y not be sold or used by any person dress of any political committee to	13 14 15 16 17 on for the purpose of soliciting contributions o solicit contributions from such committee.								
	NAME OF COMMITTEE (In Full)											
	Advocat Inc. Political Action Committ	ee										
∠ A.	Full Name (Last, First, Middle Initial) Kelli K. Montelongo			Date of Receipt								
	Mailing Address 421 Big Timber Drive			M M / D D / Y Y Y Y 11 1 13 2009								
	City	State	Zip Code	Transaction ID: AF6E801C5F5F64ED3B								
	Temple	TX	76502-5295	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		20.96								
	Name of Employer Diversicare Management Se-	Occupatio		_								
	rvices	Texas R										
	Receipt For: Primary General	Aggregate	e Year-to-Date	_								
	Other (specify) ▼	0 0	461.12									
- 3.	Full Name (Last, First, Middle Initial) Kelli K. Montelongo			Date of Receipt								
	Mailing Address 421 Big Timber Drive	M M / D D / Y Y Y Y 11 27 2009										
	City	State	Zip Code	Transaction ID: AF7359D11B23E42F5BI								
	Temple	TX	76502-5295	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		20.96								
	Name of Employer Diversicare Management Se-	Occupatio Texas Re										
	rvices Receipt For:		e Year-to-Date V	_								
	Primary General Other (specify) \blacksquare		482.08]								
_).	Full Name (Last, First, Middle Initial) Kelli K. Montelongo			Date of Receipt								
	Mailing Address 421 Big Timber Drive			1 2 1 1 2 0 0 9								
	City	State	Zip Code	Transaction ID: A93C18BED05374BDE9								
	Temple	TX	76502-5295	Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C		20.96								
	Name of Employer Diversicare Management Se- rvices	Occupatio Texas Re	eboc									
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 503.04]								
Γ	SUBTOTAL of Receipts This Page (optional).			62.88								

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 141 / 240 (check only one) 11a X 11a 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commit	Statements may not be sold or used by any persone name and address of any political committee to tee	n for the purpose of soliciting contributions solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Kelli K. Montelongo Mailing Address 421 Big Timber Drive	9	Date of Receipt
	City	State Zip Code	1 2 2 4 2 0 0 9 Transaction ID: A4E8A25E547104475845
	Temple	TX 76502-5295	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		20.96
	Name of Employer Diversicare Management Se- rvices Receipt For:	Occupation Texas Reboc	
	Primary General Other (specify) ▼	Aggregate Year-to-Date 524.00]
— В.	Full Name (Last, First, Middle Initial) Nita M. Morris		Date of Receipt
	Mailing Address P O Box 275		07 10 Y Y Y Y 02009
	City	State Zip Code	Transaction ID: AA0CDB1F2C92040DF9I
	Norman	AR 71960-0275	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		33.65
	Name of Employer Diversicare Management Se- rvices	Occupation Arkansas Cqi Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 437.45]
– c.	Full Name (Last, First, Middle Initial) Nita M. Morris		Date of Receipt
	Mailing Address P O Box 275		07 / D D / Y Y Y Y 099
	City	State Zip Code	Transaction ID: A2D91C02D668049F880
	Norman	AR 71960-0275	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33.65
	Name of Employer Diversicare Management Se- rvices Receipt For:	Occupation Arkansas Cqi Director	_
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 471.10]
Γ	SUBTOTAL of Receipts This Page (optional)	·	88.26

ľ	SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 142 / 240 (check only one) 11c X 11a 11b I3 14 15 16 17 n for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	the name and address of any political committee to	solicit contributions from such committee.
А.	Full Name (Last, First, Middle Initial) Nita M. Morris Mailing Address PO Box 275		Date of Receipt
	City	State Zip Code	Transaction ID: A4BECDD84D4804088BA0
	Norman	AR 71960-0275	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33.65
	Name of Employer Diversicare Management Se- rvices	Occupation Arkansas Cqi Director	-
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 504.75	
– В.	Full Name (Last, First, Middle Initial) Nita M. Morris		Date of Receipt
	Mailing Address P O Box 275		08 21 Y Y Y 09 21
	City	State Zip Code	Transaction ID: A2CDC9FC201F441E4BE7
	Norman	AR 71960-0275	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33.65
	Name of Employer Diversicare Management Se- rvices	Occupation Arkansas Cqi Director	_
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 538.40	
– C.	Full Name (Last, First, Middle Initial) Nita M. Morris		Date of Receipt
	Mailing Address P O Box 275		M M / D D / Y Y Y Y 09 04 2009
	City	State Zip Code	Transaction ID: A72269D9E35E94E61B60
	Norman	AR 71960-0275	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33.65
	Name of Employer Diversicare Management Se- rvices	Occupation Arkansas Cqi Director	
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 572.05	
Γ	SUBTOTAL of Receipts This Page (optiona	الة الله الله الله الله الله الله الله الله	100.95

	CHEDULE A (FEC Form 3X							FOR LINE NUMBER: PAGE 143 / 240 (check only one)									
ľ	TEMIZED RECEIPTS		for each category of the Detailed Summary Page		< 11a13	Π	11b 14		11c 15		12 16		17				
	Any information copied from such Reports and or for commercial purposes, other than using t	d Statements may	y not be sold or used by any perso dress of any political committee to	on for	the purp	LL Dose Dutio	of so	liciti m s	na co	ntrib omm	utions		17				
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commi																
⊻ A.	Full Name (Last, First, Middle Initial) Nita M. Morris				Date of	Re	ceipt										
	Mailing Address P O Box 275				м м 0 9	1		D 8	/ Y		0 [°] 09						
	City	State	Zip Code		Transa	ctio	n ID:	AA	BE8/	4046	65290)4D8	3D87				
	Norman	AR	71960-0275	_	Amoun	t of	Each	Rec	eipt th	nis P	eriod						
	FEC ID number of contributing federal political committee.	C					1			;	33.65						
	Name of Employer Diversicare Management Se-	Occupatio	n s Cqi Director														
	rvices Receipt For:		e Year-to-Date														
	Primary General Other (specify) ▼		605.70														
— В.	Full Name (Last, First, Middle Initial) Nita M. Morris				Date of	Re	ceipt										
	Mailing Address P O Box 275				^м 1 0	/	D 0	D 2	/ Y		0 [°] 09						
	City	State	Zip Code		Transa	ctio	n ID:	AC	8442	906	4F1B	443	D97				
	Norman	AR	71960-0275	_	Amoun	t of	Each	Rec	eipt th	nis P	eriod						
	FEC ID number of contributing federal political committee.	C					1			;	33.65						
	Name of Employer Diversicare Management Se- rvices	Occupatio Arkansas	ⁿ s Cqi Director														
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date 639.35														
	Full Name (Last, First, Middle Initial) Nita M. Morris				Date of	Re	ceipt										
	Mailing Address P O Box 275				^м 1 0	/		^D	/ Y		0 [°] 09						
	City	State	Zip Code		Transa	ctio	n ID:	AC	BC8	16F4	19B44	4480	C29				
	Norman	AR	71960-0275	-	Amoun	t of	Each	Rec	eipt th	nis P	eriod		_				
	FEC ID number of contributing federal political committee.	C								;	33.65						
	Name of Employer Diversicare Management Se- rvices		s Cqi Director														
	Receipt For: Primary General Other (specify) $\mathbf{\nabla}$	Aggregate	e Year-to-Date ▼ 673.00														
Γ	SUBTOTAL of Receipts This Page (optional))								10	0.95		7				

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 144 / 240 (check only one)
A	ny information copied from such Reports and	d Statements may not be sold or used by any pe the name and address of any political committee	rson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commi		
	Full Name (Last, First, Middle Initial) Nita M. Morris		Date of Receipt
	Mailing Address P O Box 275		10 ^{M M} /2009
	City	State Zip Code	Transaction ID: ADDCFA9D25B734B89/
	Norman	AR 71960-0275	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		33.65
	Name of Employer Diversicare Management Se-	Occupation	
	rvices Receipt For:	Arkansas Cqi Director Aggregate Year-to-Date	
	Primary General Other (specify) ▼	706.65	
	Full Name (Last, First, Middle Initial) Nita M. Morris	I	Date of Receipt
	Mailing Address P O Box 275		M M / D D / Y Y Y Y 111 13 2009
	City	State Zip Code	Transaction ID: AB18236C7C9D349DE
	Norman	AR 71960-0275	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33.65
	Name of Employer Diversicare Management Se-	Occupation	
	rvices Receipt For:	Arkansas Cqi Director Aggregate Year-to-Date	
	Primary General Other (specify) ▼	740.30	
	Full Name (Last, First, Middle Initial) Nita M. Morris	_ I	Date of Receipt
	Mailing Address P O Box 275		1 1 2 7 2 0 0 9
	City	State Zip Code	Transaction ID: A2BA5CE9875B94CDB
	Norman	AR 71960-0275	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33.65
	Name of Employer Diversicare Management Se- rvices	Occupation Arkansas Cqi Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 773.95	
Γ	CURTOTAL of Respire This Rose (artispa)	·	100.95

ITI	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 145 / 240 (check only one)
or f	y information copied from such Reports and or commercial purposes, other than using th NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commit	ie name and ad	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Nita M. Morris Mailing Address P O Box 275 City Norman FEC ID number of contributing federal political committee. Name of Employer Diversicare Management Services Receipt For: Primary General		Zip Code 71960-0275 on s Cqi Director e Year-to-Date ▼	Date of Receipt
3.	Other (specify) ▼ Full Name (Last, First, Middle Initial) Nita M. Morris Mailing Address P O Box 275	0.0	807.60	Date of Receipt
	City <u>Norman</u> FEC ID number of contributing federal political committee. Name of Employer Diversicare Management Se- rvices Receipt For: Primary General Other (specify) ▼	- 1 · · · · · · · · · · · · · · · · · ·	Zip Code 71960-0275 on s Cqi Director e Year-to-Date ▼ 841.25	Transaction ID: A344C319326134BC1B15 Amount of Each Receipt this Period 33.65
).	Full Name (Last, First, Middle Initial) Brenda K. Mosbey Mailing Address 209 Providence Hill E Apt 102 City Ashland FEC ID number of contributing federal political committee. Name of Employer Diversicare Leasing Corp Receipt For: Primary General Other (specify) ♥	State KY C Occupatic NursAdn	Zip Code 41101-2292 on nin Asst DON-Exempt e Year-to-Date ▼ 209.62	Date of Receipt 0 8 / D D / Y Y Y Y 0 8 / D J / Y 2009 Transaction ID: A410EE5FB77C34C3B93 Amount of Each Receipt this Period 24.62
รเ	JBTOTAL of Receipts This Page (optional)		····· •	91.92

	SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	K)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 146 / 240 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements ma the name and ac	l y not be sold or used by any pers dress of any political committee t	on for the purpose of soliciting contributions
	Advocat Inc. Political Action Comn	nittee		
, ∠ A.	Full Name (Last, First, Middle Initial) Brenda K. Mosbey			Date of Receipt
	Mailing Address 209 Providence Hil Apt 102	l Drive		M M / D D / Y
	City	State	Zip Code	Transaction ID: AFFF0BC1770E44B16A1
	Ashland	KY	41101-2292	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		24.62
	Name of Employer Diversicare Leasing Corp	Occupatio NursAdr	on nin Asst DON-Exempt	
	Receipt For:		e Year-to-Date 🔻	
	Other (specify)	0 0	234.24]
- В.	Full Name (Last, First, Middle Initial) Brenda K. Mosbey			Date of Receipt
	Mailing Address 209 Providence Hil Apt 102	I Drive		M M / D D / Y
	City	State	Zip Code	Transaction ID: A65C20D9E6BD847A084
	Ashland	KY	41101-2292	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		24.62
	Name of Employer Diversicare Leasing Corp	Occupation NursAdr	nin Asst DON-Exempt	
	Receipt For:	Aggregat	e Year-to-Date 🔻	
	Other (specify)		258.86	
- c.	Full Name (Last, First, Middle Initial) Brenda K. Mosbey			Date of Receipt
	Mailing Address 209 Providence Hil Apt 102	I Drive		M M / D D / Y Y Y Y Y 09 / 24 / 2009
	City	State	Zip Code	Transaction ID: A671E4C5ACAB84E5B94
	Ashland	KY	41101-2292	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		24.62
	Name of Employer Diversicare Leasing Corp	Occupatio NursAdr	on nin Asst DON-Exempt	
	Receipt For:	Aggregat	e Year-to-Date 🔻	_
	Other (specify)		283.48	
ſ	SUBTOTAL of Receipte This Page (astions) bl)		73.86
┢	SUBTOTAL of Receipts This Page (optiona	·		
	TOTAL This Period (last page this line num	iber only)		

	SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	K)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 147 / 240 (check only one) 11a X 11a 13 14 15 16 17
	Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements ma g the name and ac	ly not be sold or used by any pers Idress of any political committee t	on for the purpose of soliciting contributions
	Advocat Inc. Political Action Comn	nittee		
, ∠ A.	Full Name (Last, First, Middle Initial) Brenda K. Mosbey			Date of Receipt
	Mailing Address 209 Providence Hil Apt 102	l Drive		10 [/] ^D ^D [/] ^Y
	City	State	Zip Code	Transaction ID: AE882336B7E7547AA9F
	Ashland	KY	41101-2292	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		24.62
	Name of Employer Diversicare Leasing Corp	Occupation NursAdr	on nin Asst DON-Exempt	
	Receipt For:	I	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	308.10]
- 3.	Full Name (Last, First, Middle Initial) Brenda K. Mosbey			Date of Receipt
	Mailing Address 209 Providence Hil Apt 102	I Drive		M M / D D / Y Y Y Y 10 22 2009
	City	State	Zip Code	Transaction ID: AD5655D3286114329A2
	Ashland	KY	41101-2292	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		24.62
	Name of Employer Diversicare Leasing Corp	Occupation NursAdr	on nin Asst DON-Exempt	
	Receipt For:	Aggregat	e Year-to-Date 🔻	_
	Primary General Other (specify) ▼		332.72]
- C.	Full Name (Last, First, Middle Initial) Brenda K. Mosbey			Date of Receipt
	Mailing Address 209 Providence Hil Apt 102	l Drive		M M / D D / Y Y Y Y 11 05 2009
	City	State	Zip Code	Transaction ID: AC60A7BF89D3E49C68
	Ashland	KY	41101-2292	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		24.62
	Name of Employer Diversicare Leasing Corp	Occupation NursAdr	on nin Asst DON-Exempt	
	Receipt For:	Aggregat	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		357.34]
Γ	SUBTOTAL of Receipts This Page (optiona	al)		73.86
L	TOTAL This Period (last page this line num	ber only)		

	SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 148 / 240 (check only one)
	Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	the name and ad	y not be sold or used by any pers dress of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Brenda K. Mosbey			Date of Receipt
	Mailing Address 209 Providence Hill Apt 102	Drive		1 1 / 1 9 / Y Y Y Y 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	City	State	Zip Code	Transaction ID: A4685532432F94A02A18
	Ashland FEC ID number of contributing federal political committee.	KY C	41101-2292	Amount of Each Receipt this Period
	Name of Employer Diversicare Leasing Corp	Occupatio NursAdr	n nin Asst DON-Exempt	
	Receipt For: Primary General Other (specify) ▼	Aggregat	e Year-to-Date ▼ 381.96	
- В.	Full Name (Last, First, Middle Initial) Brenda K. Mosbey Mailing Address 209 Providence Hill	Drive		Date of Receipt
	Apt 102	Drive		1 2 0 3 Y Y Y Y Y 1 2 0 3 0 3
	City Ashland	State KY	Zip Code 41101-2292	Transaction ID: ABC08CF6DE1C94CC583
	FEC ID number of contributing federal political committee.	C	41101-2232	Amount of Each Receipt this Period
	Name of Employer Diversicare Leasing Corp		nin Asst DON-Exempt	
	Receipt For: Primary General Other (specify) ▼	Aggregat	e Year-to-Date ▼ 406.58	
- C.	Full Name (Last, First, Middle Initial) Brenda K. Mosbey			Date of Receipt
	Mailing Address 209 Providence Hill Apt 102	Drive		1 2 1 7 Y Y Y Y 1 2 1 7 2 0 0 9
	City <u>Ashland</u>	State KY	Zip Code 41101-2292	Transaction ID: A0322D67A92CB4FC99E0 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		24.62
	Name of Employer Diversicare Leasing Corp	I	nin Asst DON-Exempt	
	Receipt For: Primary General Other (specify) ▼	Aggregat	e Year-to-Date ▼ 431.20]
ſ	SUBTOTAL of Receipts This Page (optional)		73.86
	TOTAL This Period (last page this line numb	per only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 149 / 240 (check only one) X X 11a
	Any information copied from such Reports and or for commercial purposes, other than using th	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	13 14 15 16 17 on for the purpose of soliciting contributions osolicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committ	ee		
۷ ۹.	Full Name (Last, First, Middle Initial) Treieva Oakley			Date of Receipt
	Mailing Address 901 Camellia Road			07 / ^D D / <u>Y</u> Y Y Y 2009
	City	State	Zip Code	Transaction ID: AE2A9ED9C841341A7B
	Oneonta	AL	35121-1902	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		27.58
	Name of Employer Diversicare Management Se-	Occupatio	n aining Coordinator	
	rvices Receipt For:		e Year-to-Date V	
	Primary General Other (specify) ▼		350.44]
. –	Full Name (Last, First, Middle Initial) Treieva Oakley			Date of Receipt
	Mailing Address 901 Camellia Road			07 / 24 Y Y Y 099
	City	State	Zip Code	Transaction ID: A903319C9451047F698
	Oneonta	AL	35121-1902	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		27.58
	Name of Employer Diversicare Management Se- rvices	Occupatio DMS Tra	n aining Coordinator	
	Receipt For:		e Year-to-Date 🔻	
	Primary General Other (specify) ▼		378.02]
_	Full Name (Last, First, Middle Initial) Treieva Oakley			Date of Receipt
	Mailing Address 901 Camellia Road			M M / D D / Y Y Y Y Y <th< td=""></th<>
	City	State	Zip Code	Transaction ID: A95AF769D7A30428584
	Oneonta	AL	35121-1902	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		27.58
	Name of Employer Diversicare Management Se- rvices	Occupatio DMS Tra	n aining Coordinator	
	Receipt For:	- 1 ·	e Year-to-Date V	
	Primary General Other (specify) ▼		405.60]
ſ	SUBTOTAL of Receipts This Page (optional)	1		82.74
F			· · · · · · · · · · · · · · · · · · ·	
L	TOTAL This Period (last page this line numbe	i Oniy)		

ITEMIZED RECEIPTS for each category of the Dataled Summary Page Itel 11 d 11	ILE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 150 / 240 (check only one)						
Any information capied from such Reports and Statements may not be sold or used by any person for the surposed dialities contributions from such committee. NAME OF COMMITTEE (in Full) NAME OF COMMITTEE (in Full) Advocat Inc. Political Action Committee Date of Receipt Yell Name (Last, First, Middle Initial) Treiva Cakity Date of Receipt Mailing Address 901 Camellia Road City State Zip Code Onsonta AL 35121-1902 Feb Cito number of contributing federal political committee Zif 2 0.09 Name of Employee Docupation DMS Training Coordinator Aggregat Year-to-Date ▼ Date of Receipt Mailing Address 901 Camellia Road City State Zip Code Transaction ID: AF54CBF15B737 Name of Employee Docupation DMS Training Coordinator Mailing Address 901 Camellia Road Treixea Cakity Date of Receipt Mailing Address 901 Camellia Road City State Zip Code Transaction ID: AAFF57B02BAR Mailing Address 901 Camellia Road City State Zip Code Transaction ID: AAFF57B02BAR Mailing Address 901 Camellia Road City State Zip Code Transaction ID: AAFF57B02BAR	D RECEIPTS	for each category of the	X 11a 11b 11c 12						
Advocat Inc. Political Action Committee Full Name (Last, First, Middle Initial) Treisea Cakley Mailing Address 901 Camellia Road City State Zip Code Primary Control Contributing C Primary General Adayses Primary General Adayses Primary General Adayses Primary General Adayses City State Zip Code Other (specify) ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date Pointa AL 35121-1902 Full Name (Last, First, Middle Initial) Treisex Cakley Date of Receipt Mailing Address 901 Carmellia Road City State Zip Code Oneonta AL 35121-1902 Amount of Each Receipt His Period Primary General Obs (Score) DMS Training Coordinator Needer Fire: Dumber of contributing C Aggregate Year-to-Date ▼ Diversion: Maddress Soft Carmellia Road City State Zip Code Neede Engloyeer Dumber of contributing <th>on copied from such Reports and Stat rcial purposes, other than using the na</th> <th>ents may not be sold or used by any perso e and address of any political committee to</th> <th>on for the purpose of soliciting contributions</th>	on copied from such Reports and Stat rcial purposes, other than using the na	ents may not be sold or used by any perso e and address of any political committee to	on for the purpose of soliciting contributions						
Televa Oakley Date of Receipt Mailing Address 901 Camellia Road Image: Second Camellia Road City State Zip Code Oneonia AL 35121-1902 PEC 1D number of contributing tederal political committee. C Amount of Each Receipt this Period Particle Control Contributing tederal political committee. C Amount of Each Receipt this Period Particle Control Contr	F COMMITTEE (In Full)								
Mailing Address 901 Camellia Road City State Zip Code Oneonta AL 35121-1902 FEC ID number of contributing federal policial committee. C Amount of Each Receipt Inis Period Name of Employer Diversicate Management Se- Indexes Occupation DMS Training Coordinator Aggregate Year-to-Date ▼ Pill Name (Last, First, Middle Initial) Treieva Oakley Aggregate Year-to-Date ▼ Date of Receipt Mailing Address 901 Camellia Road C C City AL 35121-1902 Transaction ID: AF54CBF15B737 Full Name (Last, First, Middle Initial) Treewa Cakley Mailing Address 901 Camellia Road City State Zip Code Transaction ID: AA4FF37802BA1 Amount of Each Receipt Inis Period Aggregate Year-to-Date ▼ Treewa Cakley Name of Employer Diversicare Management Se- Droces Occupation DMS Training Coordinator Treewa Cakley Mailing Address 901 Camellia Road C Treewa Cakley Date of Receipt Full Name (Last, First, Middle Initial) Treewa Cakley Date of Receipt T 20.0.9 Full Name (Last, First, Middle Initial) Treewa Cakley Aggr			Date of Receipt						
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	E OF COMMITTEE (In Full)	· · · · ·											
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	ame (Last, First, Middle Initial) a Oakley				Date of	Receip	ŀ						
	g Address 901 Camellia Road				1 0	/ D	0 2	/ Y		Y 0 0 9			
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	or for commercial purposes, other than using th	ie name and ad	dress of any political committee to	o solici	t contri	butic	ons fro	om such o	comm	nittee.				
	NAME OF COMMITTEE (In Full)													
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	/													
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۱.	Treieva Oakley				Date o		ceipt							
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SCHEDULE A (FEC Form 3X))	FOR LINE NUMBER: PAGE 153/240								
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Any information copied from such Reports and	I Statements may not be sold or used by any per-	son for the purpose of soliciting contributions								
or for commercial purposes, other than using t	he name and address of any political committee	to solicit contributions from such committee.								
NAME OF COMMITTEE (In Full)										
Advocat Inc. Political Action Commit	ttee									
Full Name (Last, First, Middle Initial) Treieva Oakley		Date of Receipt								
Mailing Address 901 Camellia Road		12 24 2009								
City	State Zip Code	Transaction ID: AD2498A0EAAA84D31								
Oneonta	AL 35121-1902	Amount of Each Receipt this Period								
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FEC ID number of contributing federal political committee.	C	27.58								
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Other (specify)	681.40									
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Full Name (Last, First, Middle Initial) Diane K. Patterson		Date of Receipt								
		' '								
Mailing Address 310 Welchwood		07 16 Y Y Y Y 099								
City	State Zip Code	Transaction ID: A3F32F5B8C3AC47919								
Clarksville	TN 37040-6739	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.		13.92								
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Other (specify)	204.03									
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Diane K. Patterson		Date of Receipt								
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City	State Zip Code	Transaction ID: AA63BE711603F4B8AA								
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	SCHEDULE A (FEC Form 3X))	Use separate schedule(s)	FOR LINE NUMBER: PAGE 154 / 240
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	Advocat Inc. Political Action Commit	ttee		
∠ A.	Full Name (Last, First, Middle Initial) Diane K. Patterson			Date of Receipt
	Mailing Address 310 Welchwood			M M / D D / Y Y Y Y 08 13 2009
	City	State	Zip Code	Transaction ID: A95EACD4DEE554353A9
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	Primary General		217.95	1
	Other (specify)	0 0		
- В.	Full Name (Last, First, Middle Initial) Diane K. Patterson			Date of Receipt
	Mailing Address 310 Welchwood			M M / D D / Y Y Y Y 08 27 2009
	City	State	Zip Code	Transaction ID: A1874DABDBCBA4E6D83
	<u>Clarksville</u>	TN	37040-6739	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		13.92
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	Primary General Other (specify) ▼		231.87]
-	Full Name (Last, First, Middle Initial)			
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	City	State	Zip Code	0 9 1 0 2 0 0 9 Transaction ID: A9164DD74D2ED4620A9
	Clarksville	TN	37040-6739	Amount of Each Receipt this Period
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	SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 155 / 240 (check only one) X X 11a 11b 11c 12 13 14 15 16 17
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∠ A.	Full Name (Last, First, Middle Initial) Diane K. Patterson Mailing Address 310 Welchwood		Date of Receipt
			09 24 2009
	City Clarksville	State Zip Code TN 37040-6739	Transaction ID: A6BC23D5C70A1497BA
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	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 259.71	
– В.	Full Name (Last, First, Middle Initial) Diane K. Patterson Mailing Address 310 Welchwood		Date of Receipt
			10 08 2009
	City	State Zip Code	Transaction ID: AF8F56748484A4D5895
	Clarksville	TN 37040-6739	Amount of Each Receipt this Period
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	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 273.63	
-).	Full Name (Last, First, Middle Initial) Diane K. Patterson		Date of Receipt
	Mailing Address 310 Welchwood		M M / D D / Y
	City	State Zip Code	Transaction ID: A120CD3FFEA224D11A
	<u>Clarksville</u>	TN 37040-6739	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	13.92
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date 287.55	
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or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	g the name and address of any political committe	e to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Diane K. Patterson		Date of Receipt
Mailing Address 310 Welchwood		1 1 0 5 2 0 0 9
City	State Zip Code	Transaction ID: AFFE6DC065AE54F2A
Clarksville	TN 37040-6739	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		13.92
Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	301.47	
Full Name (Last, First, Middle Initial) Diane K. Patterson		Date of Receipt
Mailing Address 310 Welchwood		M M / D D / Y Y Y 11 1 19 2009
City	State Zip Code	Transaction ID: A3E4C514C009F43589
Clarksville	TN 37040-6739	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	13.92
Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 315.39	
Full Name (Last, First, Middle Initial) Diane K. Patterson		Date of Receipt
Mailing Address 310 Welchwood		12 03 2009
City	State Zip Code	Transaction ID: A803219810F2A4F9096
Clarksville	TN 37040-6739	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	13.92
Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 329.31	
SUBTOTAL of Receipts This Page (option	al)	41.76
TOTAL This Period (last page this line nur	nber only)	•

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 157 / 240 (check only one) X 11a 11b 11c 12 X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commit	Statements may not be sold or used by any persone name and address of any political committee to tee	on for the purpose of soliciting contributions solicit contributions from such committee.
А.	Full Name (Last, First, Middle Initial) Diane K. Patterson Mailing Address 310 Welchwood		Date of Receipt
	City	State Zip Code	Transaction ID: A5BA974400C80403BAE
	<u>Clarksville</u>	TN 37040-6739	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	13.92
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 343.23]
– B.	Full Name (Last, First, Middle Initial) Terena M. Raidt		Date of Receipt
	Mailing Address 7233 Althorp Way #S	\$10	07 10 Y Y Y Y 099
	City	State Zip Code	Transaction ID: A412B6115A06A4DCCB4
	Nashville	TN 37211-7156	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	45.76
	Name of Employer Diversicare Management Se- rvices	Occupation VP of Marketing	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 594.88]
- C.	Full Name (Last, First, Middle Initial) Terena M. Raidt		Date of Receipt
	Mailing Address 7233 Althorp Way #S	610	M M / D D / Y Y Y Y 07 24 2009
	City Nachuille	State Zip Code	Transaction ID: ADA34364F44314025A2
	Nashville FEC ID number of contributing federal political committee.	TN 37211-7156	Amount of Each Receipt this Period 45.76
	Name of Employer Diversicare Management Se- rvices	Occupation VP of Marketing	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 640.64	
Γ	SUBTOTAL of Receipts This Page (optional)	·····	105.44

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			FOR LINE NUMBER: PAGE 158 / 240 (check only one) X X 11a 11b 11c							
				13	14		15	16		17
Any information copied from such Reports and or for commercial purposes, other than using the	l Statements may he name and add	not be sold or used by any perso dress of any political committee to	on for the solicit c	e purp contrib	ose of s utions fi	olicit	ing con such co	ntribution mmittee	IS	
Advocat Inc. Political Action Commit	ttee									
Full Name (Last, First, Middle Initial) Terena M. Raidt			D	ate of	Receipt					
Mailing Address 7233 Althorp Way #S	S10			м м 0 8		0 7	/ Y	200		
City	State	Zip Code	Tr	ansad	tion ID	: AA	2DCE	933B6	_	7BD9
Nashville	TN	37211-7156	A	moun	t of Eacl	n Re	ceipt th	is Period	ł	
FEC ID number of contributing federal political committee.	C							45.7	'6	
Name of Employer Diversicare Management Se-	Occupation									
rvices Receipt For:	VP of Ma	e Year-to-Date V								
Primary General	riggrogate		1							
Other (specify)	0 0	686.40								
Full Name (Last, First, Middle Initial) Terena M. Raidt			D	ate of	Receipt					
Mailing Address 7233 Althorp Way #S	S10			м м 08	/ D	D 2 1	/ Y	Y Y 200		
City	State	Zip Code	Tr	ansad		_	43CA	68C9E		-2480
Nashville	TN	37211-7156	A	moun	t of Eacl	n Re	ceipt th	is Period	ł	
FEC ID number of contributing federal political committee.	C							45.7	'6	
Name of Employer Diversicare Management Se-	Occupation									
rvices Receipt For:	VP of Ma	e Year-to-Date V								
Primary General	Aggregate		1							
Other (specify) v		732.16								
Full Name (Last, First, Middle Initial) Terena M. Raidt	ł		D	ate of	Receipt					
Mailing Address 7233 Althorp Way #S	S10			м м 09		04	/ Y	200		
City	State	Zip Code						EACE5	464	65B8
Nashville	TN	37211-7156		moun	t of Eacl	n Re	ceipt th	is Perioo	ł	_
FEC ID number of contributing federal political committee.	C				1 1			45.7	6	
Name of Employer Diversicare Management Se- rvices	Occupation VP of Ma									
Receipt For:	I	Year-to-Date V								
Primary General Other (specify) ▼	0 0	777.92]							
SUBTOTAL of Receipts This Page (optional)					• •			137.2	8	
TOTAL This Period (last page this line number	er only)									

SCHEDULE A (FEC Form ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 159 / 240 (check only one) 11c X 11a 11b I3 14 15 16 17
Any information copied from such Report or for commercial purposes, other than us NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Con	sing the name and addre	ot be sold or used by any pers ss of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Terena M. Raidt Mailing Address 7233 Althorp Wa	ay #S10		Date of Receipt
City	State	Zip Code	Transaction ID: ABFFA90A58CCC4364B0
Nashville	TN	37211-7156	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		45.76
Name of Employer Diversicare Management Se- rvices	Occupation VP of Mark	eting	_
Receipt For:	Aggregate Y	ear-to-Date 🔻	
Other (specify) ▼		823.68]
Full Name (Last, First, Middle Initial) Terena M. Raidt	•		Date of Receipt
Mailing Address 7233 Althorp Wa	ay #S10		M M / D D / Y Y Y Y Y 10 02 2009
City	State	Zip Code	Transaction ID: AE51EB7C81D79495890
Nashville	TN	37211-7156	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		45.76
Name of Employer Diversicare Management Se-	Occupation VP of Mark	etina	
rvices Receipt For:		ear-to-Date V	—
Primary General Other (specify) ▼		869.44]
Full Name (Last, First, Middle Initial) Terena M. Raidt Mailing Address 7233 Althorp Wa	ay #S10		Date of Receipt
City	State	Zip Code	10162009 Transaction ID: AE173B786B4B343B190
Nashville	TN	37211-7156	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		45.76
Name of Employer Diversicare Management Se- rvices	Occupation VP of Mark	eting	
Receipt For:	Aggregate Y	ear-to-Date 🔻	_
Other (specify) ▼		915.20]
SUBTOTAL of Receipts This Page (opti	ional)		137.28
TOTAL This Period (last page this line r	number only)		

SCHEDULE A (FEC Form	n 3X) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 160 / 240 (check only one) X X 11a 11b 11c 13 14
Any information copied from such Report or for commercial purposes, other than NAME OF COMMITTEE (In Full) Advocat Inc. Political Action C	orts and Statements may not be sold or used by any p using the name and address of any political committee	person for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) A. Terena M. Raidt		Date of Receipt
Mailing Address 7233 Althorp V	Vay #S10	10 ^{//} ⁰ ⁰ ⁰ ¹
City	State Zip Code	Transaction ID: A71E8E71EBDCB465CB
Nashville	TN 37211-7156	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	45.76
Name of Employer Diversicare Management Se-	Occupation VP of Marketing	
<u>rvices</u> Receipt For:	Aggregate Year-to-Date ▼	—
Primary General Other (specify) ▼	960.96	·
Full Name (Last, First, Middle Initial) Terena M. Raidt		Date of Receipt
Mailing Address 7233 Althorp V	Vay #S10	M M / D D / Y Y Y Y 11 1 13 2009
City	State Zip Code	Transaction ID: AE140AF4E90094458A4
Nashville	TN 37211-7156	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	45.76
Name of Employer Diversicare Management Se-	Occupation VP of Marketing	
rvices Receipt For:	Aggregate Year-to-Date V	
Primary General Other (specify) ▼	1006.72	
Full Name (Last, First, Middle Initial) Terena M. Raidt	 	Date of Receipt
Mailing Address 7233 Althorp V	Vay #S10	1 1 2 7 2 0 0 9
City	State Zip Code	Transaction ID: A639FF230D1B3452B9E
Nashville	TN 37211-7156	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		45.76
Name of Employer Diversicare Management Se- rvices	Occupation VP of Marketing	
Receipt For:	Aggregate Year-to-Date ▼	
Other (specify)	1052.48	
SUBTOTAL of Receipts This Page (o	ptional)	137.28
TOTAL This Period (last page this line	e number only)	

I	SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 161 / 240 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	d Statements may not be sold or used by any pe the name and address of any political committee ittee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
Z A.	Full Name (Last, First, Middle Initial) Terena M. Raidt Mailing Address 7233 Althorp Way #	#S10	Date of Receipt
			12 11 2009
	City Nashville	State Zip Code TN 37211-7156	Transaction ID: ABCA0F5E18E204EADA3
	FEC ID number of contributing federal political committee.	TN 37211-7156	Amount of Each Receipt this Period 45.76
	Name of Employer Diversicare Management Se- rvices	Occupation VP of Marketing	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1098.24	
- В.	Full Name (Last, First, Middle Initial) Terena M. Raidt Mailing Address 7233 Althorp Way #	±S10	Date of Receipt
			12 24 2009
	City	State Zip Code	Transaction ID: A01DAAAA8F3FD44E787
	Nashville FEC ID number of contributing federal political committee.	TN 37211-7156	Amount of Each Receipt this Period 45.76
	Name of Employer Diversicare Management Se- rvices Receipt For:	Occupation VP of Marketing Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1144.00	
– C.	Full Name (Last, First, Middle Initial) Robert Rice		Date of Receipt
	Mailing Address 7147 Riverfront Driv	/e	07 10 Y Y Y Y 099
	City	State Zip Code	Transaction ID: A44A09547D28E402580C
	Nashville	TN 37221-6585	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	45.06
	Name of Employer Diversicare Management Se- rvices	Occupation VP of Risk Management	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	540.72	
Γ	SUBTOTAL of Receipts This Page (optiona	l)	136.58
	TOTAL This Period (last page this line num	ber only)	

S	CHEDULE A (FEC Form 3X)				-l. l. (-)	FC)r line	E NU	IMBEI	R: [PAC	GE -	162/	240	
	ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the				(check only one)								
I				etailed Summary	>	< 11a		11b	Π·	11c		12			
				Stalled Galilling	i ugo		13		14	П·	15		16	\square	17
	Any information copied from such Reports and S	tatements ma	av not b	be sold or used b	v anv perso	n for	the pur	pose	e of so	liciting	a cor	ntribu	utions	;	
0	or for commercial purposes, other than using the	name and ad	dress	of any political c	ommittee to	solic	it contril	outic	ons fro	m suc	ch co	omm	ittee.		
	NAME OF COMMITTEE (In Full)														
`	Advocat Inc. Political Action Committe														
	Advocat Inc. Folitical Action Committee	e													
. Z	Full Name (Last, First, Middle Initial) Robert Rice						Date o	f Ro	coint						
	Mailing Address 7147 Riverfront Drive								D	D /	Y		0 0		
	City	State	-	Zip Code		_	Transa						-		<u>8</u> 0
	Nashville	TN		37221-6585		_								5745	00
				57221-0303	_		Amour		Each	Recei	pt tr	IIS P	enoa		-
	FEC ID number of contributing federal political committee.	C										2	45.06	3	
	rederal political committee.									1 1					_
	Name of Employer	Occupatio	on												
	Diversicare Management Se- rvices	VP of Ri	isk Ma	anagement											
	Receipt For:	Aggregate	e Year	-to-Date 🔻											
	Primary General	39.594				11									
	Other (specify)			5	85.78										
				0 0 0 0	0 0 0	۰L.									
_	Full Name (Last, First, Middle Initial)														
	Robert Rice						Date o	f Re	ceipt						
	Mailing Address 7147 Riverfront Drive						MM	/	D	D /	Y		Y		
						_	08		P	7			00		
	City	State	2	Zip Code			Transa	ctio	n ID:	AA4	98F	244	5443	3409	3E
	Nashville	TN		37221-6585		_	Amour	nt of	Each	Recei	pt th	is P	eriod		
	FEC ID number of contributing	C											45.06	3	
	federal political committee.	С									_		+5.00	, 	
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	Name of Employer Diversicare Management Se-	Occupatio		anagement											
	rvices	1 · · · · · · · · · · · · · · · · · · ·		-		_									
	Receipt For: Primary General	Aggregate	e Year	-to-Date 🔻											
				6	30.84										
	Other (specify)		0	0 0 0 0	0 0 0										
_	Full Name (Last, First, Middle Initial)					+									
	Robert Rice						Date o	f Re	ceipt						
	Mailing Address 7147 Riverfront Drive						ММ		D	D /	Y	Y	Y	Y	
							08			1			00		
	City	State	Z	Zip Code			Transa	ctio	n ID:	A59E	BFB	151	6E2	14F5	54
	Nashville	TN	;	37221-6585			Amour								
	FEC ID number of contributing														
	federal political committee.	С										4	45.06	5	
									_					_	
	Name of Employer Diversicare Management Se-	Occupatio													
	rvices	VP of Ris	isk Ma	anagement											
	Receipt For:	Aggregate	e Year	-to-Date 🔻											
	Primary General			C.	75.00	1									
	Other (specify)	0.0	0	6	75.90										
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L	SUBTOTAL of Receipts This Page (optional)				•	-		-		-	-			-	4
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	TOTAL This Period (last page this line number	only)			🕨	•	-						-		-

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	K) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 163 / 240 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	nd Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Robert Rice		Date of Receipt
Mailing Address 7147 Riverfront Dri	ve	09 04 YYYY 09 04
City	State Zip Code	Transaction ID: A7C28FDF3CF964833A
Nashville	TN 37221-6585	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	45.06
Name of Employer Diversicare Management Se-	Occupation	7
rvices	VP of Risk Management	_
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	720.96	
Full Name (Last, First, Middle Initial) Robert Rice		Date of Receipt
Mailing Address 7147 Riverfront Dri	ve	09 18 YYYY 09
City	State Zip Code	Transaction ID: A207D5843A6C54FF7B
Nashville	TN 37221-6585	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	45.06
Name of Employer Diversicare Management Se-	Occupation	7
rvices	VP of Risk Management	_
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 766.02	
Full Name (Last, First, Middle Initial) Robert Rice		Date of Receipt
Mailing Address 7147 Riverfront Dri	ve	M M / D D / Y Y Y Y 10 02 2009
City	State Zip Code	Transaction ID: A16DBAECF540E428D
Nashville	TN 37221-6585	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	45.06
Name of Employer Diversicare Management Se-	Occupation VP of Risk Management	
<u>rvices</u> Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	811.08	
SUBTOTAL of Receipts This Page (optiona	al)	135.18
	nber only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only X 11a 13	NUMBER: y one) 11b 14	PAG 11c 15	àE 164 / ☐ 12 16	/ 240
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commit	he name and add	v not be sold or used by any pers dress of any political committee t	on for the purp o solicit contrib	bose of solicit outions from s	ing cor such co	ntribution ommittee	is
Full Name (Last, First, Middle Initial) Robert Rice Mailing Address 7147 Riverfront Drive	6		M M		/ Y		
City	State	Zip Code	10	1 6 ction ID: AE	1255	200	
Nashville	TN	37221-6585		t of Each Re			
FEC ID number of contributing federal political committee.	С					45.0	_
Name of Employer Diversicare Management Se- rvices	Occupation VP of Ris	n sk Management					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date V 856.14					
Full Name (Last, First, Middle Initial) Robert Rice Mailing Address 7147 Riverfront Drive			Date of	Receipt	/ Y	YYY	Y
	6		10	30		200	
City	State	Zip Code	Transa	ction ID: AD)F57E	EA536	CF48829F
Nashville	TN	37221-6585	Amoun	t of Each Re	ceipt th	is Perioc	ł
FEC ID number of contributing federal political committee.	C					45.0	6
Name of Employer Diversicare Management Se- rvices	- 1 · · · · · · · · · · · · · · · · · ·	sk Management					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 901.20					
Full Name (Last, First, Middle Initial) Robert Rice			Date of	Receipt			
Mailing Address 7147 Riverfront Drive	е		м м 11	/ D D 13	/ Y	200	
City	State	Zip Code		ction ID: A0	9C7C		
Nashville	TN	37221-6585	Amoun	t of Each Re	ceipt th	is Perioc	ł
FEC ID number of contributing federal political committee.	C					45.0	6
Name of Employer Diversicare Management Se- rvices	Occupation VP of Ris	n sk Management					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 946.26					
SUBTOTAL of Receipts This Page (optional)						135.1	8
TOTAL This Period (last page this line number	er only)						

	SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER:PAGE $165 / 240$ (check only one)X11a11b121314151617on for the purpose of soliciting contributions
	or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commi	he name and address of any political committee to	o solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) Robert Rice Mailing Address 7147 Riverfront Driv	e	Date of Receipt
	City	State Zip Code	Transaction ID: ABB9BB881B6CB441CA1E
	Nashville	TN 37221-6585	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	45.06
	Name of Employer Diversicare Management Se- rvices	Occupation VP of Risk Management	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Other (specify) ▼	991.32	
в.	Full Name (Last, First, Middle Initial) Robert Rice		Date of Receipt
	Mailing Address 7147 Riverfront Driv	e	12 11 2009
	City	State Zip Code	Transaction ID: AEA33E8C6DE4A46D9801
	Nashville	TN 37221-6585	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		45.06
	Name of Employer Diversicare Management Se- rvices	Occupation VP of Risk Management	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1036.38]
С.	Full Name (Last, First, Middle Initial) Robert Rice		Date of Receipt
	Mailing Address 7147 Riverfront Driv	e	1 2 2 4 Y Y Y Y 1 2 2 4 2 0 0 9
	City	State Zip Code	Transaction ID: AC148DF31CFE84C00A9E
	Nashville	TN 37221-6585	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	45.06
	Name of Employer Diversicare Management Se- rvices	Occupation VP of Risk Management	
	Receipt For:	Aggregate Year-to-Date ▼	
	Other (specify) ▼	1081.44	
	SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	135.18
	TOTAL This Period (last page this line numb	er only)	

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	3X) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 166 / 240 (check only one) 11a X 11a 13 14 15 16 17
Any information copied from such Reports or for commercial purposes, other than us NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Com	and Statements may not be sold or used by any personant of the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Louis G. Riddle Mailing Address 1203 Signature (Court	Date of Receipt
		07 10 2009
City Franklin	State Zip Code TN 37064-9663	Transaction ID: AE47CE422442B4C4BA
Franklin FEC ID number of contributing federal political committee.	TN 37064-9663	Amount of Each Receipt this Period 192.30
Name of Employer Diversicare Management Se- rvices	Occupation CFO,EVP, Secretary	-
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2499.90	
Full Name (Last, First, Middle Initial) Louis G. Riddle Mailing Address 1203 Signature (Court	Date of Receipt
		07 24 2009
City Franklin	State Zip Code TN 37064-9663	Transaction ID: A1DC2D0D96442486696
FEC ID number of contributing federal political committee.	TN 37064-9663	Amount of Each Receipt this Period 192.30
Name of Employer Diversicare Management Se- rvices	Occupation CFO,EVP, Secretary	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2692.20	
Full Name (Last, First, Middle Initial) Louis G. Riddle		Date of Receipt
Mailing Address 1203 Signature (Court	0 8 0 7 Y Y Y Y 0 8 0 7 2 0 0 9
City	State Zip Code	Transaction ID: ABF3E4FC54E9C4D93A
Franklin	TN 37064-9663	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.30
Name of Employer Diversicare Management Se- rvices Provint For:	Occupation CFO,EVP, Secretary	
Receipt For: Primary General Other (specify) $rightarrow$	Aggregate Year-to-Date ▼ 2884.50	
SUBTOTAL of Receipts This Page (option	onal)	▶ 576.90
TOTAL This Period (last page this line n	umber only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Use separate so for each categord Detailed Summa Any information copied from such Reports and Statements may not be sold or use or for commercial purposes, other than using the name and address of any political NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committee Full Name (Last, First, Middle Initial) Louis G. Riddle Mailing Address 1203 Signature Court City State Zip Code Franklin TN 37064-9663	ry of the ary Page X 11a 11b 11c 12 X 13 14 15 16 17 Id by any person for the purpose of soliciting contributions al committee to solicit contributions from such committee. Date of Receipt
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City State Zip Code Franklin TN 37064-9663	
Franklin TN 37064-9663	08 21 2009
	Transaction ID: AF2C13ECC5480476F9
	Amount of Each Receipt this Period
EE('II) number of contributing	
FEC ID number of contributing federal political committee.	192.30
Name of Employer Occupation	
Diversicare Management Se- rvices CFO,EVP, Secretary	
Receipt For: Aggregate Year-to-Date	
Primary General	3076.80
Other (specify) ▼	
Full Name (Last, First, Middle Initial)	
Louis G. Riddle	Date of Receipt
Mailing Address 1203 Signature Court	09 04 YYYY 009 04 2009
City State Zip Code	Transaction ID: A507372B78C2B49F7B
Franklin TN 37064-9663	Amount of Each Receipt this Period
FEC ID number of contributing	
federal political committee.	192.30
Name of Employer Occupation Diversicare Management Se-	
Diversicare Management Se- rvices CFO, EVP, Secretary	
Receipt For: Aggregate Year-to-Date	
Primary General	3269.10
Other (specify)	
Full Name (Last, First, Middle Initial)	
Louis G. Riddle	Date of Receipt
Mailing Address 1203 Signature Court	09 18 2009
City State Zip Code	Transaction ID: A12B776D75A6A48A9E
Franklin TN 37064-9663	Amount of Each Receipt this Period
FEC ID number of contributing	192.30
federal political committee.	
Name of Employer Occupation Diversicare Management Se-	
rvices GFO,EVP, Secretary	
Receipt For: Aggregate Year-to-Date ▼	
Primary General	3461.40
Other (specify)	
I	
SUBTOTAL of Receipts This Page (optional)	576.90

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	TEMIZED RECEIPTS		for each category of the	(check only one)				
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	Any information copied from such Reports and s	Statements may	/ y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions				
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	Mailing Address 1203 Signature Court			10 ^{D D} / Y Y Y Y 1002 2009				
	City	State	Zip Code	Transaction ID: A005FA97BDA274521A2				
	Franklin	TN	37064-9663	Amount of Each Receipt this Period				
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	rvices Receipt For:		P, Secretary	_				
	Primary General	Aggregate		1				
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	Mailing Address 1203 Signature Court			M M / D D / Y Y Y Y 10 16 2009				
	City	State	Zip Code	Transaction ID: A34A0AD150F554C02A				
	Franklin	TN	37064-9663	Amount of Each Receipt this Period				
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	Name of Employer Diversicare Management Se-	Occupation	n P, Secretary					
	rvices Receipt For:	· · · · ·	Year-to-Date ▼					
	Primary General Other (specify) ▼		3846.00]				
-	Full Name (Last, First, Middle Initial) Louis G. Riddle			Date of Receipt				
·•	Mailing Address 1203 Signature Court			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$				
	City	State	Zip Code	Transaction ID: A07899103694C4C739E				
	Franklin	TN	37064-9663	Amount of Each Receipt this Period				
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Α.	Full Name (Last, First, Middle Initial) Louis G. Riddle			Date of Receipt
	Mailing Address 1203 Signature Court			M M / D D / Y Y Y Y 11 1 13 2009
	City	State	Zip Code	Transaction ID: A1F3BAE6CB59741A3B
	Franklin	TN	37064-9663	Amount of Each Receipt this Period
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в.	Full Name (Last, First, Middle Initial) Louis G. Riddle			Date of Receipt
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	City	State	Zip Code	Transaction ID: A5A6D6108714C4E4A8
	Franklin	TN	37064-9663	Amount of Each Receipt this Period
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-).	Full Name (Last, First, Middle Initial) Louis G. Riddle			Date of Receipt
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				12 11 2009
	City	State	Zip Code	Transaction ID: A643CD990AB1E49E4A
	<u>Franklin</u>	TN	37064-9663	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
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Advocat Inc. Political Action Committee Full Name (Last, First, Middle Initial) Louis Q, Riddle Mailing Address 1203 Signature Court City State Zip Code Franklin TN 37084-9683 FEC ID number of contributing federal political committee Occupation Name of Employer Processin Aggregate Year-to Date	or for commercial purposes, c	ther than using the name and	address of any political committee to	solicit contributions fro	om such committee.					
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	federal political committee.	С		30.21			
	Name of Employer	Occupatio	n				
	Diversicare Leasing Corpo-		dministrator-exemp				
	ration Receipt For:	1 '	e Year-to-Date V	-			
	Primary General	, iggi ogut		1			
	Other (specify)		718.55				
				90.63			
	SUBTOTAL of Receipts This Page (optional)		·····				
	TOTAL This Period (last page this line number	only)					

SCHEDULE A (FEC Form 3)	()	FOR LINE NUMBER: PAGE 174 / 240				
•		(check only one)				
ITEMIZED RECEIPTS	for each category of the	X 11a 11b 11c 12				
	Detailed Summary Page					
Any information copied from such Reports ar	nd Statements may not be sold or used by any perso					
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 Comm	nittee					
Full Name (Last, First, Middle Initial)						
A. Larry Roberson		Date of Receipt				
Mailing Address 805 Merritt Drive		12 10 YYYY 12 10 2009				
City	State Zip Code	Transaction ID: AAFC530CBD7224953B				
Lockhart	TX 78644-3335	Amount of Each Receipt this Period				
	17 70044 3333	Amount of Lach Receipt this Feriod				
FEC ID number of contributing federal political committee.	C	30.21				
Name of Employer	Occupation	-				
Diversicare Leasing Corpo-	Admin Administrator-exemp					
ration Receipt For:	Aggregate Year-to-Date V	-1				
Primary General	Aggregate rear-to-Date V					
Other (specify)	748.76					
Full Name (Last, First, Middle Initial)	•	Data of Descript				
Address 205 Marritt Drive		Date of Receipt				
Mailing Address 805 Merritt Drive		12 24 2009				
City	State Zip Code	Transaction ID: A63773087AC7A4BB4A4				
Lockhart	TX 78644-3335	Amount of Each Receipt this Period				
	170 10000					
FEC ID number of contributing federal political committee.		30.21				
Name of Employer Diversicare Leasing Corpo-	Occupation					
Diversicare Leasing Corpo- ration	Admin Administrator-exemp					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General						
Other (specify)	778.97					
Full Name (Last, First, Middle Initial)	l					
Jessica M. Robison		Date of Receipt				
Mailing Address P O Box 991		08 21 2009				
City	State Zip Code	Transaction ID: A83C00FBBEC414DC98				
Cabot	AR 72023-0991	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.		13.19				
Name of Employer Diversicare Management Se-	Occupation	7				
Diversicare Management Se- rvices	Arkansas MDS Specialist					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General						
Other (specify) 🔻	205.34					
SUBTOTAL of Receipts This Page (optiona	al)	73.61				
TOTAL This Period (last page this line num	ber only)					

				FOR LINE NUMBER: PAGE 175 / 240
	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 175 / 240 (check only one)
	ITEMIZED RECEIPTS		for each category of the	X 11a 11b 11c 12
			Detailed Summary Page	
	Any information copied from such Reports and or for commercial purposes, other than using the second	Statements ma	⊥ y not be sold or used by any pers dress of any political committee t	on for the purpose of soliciting contributions
ľ	NAME OF COMMITTEE (In Full)			
	Advocat Inc. Political Action Commit	tee		
A.	Full Name (Last, First, Middle Initial) Jessica M. Robison			Date of Receipt
	Mailing Address P O Box 991			M M / D D Y
	City	State	Zip Code	Transaction ID: A5F4400BB836D41B4B51
	<u>Cabot</u>	AR	72023-0991	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		13.19
	Name of Employer Diversicare Management Se-	Occupatio	n	
	Diversicare Management Se- rvices	Arkansa	s MDS Specialist	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General		218.53	
_	Other (specify) ▼	0 0		
B.	Full Name (Last, First, Middle Initial) Jessica M. Robison			Date of Receipt
Б.	Mailing Address P O Box 991			M M / D D / Y Y Y Y 09 18 2009
	City	State	Zip Code	Transaction ID: A1D822B4772DB4FAFAA
	Cabot	AR	72023-0991	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		13.19
	Name of Employer Diversicare Management Se-	Occupatio	n	
	Diversicare Management Se- rvices	Arkansa	s MDS Specialist	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		231.72	
- C.	Full Name (Last, First, Middle Initial) Jessica M. Robison			Date of Receipt
0.	Mailing Address P O Box 991			M M / D D / Y Y Y Y 10 02 2009
	City	State	Zip Code	Transaction ID: A87199B50DE1B45E3BC
	<u>Cabot</u>	AR	72023-0991	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		13.19
	Name of Employer Diversicare Management Se-	Occupatio Arkansas	n s MDS Specialist	
	rvices Receipt For:		e Year-to-Date V	
	Primary General	, iggi ogu		
	Other (specify)	0 0	244.91	
[
	SUBTOTAL of Receipts This Page (optional)			39.57
	TOTAL This Period (last page this line number	er only)		
L				

	SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 176 / 240 (check only one)
	or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any per the name and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	Advocat Inc. Political Action Comm Full Name (Last, First, Middle Initial)		
Α.	Jessica M. Robison		Date of Receipt
	Mailing Address P O Box 991		10 ^M 16 ^V 2009
	City	State Zip Code	Transaction ID: AF626BCBBFADF444B97
	Cabot	AR 72023-0991	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	13.19
	Name of Employer Diversicare Management Se- rvices	Occupation Arkansas MDS Specialist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary GeneralOther (specify) ▼	258.10	
- B.	Full Name (Last, First, Middle Initial) Jessica M. Robison		Date of Receipt
	Mailing Address P O Box 991		10 ^{//} 2009
	City	State Zip Code	Transaction ID: AC8B40F7CF1ED4F98988
	Cabot	AR 72023-0991	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	13.19
	Name of Employer Diversicare Management Se- rvices	Occupation Arkansas MDS Specialist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	271.29	
- C.	Full Name (Last, First, Middle Initial) Jessica M. Robison		Date of Receipt
	Mailing Address P O Box 991		M M / D D / Y Y Y Y 111 13 2009
	City	State Zip Code	Transaction ID: A5CC04906E0094714925
	Cabot	AR 72023-0991	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	13.19
	Name of Employer Diversicare Management Se- rvices	Occupation Arkansas MDS Specialist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	284.48	
ſ	SUBTOTAL of Receipts This Page (optional)	39.57
	TOTAL This Period (last page this line numb	·	

	SCHEDULE A (FEC Form 3X) [Use separate schedule(s)	FOR LINE NUMBER: PAGE 177/240
	ITEMIZED RECEIPTS	-	for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using t	d Statements may the name and add	not be sold or used by any pers ress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
	Advocat Inc. Political Action Commi	ttee		
۷ A.	Full Name (Last, First, Middle Initial) Jessica M. Robison			Date of Receipt
	Mailing Address P O Box 991			M M / D D / Y Y Y Y 11 27 2009
	City	State	Zip Code	Transaction ID: A2A0FA76B95AF48A6A84
	Cabot	AR	72023-0991	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		13.19
	Name of Employer Diversicare Management Se-	Occupation Arkansas	MDS Specialist	
	rvices Receipt For:		Year-to-Date V	—
	Primary General Other (specify) ▼		297.67]
- В.	Full Name (Last, First, Middle Initial) Jessica M. Robison			Date of Receipt
	Mailing Address P O Box 991			M M / D D Y
	City	State	Zip Code	Transaction ID: A913FBAF71BA444BC97
	Cabot	AR	72023-0991	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		13.19
	Name of Employer Diversicare Management Se- rvices	Occupation Arkansas	MDS Specialist	
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	310.86]
- C.	Full Name (Last, First, Middle Initial) Jessica M. Robison			Date of Receipt
	Mailing Address P O Box 991			M M / D D / Y Y Y Y 12 24 2009
	City	State	Zip Code	Transaction ID: A3EB6232F376749819F8
	Cabot	AR	72023-0991	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		13.19
	Name of Employer Diversicare Management Se-	Occupation		
	rvices		MDS Specialist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 324.05]
ſ	SUBTOTAL of Receipts This Page (optional))		39.57
F	TOTAL This Period (last page this line numb	·	•	
L		,,		

SCHEDULE A (FEC Form 3)	() Use separa	ate schedule(s)	FOR LINE I (check only		: PA	GE ·	178/2	40	
ITEMIZED RECEIPTS		ategory of the ummary Page	X 11a	11b	11c	\square	12	—	
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may not be sold o	r used by any perso	on for the purpo	14 se of sol	15 iciting co	ntrib	16 utions		17
NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm						Unin			_
Full Name (Last, First, Middle Initial)									
Mailing Address 134 Robinhood Dr			Date of I	•			0 [°] 09		
City	State Zip Code		Transac						IRF
Kennedy	TX 78119-2		Amount					100	
FEC ID number of contributing federal political committee.	C						28.26	1]
Name of Employer Diversicare Leasing Corpo-	Occupation Admin Administrator	-evemp							
ration Receipt For:	Aggregate Year-to-Date	•							
Primary General Other (specify) ▼		254.34]						
Full Name (Last, First, Middle Initial) Vicki C. Root			Date of I	Receipt					
Mailing Address 134 Robinhood Dr			^M 1 0	/ D 1			v 0 0 9		
City	State Zip Code	•	Transac	ion ID:	AE19C1	57F	FC40)40D	08
Kennedy	TX 78119-2	503	Amount	of Each I	Receipt tl	nis P	eriod		
FEC ID number of contributing federal political committee.	C	0 0				2	28.26]
Name of Employer Diversicare Leasing Corpo- ration	Occupation Admin Administrator	-exemp							
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	▼ 254.34]						
Full Name (Last, First, Middle Initial) Vicki C. Root			Date of I	Bacaint					
Mailing Address 134 Robinhood Dr				•		, Y	v 0 0 9	Y	
City	State Zip Code	•	Transact	ion ID:	4184DE	BD/	A2B5	747C	88
Kennedy	TX 78119-2	503	Amount	of Each F	Receipt tl	nis P	eriod		
FEC ID number of contributing federal political committee.	C					2	28.26		
Name of Employer Diversicare Leasing Corpo- ration	Occupation Admin Administrator	-exemp							
Receipt For:	Aggregate Year-to-Date	▼							
Primary General Other (specify) ▼		282.60]						
SUBTOTAL of Receipts This Page (optiona	J				· ·	8	84.78]
TOTAL This Period (last page this line num	,]

	CHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 179 / 240 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17
	r for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any per e name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
	Advocat Inc. Political Action Commit	ee	
	Full Name (Last, First, Middle Initial) Vicki C. Root		Date of Receipt
	Mailing Address 134 Robinhood Dr		M M / D D / Y Y Y Y 111 12 2009
	City	State Zip Code	Transaction ID: ABA1FA4BA19C04493A
	Kennedy	TX 78119-2503	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.26
	Name of Employer Diversicare Leasing Corpo-	Occupation	
	ration	Admin Administrator-exemp	
	Receipt For: Primary General	Aggregate Year-to-Date	_
	Other (specify) ▼	310.86	
	Full Name (Last, First, Middle Initial) Vicki C. Root		Date of Receipt
	Mailing Address 134 Robinhood Dr		M M / D D / Y Y Y Y 111 25 2009
	City	State Zip Code	Transaction ID: A375583FACF784AF68
	Kennedy	TX 78119-2503	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.26
	Name of Employer Diversicare Leasing Corpo-	Occupation	
	ration Receipt For:	Admin Administrator-exemp	—
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 339.12	
_	Full Name (Last, First, Middle Initial) Vicki C. Root		Date of Receipt
	Mailing Address 134 Robinhood Dr		12 10 Y Y Y Y 2009
	City	State Zip Code	Transaction ID: A052F808E61B64704B
	Kennedy	TX 78119-2503	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.26
	Name of Employer Diversicare Leasing Corpo- ration	Occupation Admin Administrator-exemp	
	Receipt For:	Aggregate Year-to-Date V	
	Other (specify) ▼	367.38	
Γ		1	84.78
	SUBTOTAL of Receipts This Page (optional)		04.70

ľ	SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	d Statements may	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 180 / 240 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17 ion for the purpose of soliciting contributions 110 110 110
	or for commercial purposes, other than using t NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commi	the name and add	lress of any political committee t	o solicit contributions from such committee.
۷ ۹.	Full Name (Last, First, Middle Initial) Vicki C. Root Mailing Address 134 Robinhood Dr			Date of Receipt
	City	State	Zip Code	1 2 2 4 2 0 0 9 Transaction ID: A8F220A4E58B44D68BE
	Kennedy	TX	78119-2503	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		28.26
	Name of Employer Diversicare Leasing Corpo- ration Receipt For: Primary General		dministrator-exemp Year-to-Date V	
	Other (specify) ▼ Full Name (Last, First, Middle Initial)	0 0	395.64	
	Marlies B. Sarrett			Date of Receipt
	Mailing Address 3450 East Lake Driv	'e		M M / D D / Y Y Y Y 07 10 2009
	City	State	Zip Code	Transaction ID: A511861F552054011A8/
	Land O Lakes	FL	34639-4641	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		33.04
	Name of Employer Diversicare Management Se- rvices	Occupation Florida C	qi	
	Receipt For: Primary General Other (specify) v	Aggregate	Year-to-Date 418.32	
. —	Full Name (Last, First, Middle Initial) Marlies B. Sarrett			Date of Receipt
	Mailing Address 3450 East Lake Driv	'e		07 24 Y Y Y 099
	City	State	Zip Code	Transaction ID: AEEB538ED931A41D9A
	Land O Lakes	FL	34639-4641	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		33.04
	Name of Employer Diversicare Management Se- rvices	Occupation Florida C	qi	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 451.36	
Γ	SUBTOTAL of Receipts This Page (optional))		94.34

		dule(s) (check only one)
ITEMIZED RECEIPTS	for each category of Detailed Summary F	
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by name and address of any political co	<i>i</i> any person for the purpose of soliciting contributions mmittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committee	e	
Full Name (Last, First, Middle Initial) Marlies B. Sarrett		Date of Receipt
Mailing Address 3450 East Lake Drive		08 07 2009
City	State Zip Code	Transaction ID: AD543690950DC46B8
Land O Lakes	FL 34639-4641	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33.04
Name of Employer Diversicare Management Se- rvices	Occupation Florida Cqi	
Receipt For:	Aggregate Year-to-Date ▼	
Other (specify) ▼	48	4.40
Full Name (Last, First, Middle Initial) Marlies B. Sarrett		Date of Receipt
Mailing Address 3450 East Lake Drive		0 8 / D D / Y Y Y Y 0 8 2 1 2 0 0 9
City	State Zip Code	Transaction ID: A654C934AB9464B0C
Land O Lakes	FL 34639-4641	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33.04
Name of Employer Diversicare Management Se- rvices	Occupation Florida Cgi	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	51	7.44
Full Name (Last, First, Middle Initial) Marlies B. Sarrett		Date of Receipt
Mailing Address 3450 East Lake Drive		0 9 0 4 2 0 0 9
City	State Zip Code	Transaction ID: AEC8AFC37F90B4F2
Land O Lakes	FL 34639-4641	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33.04
Name of Employer Diversicare Management Se- rvices	Occupation Florida Cqi	
Receipt For:	Aggregate Year-to-Date 🔻	
Primary General Other (specify) ▼	55	0.48
SUBTOTAL of Receipts This Page (optional)	l	99.12
		· · · · · · · · · · · · · · · · · · ·

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 182/240
		Use separate schedule(s) for each category of the	(check only one)	
	EMIZED RECEIPTS	IIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12
			Detailed Cummary Page	
A	ny information copied from such Reports and s	Statements ma	y not be sold or used by any pers	on for the purpose of soliciting contributions
		e name and ad	dress of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	Advocat Inc. Political Action Committ	ee		
	Full Name (Last, First, Middle Initial) Marlies B. Sarrett			Date of Receipt
•	Mailing Address 3450 East Lake Drive			0 9 1 8 2 0 0 9
	City	State	Zip Code	Transaction ID: A4B728FCF10B846ABA
	Land O Lakes	FL	34639-4641	Amount of Each Receipt this Period
	FEC ID number of contributing			22.04
	federal political committee.	C		33.04
	Name of Employer Diversicare Management Se-	Occupatio		
	rvices Receipt For:	Florida C	•	_
	Primary General	Aggregate	e Year-to-Date 🔻	-
	Other (specify)	0 0	583.52	
	Full Name (Last, First, Middle Initial)			
	Marlies B. Sarrett			Date of Receipt
	Mailing Address 3450 East Lake Drive			10 ^{/ D D} / Y Y Y 2009
	City	State	Zip Code	Transaction ID: A085DBE6E62B449628
	Land O Lakes	FL	34639-4641	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		33.04
	Name of Employer Diversicare Management Se-	Occupatio		_
	rvices	Florida C	•	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_
	Other (specify) ▼		616.56	
	Full Name (Last, First, Middle Initial)			
	Marlies B. Sarrett			Date of Receipt
	Mailing Address 3450 East Lake Drive			10 ^{//} 16 [/] 2009
	City	State	Zip Code	Transaction ID: AB12E8877F773413EB
	Land O Lakes	FL	34639-4641	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		33.04
	Name of Employer Diversicare Management Se-	Occupatio Florida (
	rvices Receipt For:	·	e Year-to-Date V	
	Primary General	, iggi ogali		
	Other (specify)	0 0	649.60	

SCHEDULE A (FEC Form	3X) Use separate schedule(s)	FOR LINE NUMBER: PAGE 183 / 240 (check only one)
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	$\begin{array}{c c} X & 11a \\ \hline 13 \\ \hline 13 \\ \hline 14 \\ \hline 15 \\ \hline 16 \\ \hline 17 \\ \hline 16 \\ \hline 17 \\ \hline 17 \\ \hline 17 \\ \hline 17 \\ \hline 10 \\ \hline 17 \\ \hline 10 \\ \hline 10 \\ \hline 17 \\ \hline 10 \\ \hline 11 \\ \hline 10 \\ \hline 11 \\ \hline 12 \\ \hline 11 \\ \hline 11$
Any information copied from such Reports or for commercial purposes, other than us	s and Statements may not be sold or used by any perso sing the name and address of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Cor	nmittee	
Full Name (Last, First, Middle Initial) A. Marlies B. Sarrett		Date of Receipt
Mailing Address 3450 East Lake	Drive	M M / D D / Y Y Y Y 10 30 2009
City	State Zip Code	Transaction ID: A33415D8527234A398D
Land O Lakes	FL 34639-4641	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33.04
Name of Employer Diversicare Management Se- rvices	Occupation Florida Cgi	1
Receipt For:	Aggregate Year-to-Date ▼	_
Other (specify) ▼	682.64]
Full Name (Last, First, Middle Initial) Marlies B. Sarrett		Date of Receipt
Mailing Address 3450 East Lake	Drive	M M / D D / Y Y Y Y 1 1 1 1 3 2009
City	State Zip Code	Transaction ID: A6555C0063F6344A384
Land O Lakes	FL 34639-4641	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33.04
Name of Employer Diversicare Management Se- rvices	Occupation Florida Cqi	7
Receipt For:	Aggregate Year-to-Date ▼	_
Other (specify)	715.68	
Full Name (Last, First, Middle Initial) Marlies B. Sarrett		Date of Receipt
Mailing Address 3450 East Lake	Drive	M M / D D / Y Y Y Y 11 27 2009
City	State Zip Code	Transaction ID: A31775B66E28B4D9EA
Land O Lakes	FL 34639-4641	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33.04
Name of Employer Diversicare Management Se- rvices	Occupation Florida Cqi	
Receipt For:	Aggregate Year-to-Date V	
Other (specify)	748.72	
SUBTOTAL of Receipts This Page (opti	onal)	99.12
	iumber only)	

ę	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 184 / 240 (check only one)
	TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma	y not be sold or used by any pers dress of any political committee t	13 14 15 16 17 on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committee			
	Full Name (Last, First, Middle Initial)			
Α.	Marlies B. Sarrett			Date of Receipt
	Mailing Address 3450 East Lake Drive			1 2 / D D / Y Y Y Y 1 2 0 0 9
	City	State	Zip Code	Transaction ID: A206898F3CB2741BB99
	Land O Lakes	FL	34639-4641	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		33.04
	Name of Employer Diversicare Management Se- rvices	Occupatio Florida C		
	Receipt For:		e Year-to-Date 🔻	
	Primary General Other (specify) ▼		781.76]
- 3.	Full Name (Last, First, Middle Initial) Marlies B. Sarrett			Date of Receipt
	Mailing Address 3450 East Lake Drive			1 2 2 4 2 0 0 9
	City	State	Zip Code	Transaction ID: A2CA767E922BB488EB2
	Land O Lakes	FL	34639-4641	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		33.04
	Name of Employer Diversicare Management Se- rvices	Occupatio Florida (
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	814.80]
-).	Full Name (Last, First, Middle Initial) Kenneth K. Smith			Date of Receipt
	Mailing Address 4909 Walnut Hills Driv	/e		M M / D D / Y Y Y Y 07 10 2009
	City	State	Zip Code	Transaction ID: AC3B0CD5D368345FAB
		KY	40299-1044	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		42.64
	Name of Employer Diversicare Management Se- rvices	Occupation Regiona	ⁿ I Hr Director	
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Primary General Other (specify) ▼	0 0	539.92]
ſ	SUBTOTAL of Receipts This Page (optional)	I		108.72
ŀ	TOTAL This Period (last page this line number			
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	SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 185 / 240 (check only one) X X 11a 11b 11c 12 13 14 15 16 17 erson for the purpose of soliciting contributions 110 110 110 110
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	the name and address of any political committe	e to solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Kenneth K. Smith		Date of Receipt
	Mailing Address 4909 Walnut Hills E	Drive	07 24 YYYY 2009
	City	State Zip Code	Transaction ID: A5C653F36474D4023BE3
	Louisville	KY 40299-1044	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.64
	Name of Employer Diversicare Management Se-	Occupation	
	rvices Receipt For:	Regional Hr Director Aggregate Year-to-Date	
	Primary General Other (specify) ▼	582.56	
- B.	Full Name (Last, First, Middle Initial) Kenneth K. Smith		Date of Receipt
	Mailing Address 4909 Walnut Hills E	0 8 0 7 Y Y Y Y 0 9 0 7 0 7 0 7 0 0 9	
	City	State Zip Code	Transaction ID: A4596203C04F144DD8CE
	Louisville	KY 40299-1044	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.64
	Name of Employer Diversicare Management Se- rvices	Occupation Regional Hr Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 625.20	
- C.	Full Name (Last, First, Middle Initial) Kenneth K. Smith		Date of Receipt
	Mailing Address 4909 Walnut Hills E	Prive	M M / D D / Y Y Y Y 08 21 2009
	City	State Zip Code	Transaction ID: A1A7C8C75705D44E99A/
	Louisville	KY 40299-1044	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.64
	Name of Employer Diversicare Management Se- rvices	Occupation Regional Hr Director	
	Receipt For:	Aggregate Year-to-Date V	
	Primary General Other (specify) ▼	667.84	
ſ	SUBTOTAL of Receipts This Page (optiona		127.92
ŀ		,	

	CHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 186 / 240 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commit	Statements may not be sold or used by any pers ne name and address of any political committee to tee	on for the purpose of soliciting contributions
А. И	Full Name (Last, First, Middle Initial) Kenneth K. Smith Mailing Address 4909 Walnut Hills Dr	ive	Date of Receipt
		-	09 04 2009
	City Louisville	State Zip Code KY 40299-1044	Transaction ID: A471F7473796A4504BEE
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 42.64
	Name of Employer Diversicare Management Se- rvices	Occupation Regional Hr Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 710.48]
— В.	Full Name (Last, First, Middle Initial) Kenneth K. Smith Mailing Address 4909 Walnut Hills Dr	ive	Date of Receipt
	O the		
	City Louisville	State Zip Code KY 40299-1044	Transaction ID: A0B8F514AD5CC45DFB4 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.64
	Name of Employer Diversicare Management Se- rvices Receipt For:	Occupation Regional Hr Director	
	Primary General Other (specify) ▼	Aggregate Year-to-Date 753.12]
– C.	Full Name (Last, First, Middle Initial) Kenneth K. Smith		Date of Receipt
	Mailing Address 4909 Walnut Hills Dr	ive	M M / D D / Y Y Y Y 10 02 2009
	City	State Zip Code	Transaction ID: A8B9A8D9A75C04BC6B
	Louisville	KY 40299-1044	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.64
	Name of Employer Diversicare Management Se- rvices	Occupation Regional Hr Director	
	Receipt For:	Aggregate Year-to-Date ▼	
	Other (specify)	795.76]
Γ	SUBTOTAL of Receipts This Page (optional)	_ I 	127.92
F	TOTAL This Period (last page this line number	er only)	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	X) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 187 / 240 (check only one)		
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Com	and Statements may not be sold or used by any perso g the name and address of any political committee to	n for the purpose of soliciting contributions		
Full Name (Last, First, Middle Initial) Kenneth K. Smith		Date of Receipt		
City	State Zip Code	10 16 2009 Transaction ID: A3D70E72D01734D669		
Louisville	KY 40299-1044	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	42.64		
Name of Employer Diversicare Management Se-	Occupation	7		
rvices Receipt For:	Regional Hr Director Aggregate Year-to-Date ▼	-1		
Primary General Other (specify) ▼	838.40			
Full Name (Last, First, Middle Initial) Kenneth K. Smith		Date of Receipt		
Mailing Address 4909 Walnut Hills	M M / D D / Y Y Y Y 10 30 2009			
City	State Zip Code	Transaction ID: A644EA2535B38441CB		
Louisville	KY 40299-1044	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	42.64		
Name of Employer Diversicare Management Se-	Occupation Regional Hr Director	7		
rvices Receipt For:	Aggregate Year-to-Date V	-		
Primary General Other (specify) ▼	881.04			
Full Name (Last, First, Middle Initial) Kenneth K. Smith		Date of Receipt		
Mailing Address 4909 Walnut Hills	Drive	M M / D D / Y Y Y Y 11 1 13 2009		
City	State Zip Code	Transaction ID: A58757DE9DBCA40E3		
Louisville	KY 40299-1044	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	42.64		
Name of Employer Diversicare Management Se- rvices	Occupation Regional Hr Director			
Receipt For:	Aggregate Year-to-Date V	1		
Primary General Other (specify) ▼	923.68			
SUBTOTAL of Receipts This Page (optior	nal)	127.92		
TOTAL This Period (last page this line nut	nber only)			

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 188 / 240 (check only one) 11a X 11a 11b 13 14 15 16 17
A 0	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commit	Statements may not be sold or used by any pers te name and address of any political committee t tee	on for the purpose of soliciting contributions
A.	Full Name (Last, First, Middle Initial) Kenneth K. Smith Mailing Address 4909 Walnut Hills Dri	ve	Date of Receipt
			11 27 2009
	City Louisville	State Zip Code KY 40299-1044	Transaction ID: A13C453C4FA574CD18A Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.64
	Name of Employer Diversicare Management Se- rvices	Occupation Regional Hr Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 966.32	
— В.	Full Name (Last, First, Middle Initial) Kenneth K. Smith Mailing Address 4909 Walnut Hills Dri	ve	Date of Receipt
	City	State Zip Code	
	Louisville	KY 40299-1044	Transaction ID: AFDE200A7DC0343218E Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		42.64
	Name of Employer Diversicare Management Se- rvices	Occupation Regional Hr Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1008.96	
 C.	Full Name (Last, First, Middle Initial) Kenneth K. Smith		Date of Receipt
	Mailing Address 4909 Walnut Hills Dri	ve	M M / D D / Y Y Y Y 12 24 2009
	City	State Zip Code	Transaction ID: A60B12B2E9EE14AFEBA
	Louisville	KY 40299-1044	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	42.64
	Name of Employer Diversicare Management Se- rvices	Occupation Regional Hr Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1051.60	
	SUBTOTAL of Receipts This Page (optional)	1	127.92
-	TOTAL This Period (last page this line numbe	r only)	

l	SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 189 / 240 (check only one) 11c X 11a 13 14 15 16 17 on for the purpose of soliciting contributions
	or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commi	the name and address of any political committee to	o solicit contributions from such committee.
<u>А</u> .	Full Name (Last, First, Middle Initial) Gary K. Snyder Mailing Address PO Box 30	Date of Receipt	
			07 02 2009
	City Martin	State Zip Code TN 38237-0030	Transaction ID: ACA0BE76D11A646C0AE9
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 30.75
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 394.26]
- B.	Full Name (Last, First, Middle Initial) Gary K. Snyder Mailing Address PO Box 30		Date of Receipt
		07 16 2009	
	City Martin	State Zip Code TN 38237-0030	Transaction ID: AD4C5D6A2E323476DBBE
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 30.75
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 455.76]
- C.	Full Name (Last, First, Middle Initial) Gary K. Snyder		Date of Receipt
	Mailing Address PO Box 30		07 16 Y Y Y Y 009
	City	State Zip Code	Transaction ID: A0ECE37E7F53947A9852
	Martin	TN 38237-0030	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		30.75
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 455.76]
ſ	SUBTOTAL of Receipts This Page (optional)	92.25
Ī	TOTAL This Period (last page this line numb	per only)	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 190 / 240 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commit	ne name and ad	y not be sold or used by any perso dress of any political committee to	solicit contributions from such committee.
۷ A.	Full Name (Last, First, Middle Initial) Gary K. Snyder Mailing Address PO Box 30	Date of Receipt		
	<u></u>	Chata	Zin Oada	08 13 2009
	City Martin	State TN	Zip Code 38237-0030	Transaction ID: AC1630CF43FB241B68AB Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.75
	Name of Employer Diversicare Leasing Corp	I	dministrator-exemp	
	Receipt For: Primary General Other (specify) $rightarrow$		e Year-to-Date 486.51]
- В.	Full Name (Last, First, Middle Initial) Gary K. Snyder Mailing Address PO Box 30	-		Date of Receipt
				08 27 2009
	City	State	Zip Code	Transaction ID: ACF1B30F21EF14CAF9D3
	Martin FEC ID number of contributing federal political committee.	TN	38237-0030	Amount of Each Receipt this Period 30.75
	Name of Employer Diversicare Leasing Corp		dministrator-exemp	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 517.26]
- C.	Full Name (Last, First, Middle Initial) Gary K. Snyder Mailing Address PO Box 30	_		Date of Receipt
	City	State	Zip Code	Transaction ID: A31DDDCB19EE84F2DB4
	Martin	TN	38237-0030	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.75
	Name of Employer Diversicare Leasing Corp	- 1 · · · · · · · · · · · · · · · · · ·	dministrator-exemp	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date 🔻 548.01]
	SUBTOTAL of Receipts This Page (optional)			92.25
	TOTAL This Period (last page this line number	er only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 191 / 240 (check only one)
	Any information copied from such Reports and or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person name and address of any political committee	13 14 15 16 17 con for the purpose of soliciting contributions o solicit contributions from such committee.
	Advocat Inc. Political Action Commit	tee	
∠ A.	Full Name (Last, First, Middle Initial) Gary K. Snyder		Date of Receipt
	Mailing Address PO Box 30	09 24 YYYY 09 24 2009	
	City	State Zip Code	Transaction ID: A73A6B5C199F44F289EC
	<u>Martin</u>	TN 38237-0030	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30.75
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For:	Aggregate Year-to-Date V	
	Primary General Other (specify) ▼	578.76	
- B.	Full Name (Last, First, Middle Initial) Gary K. Snyder		Date of Receipt
	Mailing Address PO Box 30	10 ^{//} 08 ^{//} 2009	
	City	State Zip Code	Transaction ID: A556CC9D8AAAA48EFA4
	<u>Martin</u>	TN 38237-0030	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30.75
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 609.51	
- C.	Full Name (Last, First, Middle Initial) Gary K. Snyder		Date of Receipt
	Mailing Address PO Box 30		10 ¹ 22 ¹ 2009
	City	State Zip Code	Transaction ID: AAC2C5E2AB4C04D5083
	Martin	TN 38237-0030	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30.75
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 640.26	
ſ	SURTOTAL of Receipte This Dags (actions)		92.25
ŀ	SUBTOTAL of Receipts This Page (optional)		
	TOTAL This Period (last page this line number	ər Oniy)	

	SCHEDULE A (FEC Form 3X	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 192 / 240 (check only one)
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	Any information copied from such Reports and or for commercial purposes, other than using t	I Statements may not be sold or used by any person he name and address of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commi	ttee	
∠ A.	Full Name (Last, First, Middle Initial) Gary K. Snyder		Date of Receipt
	Mailing Address PO Box 30		M M / D D / Y Y Y Y 111 05 2009
	City	State Zip Code	Transaction ID: A1E1EB6B452D04A3FBB
	Martin	TN 38237-0030	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30.75
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	-
	Receipt For:	Aggregate Year-to-Date V	7
	Primary General Other (specify) ▼	671.01]
- В.	Full Name (Last, First, Middle Initial) Gary K. Snyder		Date of Receipt
	Mailing Address PO Box 30	M M / D D / Y Y Y Y 111 19 2009	
	City	State Zip Code	Transaction ID: A1638B62E5C8644DFA1
	Martin	TN 38237-0030	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30.75
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For: Primary General	Aggregate Year-to-Date ▼ 701.76	1
_	Other (specify) 🔻		
C.	Full Name (Last, First, Middle Initial) Gary K. Snyder		Date of Receipt
	Mailing Address PO Box 30		1 2 0 3 Y Y Y Y 1 2 0 3 D 0 3
	City	State Zip Code	Transaction ID: A1A96C4E34B034E5BA2
	Martin	TN 38237-0030	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30.75
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For:	Aggregate Year-to-Date 🔻	_
	Primary General Other (specify)	732.51]
ſ	SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	92.25
F	TOTAL This Period (last page this line numb	er only)	

I	SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page d Statements may not be sold or used by any per	FOR LINE NUMBER: PAGE 193 / 240 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	the name and address of any political committee	to solicit contributions from such committee.
۷ A .	Full Name (Last, First, Middle Initial) Gary K. Snyder Mailing Address PO Box 30		Date of Receipt
	City <u>Martin</u>	State Zip Code TN 38237-0030	Transaction ID: A3EB1CDD4F33A43AD80 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30.75
	Name of Employer Diversicare Leasing Corp Receipt For: Primary General Other (specify) ▼	Occupation Admin Administrator-exemp Aggregate Year-to-Date ▼ 763.26	
- B.	Full Name (Last, First, Middle Initial) Kathie Sullivan Mailing Address 2469 AR 115		Date of Receipt
	City Smithville	State Zip Code AR 72466	Transaction ID: ADFF7EE64DFA249AE98 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30.56
	Name of Employer Diversicare Management Se- rvices Receipt For: Primary General Other (specify) ▼	Occupation Arkansas Cqi Director Aggregate Year-to-Date ▼ 386.98	
- C.	Full Name (Last, First, Middle Initial) Kathie Sullivan Mailing Address 2469 AR 115		Date of Receipt
	City Smithville	State Zip Code AR 72466	07 24 2009 Transaction ID: A79B876F1FD7A4768A77
	FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 30.56
	Name of Employer Diversicare Management Se- rvices Receipt For: Primary General	Occupation Arkansas Cqi Director Aggregate Year-to-Date ▼	
F	Other (specify) 🔻	417.54	
	SUBTOTAL of Receipts This Page (optional	l)	91.87

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	-	R LINE	-		२ :	PAG	GE ·	194 / :	240	
ľ	TEMIZED RECEIPTS		for each category of the Detailed Summary Page	`	neck onl	<u></u>	e) 11b	Г	11c		12		
	ny information copied from such Reports and	Statomonte may n	, ,	on for	13		14	lioiti	15		16 utions		17
	r for commercial purposes, other than using th	ne name and addre	ess of any political committee to	on tor o solici	it contrib	outio	ns fro	m s	uch c	omm	ittee.	,	
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commit	tee											
Z	Full Name (Last, First, Middle Initial)												
•	Kathie Sullivan				Date of	f Red	•						
	Mailing Address 2469 AR 115				0 8 ^M	/	D 0	D 7	/ Y		0 [°] 0 9		
	City	State	Zip Code		Transa	ctio	ו ID:	AA	FC84	2F1	2E3	740)148
	Smithville	AR	72466		Amour	t of	Each	Rec	eipt th	is P	eriod		_
	FEC ID number of contributing federal political committee.	С								(30.56	3	
	Name of Employer Diversicare Management Se-	Occupation											
	rvices Receipt For:		Cqi Director ear-to-Date 🔻										
	Primary General	Aggregale Y											
	Other (specify)		448.10										
	Full Name (Last, First, Middle Initial) Kathie Sullivan				Date of	f Rec	eint						
	Mailing Address 2469 AR 115				0 8		D	D 1	/ Y		۲ 0 0 9		
	City	State	Zip Code		Transa	ctio			6972			_	E4EA
	Smithville	AR	72466		Amour	t of	Each	Rec	eipt th	is P	eriod		
	FEC ID number of contributing federal political committee.	C								ć	30.56	5	
	Name of Employer Diversicare Management Se-	Occupation	Cqi Director										
	rvices Receipt For:	- 1 · · · · · · · · · · · · · · · · · ·	ear-to-Date V										
	Primary General Other (specify) ▼		478.66										
_	Full Name (Last, First, Middle Initial)				Data								
	Kathie Sullivan Mailing Address 2469 AR 115				Date of	_	D	D	/ Y	Y	Y	Y	
	City	State	Zip Code		09 Transa	ctio	P	4 AF			009 9FF2	_	17C
	Smithville	AR	72466		Amour								170
	FEC ID number of contributing federal political committee.	C								(30.56	3	
	Name of Employer Diversicare Management Se- rvices	Occupation Arkansas (Cqi Director										
	Receipt For:	Aggregate Y	ear-to-Date 🔻										
	Other (specify) ▼		509.22										
Γ						-		-		-	91.68	<u> </u>	

I	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 195 / 240 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	ne name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Advocat Inc. Political Action Commit	tee		
Α.	Full Name (Last, First, Middle Initial) Kathie Sullivan			Date of Receipt
	Mailing Address 2469 AR 115			09 18 Y Y Y Y 2009
	City	State	Zip Code	Transaction ID: A5D94CDD6CE7840C98E
	Smithville	AR	72466	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.56
	Name of Employer Diversicare Management Se- rvices	Occupation Arkansas	n s Cqi Director	
	Receipt For:	Aggregate	Year-to-Date V	
	 Primary General Other (specify) ▼ 		539.78]
– В.	Full Name (Last, First, Middle Initial) Kathie Sullivan			Date of Receipt
	Mailing Address 2469 AR 115			M M / D D Y
	City	State	Zip Code	Transaction ID: A925DCBA298CD49CA90
	Smithville	AR	72466	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.56
	Name of Employer Diversicare Management Se- rvices	Occupation Arkansas	n s Cqi Director	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		570.34]
– C.	Full Name (Last, First, Middle Initial) Kathie Sullivan			Date of Receipt
	Mailing Address 2469 AR 115			M M / D D Y
	City	State	Zip Code	Transaction ID: AD1FEABEB57BE477FB2
	Smithville	AR	72466	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.56
	Name of Employer Diversicare Management Se- rvices	Occupation Arkansas	n s Cqi Director	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ♥	0.0	600.90]
Γ	SUBTOTAL of Receipts This Page (optional)			91.68
F	TOTAL This Period (last page this line number		•	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	f	Use separate schedule(s) for each category of the Detailed Summary Page	-	LINE ck only 11a	y on		R:	PA0	GE	196 /	/ 240	
	Any information copied from such Reports and or for commercial purposes, other than using the second s	Statements may no	t be sold or used by any pers	son for th	13 ne purp		14 of so	olicit	15 ing co	ntrib	16 ution		17
	Advocat Inc. Political Action Commit									Unin		-	
لا ۹.	, Full Name (Last, First, Middle Initial) Kathie Sullivan				Date of	Rec	ceipt						
	Mailing Address 2469 AR 115				м м 10	/	D 3	D 0	/ Y		0 0		
	City	State	Zip Code	Т	ransa	ctio			73EE				625
	Smithville	AR	72466	A	Moun	t of I	Each	Red	ceipt th	nis P	erioc	ł	
	FEC ID number of contributing federal political committee.	C									30.5	6	
	Name of Employer Diversicare Management Se- rvices	Occupation Arkansas Co	qi Director										
	Receipt For:	Aggregate Ye	•										
	Primary General Other (specify) ▼		631.46										
-	Full Name (Last, First, Middle Initial) Kathie Sullivan	_			Date of	Rec	ceipt						
	Mailing Address 2469 AR 115				м м 11	/		D 3	/ Y		0 0		
	City	State	Zip Code	Т	ransa	ctio	n ID:	AC	B42E	EB6	9CE	CD2	1A03
	Smithville	AR	72466	A	Amoun	t of I	Each	Red	ceipt th	nis P	erioc	ł	_
	FEC ID number of contributing federal political committee.	C								;	30.5	6	
	Name of Employer Diversicare Management Se-	Occupation Arkansas Co	ai Director										
	rvices Receipt For:	Aggregate Ye	•										
	Primary General Other (specify) ▼		662.02										
_	Full Name (Last, First, Middle Initial) Kathie Sullivan				Date of	Rec	ceipt						
	Mailing Address 2469 AR 115				м м 11	/	D 2	D 7	/ Y		0 0		
	City	State	Zip Code	Т	ransa	ctio	_		CAC			_	7989
	Smithville	AR	72466	A	Amoun	t of I	Each	Red	ceipt th	nis P	erioc	ł	
	FEC ID number of contributing federal political committee.	C					1			;	30.5	6	
	Name of Employer Diversicare Management Se-	Occupation Arkansas Co	ai Director										
	rvices Receipt For:	Aggregate Yea	•										
	Primary General Other (specify) ▼		692.58										
ſ	SUBTOTAL of Receipts This Page (optional)									ę	91.6	8	
┢	TOTAL This Period (last page this line number												
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	SCHEDULE A (FEC Form 3X)		Use separate schedule(s)		OR LINE			R: [PAC	GE	197 /	240	
	TEMIZED RECEIPTS		for each category of the Detailed Summary Page	Ì	X 11a		, 11b		11c		12	_	
Γ	Any information copied from such Reports and or for commercial purposes, other than using th	Statements ma	y not be sold or used by any perso	on for	13 r the pur	pose	14 e of sc	olicitir	15 ng coi	ntrib	16 utions	;	17
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commit			5 50110							intee.		
∠ A.	Full Name (Last, First, Middle Initial) Kathie Sullivan				Date o	f Re	ceipt						
	Mailing Address 2469 AR 115				^M 1 2	/		D /	Y		0 [°] 0		
	City	State	Zip Code		Transa	ctio	n ID:	A20	2853	3F8	FFB	9437	7D93
	Smithville	AR	72466		Amour	nt of	Each	Rece	eipt th	nis P	eriod		
	FEC ID number of contributing federal political committee.	C									30.56	3	
	Name of Employer Diversicare Management Se-	Occupatio	on s Cqi Director										
	rvices Receipt For:		e Year-to-Date V										
	Primary General Other (specify) ▼		723.14										
– B.	Full Name (Last, First, Middle Initial) Kathie Sullivan				Date o	f Re	ceipt						
	Mailing Address 2469 AR 115				^M 1 2	/		^D 24	Y		0 [°] 0		
	City	State	Zip Code		Transa	ctio	n ID:	ABE	3A26	659	9811	7490	C1A4
	Smithville	AR	72466		Amour	nt of	Each	Rece	eipt th	is P	eriod		_
	FEC ID number of contributing federal political committee.	C									30.50	3	
	Name of Employer Diversicare Management Se- rvices	Occupatio Arkansa	on s Cqi Director										
	Receipt For:	- 1 · · · · · · · · · · · · · · · · · ·	e Year-to-Date 🔻										
	Primary General Other (specify) ▼	0 0	753.70										
– C.	Full Name (Last, First, Middle Initial) E Kim Tirronen				Date o	f Re	ceipt						
	Mailing Address 16701 Richloam Lan	e			м м 07	/		D 0	Y		0 [°] 0		
	City	State	Zip Code		Transa							E4B	FF9[
	Spring Hill	FL	34610-1657		Amour	nt of	Each	Rece	eipt th	is P	eriod		_
	FEC ID number of contributing federal political committee.	C									38.43	3	
	Name of Employer Advocat	Occupatio Rai Dire	ctor										
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 484.79										
Γ	SUBTOTAL of Receipts This Page (optional)									ç	9.5	5	7

	SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	X) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 198 / 240 (check only one)
	Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	nd Statements may not be sold or used by any pers g the name and address of any political committee to nittee	on for the purpose of soliciting contributions o solicit contributions from such committee.
. Z	Full Name (Last, First, Middle Initial) E Kim Tirronen		Date of Receipt
	Mailing Address 16701 Richloam La	ane	07 / D D / Y Y Y Y 24 2009
	City	State Zip Code	Transaction ID: A018C39AB59734129B2
	Spring Hill FEC ID number of contributing federal political committee.	FL 34610-1657	Amount of Each Receipt this Period 38.43
	Name of Employer Advocat	Occupation Rai Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 523.22	
. –	Full Name (Last, First, Middle Initial) E Kim Tirronen		Date of Receipt
	Mailing Address 16701 Richloam La	ane	0 8 0 7 2 0 0 9
	City	State Zip Code	Transaction ID: A701BF62D6EE64FF5A
	Spring Hill	FL 34610-1657	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		38.43
	Name of Employer Advocat	Occupation Rai Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 561.65]
	Full Name (Last, First, Middle Initial) E Kim Tirronen		Date of Receipt
	Mailing Address 16701 Richloam La	ane	0 8 2 1 2 0 0 9
	City	State Zip Code	Transaction ID: A4089887FE17A41B2A
	Spring Hill	FL 34610-1657	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		38.43
	Name of Employer Advocat	Occupation Rai Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.08]
Γ	SUBTOTAL of Receipts This Page (option	-)	115.29

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate sched for each category of Detailed Summary F	the Dage X 11a 11b 11c 12
	or for commercial purposes, other than using th	Statements may not be sold or used by	13 14 15 16 17 any person for the purpose of soliciting contributions nmittee to solicit contributions from such committee.
	Advocat Inc. Political Action Commit	ee	
A.	Full Name (Last, First, Middle Initial) E Kim Tirronen		Date of Receipt
	Mailing Address 16701 Richloam Lan	9	0 9 0 4 2 0 0 9
	City	State Zip Code	Transaction ID: A12FB4B2DC0CF4AFB89
	Spring Hill	FL 34610-1657	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	38.43
	Name of Employer Advocat	Occupation Rai Director	
	Receipt For:	Aggregate Year-to-Date ▼	
	Other (specify) ▼	63	8.51
- В.	Full Name (Last, First, Middle Initial) E Kim Tirronen		Date of Receipt
	Mailing Address 16701 Richloam Lan	9	M M M / D D / Y Y Y Y Y <th< td=""></th<>
	City	State Zip Code	Transaction ID: AD2B61F87DDC941A2A8
	Spring Hill	FL 34610-1657	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	38.43
	Name of Employer Advocat	Occupation Rai Director	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary General Other (specify) ▼	67	6.94
- C.	Full Name (Last, First, Middle Initial) E Kim Tirronen		Date of Receipt
	Mailing Address 16701 Richloam Lan	2	M M M / D D / Y Y Y Y Y 10 / 02 / 2009
		State Zip Code	Transaction ID: AA845E127693F4D1DA0
	Spring Hill	FL 34610-1657	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	38.43
	Name of Employer Advocat	Occupation Rai Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	5.37
ſ	SUBTOTAL of Receipts This Page (optional)		115.29
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	SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	Use separate schedul for each category of th Detailed Summary Pa	
	Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	the name and address of any political com	ny person for the purpose of soliciting contributions mittee to solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) <u>E Kim Tirronen</u> Mailing Address 16701 Richloam La	ne	Date of Receipt
	City	State Zip Code	Transaction ID: A908FD7B992C1420D870
	Spring Hill	FL 34610-1657	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	38.43
	Name of Employer Advocat	Occupation Rai Director	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary General Other (specify) ▼	753.	80
в.	Full Name (Last, First, Middle Initial) E Kim Tirronen		Date of Receipt
	Mailing Address 16701 Richloam La		M M / D D / Y Y Y Y 10 30 2009 2009 100
	City	State Zip Code	Transaction ID: A792AA9FEBC5F4CA7A03
	Spring Hill	FL 34610-1657	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	38.43
	Name of Employer Advocat	Occupation Rai Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 792.	23
- C.	Full Name (Last, First, Middle Initial) E Kim Tirronen		Date of Receipt
	Mailing Address 16701 Richloam La	ne	M M / D D / Y Y Y Y 111 13 2009
	City	State Zip Code	Transaction ID: A8D4AD78839904BFCAB4
	Spring Hill	FL 34610-1657	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	38.43
	Name of Employer Advocat	Occupation Rai Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 830.	66
ſ	SUBTOTAL of Receipts This Page (optiona	η.	115.29

IE OF COMMITTEE (In Full) ocat Inc. Political Action Comm Name (Last, First, Middle Initial) n Tirronen ng Address 16701 Richloam La ing Hill ID number of contributing ral political committee. e of Employer ocat pipt For: Primary General Other (specify) ▼ Name (Last, First, Middle Initial) n Tirronen ng Address 16701 Richloam La ing Hill ID number of contributing ral political committee.	ane State FL Occupation Rai Direct Aggregate	Zip Code 34610-1657	Date of Receipt Date of Receipt Transaction ID: A4B4B4FAADCD842F3AD Amount of Each Receipt this Period Date of Receipt Date of R
n Tirronen ng Address 16701 Richloam La ing Hill ID number of contributing ral political committee. e of Employer ccat e of Employer ccat Primary General Other (specify) ♥ Name (Last, First, Middle Initial) n Tirronen ng Address 16701 Richloam La ing Hill ID number of contributing	State FL C Occupation Rai Direct Aggregate Aggregate State FL	34610-1657 tor Year-to-Date ▼ 869.09 Zip Code	M M / D / Y
ing Hill ID number of contributing ral political committee. e of Employer ccat sipt For: Primary □ General Other (specify) ▼ Name (Last, First, Middle Initial) n Tirronen ng Address 16701 Richloam La ing Hill ID number of contributing	State FL C Occupation Rai Direct Aggregate Aggregate State FL	34610-1657 tor Year-to-Date ▼ 869.09 Zip Code	11 27 2009 Transaction ID: A4B4B4FAADCD842F3AD Amount of Each Receipt this Period 38.43 Date of Receipt M / Date of Receipt Transaction ID: A2A95BEF42BB440798C7
ID number of contributing ral political committee. e of Employer ccat eipt For: Primary General Other (specify) ▼ Name (Last, First, Middle Initial) n Tirronen ng Address 16701 Richloam La	FL C Occupation Rai Direct Aggregate Inne State FL	34610-1657 tor Year-to-Date ▼ 869.09 Zip Code	Amount of Each Receipt this Period 38.43 Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 1 / 2 0 0 9 Transaction ID: A2A95BEF42BB440798C7
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Primary General Other (specify) ▼ Name (Last, First, Middle Initial) n Tirronen ng Address 16701 Richloam La ing Hill ID number of contributing	ane State FL	869.09 Zip Code	M M / D / Y
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eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 907.52	
Name (Last, First, Middle Initial) n Tirronen ng Address 16701 Richloam La	ine		Date of Receipt
	State	Zip Code	1 2 2 4 2 0 0 9 Transaction ID: AAB71AA6EA5B648DE8D
ing Hill	FL	34610-1657	Amount of Each Receipt this Period
ID number of contributing ral political committee.	C		38.43
e of Employer ocat	Rai Direct	tor	
eipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 945.95	
			115.29
r e	ng Hill ID number of contributing al political committee. e of Employer cat ipt For: Primary General	State ng Hill FL ID number of contributing al political committee. C e of Employer cat Occupation Rai Direct ipt For: Aggregate Primary General Other (specify) ▼ Image: Complex state	State Zip Code ng Hill FL 34610-1657 ID number of contributing al political committee. C C e of Employer cat Occupation Rai Director Occupation ipt For: Primary General Aggregate Year-to-Date ▼

I	SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS Any information copied from such Reports and	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 202 / 240 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions
	or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	the name and address of any political committee to	solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Mark Tschudy Mailing Address 28219 Madelin Mar		Date of Receipt
	Mailing Address 28219 Madelin Mar	IOF LARIE	07 09 Y Y Y Y 2009
	City	State Zip Code	Transaction ID: A91DC5F9C797240A3AF6
	Spring	TX 77386-3087	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	43.76
	Name of Employer	Occupation	
	Diversicare Leasing Corpo- ration	Admin Administrator-exemp	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary General Other (specify) ▼	600.81	
– B.	Full Name (Last, First, Middle Initial) Mark Tschudy		Date of Receipt
	Mailing Address 28219 Madelin Mar	nor Lane	07 23 Y Y Y Y 099
	City	State Zip Code	Transaction ID: A4548D3B8C21E4179868
	Spring	TX 77386-3087	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	43.76
	Name of Employer Diversicare Leasing Corpo-	Occupation Admin Administrator-exemp	
	ration Receipt For:	Aggregate Year-to-Date V	
	Primary General Other (specify) ▼	644.57]
– C.	Full Name (Last, First, Middle Initial) Mark Tschudy		Date of Receipt
	Mailing Address 28219 Madelin Mar	nor Lane	0 8 0 6 2 0 0 9
	City	State Zip Code	Transaction ID: AFA44FC12A257482283I
	Spring	TX 77386-3087	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	43.76
	Name of Employer Diversicare Leasing Corpo- ration	Occupation Admin Administrator-exemp	
	Receipt For:	Aggregate Year-to-Date V	7
	Primary General Other (specify) ▼	688.33]
ſ	SUBTOTAL of Receipts This Page (options	l al)	131.28
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r commercial purposes, other than using IAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm Full Name (Last, First, Middle Initial) Mark Tschudy Mailing Address 28219 Madelin Mar City Spring EC ID number of contributing ederal political committee. Lame of Employer Diversicare Leasing Corpo- ation Receipt For: Primary General	nittee nor Lane State TX Occupation Admin Admin	Zip Code 77386-3087	13 14 15 16 17 on for the purpose of soliciting contributions boolicit contributions from such committee. 10 17 Date of Receipt 0 20 2009 2009 Transaction ID: AAFA22B85D0AC421A97 Amount of Each Receipt this Period 43.76
AME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm Full Name (Last, First, Middle Initial) Mark Tschudy Mailing Address 28219 Madelin Mar City Spring FEC ID number of contributing ederal political committee.	nittee nor Lane State TX C Occupation Admin Ad	Zip Code 77386-3087	Date of Receipt 0 8 2 0 2 0 9 Transaction ID: AAFA22B85D0AC421A97 Amount of Each Receipt this Period
Advocat Inc. Political Action Comm Full Name (Last, First, Middle Initial) Mark Tschudy Mailing Address 28219 Madelin Mar City Spring EC ID number of contributing ederal political committee. Jame of Employer Diversicare Leasing Corpo- ation Receipt For: Primary General	nor Lane State TX C	77386-3087	M M M D D Y
Mark Tschudy Mailing Address 28219 Madelin Mar Dity EC ID number of contributing ederal political committee. Jame of Employer Diversicare Leasing Corpo- ation Receipt For: Primary General	State TX C	77386-3087	M M M D D Y
Mailing Address 28219 Madelin Mar Dity Spring EEC ID number of contributing ederal political committee. Jame of Employer Diversicare Leasing Corpo-ation Receipt For: Primary General	State TX C	77386-3087	M M M D D Y
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ation Receipt For: Primary General	Admin Admin Admin		—
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		Year-to-Date V	—
		732.09]
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Dity	State	Zip Code	Transaction ID: AD2A46F2CA5B949F784
Spring	ТХ	77386-3087	Amount of Each Receipt this Period
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Primary General Other (specify) ▼		775.85]
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	nor Lane		M M / D D / Y Y Y Y 09 17 2009
	State	Zip Code	Transaction ID: AE677BEAB86AC438091
Spring	<u> </u>	77386-3087	Amount of Each Receipt this Period
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Diversicare Leasing Corpo-			
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Other (specify)	U U 0 0	819.61]
BTOTAL of Receipts This Page (optional	al)		131.28
	Other (specify) ▼ Full Name (Last, First, Middle Initial) Mark Tschudy Mailing Address 28219 Madelin Mar Dity Spring EC ID number of contributing ederal political committee. Name of Employer Diversicare Leasing Corpo- Address 28219 Madelin Mar Name of Employer Diversicare Leasing Corpo- Address General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mark Tschudy Mailing Address 28219 Madelin Mar Diversicare Leasing Corpo- City Spring EC ID number of contributing ederal political committee. Name of Employer Diversicare Leasing Corpo- Adion Receipt For: Primary General Other (specify) ▼ Btottal of Receipts This Page (optional	Other (specify) General Other (specify) Mailing Address 28219 Madelin Manor Lane City Spring TX EC ID number of contributing ederal political committee. Vame of Employer Other (specify) Other (specify) Primary General Other (specify) City State Primary General Other (specify) City State State City State State City State State Other (specify) City State State City State State City State State City State State State City State City State Sta	Other (specify) 732.09 Full Name (Last, First, Middle Initial) 732.09 Mailing Address 28219 Madelin Manor Lane Dity State Zip Code Spring TX 77386-3087 FEC ID number of contributing ederal political committee. C 0 Jame of Employer Occupation Admin Administrator-exemp Ageregate Year-to-Date ▼ 775.85 Full Name (Last, First, Middle Initial) 775.85 775.85 Other (specify) ▼ 775.85 Full Name (Last, First, Middle Initial) 775.85 775.85 Full Name (Last, First, Middle Initial) 77386-3087 775.85 Full Name of contributing ederal political committee. C 77386-3087 C C 1 77386-3087 EC ID number of contributing ederal political committee. C 1 Aggregate Year-to-Date ▼ 0 0 <

	SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	K) Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 204 / 240 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	nd Statements may not be sold or used by any per the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
∠ A.	Full Name (Last, First, Middle Initial) Mark Tschudy Mailing Address 28219 Madelin Mar	nor Lane	Date of Receipt
			10 15 2009
	City	State Zip Code	Transaction ID: A66AFEB02D743451089
	Spring	TX 77386-3087	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	43.76
	Name of Employer Diversicare Leasing Corpo-	Occupation	
	ration	Admin Administrator-exemp	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	907.13	
– В.	Full Name (Last, First, Middle Initial) Mark Tschudy		Date of Receipt
	Mailing Address 28219 Madelin Mai	nor Lane	10 ^M 15 ^Y 2009
	City	State Zip Code	Transaction ID: ABAEAD3520DEF4F1F80
	Spring	TX 77386-3087	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	43.76
	Name of Employer Diversicare Leasing Corpo-	Occupation	
	ration Receipt For:	Admin Administrator-exemp	
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 907.13	
– C.	Full Name (Last, First, Middle Initial) Mark Tschudy		Date of Receipt
	Mailing Address 28219 Madelin Mai	nor Lane	10 ¹ ¹ ²⁹ , ²⁰⁰⁹
	City	State Zip Code	Transaction ID: A503409DB04C245C58D
	Spring	TX 77386-3087	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	43.76
	Name of Employer Diversicare Leasing Corpo-	Occupation Admin Administrator-exemp	
	ration Receipt For:	Aggregate Year-to-Date V	
	Primary General Other (specify) ▼	950.89	
Γ	SUBTOTAL of Receipts This Page (option)	al)	131.28
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	SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 205 / 240							
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ITEMIZED REC	CEIPTS		Detailed Summary		X 11a	11b	11c	12				
			Detailed Summary	i age	13	14	15	16	17			
Any information copied	from such Reports and S	tatements ma	v not be sold or used b	v anv person	for the pur	oose of sol	icitina cor	ntribution				
or for commercial purp	oses, other than using the	name and ad	dress of any political co	ommittee to s	solicit contril	outions from	n such co	ommittee).			
NAME OF COMMI	TTEE (In Full)											
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Full Name (Last, Fi	rst, Middle Initial)											
Mark Tschudy					Date of	f Receipt						
Mailing Address	28219 Madelin Manor I	Lane			м м 11	/ D		200				
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federal political con	nmittee.					1 1		10.7	ĭ			
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Diversicare Leasing	g Corpo-	Occupatio										
ration			dministrator-exemp)	-							
Receipt For:	Conserval	Aggregate	e Year-to-Date									
Primary	General		Q	94.65								
Other (specif	y) 🔻	0.0		1.00								
Full Name (Last, Fi	rst, Middle Initial)											
Mark Tschudy					Date o	f Receipt						
Mailing Address	28219 Madelin Manor I	Lane			M M			Y Y				
					2		200					
City		State	Zip Code		Transaction ID: A9752156DD6F74E5D9							
<u>Spring</u>		TX	77386-3087		Amour	nt of Each I	Receipt th	is Period	b			
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federal political con		С						43.7	0			
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ration	5 - 1 -		dministrator-exemp)	_							
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Other (specif	y) 🔻			50.41								
Full Name (Last, Fi	rst, Middle Initial)											
Mark Tschudy					Date o	f Receipt						
Mailing Address	28219 Madelin Manor I	Lane			M M			Y Y				
					12	1		200				
City		State	Zip Code		Transa	ction ID:	A2FB54	08ED69	93431FI			
<u>Spring</u>		TX	77386-3087		Amour	nt of Each I	Receipt th	is Period	b			
FEC ID number of	contributing							43.7	76			
federal political con	nmittee.	С						43.7	0			
					_							
Name of Employer Diversicare Leasing	a Corpo-	Occupatio										
ration	u = 1= =	· ·	dministrator-exemp)	_							
Receipt For:		Aggregate	e Year-to-Date 🔻									
Primary	General		109	32.17								
Other (specif	y) 🔻			52.17								
								131.2	8			
SUBTOTAL of Recei	pts This Page (optional)			••••• •				151.2				
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TOTAL This Period (last page this line number	only)		🕨		· · · ·						

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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 206 / 240 (check only one)									
П	EMIZED RECEIPTS		for each category of the	`_	X 11a		11b	☐ 11c		12		
			Detailed Summary Page	-	13	H	14	15		16		17
Α	ny information copied from such Reports a	nd Statements ma	v not be sold or used by any pers	on for	-	nose			ntrib	-		
0	r for commercial purposes, other than using	the name and ad	dress of any political committee to	o solic	cit contri	butic	ns fro	m such o	comm	nittee.		
∇	NAME OF COMMITTEE (In Full)											
	Advocat Inc. Political Action Comm	nittee										
Z												
	Full Name (Last, First, Middle Initial) Mark Tschudy				Date o	f Re	ceipt					
	Mailing Address 28219 Madelin Mai	nor Lane				1 /	D			Y		
	City	State	Zin Codo		12		_	4		00 01D		
	City Spring	TX	Zip Code 77386-3087					A980E7 Receipt t				1
			11300-3001		Amour		Each			enou	-	-
	FEC ID number of contributing federal political committee.	С								43.76	3	
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	Name of Employer Diversicare Leasing Corpo-	Occupatio										
	ration Receipt For:		dministrator-exemp									
	Primary General	Aggregat		- 1								
	Other (specify)		1125.93									
	Full Name (Last, First, Middle Initial)				Data	(D .						
	Molly K. Walker Mailing Address 16 Buttercup Cover				Date o		· ·		Ň	X	X	
	Mailing Address 16 Buttercup Cove	u			07	1 /		D / Y 0 /		0 ^Y 0 9		
	City	State	Zip Code		Transa	ictio	n ID:	A90333	A8A	B874	1490	D
	Cabot	AR	72023		Amour	nt of	Each	Receipt t	his P	eriod		-
	FEC ID number of contributing	C								26.92	, ,	
	federal political committee.									20.52		_
	Name of Employer	Occupatio	n									
	Diversicare Management Se- rvices	Director,	AR									
	Receipt For:	Aggregate	e Year-to-Date 🔻									
	Primary General		349.96									
	Other (specify)	0 0		_								
	Full Name (Last, First, Middle Initial)											-
	Molly K. Walker				Date o	f Re	ceipt					
	Mailing Address 16 Buttercup Cover	d			07	1 /	2	D / Y 4		0 ^Y 0 9		
	City	State	Zip Code			Ictio		A02361				76
	Cabot	AR	72023					Receipt t				
	FEC ID number of contributing									26.92	,	
	federal political committee.	C								20.02		_
	Name of Employer	Occupatio	n									
	Diversicare Management Se- rvices	Director,	AR									
	Receipt For:	Aggregate	e Year-to-Date 🔻									
	Primary General		376.88									
	Other (specify) ▼											
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	SUBTOTAL of Receipts This Page (optiona	al)							્ર	97.60)	

I	SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS Any information copied from such Reports ar	for each of Detailed S	rate schedule(s) category of the Summary Page or used by any person fo	FOR LINE NUMBER: PAGE 207 / 240 (check only one) X X 11a 11b 11c 12 13 14 15 16 17 or the purpose of soliciting contributions 110 110 110 110
	or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	the name and address of any p	political committee to sol	licit contributions from such committee.
∠ A.	Full Name (Last, First, Middle Initial) Molly K. Walker Mailing Address 16 Buttercup Coved	1		
	City	State Zip Cod	0	0 8 0 7 2 0 0 9 Transaction ID: A54B047F60FD14A0DB2
	Cabot	AR 72023		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		26.92
	Name of Employer Diversicare Management Se- rvices	Occupation Director, AR		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	403.80	
- В.	Full Name (Last, First, Middle Initial) Molly K. Walker Mailing Address 16 Buttercup Coved	I		Date of Receipt
		J		08 21 2009
	City	State Zip Cod	e	Transaction ID: A89525DA6C3F845528E9
	Cabot FEC ID number of contributing federal political committee.	AR 72023		Amount of Each Receipt this Period 26.92
	Name of Employer Diversicare Management Se- rvices	Occupation Director, AR		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	430.72	
– C.	Full Name (Last, First, Middle Initial) Molly K. Walker			Date of Receipt
	Mailing Address 16 Buttercup Cover	1		M M / D D Y
	City Cabot	State Zip Cod AR 72023	e	Transaction ID: A22CBD8E3FF4A42B2B5
	FEC ID number of contributing federal political committee.	AR 72023		Amount of Each Receipt this Period 26.92
	Name of Employer Diversicare Management Se- rvices	Occupation Director, AR		
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	457.64	
Γ	SUBTOTAL of Receipts This Page (optiona	Г\	·····	80.76

ľ	SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 208 / 240 (check only one) Image: Check only one) X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions 11 11 12
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	the name and ad	dress of any political committee to	o solicit contributions from such committee.
∠ A.	Full Name (Last, First, Middle Initial) Molly K. Walker Mailing Address 16 Buttercup Coved	d		Date of Receipt
	· · · · · · · · · · · · · · · · · · ·			09 18 2009
	City Cabot	State AR	Zip Code 72023	Transaction ID: A6D9A99DCBC4340D3BD
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer Diversicare Management Se- rvices Receipt For:	Occupatio Director,	AR	_
	Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 484.56	
_ В.	Full Name (Last, First, Middle Initial) Molly K. Walker Mailing Address 16 Buttercup Cover			Date of Receipt
		~		10 02 2009
	City	State	Zip Code	Transaction ID: A3AF776AAF2B34292B50
	Cabot FEC ID number of contributing federal political committee.	AR	72023	Amount of Each Receipt this Period
	Name of Employer Diversicare Management Se- rvices	Occupatio Director,	AR	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 511.48]
- C.	Full Name (Last, First, Middle Initial) Molly K. Walker			Date of Receipt
	Mailing Address 16 Buttercup Cover	b		10 / Y Y Y Y 16 2009
	City	State	Zip Code	Transaction ID: A3EA556BC47A44EE7907
	Cabot FEC ID number of contributing federal political committee.	AR	72023	Amount of Each Receipt this Period 26.92
	Name of Employer Diversicare Management Se- rvices	Occupatio Director,		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 538.40]
Γ	SUBTOTAL of Receipts This Page (optiona	al)		80.76

	SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS Any information copied from such Reports and	- 	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 209 / 240 (check only one) 11c 12 X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions 10 10 17
	or for commercial purposes, other than using t NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commi	he name and ad	dress of any political committee to	solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Molly K. Walker Mailing Address 16 Buttercup Coved			Date of Receipt
	City	State	Zip Code	Transaction ID: A7E3D9C0EE70B48A4BBB
	<u>Cabot</u>	AR	72023	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		26.92
	Name of Employer Diversicare Management Se- rvices	Occupation Director		-
	Receipt For:	Aggregat	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		565.32]
- В.	Full Name (Last, First, Middle Initial) Molly K. Walker			Date of Receipt
	Mailing Address 16 Buttercup Coved			M M / D D / Y Y Y Y 1 1 / 1 3 / 2 0 0 9
	City	State	Zip Code	Transaction ID: A8EA8861FFF5C4193954
	Cabot	AR	72023	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		26.92
	Name of Employer Diversicare Management Se-	Occupatio		
	rvices	Director		_
	Receipt For: Primary General	Aggregat	e Year-to-Date 🔻	
	Other (specify)	0 0	592.24	
- с.	Full Name (Last, First, Middle Initial) Molly K. Walker	l		Date of Receipt
	Mailing Address 16 Buttercup Coved			1 1 / 2 7 / Y Y Y 1 1 1 / 2 7 / 2 0 0 9
	City	State	Zip Code	Transaction ID: AF4A5A04E7EE444DEB13
	Cabot	AR	72023	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		26.92
	Name of Employer Diversicare Management Se- rvices	Occupation Director		
	Receipt For:	Aggregat	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	619.16	
ſ	SUBTOTAL of Receipts This Page (optional))	·····•	80.76
f	TOTAL This Period (last page this line numb	er only)		

	SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	K) Use separate schedule for each category of the Detailed Summary Pag	
	Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	the name and address of any political comm	y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Molly K. Walker		Date of Receipt
	Mailing Address 16 Buttercup Cove	u	12 11 2009
	City	State Zip Code	Transaction ID: A5B1A58B9ECE94F4FA
	Cabot FEC ID number of contributing federal political committee.	AR 72023	Amount of Each Receipt this Period
	Name of Employer Diversicare Management Se- rvices Receipt For:	Occupation Director, AR Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	646.0	8
- 3.	Full Name (Last, First, Middle Initial) Molly K. Walker		Date of Receipt
	Mailing Address 16 Buttercup Cove	d	1 2 2 4 2 0 0 9
	City	State Zip Code	Transaction ID: AB28E8AFD18C14F3484
	Cabot	AR 72023	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	26.92
	Name of Employer Diversicare Management Se- rvices	Occupation Director, AR	
	Receipt For: Primary General Other (specify) \bigtriangledown	Aggregate Year-to-Date ▼ 673.0	0
-	Full Name (Last, First, Middle Initial) Roger J. Walls		Date of Receipt
•	Mailing Address 2209 Bel Aire Drive	e SW	07 10 2009
	City	State Zip Code	Transaction ID: A4BB496A675B64B579I
	Hartselle	AL 35640-3844	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.40
	Name of Employer Diversicare Management Se- rvices	Occupation AI Reboc	
	Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 358.3	30
Γ		1	82.24

SCHEDULE A (FEC Form 3X)	E A (FEC Form 3X) Use separate schedule(s)					FOR LINE NUMBER: PAGE 211/240 (check only one)								
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	` - `-	X 11a		, 11b		11c		12	_	-		
Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma	y not be sold or used by any per	son for	13 r the purp		14 e of so	olicitir	15 ng coi	ntrib	16 utions	3	17		
NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committ			10 3010	on contin			5111 50			intee.				
Full Name (Last, First, Middle Initial) Roger J. Walls				Date of	F Do	agint								
Mailing Address 2209 Bel Aire Drive S	SW				_	D	^D 4	Y		0 [°] 0				
City	State	Zip Code		Transa	ctio	_		6E2				0184		
Hartselle	AL	35640-3844		Amoun	t of	Each	Rece	eipt th	nis P	eriod				
FEC ID number of contributing federal political committee.	C						1			28.40	0			
Name of Employer Diversicare Management Se- rvices	Occupatio Al Reboo													
Receipt For:		e Year-to-Date 🔻												
Primary General Other (specify) ▼	0 0	386.70												
Full Name (Last, First, Middle Initial) Roger J. Walls				Date of	f Re	ceipt								
Mailing Address 2209 Bel Aire Drive S	SW			м м 0 8	/	DC	D /	Y		0 [°] 0				
City	State	Zip Code		Transa							A43	3148		
Hartselle	AL	35640-3844		Amoun	it of	Each	Rece	eipt th	nis P	eriod		_		
FEC ID number of contributing federal political committee.	C									28.40	0			
Name of Employer Diversicare Management Se- rvices	Occupatio													
Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_											
Other (specify)		415.10												
Full Name (Last, First, Middle Initial) Roger J. Walls	l			Date of	f Re	ceipt								
Mailing Address 2209 Bel Aire Drive S	SW			0 8	/		^D /	Y		0 [°] 0				
City	State	Zip Code		Transa							047	'598 [·]		
Hartselle	AL	35640-3844		Amoun	it of	Each	Rece	eipt th			-	_		
FEC ID number of contributing federal political committee.	C									28.40	0			
Name of Employer Diversicare Management Se- rvices	Occupatio													
Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_											
Other (specify) ▼	0 0	443.50												
SUBTOTAL of Receipts This Page (optional) .			•						6	35.20	D			
TOTAL This Period (last page this line numbe			• •											

9	SCHEDULE A (FEC Form 3)	X)	FOR LINE NUMBER: PAGE 212/240
	•	Use separate schedule(s) for each category of the	(check only one)
I	TEMIZED RECEIPTS	Detailed Summary Page	X 11a 11b 11c 12
F		, ,	13 14 15 16 17
	Any information copied from such Reports a	nd Statements may not be sold or used by any persign the name and address of any political committee to	on for the purpose of soliciting contributions
		g the hame and address of any political committee to	
	NAME OF COMMITTEE (In Full)		
	Advocat Inc. Political Action Comr	milee	
, ∠ A.	Full Name (Last, First, Middle Initial) Roger J. Walls		Date of Receipt
	Mailing Address 2209 Bel Aire Drive	e SW	M M / D D / Y Y Y Y 09 04 2009
	City	State Zip Code	Transaction ID: AD38032B50AA540F294
	Hartselle	AL 35640-3844	Amount of Each Receipt this Period
	FEC ID number of contributing		
	federal political committee.	C	28.40
	Name of Employer Diversicare Management Se-	Occupation	
	rvices Receipt For:	Al Reboc	
	Primary General	Aggregate Year-to-Date	-
	Other (specify)	471.90	
_			1
3.	Full Name (Last, First, Middle Initial) Roger J. Walls		Date of Receipt
	Mailing Address 2209 Bel Aire Drive	e SW	M M / D D / Y Y Y Y 09 18 2009
	City	State Zip Code	Transaction ID: AF8E28D1E13D642D1A0
	Hartselle	AL 35640-3844	Amount of Each Receipt this Period
		AL 33040-3044	
	FEC ID number of contributing federal political committee.	C	28.40
	Name of Employer Diversicare Management Se-	Occupation	
	rvices	Al Reboc	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Other (specify)	500.30	
			1
-).	Full Name (Last, First, Middle Initial) Roger J. Walls		Date of Receipt
	Mailing Address 2209 Bel Aire Drive	e SW	
			10 02 2009
	City	State Zip Code	Transaction ID: AD597347255F8471A8F
	Hartselle	AL 35640-3844	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.40
	Name of Employer Diversicare Management Se-	Occupation	-
	Diversicare Management Se- rvices	Al Reboc	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Primary General	528.70	1
	Other (specify)		
Γ			85.20
	SUBTOTAL of Receipts This Page (option	al)	05.20
	TOTAL This Devied (lock serve this "		
	IUIAL I his Period (last page this line hun	nber only)	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 213/240 (check only one) 11c 12 X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committee	e name and ad	ay not be sold or used by any pers Idress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) Roger J. Walls			Date of Receipt
	Mailing Address 2209 Bel Aire Drive S	VV		10 ^{M, M} / D D / Y Y Y Y 10 ^L 16 ^L 2009
	City	State	Zip Code	Transaction ID: AFEE8C29275164DD8938
	Hartselle	AL	35640-3844	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.40
	Name of Employer Diversicare Management Se-	Occupation		
	rvices Receipt For:	Al Rebo	c e Year-to-Date ▼	_
	Primary General Other (specify) ▼		557.10]
В.	Full Name (Last, First, Middle Initial) Roger J. Walls			Date of Receipt
	Mailing Address 2209 Bel Aire Drive S	W		10 / D D / Y Y Y Y 10 30 2009
	City	State	Zip Code	Transaction ID: AC5BAC450ECD246168A4
	Hartselle	AL	35640-3844	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.40
	Name of Employer Diversicare Management Se- rvices Receipt For:	Occupation Al Reboo		
	Primary General Other (specify) ▼		585.50]
C.	Full Name (Last, First, Middle Initial) Roger J. Walls			Date of Receipt
	Mailing Address 2209 Bel Aire Drive S	W		M M / D D / Y Y Y Y 11 1 13 2009
	City	State	Zip Code	Transaction ID: A9F89689FE41B4CDAAE5
	Hartselle	AL	35640-3844	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.40
	Name of Employer Diversicare Management Se- rvices	Occupation Al Rebo		
	Receipt For:	Aggregat	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		613.90	
	SUBTOTAL of Receipts This Page (optional) .			85.20
	TOTAL This Period (last page this line number	r only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 214 / 240 (check only one) 11a X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and s or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persond dress of any political committee to	on for the purpose of soliciting contributions
	Advocat Inc. Political Action Committ	ee		
Α.	Full Name (Last, First, Middle Initial) Roger J. Walls			Date of Receipt
	Mailing Address 2209 Bel Aire Drive S	VV		1 1 2 7 2 0 0 9
	City	State	Zip Code	Transaction ID: A297DCDB4CDD64E22AB9
	<u>Hartselle</u>	AL	35640-3844	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.40
	Name of Employer Diversicare Management Se- rvices	Occupatio Al Reboo		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	 Primary General Other (specify) ▼ 	0 0	642.30]
- B.	Full Name (Last, First, Middle Initial) Roger J. Walls			Date of Receipt
	Mailing Address 2209 Bel Aire Drive S	W		12 11 2009
	City	State	Zip Code	Transaction ID: A62E4C9AC92BB4CD0946
	<u>Hartselle</u>	AL	35640-3844	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		28.40
	Name of Employer Diversicare Management Se- rvices	Occupatio Al Reboo		
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Other (specify)	0 0	670.70	
- С.	Full Name (Last, First, Middle Initial) Roger J. Walls			Date of Receipt
	Mailing Address 2209 Bel Aire Drive S	W		12 24 2009
	City	State	Zip Code	Transaction ID: ADBF558270D6A41EDB08
	Hartselle	AL	35640-3844	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.40
	Name of Employer Diversicare Management Se- rvices	Occupatio Al Reboo		
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	 Primary General Other (specify) ▼ 	0 0	699.10	
	SUBTOTAL of Receipts This Page (optional) .			85.20
	TOTAL This Period (last page this line number	r only)		

I	SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	nd Statements may	Use separate schedule(s) for each category of the Detailed Summary Page not be sold or used by any pers	FOR LINE NUMBER: PAGE 215 / 240 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions
	or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm		ess of any political committee to	o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Matthew J. Weishaar Mailing Address 376 Sandcastle Roa	ad		Date of Receipt
	City	State	Zip Code	Transaction ID: AA23F5FEFFE8249CDA33
	Franklin	TN	37069-7186	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		54.55
	Name of Employer Diversicare Management Se- rvices	Occupation VP Financ	e & Controller	_
	Receipt For:	Aggregate	Year-to-Date 🔻	
	Primary General Other (specify)	0 0	709.15]
– В.	Full Name (Last, First, Middle Initial) Matthew J. Weishaar	-		Date of Receipt
	Mailing Address 376 Sandcastle Roa	ad		07 ^M / D D / Y Y Y Y 24 ^D 2009
	City	State	Zip Code	Transaction ID: A70AC60EA27ED4F999D0
	Franklin	TN	37069-7186	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		54.55
	Name of Employer Diversicare Management Se- rvices	Occupation VP Financ	e & Controller	
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 763.70	
– C.	Full Name (Last, First, Middle Initial) Matthew J. Weishaar			Date of Receipt
	Mailing Address 376 Sandcastle Roa	ad		M M / D D / Y
	City	State	Zip Code	Transaction ID: AD39D2551DADB40FE870
	Franklin	TN	37069-7186	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		54.55
	Name of Employer Diversicare Management Se- rvices		e & Controller	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼ 818.25	
	Other (specify)	0 0	010.20	
Γ	SUBTOTAL of Receipts This Page (optiona	ป)		163.65
	TOTAL This Period (last page this line num	-		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	for each category of the	FOR LINE NUMBER: PAGE 216 / 240 (check only one) 11a X 11a 11b 11c 12
Any information copied from such Reports a	Detailed Summary Page nd Statements may not be sold or used by any pers	
or for commercial purposes, other than using	the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Advocat Inc. Political Action Comm	nittee	
Full Name (Last, First, Middle Initial) A. Matthew J. Weishaar		Date of Receipt
Mailing Address 376 Sandcastle Ro	ad	M M / D D / Y Y Y Y Y 0 8 2 1 2 0 0 9
City	State Zip Code	Transaction ID: A4850CFC1025D4BEEB
Franklin	TN 37069-7186	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		54.55
Name of Employer Diversicare Management Se-	Occupation VP Finance & Controller	_
<u>rvices</u> Receipt For:	Aggregate Year-to-Date V	—
Primary General Other (specify) ▼	872.80	
Full Name (Last, First, Middle Initial) Matthew J. Weishaar		Date of Receipt
Mailing Address 376 Sandcastle Ro	ad	M M / D D / Y Y Y Y 09 04 2009
City	State Zip Code	Transaction ID: AAD296648DDEB43A29
Franklin	TN 37069-7186	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	54.55
Name of Employer Diversicare Management Se- rvices	Occupation VP Finance & Controller	
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	927.35]
Full Name (Last, First, Middle Initial) Matthew J. Weishaar		Date of Receipt
Mailing Address 376 Sandcastle Ro	ad	M M / D D / Y Y Y Y 09 18 2009
City	State Zip Code	Transaction ID: ABB42F98C532C462784
Franklin	TN 37069-7186	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		54.55
Name of Employer Diversicare Management Se-	Occupation	
rvices Receipt For:	VP Finance & Controller Aggregate Year-to-Date V	
Primary General Other (specify) v	981.90	
SUBTOTAL of Receipts This Page (optiona	al)	163.65
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Any information copied from such Reports and Statements may not be sold or used by any person for the purposes, other than using the name and address of any political committee to solicit contributions from such committee. ANAME OF COMMITTEE (in Full) Advocat Inc. Political Action Committee Full Name (Last, First, Middle Initial) Matthew J. Weishaar Mailing Address 376 Sandcastle Road City State Franklin TN Total contributing C Mare of Enployer Occupation Wresticate and thema and the aname and address of any political committee Amount of Each Receipt Mailing Address 376 Sandcastle Road Transaction Ib: A24724CE8A1CD4E3 Amount of Each Receipt Management Se- UVP Finance & Controller Amount of Each Receipt His Period Primary General Occupation VP Finance & Controller Mailing Address 376 Sandcastle Road City State Zip Code Transaction Ib: A2510EEE9B3FC4AI Full Name (Last, First, Middle Initial) Mailing Address 376 Sandcastle Road To 5 ° ° (Y 2 0 0 9 City State Zip Code Transaction Ib: A2510EE9B3FC4AI To 5 ° ° (Y 2 0 0 9 Full Name (Last, First, Middle Initial)	SCHEDULE A (FEC Form ITEMIZED RECEIPTS	for each category of the	FOR LINE NUMBER: PAGE 217/240 (check only one) X 11a 11b 11c 12					
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rederal political committee. V St.33 Name of Employer Diversicare Maragement Se- Naces VP Finance & Controller Aggregate Year-to-Date ▼ Date of Receipt Receipt For: Aggregate Year-to-Date ▼ 1036.45 Date of Receipt Mattinev J. Weishaar Date of Receipt His Period 1036.45 City State Zip Code Transaction Di: AC51B6EE983FC4At Full Name (Last, First, Middle Initial) Matthew J. Weishaar Annount of Each Receipt His Period Mare of Employer Occupation VP Finance & Controller Amount of Each Receipt His Period Full Name (Last, First, Middle Initial) Aggregate Year-to-Date ▼ Image of Employer Date of Receipt Direr (specify) © General Occupation VP Finance & Controller Amount of Each Receipt His Period Full Name (Last, First, Middle Initial) Matthew J. Weishaar Date of Receipt Date of Receipt Mailing Address 376 Sandcastle Road TN 37069-7186 Transaction ID: A77AF7D8329084B1; Amount of Each Receipt His Period Full Name (Last, First, Middle Initial) Matthew J. Weishaar Date of Receipt Maount of Each Receipt His Period Mailing Address 376 Sandcastle Road TN 37069-7186 Transaction I	Franklin	TN 37069-7186	Amount of Each Receipt this Period					
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rvices VP Finance & Controller Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1145.55								
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Other (specify) ▼ 1145.55	Receipt For:	Receipt For: Aggregate Year-to-Date ▼						
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	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committee	ee																
. Z	Full Name (Last, First, Middle Initial) Matthew J. Weishaar									Date of Receipt								
	Mailing Address 376 Sandcastle Road							D 3	/ Y		о 0 0		1					
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	Franklin	TN	37069-7186		Amoun	t of	Each	Rec	eipt th	is P	eriod	ł						
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_	Full Name (Last, First, Middle Initial) Matthew J. Weishaar						ceipt											
	Mailing Address 376 Sandcastle Road					1		D 27	/ Y		0 0							
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	Full Name (Last, First, Middle Initial) Matthew J. Weishaar				Date of	Re	ceipt											
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	FEC ID number of contributing federal political committee.	C				_				Ę	54.5	5						
	Name of Employer Diversicare Management Se- rvices	Occupatio VP Final	on nce & Controller															
	Receipt For:	e Year-to-Date 🔻																
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	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Commit	I Statements may not be sold or used by any pers he name and address of any political committee t ttee	to solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Matthew J. Weishaar		Date of Receipt
	Mailing Address 376 Sandcastle Road	d	12 24 2009
	City	State Zip Code	Transaction ID: A071001994E5644179E4
	Franklin	TN 37069-7186	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	54.55
	Name of Employer Diversicare Management Se-	Occupation	
	rvices	VP Finance & Controller	
	Receipt For:	Aggregate Year-to-Date	_
	Other (specify)	1363.75	
в.	Full Name (Last, First, Middle Initial) Charles W. Wheeler		Date of Receipt
	Mailing Address P O Box 201682	07 10 Y Y Y Y 02009	
	City	State Zip Code	Transaction ID: AD7AEFC2199754C8AAB6
	Austin	TX 78720-1682	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	44.00
	Name of Employer Diversicare Management Se-	Occupation	
	rvices	Texas Executive Director	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 555.10	
- C.	Full Name (Last, First, Middle Initial) Charles W. Wheeler Mailing Address PO Box 201682		Date of Receipt
	City	State Zip Code	Transaction ID: A389CD4D777754B39857
	Austin	TX 78720-1682	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	44.00
	Name of Employer Diversicare Management Se-	Occupation	
	rvices	Texas Executive Director	
	Receipt For: Primary General	Aggregate Year-to-Date	_
	Other (specify)	599.10	
	SUBTOTAL of Receipts This Page (optional)		142.55
F	TOTAL This Period (last page this line numb	er only)	

or for commercial purposes, other than usi NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Com Full Name (Last, First, Middle Initial) Charles W. Wheeler	and Statements may not be sold or used by any person ng the name and address of any political committee to mittee	13 14 15 16 17 In for the purpose of soliciting contributions solicit contributions from such committee. 17 Date of Receipt Date of Receipt
A. Charles W. Wheeler		Data of Dessint
Mailing Address P O Box 201682 City <u>Austin</u> FEC ID number of contributing federal political committee. Name of Employer Diversicare Management Se- rvices Receipt For: Primary General	State Zip Code TX 78720-1682 C Occupation Texas Executive Director Aggregate Year-to-Date	M M O D O Y
Fillinary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Charles W. Wheeler Mailing Address P O Box 201682 City Austin FEC ID number of contributing federal political committee. Name of Employer Diversicare Management Services Receipt For: Primary General Other (specify)	643.10 State Zip Code TX 78720-1682 C Occupation Texas Executive Director Aggregate Year-to-Date ▼ 687.10	Date of Receipt 0 8 / 2 1 / 2 0 0 9 Transaction ID: AA2DC3A17B71F482C8C Amount of Each Receipt this Period 44.00
C. Full Name (Last, First, Middle Initial) Charles W. Wheeler Mailing Address P O Box 201682 City Austin FEC ID number of contributing federal political committee. Name of Employer Diversicare Management Se- rvices Receipt For: Primary General Other (specify) ▼	State Zip Code TX 78720-1682 C Occupation Texas Executive Director Aggregate Year-to-Date ▼ 731.10	Date of Receipt
	nal)	132.00

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	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	ittee		
∠ A.	Full Name (Last, First, Middle Initial) Charles W. Wheeler	Date of Receipt		
	Mailing Address P O Box 201682			M M / D D / Y Y Y Y 09 18 2009
	City	State Zip Code		Transaction ID: A6F754B643E574EDD9E
	Austin	TX 78720-16	82	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	0 0	44.00
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	rvices Receipt For:	Aggregate Year-to-Date		1
	Primary General Other (specify) ▼		775.10	
	Full Name (Last, First, Middle Initial) Charles W. Wheeler	Date of Receipt		
	Mailing Address P O Box 201682			10 ^{//} 10 ^{//} 2009
	City	State Zip Code		Transaction ID: AAEE22A19760D432FAI
	Austin	TX 78720-16	82	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		44.00
	Name of Employer Diversicare Management Se-	Occupation Texas Executive Direct	ctor	
	rvices Receipt For:	Aggregate Year-to-Date		
	Primary General Other (specify) ▼		819.10	
	Full Name (Last, First, Middle Initial) Charles W. Wheeler			Date of Receipt
	Mailing Address P O Box 201682			M M / D D / Y Y Y Y 10 16 2009
	City	State Zip Code		Transaction ID: A8899D378835544F19A
	Austin	TX 78720-16	682	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		44.00
	Name of Employer Diversicare Management Se-	Occupation	ator	
	rvices Receipt For:	Texas Executive Direc		1
	Primary General Other (specify) ▼		863.10	
Γ	SUBTOTAL of Receipts This Page (optiona)		132.00
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SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 222 / 240 (check only one) 11c 12 X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Comm	nd Statements may not be sold or used by any pers the name and address of any political committee to nittee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Charles W. Wheeler		Date of Receipt
Mailing Address P O Box 201682		10 ^D 0 ^D 1 ^Y 2009
City	State Zip Code	Transaction ID: A8942D863E346460FB9
Austin	TX 78720-1682	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	44.00
Name of Employer Diversicare Management Se-	Occupation	_
rvices Receipt For:	Texas Executive Director	
Primary General Other (specify) ▼	Aggregate Year-to-Date 907.10]
Full Name (Last, First, Middle Initial) Charles W. Wheeler		Date of Receipt
Mailing Address P O Box 201682		1 1 1 1 3 2 0 0 9
City	State Zip Code	Transaction ID: A00FE2D7A2074419A82
Austin	TX 78720-1682	Amount of Each Receipt this Period
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Name of Employer Diversicare Management Se-	Occupation Texas Executive Director	_
rvices Receipt For:	Aggregate Year-to-Date V	—
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Full Name (Last, First, Middle Initial) Charles W. Wheeler		Date of Receipt
Mailing Address P O Box 201682		1 1 2 7 2 0 0 9
City	State Zip Code	Transaction ID: ADECB353C392B47E2A
Austin	TX 78720-1682	Amount of Each Receipt this Period
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federal political committee. C 20.00 Name of Employer Diversicare Leasing Corp Occupation Admin Administrator-exemp Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Date of Receipt Full Name (Last, First, Middle Initial) Chyra D. Worthington Date of Receipt Date of Receipt Mailing Address 1723 Royal Oaks Date of Receipt 0 9 City State Zip Code Transaction ID: A66F782AB8044AD0 Malvern AR 72104-5752 Transaction ID: A66F782AB8044AD0 FEC ID number of contributing federal political committee. C 28.85 Name of Employer Diversicare Leasing Corp Occupation Admin Administrator-exemp Aggregate Year-to-Date ▼ Receipt For: Other (specify) ▼ Aggregate Year-to-Date ▼ 510.57 96.55		Malvern	AR	72104-5752		Amoun	t of E	ach F	Receipt t	his P	eriod						
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Name of Employer Diversicare Leasing Corp Occupation Admin Administrator-exemp Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 510.57			С			`				:	28.85	5					
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Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 510.57		Name of Employer Diversicare Leasing Corp															
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	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 225 / 240 (check only one) X 11a 11b 11c 12 X 11a 11b 11c 12 13 14 15 16 17
A 0	ny information copied from such Reports and s r for commercial purposes, other than using th	Statements may e name and ad	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committ	ee		
	Full Name (Last, First, Middle Initial) Chyra D. Worthington			Date of Receipt
	Mailing Address 1723 Royal Oaks			09 / 24 / Y Y Y 2009
	City	State	Zip Code	Transaction ID: AD3F87AC8C64A4C4D8
	Malvern	AR	72104-5752	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.85
	Name of Employer Diversicare Leasing Corp	Occupatio Admin A	n dministrator-exemp	
	Receipt For:	- · · · · · · · · · · · · · · · · · · ·	e Year-to-Date 🔻	1
	Primary General Other (specify) ▼	0 0	539.42	
	Full Name (Last, First, Middle Initial) Chyra D. Worthington	I		Date of Receipt
	Mailing Address 1723 Royal Oaks			M M / D D / Y Y Y Y 10 08 2009
	City	State	Zip Code	Transaction ID: AF36168F657E0474A84
	Malvern	AR	72104-5752	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.85
	Name of Employer Diversicare Leasing Corp		dministrator-exemp	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify)		568.27	
	Full Name (Last, First, Middle Initial) Chyra D. Worthington			Date of Receipt
	Mailing Address 1723 Royal Oaks			M M / D D / Y Y Y Y 10 22 2009
	City	State	Zip Code	Transaction ID: AAE8B3CC396E74AFDE
	Malvern	AR	72104-5752	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		28.85
	Name of Employer Diversicare Leasing Corp	Occupatio Admin A	n dministrator-exemp	
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	
	Other (specify)		597.12	
	SUBTOTAL of Receipts This Page (optional) .	1		86.55
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I	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 226 / 240 (check only one)		
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committed	e name and add	r not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
A.	Full Name (Last, First, Middle Initial) Chyra D. Worthington Mailing Address 1723 Royal Oaks			Date of Receipt		
	City	State	Zip Code	Transaction ID: A4F18E0EDA66B4FAABE		
	Malvern	AR	72104-5752	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		28.85		
	Name of Employer Diversicare Leasing Corp	Occupation Admin Ad	n dministrator-exemp			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 625.97]		
– В.	Full Name (Last, First, Middle Initial) Chyra D. Worthington Mailing Address 1723 Royal Oaks	Date of Receipt				
	0.1	01-11-	7'	11192009 Transaction ID: AFBE024577CD948698AB		
	City Malvern					
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 28.85		
	Name of Employer Diversicare Leasing Corp	- 1 · ·	dministrator-exemp			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 654.82]		
- C.	Full Name (Last, First, Middle Initial) Chyra D. Worthington Mailing Address 1723 Royal Oaks			Date of Receipt		
	City	State	Zip Code	Transaction ID: AC39324D927774724A3C		
	Malvern	AR	72104-5752	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		28.85		
	Name of Employer Diversicare Leasing Corp		dministrator-exemp			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date 683.67]		
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	Any information copied from such Reports and	Statements ma	v not be sold or used by any per	son for the r	·	liciting co	16 ntribution			
	r for commercial purposes, other than using th	e name and ad	dress of any political committee	to solicit cor	ntributions fr	om such c	ommittee	ð.		
$\left \right $	NAME OF COMMITTEE (In Full)									
	Advocat Inc. Political Action Committ	ee								
Z	Full Name (Last, First, Middle Initial) Chyra D. Worthington			Dat	e of Receipt					
	Mailing Address 1723 Royal Oaks		M / D	D / Y 17	200					
	City	State	Zip Code		saction ID:					
	Malvern	AR	72104-5752		ount of Each					
	FEC ID number of contributing									
	federal political committee.	C					28.8	35		
	Name of Employer Diversicare Leasing Corp	Occupatio								
		- I - I	dministrator-exemp							
	Receipt For: Primary General	Aggregate	e Year-to-Date 🔻	_						
	Other (specify) 🔻		712.52							
	Full Name (Last, First, Middle Initial)									
	Samuel R. Wright II			Date	e of Receipt					
	Mailing Address 7863 Hwy 828	м 0		D / Y D 1	200					
	City	State	Zip Code	Trar	saction ID:	A4465E	41F342	2F40978		
	Louisa	KY	41230-5525	Amo	ount of Each	Receipt t	nis Perio	d		
	FEC ID number of contributing federal political committee.	C				1 1	33.2	27		
	Name of Employer Diversicare Leasing Corp	Occupatio	n dministrator-exemp							
	Receipt For:		e Year-to-Date V							
	Primary General	Aggregate	e rear-to-Date V	_						
	Other (specify)	0 0	421.08							
	Full Name (Last, First, Middle Initial)									
	Samuel R. Wright II				e of Receipt					
	Mailing Address 7863 Hwy 828			O		D / Y	200	9		
	City	State	Zip Code	Trar	saction ID:	A2CE90				
	Louisa	KY	41230-5525	-	ount of Each					
	FEC ID number of contributing					33.2	7			
	federal political committee.	C				1 1	55.2			
	Name of Employer Diversicare Leasing Corp	n dministrator-exemp								
	Receipt For:	1 1	e Year-to-Date V	_						
	Primary General	Aggregate		-						
	Other (specify) ▼		487.62							
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	SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 228 / 240 (check only one)
	ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using th	Statements may not be sold or used by any pe e name and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committ	ee	
ا ۸.	/ Full Name (Last, First, Middle Initial) Samuel R. Wright II		Date of Receipt
	Mailing Address 7863 Hwy 828		M M / D D / Y Y Y Y 07 15 2009
	City	State Zip Code	Transaction ID: A781F9674A979403BAFE
	Louisa	KY 41230-5525	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33.27
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For:	Aggregate Year-to-Date V	
	Primary General Other (specify) ▼	487.62	
- B.	Full Name (Last, First, Middle Initial) Samuel R. Wright II	1	Date of Receipt
	Mailing Address 7863 Hwy 828	M M / D D / Y	
	City	State Zip Code	Transaction ID: A4FBFBC225EF54E1EA
	Louisa	KY 41230-5525	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33.27
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Other (specify)	520.89	
- C.	Full Name (Last, First, Middle Initial) Samuel R. Wright II		Date of Receipt
	Mailing Address 7863 Hwy 828		M M / D D / Y Y Y Y 08 26 2009
	City	State Zip Code	Transaction ID: AD2AD9DD105384205B
	Louisa	KY 41230-5525	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33.27
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For:	Aggregate Year-to-Date 🔻	
	Other (specify)	554.16	
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	SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 229 / 240 (check only one)
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	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any pers e name and address of any political committee to	on for the purpose of soliciting contributions
1	NAME OF COMMITTEE (In Full)		
	Advocat Inc. Political Action Committe	e	
Α.	Full Name (Last, First, Middle Initial) Samuel R. Wright II		Date of Receipt
	Mailing Address 7863 Hwy 828		M M / D D / Y Y Y Y 09 09 2009
	City	State Zip Code	Transaction ID: ABE8B14A4577743418FA
	Louisa	KY 41230-5525	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33.27
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	—
	Receipt For:	Aggregate Year-to-Date V	_
	Primary General		
	Other (specify)	587.43	
в.	Full Name (Last, First, Middle Initial) Samuel R. Wright II		Date of Receipt
	Mailing Address 7863 Hwy 828		M M / D D / Y Y Y Y 09 23 2009
	City	State Zip Code	Transaction ID: ABF3AB62D384E451DA70
	Louisa	KY 41230-5525	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33.27
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For:	Aggregate Year-to-Date V	
	Primary General Other (specify) ▼	620.70]
с.	Full Name (Last, First, Middle Initial) Samuel R. Wright II		Date of Receipt
0.	Mailing Address 7863 Hwy 828		10 07 2009
	City	State Zip Code	Transaction ID: A0BB5848F379C4142A6F
	Louisa	KY 41230-5525	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33.27
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	_
	Receipt For:	Aggregate Year-to-Date ▼	
	Other (specify)	653.97]
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	SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 230 / 240
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	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any pers name and address of any political committee t	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committee	e	
لا A.	Full Name (Last, First, Middle Initial) Samuel R. Wright II		Date of Receipt
	Mailing Address 7863 Hwy 828		10 ^{M M} /21 ^Y YYY 2009
	City	State Zip Code	Transaction ID: AE312CF907FC84080A09
	Louisa	KY 41230-5525	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33.27
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For:	Aggregate Year-to-Date V	_
	Primary General Other (specify) ▼	687.24]
- B.	Full Name (Last, First, Middle Initial) Samuel R. Wright II		Date of Receipt
	Mailing Address 7863 Hwy 828		M M / D D / Y Y Y Y 11 04 2009
	City	State Zip Code	Transaction ID: AED32F3BAC28149CA8
	Louisa	KY 41230-5525	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33.27
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date V 720.51	
- C.	Full Name (Last, First, Middle Initial) Samuel R. Wright II		Date of Receipt
	Mailing Address 7863 Hwy 828		M M / D D / Y Y Y Y 1 1 1 1 8 2009
	City	State Zip Code	Transaction ID: A28487285B3494A628AB
	Louisa	KY 41230-5525	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33.27
	Name of Employer Diversicare Leasing Corp	Occupation Admin Administrator-exemp	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	_
	Other (specify)	753.78	
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ŀ	TOTAL This Period (last page this line number		

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	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 231 / 240 (check only one) (check only one) X 11a 11b 11c 12 13 14 15 16 17
A	Any information copied from such Reports and s r for commercial purposes, other than using th	Statements may	y not be sold or used by any pers dress of any political committee t	on for the purpose of soliciting contributions oslicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committ	ee		
∠ A.	Full Name (Last, First, Middle Initial) Samuel R. Wright II			Date of Receipt
	Mailing Address 7863 Hwy 828			M M / D D / Y Y Y Y 12 / 02 / 2009
	City Louisa	State KY	Zip Code 41230-5525	Transaction ID: A51782819F50441D8938
	FEC ID number of contributing federal political committee.	C	41230-3323	Amount of Each Receipt this Period 33.27
	Name of Employer Diversicare Leasing Corp	Occupatio Admin A	n dministrator-exemp	_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 787.05]
— В.	Full Name (Last, First, Middle Initial) Samuel R. Wright II			Date of Receipt
	Mailing Address 7863 Hwy 828			12 16 2009
	City	State	Zip Code	Transaction ID: A2EED45F8B07347E08E
	Louisa	KY	41230-5525	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		33.27
	Name of Employer Diversicare Leasing Corp	Occupatio Admin A	n dministrator-exemp	_
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 820.32]

SUBTOTAL of Receipts This Page (optional)	►	66.54
TOTAL This Period (last page this line number only)	►	27460.37

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 232 / 240 (check only one) 11a 11a 11b 11c 12 13 14 15 X 16 17
	Any information copied from such Reports and Sta or for commercial purposes, other than using the n	tements may no ame and addre	ot be sold or used by any person ss of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	Advocat Inc. Political Action Committee			
Α.	Full Name (Last, First, Middle Initial) Udall for Colorado			Date of Receipt
	Mailing Address PO Box 40158			M M / D D / Y Y Y Y 12 31 2009
	City	State	Zip Code	Transaction ID: A10069D87BE8F49CF968
	Denver	CO	80204-0158	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C0033	1439	1000.00
	Name of Employer	Occupation		Refund
	Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 1000.00	

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

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		NE NUMBER: PAGE 233 / 240							
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	yone) 22 X 23 24 25 28a 28b 28c 29							
ny Information copied from such Reports and State		y any person f	or the purpose of soliciting contributions							
r for commercial purposes, other than using the nan	ne and address of any political co	ommittee to so	licit contributions from such committee							
NAME OF COMMITTEE (In Full)										
Advocat Inc. Political Action Committee										
Full Name (Last, First, Middle Initial)			Transaction ID: B9299B5DEA9684							
Hon. Charlie Crist			Date of Disbursement							
Mailing Address			09 ^M / 29 ^J / 2009 ^Y							
<u>Cite</u>	Ctoto Zip Codo		Amount of Fook Disk we are not this Davis							
City	State Zip Code		Amount of Each Disbursement this Period							
Purpose of Disbursement	г		1500.00							
FL - US Senate Candidate Name		Cotocons/								
Hon. Charlie Crist		Category/ Type								
<u> </u>	ement For: 2010		[MEMO ITEM]							
	C Primary General									
State: District:	Other (specify)									
Full Name (Last, First, Middle Initial)			Transaction ID: BD6EB0F3BEDBC4							
Hon. Charlie Crist			Date of Disbursement							
Mailing Address			M M / D 2 9 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
City	State Zip Code		Amount of Each Disbursement this Period							
Purpose of Disbursement	1500.00									
FL - US Senate Candidate Name		Category/								
Hon. Charlie Crist		Type								
Senate > President	ement For: 2010 ⟨Primary General Other (specify) ▼		[MEMO ITEM]							
State: District: Full Name (Last, First, Middle Initial)										
Charlie Crist for U.S. Senate			Transaction ID: B62D3BD0827D94 Date of Disbursement							
Mailing Address P.O. Box 1694			M 9 M / D 2 9 / Y							
City Tallahassee	StateZip CodeFL32302		Amount of Each Disbursement this Period							
Purpose of Disbursement FL - US Senate	[1500.00							
Candidate Name		Category/ Type								
<u> </u>	ement For: 2010 Primary General Other (specify) ▼									
State: District:										
SUBTOTAL of Disbursements This Page (optional)		►	1500.00							
FOTAL This Period (last page this line number only	()	►								
6AN026			FEC Schedule B (Form 3X) (Revised							

SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the		INE NUMBER:							
	Detailed Summary Page	2		23 24 25 26 28b 28c 29 30b						
ny Information copied from such Reports and State r for commercial purposes, other than using the nan										
NAME OF COMMITTEE (In Full)										
Advocat Inc. Political Action Committee										
Full Name (Last, First, Middle Initial) Committee to Elect Chris Murphy			Date of Dis							
Mailing Address PO Box 127			10 ^M							
City Cheshire	StateZip CodeCT06410-0127		Amount of	Each Disbursement this Period						
Purpose of Disbursement CT - 5 US House				1000.00						
Candidate Name Rep. Christopher S. Murphy		Category Type	/							
Senate > President	ement For: 2010 C Primary General Other (specify) ▼									
State: CT District: 05 Full Name (Last, First, Middle Initial) Crapo for U.S. Senate				n ID: BD2348BD6866444498						
Mailing Address 128 N. Columbus St. Linda E. Daniel & Assoc	Inc.		08 /	$\begin{bmatrix} D & D \\ 0 & 7 \end{bmatrix} \begin{pmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{bmatrix}$						
City Alexandria	State Zip Code VA 22314		Amount of	Each Disbursement this Period						
Purpose of Disbursement ID - US Senate	[<u>, L</u>	1000.00						
Candidate Name Sen. Mike Crapo	L	Category Type								
	ement For: 2010 Primary General Other (specify) ▼									
Full Name (Last, First, Middle Initial) Enzi for U,S. Senate			Transactio Date of Dis	n ID: BF462D2F820154880E						
Mailing Address P.O. Box 2775			0 9 [/]	^D 2 1 ^D / ^Y 2 0 0 9 ^Y						
City Cody	State Zip Code WY 82414		Amount of	Each Disbursement this Period						
Purpose of Disbursement WY - US Senate			<u> </u>	1000.00						
Candidate Name Sen. Mike Enzi		Category Type	/							
X Senate > President	ement For: 2014 Primary General Other (specify) ▼									
State: WY District:				0000.00						
SUBTOTAL of Disbursements This Page (optional)				3000.00						
TOTAL This Period (last page this line number only 6AN026)			hedule B(Form 3X)(Revised 02//						

	Use separate schedule(s)					E NUMBER: PAGE 235 / 240												
TEMIZED DISBURSEMENTS		S			ory of the ary Page			21b		22 28a	\square	23 28b		24 28c	F	25 29		26 30k
	ed from such Reports ar rposes, other than using							perso		the pu		se of s		ting co		butio		1001
		<u> </u>																
Advocat Inc. P	Political Action Comn	nittee																
Full Name (Last, ERIC PAC	First, Middle Initial)											tion IE			000)65B	34D	489E
Mailing Address	209 Pennsylvania	a Ave SE								^м 7	М	/ D	1 ^D	/	2	έοŏ	9 [×]	
City Washington		Sta D(Code)03-1107	7				Amou	unt	of Eac	h Dis	burse	emer	nt this	Peri	od
Purpose of Disbu PAC to PAC	ursement						U	*		L.					5	600.0	0	
Candidate Name							ateg Typ	ory/ e										
Office Sought:	House Senate President	хо	rimary other (spe	ecify)	2009 General	•												
State:	District:	Other2009	9															
Full Name (Last, Friends of Byre	First, Middle Initial) on Dorgan									Date	of E	tion IE Disburs	seme					4770
Mailing Address	P.O. Box 871									[™] 2	М	/ D	2 ¹	/	2	έοỏ	9 [×]	
City Bismark		Sta NI		Zip (585	Code 502					Amou	unt	of Eac	h Dis	burse	emer	nt this	Peri	od
Purpose of Disbu 12/02/2009 Breal							0			L.					10	00.0	00	
Candidate Name Sen. Byron L.							ateg Typ	ory/ e										
Office Sought:	House X Senate President		ent For: rimary 9ther (spe		2010 General	•												
State: ND	District:																	
Friends of Chr	First, Middle Initial) is Dodd									Date		tion IE Disburs	seme					4D95
Mailing Address	P.O. Box 270701	l								^м 11		/ D	0 3 ^D		2	2 0 Ò	9 '	
City West Hartford		Sta C		Zip (061	Code 27				1	Amou	unt	of Eac	h Dis	burse	emer	nt this	Peri	od
Purpose of Disbu 11/03/09; CT US										L.					10	00.0	00	
Candidate Name Sen. Chris Doo							ateg Typ	ory/ e										
Office Sought:	House X Senate President		ent For: rimary 9ther (spe	ecify)	2010 General	•												
State: CT	District:																	
SUBTOTAL of Diel	oursements This Page (ontional)													25	00.0	0	

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•	CHEDULE B (FEC Form 3X)		Use separate schedule(s) FOR LINE (check on					R:		PA	PAGE 236 / 240				
ITEMIZED DISBURSEMENTS		for each category of the Detailed Summary Page			21b 27		22 28a		23 28b	\square	24 28c	\square	25 29		26 30b
Any Information copied from such Re or for commercial purposes, other the					person	for th	ne pur	rpose	of s		ing co		ution		
Advocat Inc. Political Action															
Full Name (Last, First, Middle Init Friends of John Boehner	ial)						Date o		burs	eme	1A2E	392 <i>F</i>	A90	CE74	47D0
Mailing Address 100 E Bro	ad St Ste 233	0					07	VI /	D () 7	/ Y	ž	0 ò	9 ^Y	
City Columbus		State OH	Zip Code 43215-3651			4	Amour	nt of I	Each	ı Dis	burse	-	-	-	d
Purpose of Disbursement OH - 8 US House												250	0.0	0	
Candidate Name Rep. John Boehner				Cateo Typ											
Office Sought: X House Senate President State: OH District: 08		ement For: Primary Other (spe	2010 General ecify) ▼												
Full Name (Last, First, Middle Init FRIENDS OF SCHUMER	ial)						Date o	of Dis	burs	eme	A026	63C3	3D0E	31A4	1867
Mailing Address 426 C Stre	et, NE						11	VI /	D	0	/ Y	ž	0 ò	9 ^Y	
City Washington		State DC	Zip Code 20002			4	Amour	nt of I	Each	ı Dis	burse	ment	this	Perio	d
Purpose of Disbursement 11/10/09; NY US Senate												200	0.0	0	
Candidate Name Sen. Charles E. Schumer				Cateo Typ											
Office Sought: House X Senate President State: NY District:		ement For: Primary Other (spe	2010 General ecify) ▼												
Full Name (Last, First, Middle Init Friends of Trey Grayson	ial)						ransa Date o		burs	eme	D6E6	6198	8A8E	DD44	1391
Mailing Address P.O. Box	75726						[™] 9	VI /	D	^D 8	/ Y	ž	0 ð	9 [×]	
City Ft. Mitchell		State KY	Zip Code 41017			4	Amour	nt of I	Each	ı Dis	burse	ment	this	Perio	d
Purpose of Disbursement KY - US Senate												150	0.0	0	
Candidate Name Trey Grayson				Cateo Typ											
Office Sought: House X Senate President State: KY District:		ement For: Primary Other (spe	2010 General ecify) ▼												
SUBTOTAL of Disbursements This	Page (optional)				•							600	0.0	0	
TOTAL This Period (last page this	ine number only)			►										
E6AN026							FEC	C Sc	hedu	le B	(For	m 3X) (Re	evise	d 02/

SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check onl	22 X 23 24 25 26
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committee			for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Hatch Election Committee			Transaction ID: BE35C9CC51A124BFE Date of Disbursement
Mailing Address PO Box 1480			07 ^M /21/ <u>YYYY</u> Y
City Washington	State Zip Code DC 20013-1480		Amount of Each Disbursement this Period
Purpose of Disbursement UT - US Senate			1500.00
Candidate Name Sen. Orrin G. Hatch		Category/ Type	
5	ement For:2012PrimaryGeneralOther (specify)V		
Full Name (Last, First, Middle Initial) Hoosiers for Hill			Transaction ID: BAC6FEF46B8AE4DDI Date of Disbursement
Mailing Address PO Box 1071			$\begin{array}{c} \begin{array}{c} M \\ 1 \\ 0 \end{array} \end{array} \left(\begin{array}{c} D \\ 2 \\ 1 \end{array} \right) \left(\begin{array}{c} Y \\ 2 \\ 0 \\ 0 \\ 9 \end{array} \right) \left(\begin{array}{c} Y \\ 2 \\ 0 \\ 0 \\ 9 \end{array} \right) \left(\begin{array}{c} Y \\ 2 \\ 0 \\ 0 \\ 9 \end{array} \right) \left(\begin{array}{c} Y \\ 2 \\ 0 \\ 0 \\ 9 \end{array} \right) \left(\begin{array}{c} Y \\ Y \\ 2 \\ 0 \\ 0 \\ 9 \end{array} \right) \left(\begin{array}{c} Y \\ Y $
City Seymour	State Zip Code IN 47274-1071		Amount of Each Disbursement this Period
Purpose of Disbursement IN - 9 US House	ſ		1000.00
Candidate Name Rep. Baron P. Hill	L	Category/ Type	
	ement For: 2010 Primary General Other (specify)		
Full Name (Last, First, Middle Initial) Kratovil for Congress			Transaction ID: B30E6CA0A8B62429A Date of Disbursement
Mailing Address 499 South Capitol Street Suite 404	SW		12 ^M /02/Y2009
City Washington	StateZip CodeDC20003		Amount of Each Disbursement this Period
Purpose of Disbursement 11/30/09 Event; MD-1 US House	ſ		1000.00
Candidate Name Rep. Frank Kratovil, Jr.		Category/ Type	
	ement For: 2010 Primary General Other (specify)		
SUBTOTAL of Disbursements This Page (optional))	3500.00
TOTAL This Period (last page this line number only		►	FEC Schedule B (Form 3X) (Revised 02/2

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check on 21b 27	NUMBER: PAGE 238 / 240 y one) 22 X 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and States or for commercial purposes, other than using the nan NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committee			
Full Name (Last, First, Middle Initial) McNerney for Congress			Transaction ID: BF3FB1925528847358C Date of Disbursement
Mailing Address 6520 Village Pkwy			$\begin{array}{c} \begin{array}{c} M \\ 1 \\ \end{array} \\ \end{array} \\ \begin{array}{c} M \\ \end{array} \\ \end{array} \\ \begin{array}{c} D \\ \end{array} \\ \begin{array}{c} D \\ 2 \\ \end{array} \\ \end{array} \\ \begin{array}{c} D \\ \end{array} \\ \begin{array}{c} T \\ \end{array} \\ \begin{array}{c} Y \\ \end{array} \\ \end{array} \\ \begin{array}{c} Y \\ \end{array} \\ \begin{array}{c} Y \\ \end{array} \\ \end{array} \\ \end{array} \\ \begin{array}{c} Y \\ \end{array} \\ \end{array} \\ \end{array} \\ \begin{array}{c} Y \\ \end{array} \\ \end{array} \\ \end{array} \\ \begin{array}{c} Y \\ \end{array} \\ \end{array} \\ \end{array} \\ \end{array} \\ \begin{array}{c} Y \\ \end{array} \\ \end{array} \\ \end{array} \\ \end{array} \\ \end{array} \\ \begin{array}{c} Y \\ \end{array} \\$
City Dublin	State Zip Code CA 94568-3010		Amount of Each Disbursement this Period
Purpose of Disbursement CA- 11 US House	[1000.00
Candidate Name Rep. Jerry McNerney	lin (Category/ Type	
	ement For: 2010 Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial) PAC to the Future			Transaction ID: B4A765B950FE74558A8 Date of Disbursement
Mailing Address 607 14th Street, NW Suite 800			0 8 ^M / 0 7 / Y Y Y Y Y Y
City Washington	State Zip Code DC 20005		Amount of Each Disbursement this Period
Purpose of Disbursement PAC to PAC	ſ		3500.00
Candidate Name	L	Category/ Type	
Senate	ement For: 2009 Primary General Other (specify) ▼ 009		
Full Name (Last, First, Middle Initial) Pat Roberts Victory Committee			Transaction ID: BBEB4D0F65D334BE7E Date of Disbursement
Mailing Address 610 S. Boulevard			$\begin{bmatrix} M & M \\ 0 & 7 \end{bmatrix} \begin{pmatrix} D & D \\ 2 & 1 \end{bmatrix} \begin{pmatrix} Y & Y & Y \\ 2 & 0 & 0 \end{pmatrix} \begin{pmatrix} Y \\ 2 & 0 & 0 \end{pmatrix}$
- City Tampa	State Zip Code FL 33606		Amount of Each Disbursement this Period
Purpose of Disbursement KS - US Senate	[· · ·	1000.00
Candidate Name Sen. Pat Roberts		Category/ Type	
	ement For: 2014 Primary General Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional)			5500.00
TOTAL This Period (last page this line number only)	►	

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		PAGE 239 / 240
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 28a 28b	24 25 26 28c 29 30b
Any Information copied from such Reports and State or for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full)				
Advocat Inc. Political Action Committee				
Full Name (Last, First, Middle Initial) Portman for Senate			Date of Disbur	
Mailing Address P.O. Box 39			12 ^M /	08 [′] [×] 2009 [×]
City Terrace Park	StateZip CodeOH45174		Amount of Eac	h Disbursement this Period
Purpose of Disbursement 12/08/09 Event; US Senate				2500.00
Candidate Name Rob Portman	1	Category/ Type		
Ŭ	eement For: 2010 ⟨ Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) Senate Majority Fund			Transaction II Date of Disbur	D: BC285E3603E9E4AC sement
Mailing Address 507 Capitol Ct NE Ste 1	00		0 7 ^M /	1 3 ⁷ ^Y ^Y ^Y ^Y ^Y ^Y ^Y ^Y ^Y
City Washington	State Zip Code DC 20002-7705		Amount of Eac	h Disbursement this Period
Purpose of Disbursement PAC to PAC	ľ			1000.00
Candidate Name		Category/ Type		
Senate	ement For: 2009 Primary General ♦ Other (specify) ▼ 2009			
Full Name (Last, First, Middle Initial) Zach Space for Congress Committee			Transaction II	D: B981E786C55D74EB
Mailing Address 726 Sixteenth Street NE				
City Massillon	State Zip Code OH 44646		Amount of Eac	h Disbursement this Period
Purpose of Disbursement OH - 18 US House				1000.00
Candidate Name Rep. Zachary T. Space	L	Category/ Type		
°	ement For: 2010 Primary General Other (specify)			
SUBTOTAL of Disbursements This Page (optional)	······ Þ		4500.00
TOTAL This Period (last page this line number only	d			26500.00

	SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: (check only one)		PAGE 240 / 240	
	ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21		24 25 26 28c X 29 30b	
	Any Information copied from such Reports and Stater or for commercial purposes, other than using the name					
	NAME OF COMMITTEE (In Full) Advocat Inc. Political Action Committee					
Α.	Full Name (Last, First, Middle Initial) North Dakota Democratic NPL Mailing Address 1902 East Divide Avenue	9		Date of Disburs	: BD3AB828FDF464416873 ement 1 8 / Y Y Y Y Y Y 2 0 0 9	
	City Bismarck	State Zip Code ND 58501		Amount of Each	Disbursement this Period	
	Purpose of Disbursement Pac to PAC		7 L	2500.00		
	Candidate Name		Category/ Type			
	Senate President X					
	State: District: Unknow	vn0				

	SUBTOTAL of Disbursements This Page (optional)	•	2500.00
	TOTAL This Period (last page this line number only)	►	2500.00
i	FE6AN026		FEC Schedule B (Form 3X) (Revised 02/2003)