

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

American Health Care Association Political Action Committee

ADDRESS (number and street)

1201 L Street, NW

Check if different than previously reported. (ACC)

Washington

DC

20005

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00006090

3. IS THIS REPORT

X

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Quarterly Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

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

Mar 20 (M3)

X

Jun 20 (M6)

Sep 20 (M9)

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

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the State of

(d) 30-Day Post-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

05

01

2005

through

05

31

2005

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

Type or Print Name of Treasurer

Anna Lee-Assl. Treasurer

Signature of Treasurer

Electronically Filed by Anna Lee-Assl. Treasurer

Date

06

09

2005

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

Office Use Only

FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name

American Health Care Association Political Action Committee

Report Covering the Period: From: ^M05 ^D01 ^Y2005 To: ^M05 ^D31 ^Y2005

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^Y 2005		168941.11
(b) Cash on Hand at Beginning of Reporting Period	254984.96	
(c) Total Receipts (from Line 19)	48168.20	356612.93
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	303153.16	525554.04
<hr/>		
7. Total Disbursements (from Line 31)	49981.24	272382.12
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	253171.92	253171.92
<hr/>		
9. Debts and Obligations owed TO the committee (itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

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Write or Type Committee Name

American Health Care Association Political Action Committee

Report Covering the Period: From: ^M05 ⁻01 ⁻2005 To: ^M05 ⁻31 ⁻2005

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)	44039.26	326831.45
(ii) Unitemized	4378.94	30031.48
(iii) TOTAL (add Lines 11(a)(i) and (ii))	48418.20	356862.93
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	48418.20	356862.93
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	-250.00	-250.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total 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))	48168.20	356612.93
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	48168.20	356612.93

DETAILED SUMMARY PAGE

of Disbursements

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	981.24	3684.09
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	981.24	3684.09
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	49000.00	266350.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	1250.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	1250.00
29. Other Disbursements.....	0.00	1098.03
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election ActMty (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	49981.24	272382.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 31).....	49981.24	272382.12

DETAILED SUMMARY PAGE
of Disbursements

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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)	48418.20	356862.93
34. Total Contribution Refunds (from Line 28(d))	0.00	1250.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	48418.20	355612.93
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	981.24	3684.09
37. Offsets to Operating Expenditures (from Line 15, page 3)	-250.00	-250.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1231.24	3934.09

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

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

FOR LINE NUMBER: PAGE 6 / 38

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. Floyd Schlossberg		Date of Receipt M / D / Y 05 / 02 / 2005
Mailing Address 4200 W. Peterson #140		Transaction ID: 22120713
City Chicago	State IL	Zip Code 60646-6812
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1250.00
Name of Employer Alden Management Inc	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. Mrs. Ina Schlossberg		Date of Receipt M / D / Y 05 / 02 / 2005
Mailing Address 4200 W Peterson #140		Transaction ID: 22120711
City Chicago	State IL	Zip Code 60646-6813
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Alden Enterprises	Occupation Special Operations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) C. Ms. Kelley Schild		Date of Receipt M / D / Y 05 / 03 / 2005
Mailing Address 47 NW 32nd Place		Transaction ID: 21547487
City Miami	State FL	Zip Code 33125-4514
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Floridian Nursing Home	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	4750.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 38

(check only one)

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

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. Michael A Newton		Date of Receipt M / D / Y 05 / 03 / 2005
Mailing Address 143D Progress Way #10B		Transaction ID: 21547503
City Eldersburg	State MD	Zip Code 21784-6484
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Nexon Health	Occupation Director of Human Resources	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Mr. Breton J. Bolt		Date of Receipt M / D / Y 05 / 03 / 2005
Mailing Address 143D Progress Way Suite 108		Transaction ID: 21547504
City Eldersburg	State MD	Zip Code 21784-6484
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Nexon Health Care	Occupation CFO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. Mr Abraham Moraes		Date of Receipt M / D / Y 05 / 04 / 2005
Mailing Address 231D Washington St #300		Transaction ID: 22118528
City Newton Lower Falls	State MA	Zip Code 02462-1440
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer MA Extended Care Federation	Occupation Executive Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	325.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 8 / 38

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Ms. Jill Mendlen		Date of Receipt M M / D D / Y Y Y Y 05 / 04 / 2005
Mailing Address 2151 Calle Poco		Transaction ID: 21547516
City El Cajon	State CA	Zip Code 92019-3540
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Mendlen Group	Occupation LTC Consultant	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr Keith Holloway		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2005
Mailing Address 1475 N Cole Rd		Transaction ID: 22120722
City Boise	State ID	Zip Code 83704-8537
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Western Health Care Corp	Occupation Administrator	Aggregate Year-to-Date ▼ 5000.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms Datta Holloway		Date of Receipt M M / D D / Y Y Y Y 05 / 05 / 2005
Mailing Address 1475 N. Cole Rd.		Transaction ID: 22120720
City Boise	State ID	Zip Code 83704-8537
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Western Health Care Corp.	Occupation Consultant RN	Aggregate Year-to-Date ▼ 1000.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	6500.00
TOTAL This Period (last page this line number only)	▶	

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

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FOR LINE NUMBER: PAGE 9 / 38
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr Paul Diaz		Date of Receipt M / D / Y Y Y Y 05 / 05 / 2005
Mailing Address 880 South Fourth Street		Transaction ID: 22120716
City	State	Zip Code
Louisville	KY	40202-2816
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Kindrad HealthCare	Occupation Sr Vice President/CFO	Aggregate Year-to-Date ▼ 1000.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Patrick Bruendaman		Date of Receipt M / D / Y Y Y Y 05 / 05 / 2005
Mailing Address 1700 UPS Drive #105		Transaction ID: 22120717
City	State	Zip Code
Louisville	KY	40223-4046
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Senior Care LLC	Occupation Chief Operating Officer	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Macey Woolpert		Date of Receipt M / D / Y Y Y Y 05 / 06 / 2005
Mailing Address 200 S 13th St Suite 200		Transaction ID: 22120710
City	State	Zip Code
Grover Beach	CA	93433-2262
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Compass Health Care	Occupation VP	Aggregate Year-to-Date ▼ 2500.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	4000.00
TOTAL This Period (last page this line number only)	

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

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FOR LINE NUMBER: PAGE 10 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Ms. Patricia Giorgio		Date of Receipt M / D / Y 05 / 09 / 2005
Mailing Address 341 D 12th Ave. SW		Transaction ID: 22120715
City Cedar Rapids	State IA	Zip Code 52404-1375
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Evergreen Estates	Occupation Owner	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Mr John Masternick		Date of Receipt M / D / Y 05 / 13 / 2005
Mailing Address 20 E Liberty Street		Transaction ID: 22147840
City Girard	State OH	Zip Code 44420-2690
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Attorney AT LAW	Occupation Attorney	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms Penny Prue		Date of Receipt M / D / Y 05 / 16 / 2005
Mailing Address 1201 L Street, NW PAYROLL DEDUCTION		Transaction ID: 22120727
City Washington	State DC	Zip Code 20005-4024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.47
Name of Employer AHCA	Occupation Vice President, Administration	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 384.70	

SUBTOTAL of Receipts This Page (optional)	▶	538.47
TOTAL This Period (last page this line number only)	▶	

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr David Kyle		Date of Receipt M / D / Y 05 / 16 / 2005
Mailing Address 4821 28th Road South PAYROLL DEDUCTION		Transaction ID: 22120735
City Arlington	State VA	Zip Code 22206-1143
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer AHCA	Occupation Director, Assisted Living	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms Elise Smith		Date of Receipt M / D / Y 05 / 16 / 2005
Mailing Address 1201 L Street NW		Transaction ID: 22120728
City Washington	State DC	Zip Code 20005-4024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer AHCA	Occupation VP Reimbursement	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. John Derr		Date of Receipt M / D / Y 05 / 16 / 2005
Mailing Address 1320 North Veitech Street Apt 920 PAYROLL DEDUCTION		Transaction ID: 22120728
City Arlington	State VA	Zip Code 22201-6214
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 84.25
Name of Employer AHCA	Occupation Director, Strat. Action Group	Aggregate Year-to-Date ▼ 842.50
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	609.25
TOTAL This Period (last page this line number only)	▶	

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

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FOR LINE NUMBER: PAGE 12 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. James B. Smith		Date of Receipt M / D / Y 05 / 16 / 2005
Mailing Address 1201 L St NW PAYROLL DEDUCTION		Transaction ID: 22120732
City Washington	State DC	Zip Code 20005-4024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.31
Name of Employer American Health Care Association	Occupation Sr. VP	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1538.48	

Full Name (Last, First, Middle Initial) B. Mr. Hal Deub		Date of Receipt M / D / Y 05 / 16 / 2005
Mailing Address 1201 L Street, NW		Transaction ID: 22120726
City Washington	State DC	Zip Code 20005-4024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 454.60
Name of Employer American Health Care Association	Occupation President & CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4545.30	

Full Name (Last, First, Middle Initial) C. Mr William Williamson		Date of Receipt M / D / Y 05 / 18 / 2005
Mailing Address 101 Grace Drive		Transaction ID: 22147784
City Easley	State SC	Zip Code 29640-9088
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer Health Management Resources	Occupation Director of Operations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	721.91
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 30

(check only one)

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

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Ms Alice Kim Lew		Date of Receipt M / D / Y 05 / 18 / 2005
Mailing Address 58-130 Kam Hwy		Transaction ID: 22146065
City Haleiwa	State HI	Zip Code 96712-9714
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Crawford's Convalescent Home	Occupation Administrator	Aggregate Year-to-Date ▼ 600.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr Cecil Barock		Date of Receipt M / D / Y 05 / 18 / 2005
Mailing Address 411 Alabama		Transaction ID: 22147783
City League City	State TX	Zip Code 77573
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Baywind Village	Occupation Administrator	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms Mary Baker		Date of Receipt M / D / Y 05 / 18 / 2005
Mailing Address 108 Starr Ave. PO Box 1129		Transaction ID: 22147774
City Turlock	State CA	Zip Code 95381
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1250.00
Name of Employer Mark One Corp.	Occupation Administrator	Aggregate Year-to-Date ▼ 1250.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	1600.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 30

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr Paul Walczak		Date of Receipt M / D / Y 05 / 18 / 2005
Mailing Address 297B PGA Blvd		Transaction ID: 22146079
City Palm Beach Gardens	State FL	Zip Code 33410-2011
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Home Quality Management	Occupation CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. Ms. Terri Byers		Date of Receipt M / D / Y 05 / 18 / 2005
Mailing Address 154B Akaka Place		Transaction ID: 22147794
City Kailua	State HI	Zip Code 96734-4209
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Healthcare Association of Hawaii	Occupation VP	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) C. Ms. Dee Klausman		Date of Receipt M / D / Y 05 / 18 / 2005
Mailing Address 1031 SW Fleming Ct		Transaction ID: 22147787
City Topeka	State KS	Zip Code 66604-1851
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 375.00
Name of Employer Lexington Park Nursing Facility	Occupation Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	2975.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 15 / 30

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. Jeffrey B. Hendrickson		Date of Receipt M / D / Y 05 / 18 / 2005
Mailing Address 132 Loch Lomond		Transaction ID: 22147770
City Rancho Mirage	State CA	Zip Code 92270-5600
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Legacy Healthcare	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	500.00

Full Name (Last, First, Middle Initial) B. Mr. Kenneth Preede		Date of Receipt M / D / Y 05 / 18 / 2005
Mailing Address 13229 Pleasant Glen Court		Transaction ID: 22147792
City Oak Hill	State VA	Zip Code 20171-2344
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer AHCA	Occupation Director Government Relations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	500.00

Full Name (Last, First, Middle Initial) C. Rebecca A. Moore		Date of Receipt M / D / Y 05 / 18 / 2005
Mailing Address 200 N. E. 28th Street		Transaction ID: 22148078
City Oklahoma City	State OK	Zip Code 73105-2828
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Oklahoma Association of Health Care Pr	Occupation State Exec	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	1000.00

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. Stan Jones		Date of Receipt M / D / Y 05 / 10 / 2005
Mailing Address 3107 Westhill Dr		Transaction ID: 22163642
City Wausau	State WI	Zip Code 54401
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Wausau Manor	Occupation Administrator	Aggregate Year-to-Date ▼ 225.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Patricia Scherven		Date of Receipt M / D / Y 05 / 10 / 2005
Mailing Address 14322 - 21st Ave. N		Transaction ID: 22163681
City Plymouth	State MN	Zip Code 55447-4637
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Birchwood Leasing Partnership	Occupation Partner	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Shawn Roelder		Date of Receipt M / D / Y 05 / 10 / 2005
Mailing Address 2825 Woodlane Drive		Transaction ID: 22163612
City Woodbury	State MN	Zip Code 55125-2508
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Birchwood Leasing Partnership	Occupation Partner	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	600.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 17 / 30

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Ms. Cassandra Kernsine		Date of Receipt M / D / Y 05 / 10 / 2005	
Mailing Address 14322 - 21st Ave. N		Transaction ID: 22163587	
City Plymouth	State MN	Zip Code 55447-4637	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Birchwood Leasing Partnership	Occupation Partner	Aggregate Year-to-Date ▼ 250.00	
Receipt For: Primary General Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. Kimberly Scobbie		Date of Receipt M / D / Y 05 / 10 / 2005	
Mailing Address 14322 - 21st Ave. N		Transaction ID: 22163580	
City Plymouth	State MN	Zip Code 55447-4637	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Birchwood Leasing Partnership	Occupation Partner	Aggregate Year-to-Date ▼ 250.00	
Receipt For: Primary General Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mr. Mark Davis		Date of Receipt M / D / Y 05 / 10 / 2005	
Mailing Address 52 W. 8th		Transaction ID: 22163825	
City Parsons	State TN	Zip Code 38363-4658	Amount of Each Receipt this Period 600.00
FEC ID number of contributing federal political committee. C			
Name of Employer Tennessee Health Mgmt.	Occupation COO	Aggregate Year-to-Date ▼ 600.00	
Receipt For: Primary General Other (specify) ▼			

SUBTOTAL of Receipts TN's Page (optional)	▶	1100.00
TOTAL This Period (last page this line number only)	▶	

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

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

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(check only one)
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. Kelley Hamilton		Date of Receipt M / D / Y 05 / 10 / 2005
Mailing Address 3220 State Street		Transaction ID: 22166915
City Salem	State OR	Zip Code 97301-5063
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Intl. West Retirement Corp.	Occupation CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Mr. James M. Smith		Date of Receipt M / D / Y 05 / 10 / 2005
Mailing Address P.O. Box 456		Transaction ID: 22163620
City Parsons	State TN	Zip Code 38363-4656
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer TN Health Care Management, Inc.	Occupation CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Mr. Donald B. Ross		Date of Receipt M / D / Y 05 / 10 / 2005
Mailing Address 319 Turtle Creek Drive		Transaction ID: 22163623
City Brentwood	State TN	Zip Code 37027
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer Tennessee Health Management	Occupation Sr. Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts TN's Page (optional)	3600.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 10 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Ms. Anne G. Vise		Date of Receipt M / D / Y 05 / 10 / 2005
Mailing Address 1540 Bunches Chapel Road		Transaction ID: 22163624
City Parsons	State TN	Zip Code 38363-3839
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer Tennessee Health Management	Occupation CFO	Aggregate Year-to-Date ▼ 600.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Robert M. Brownard		Date of Receipt M / D / Y 05 / 10 / 2005
Mailing Address 1220 East Main Street P.O. Box 307		Transaction ID: 22163626
City Parsons	State TN	Zip Code 38363-2729
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer Tennessee Health Management	Occupation Pharmacy Director	Aggregate Year-to-Date ▼ 600.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Jeffrey Parrish		Date of Receipt M / D / Y 05 / 10 / 2005
Mailing Address 11156 Sandie-Scotts Hill Road		Transaction ID: 22163627
City Scotts Hill	State TN	Zip Code 38374-5084
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer Tennessee Health Management	Occupation General Counsel	Aggregate Year-to-Date ▼ 600.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts TN's Page (optional)	1800.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. Thomas F. Schanke		Date of Receipt M / D / Y 05 / 10 / 2005
Mailing Address 1700 Midway Road		Transaction ID: 22163652
City Menasha	State WI	Zip Code 54952-1289
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Oakridge Gardens Nursing Center	Occupation President	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr Gerald Cox		Date of Receipt M / D / Y 05 / 23 / 2005
Mailing Address PO Box 7728		Transaction ID: 22168820
City Rocky Mount	State NC	Zip Code 27864-0728
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Autumn Corp	Occupation President	Aggregate Year-to-Date ▼ 5000.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr Robert Van Dyk		Date of Receipt M / D / Y 05 / 23 / 2005
Mailing Address 304 South Van Dien		Transaction ID: 22168822
City Ridgewood	State NJ	Zip Code 07450-5200
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1250.00
Name of Employer Van Dyk Health Care	Occupation President/CEO	Aggregate Year-to-Date ▼ 2500.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	4250.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 21 / 30

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr Dirk Anjewierden		Date of Receipt M / D / Y 05 / 23 / 2005	
Mailing Address 218D So. 1300 E Suite 445		Transaction ID: 22166204	
City Salt Lake City	State UT	Zip Code 84106-2813	Amount of Each Receipt this Period 125.00
FEC ID number of contributing federal political committee. C			
Name of Employer Utah Health Care Assn.	Occupation Executive Director		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		
Full Name (Last, First, Middle Initial) B. Mr Terry Kuzman		Date of Receipt M / D / Y 05 / 23 / 2005	
Mailing Address 1157 Enfield St		Transaction ID: 22166205	
City Enfield	State CT	Zip Code 06082-4338	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Kindred Healthcare	Occupation Administrator		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		
Full Name (Last, First, Middle Initial) C. Mr Don Wessel		Date of Receipt M / D / Y 05 / 23 / 2005	
Mailing Address 417 S Main St		Transaction ID: 22174295	
City Oberlin	State OH	Zip Code 44074	Amount of Each Receipt this Period 125.00
FEC ID number of contributing federal political committee. C			
Name of Employer Welcome Nursing Home Inc	Occupation President		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶ **500.00**

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

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

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

FOR LINE NUMBER: PAGE 22 / 30

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr J Wayne Franklin		Date of Receipt M / D / Y 05 / 23 / 2005
Mailing Address 125 Springfield Ct #1		Transaction ID: 22166206
City O Fallon	State IL	Zip Code 62269-2495
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1250.00
Name of Employer Franklin Healthcare	Occupation Senior Manager	Aggregate Year-to-Date ▼ 2500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr Stan Jones		Date of Receipt M / D / Y 05 / 23 / 2005
Mailing Address 3107 Westhill Dr		Transaction ID: 22168923
City Wausau	State WI	Zip Code 54401
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer Wausau Manor	Occupation Administrator	Aggregate Year-to-Date ▼ 350.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms Kathy Kloster		Date of Receipt M / D / Y 05 / 23 / 2005
Mailing Address Box 1673		Transaction ID: 22168919
City Seward	State AK	Zip Code 99664-1673
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Wildflower Court	Occupation Dir of Nursing	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	1625.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 30

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr William Dunn		Date of Receipt M / D / Y 05 / 25 / 2005
Mailing Address 195 Executive Dr		Transaction ID: 22179078
City Marion	State OH	Zip Code 43302-6391
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Marion Manor Nursing Hm Inc	Occupation Administrator	Aggregate Year-to-Date ▼ 1000.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms Penny Prue		Date of Receipt M / D / Y 05 / 25 / 2005
Mailing Address 1201 L Street, NW PAYROLL DEDUCTION		Transaction ID: 22174251
City Washington	State DC	Zip Code 20005-4024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.47
Name of Employer AHCA	Occupation Vice President, Administration	Aggregate Year-to-Date ▼ 423.17
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr David Kyle		Date of Receipt M / D / Y 05 / 25 / 2005
Mailing Address 4821 28th Road South PAYROLL DEDUCTION		Transaction ID: 22174285
City Arlington	State VA	Zip Code 22208-1143
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer AHCA	Occupation Director, Assisted Living	Aggregate Year-to-Date ▼ 275.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	563.47
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. John Der		Date of Receipt M / D / Y Y Y Y 05 / 25 / 2005
Mailing Address 1320 North Veitch Street Apt B20 PAYROLL DEDUCTION		Transaction ID: 22174250
City Arlington	State VA	Zip Code 22201-6214
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 84.25
Name of Employer AHCA	Occupation Director, Strat. Action Group	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 826.75	

Full Name (Last, First, Middle Initial) B. Mr. James B. Smith		Date of Receipt M / D / Y Y Y Y 05 / 25 / 2005
Mailing Address 1201 L St NW PAYROLL DEDUCTION		Transaction ID: 22174262
City Washington	State DC	Zip Code 20005-4024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.31
Name of Employer American Health Care Association	Occupation Sr. VP	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1730.79	

Full Name (Last, First, Middle Initial) C. Mr. Hal Daub		Date of Receipt M / D / Y Y Y Y 05 / 25 / 2005
Mailing Address 1201 L Street, NW		Transaction ID: 22174249
City Washington	State DC	Zip Code 20005-4024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 454.60
Name of Employer American Health Care Association	Occupation President & CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4999.90	

SUBTOTAL of Receipts This Page (optional)	731.16
TOTAL This Period (last page this line number only)	

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 30
(check only one)
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Donald Franco		Date of Receipt M / D / Y 05 / 26 / 2005
Mailing Address 274 Hemingway Ave		Transaction ID: 22174500
City East Haven	State CT	Zip Code 06512-3031
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer Paragon Group Inc.	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) B. Howard Groff		Date of Receipt M / D / Y 05 / 26 / 2005
Mailing Address 9031 Penn. Ave. South		Transaction ID: 22174501
City Bloomington	State MN	Zip Code 55431-2225
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1250.00
Name of Employer Teahood Care Centers Inc	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) C. Mr Richard Grosso		Date of Receipt M / D / Y 05 / 31 / 2005
Mailing Address 130 Terhune Dr		Transaction ID: 22194431
City Wayne	State NJ	Zip Code 07470-7199
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Lakeview SubAcute Care Ce- nter	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	3750.00
TOTAL This Period (last page this line number only)	▶	

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 30
(check only one)
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Bruce Yarwood		Date of Receipt M / D / Y 05 / 31 / 2005
Mailing Address 200 P St #F31		Transaction ID: 22176811
City Sacramento	State CA	Zip Code 95814-6259
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Yarwood and Associates	Occupation Gov Rel Consultant	Aggregate Year-to-Date ▼ 2500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Nancy Beecham		Date of Receipt M / D / Y 05 / 31 / 2005
Mailing Address 1651 E. Main St Ste. 203		Transaction ID: 22176810
City El Cajon	State CA	Zip Code 92021-5206
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Retro Medical Billing Inc.	Occupation President	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	44039.26

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

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

FOR LINE NUMBER: PAGE 27 / 30

(check only one)

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

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

NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. Stuart Goldberg		Date of Receipt M / D / Y 05 / 23 / 2005
Mailing Address 134 Great East Neck Rd PO Box 5240		Transaction ID: 22202098
City West Babylon	State NY	Zip Code 11704-8027
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -250.00
Name of Employer East Neck Nursing Center	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	-250.00
TOTAL This Period (last page this line number only)	▶	-250.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. American Health Care Assoc PAC

Mailing Address 1201 L Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement

Candidate Name

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

001
Category/
Type

Transaction ID: 22205867
Date of Disbursement

05 / 31 / 2005

Amount of Each Disbursement this Period

49.35

Full Name (Last, First, Middle Initial)
B. American Health Care Assoc PAC

Mailing Address 1201 L Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement

Candidate Name

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

001
Category/
Type

Transaction ID: 22205869
Date of Disbursement

05 / 31 / 2005

Amount of Each Disbursement this Period

931.89

SUBTOTAL of Disbursements This Page (optional) ▶

981.24

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

981.24

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. Martin Frost Campaign Cmte.

Mailing Address P.O. Box 4219

City Dallas State TX Zip Code 75208

Purpose of Disbursement
Void - Martin Frost Campaign Cmte.

Candidate Name
Mr. Martin Frost

Office Sought: House Senate President
Disbursement For: 2004
Primary General
 Other (specify) ▼
2004 General

State: TX District: 24

011
Category/
Type

Transaction ID: 21910925
Date of Disbursement

05 / 09 / 2005

Amount of Each Disbursement this Period

-1000.00

Void - Martin Frost Campaign Cmte.

Full Name (Last, First, Middle Initial)
B. Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol St

City Washington State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

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

State: District

011
Category/
Type

Transaction ID: 22127305
Date of Disbursement

05 / 17 / 2005

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)
C. Nussle for Congress Committee

Mailing Address PO Box 324

City Manchester State IA Zip Code 52057

Purpose of Disbursement

Candidate Name
Mr. Jim Nussle

Office Sought: House Senate President
Disbursement For: 2006
 Primary General
Other (specify) ▼

State: IA District: 2

011
Category/
Type

Transaction ID: 22127315
Date of Disbursement

05 / 17 / 2005

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

15000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. Oxley for Congress

Mailing Address P O Box 1990
2233 Rayburn House Ofc Bldg
City Findlay State OH Zip Code 45839

Purpose of Disbursement

Candidate Name
Mr. Michael Oxley

Office Sought: House
Senate
President
State: OH District 4

Disbursement For: 2006
 Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 22127299
Date of Disbursement

05 / 17 / 2005

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)
B. Lewis for Congress Committee

Mailing Address 1150 Brookside Ave.

City Redlands State CA Zip Code 92373

Purpose of Disbursement

Candidate Name
Mr. Jerry Lewis

Office Sought: House
Senate
President
State: CA District 40

Disbursement For: 2006
 Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 22128675
Date of Disbursement

05 / 17 / 2005

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)
C. Jim Ramstad Volunteer Cmte.

Mailing Address B120 Penn Ave., S., #156-A
322 Cannon House Ofc Bldg

City Bloomington State MN Zip Code 55431

Purpose of Disbursement

Candidate Name
Mr. Jim Ramstad

Office Sought: House
Senate
President
State: MN District 3

Disbursement For: 2006
 Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 22127323
Date of Disbursement

05 / 17 / 2005

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. Democratic Senatorial Campaign Committee

Mailing Address 430 South Capitol St., SE

City Washington State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Transaction ID: 22127304
Date of Disbursement
05 / 17 / 2005

Amount of Each Disbursement this Period
15000.00

Full Name (Last, First, Middle Initial)
B. Sue Kelly for Congress

Mailing Address 187 Jay St.
1037 Longworth HOB

City Katonah State NY Zip Code 10536

Purpose of Disbursement

Candidate Name
Ms. Sue Kelly

Office Sought: House Senate President State: NY District 19

Disbursement For: 2006
 Primary General Other (specify) ▼

011
Category/
Type

Transaction ID: 22127316
Date of Disbursement
05 / 17 / 2005

Amount of Each Disbursement this Period
1000.00

Full Name (Last, First, Middle Initial)
C. Friends of Don Sherwood

Mailing Address B1 Warren Street

City Tunkhannock State PA Zip Code 18657

Purpose of Disbursement

Candidate Name
Mr. Don Sherwood

Office Sought: House Senate President State: PA District 10

Disbursement For: 2006
 Primary General Other (specify) ▼

011
Category/
Type

Transaction ID: 22128175
Date of Disbursement
05 / 17 / 2005

Amount of Each Disbursement this Period
1500.00

SUBTOTAL of Disbursements This Page (optional) ▶ **17500.00**

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

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. Friends of Don Sherwood

Mailing Address 81 Warren Street

City Tunkhannock State PA Zip Code 18657

Purpose of Disbursement

Candidate Name
Mr. Don Sherwood

Office Sought: House
Senate
President
State: PA District 10

Disbursement For: 2006
 Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 22128378
Date of Disbursement

05 / 17 / 2005

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)
B. Heather Wilson for Congress

Mailing Address PO Box 14070

City Albuquerque State NM Zip Code 87101

Purpose of Disbursement

Candidate Name
Ms. Heather Wilson

Office Sought: House
Senate
President
State: NM District 1

Disbursement For: 2006
 Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 22128049
Date of Disbursement

05 / 17 / 2005

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)
C. Brown-Waite for Congress

Mailing Address 6135 Deltona Blvd.

City Spring Hill State FL Zip Code 34808

Purpose of Disbursement

Candidate Name
Ms. Ginny Brown-Waite

Office Sought: House
Senate
President
State: FL District 5

Disbursement For: 2006
 Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 22127920
Date of Disbursement

05 / 17 / 2005

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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

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

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

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(check only one)

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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jim Gerlach for Congress

Mailing Address 911 Welsh Ayres Way

City Downingtown State PA Zip Code 19335

Purpose of Disbursement

Candidate Name
Mr. James Gerlach

Office Sought: House Senate President
State: PA District 6

Disbursement For: 2006
 Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 22128468
Date of Disbursement
05 / 17 / 2005

Amount of Each Disbursement this Period
1000.00

B. Full Name (Last, First, Middle Initial)
John Sullivan for Congress

Mailing Address 5200 S. Howard St.

City Tulsa State OK Zip Code 74135

Purpose of Disbursement

Candidate Name
Cong. John Sullivan

Office Sought: House Senate President
State: OK District 1

Disbursement For: 2006
 Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 22128879
Date of Disbursement
05 / 17 / 2005

Amount of Each Disbursement this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Charlie Dent For Congress

Mailing Address PO Box 442

City Allentown State PA Zip Code 18105

Purpose of Disbursement

Candidate Name
Rep. Charles Dent

Office Sought: House Senate President
State: PA District 15

Disbursement For: 2006
 Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 22127922
Date of Disbursement
05 / 17 / 2005

Amount of Each Disbursement this Period
1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **3000.00**

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Phil PAC

Mailing Address 104 Hume Avenue

City Alexandria State VA Zip Code 22301

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Transaction ID: 22127314

Date of Disbursement

05 / 17 / 2005

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. DeWine for Congress Committee

Mailing Address 7849 Midday Lane

City Alexandria State VA Zip Code 22306

Purpose of Disbursement

Candidate Name

Pat DeWine

Office Sought: House Senate President
State: OH District 2

Disbursement For: 2006
 Primary General Other (specify) ▼

011
Category/
Type

Transaction ID: 22127856

Date of Disbursement

05 / 17 / 2005

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Mike Pence for Congress

Mailing Address 802 S. Anderson Street

City Elmwood State IN Zip Code 46036

Purpose of Disbursement

Candidate Name

Mr. Mike Pence

Office Sought: House Senate President
State: IN District 2

Disbursement For: 2006
 Primary General Other (specify) ▼

011
Category/
Type

Transaction ID: 22141768

Date of Disbursement

05 / 18 / 2005

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 35 / 39

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

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
Boozman For Congress

Mailing Address PO Box 671

City Rogers State AR Zip Code 72757

Purpose of Disbursement

Candidate Name
Rep. John Boozman

Office Sought: House Senate President
State: AR District 3

Disbursement For: 2006
 Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 22139233
Date of Disbursement
05 / 18 / 2005

Amount of Each Disbursement this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Santorum for Senate

Mailing Address P O Box 1049

City Pittsburgh State PA Zip Code 15234

Purpose of Disbursement

Candidate Name
Mr. Rick Santorum

Office Sought: House Senate President
State: PA District 2

Disbursement For: 2006
 Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 22157423
Date of Disbursement
05 / 19 / 2005

Amount of Each Disbursement this Period
4000.00

C. Full Name (Last, First, Middle Initial)
Santorum for Senate

Mailing Address P O Box 1049

City Pittsburgh State PA Zip Code 15234

Purpose of Disbursement

Candidate Name
Mr. Rick Santorum

Office Sought: House Senate President
State: PA District 2

Disbursement For: 2006
 Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 22157424
Date of Disbursement
05 / 19 / 2005

Amount of Each Disbursement this Period
5000.00

SUBTOTAL of Disbursements This Page (optional) ► **10000.00**

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

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. Cantor for Congress

Mailing Address PO Box 28537

City Richmond State VA Zip Code 23222

Purpose of Disbursement

Candidate Name
Mr. Eric Cantor

Office Sought: House Senate President
State: VA District 7

Disbursement For: 2006
 Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 22157420
Date of Disbursement
05 / 19 / 2005

Amount of Each Disbursement this Period
4000.00

Full Name (Last, First, Middle Initial)
B. Cantor for Congress

Mailing Address PO Box 28537

City Richmond State VA Zip Code 23222

Purpose of Disbursement

Candidate Name
Mr. Eric Cantor

Office Sought: House Senate President
State: VA District 7

Disbursement For: 2006
 Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 22157421
Date of Disbursement
05 / 19 / 2005

Amount of Each Disbursement this Period
5000.00

Full Name (Last, First, Middle Initial)
C. Congressman Phil Crane Committee

Mailing Address 1450 So. New Wilke, Suite 101

City Arlington Heights State IL Zip Code 60005

Purpose of Disbursement
Void - Congressman Phil Crane Committee

Candidate Name
Mr. Philip Crane

Office Sought: House Senate President
State: IL District 8

Disbursement For: 2004
 Primary General
 Other (specify) ▼
2004 General

011
Category/
Type

Transaction ID: 22174352
Date of Disbursement
05 / 25 / 2005

Amount of Each Disbursement this Period
-5000.00

Void - Congressman Phil Crane Committee

SUBTOTAL of Disbursements This Page (optional) ▶ **4000.00**

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

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. Richard E. Neal for Congress

Mailing Address 76 Magnolia Terrace

City Springfield State MA Zip Code 01108

Purpose of Disbursement
Void - Richard E. Neal for Congress

Candidate Name
Mr. Richard Neal

Office Sought: House Senate President
Disbursement For: 2004 Primary General
 Other (specify) ▼
2004 General

State: MA District: 2

011
Category/
Type

Transaction ID: 22174350
Date of Disbursement

05 / 25 / 2005

Amount of Each Disbursement this Period

-2500.00

Void - Richard E. Neal for Congress

Full Name (Last, First, Middle Initial)
B. Stenholm for Congress Cmte.

Mailing Address 227 Massachusetts Ave., NE
Ste. 101

City Washington State DC Zip Code 20002

Purpose of Disbursement
Void - Stenholm for Congress Cmte.

Candidate Name
Mr. Charles Stenholm

Office Sought: House Senate President
Disbursement For: 2004 Primary General
 Other (specify) ▼
2004 General

State: TX District: 17

011
Category/
Type

Transaction ID: 22174348
Date of Disbursement

05 / 25 / 2005

Amount of Each Disbursement this Period

-1000.00

Void - Stenholm for Congress Cmte.

Full Name (Last, First, Middle Initial)
C. Ryan For Congress

Mailing Address P.O. Box 2778

City Arlington State VA Zip Code 22202

Purpose of Disbursement
Void - Ryan For Congress

Candidate Name
Mr. Paul Ryan

Office Sought: House Senate President
Disbursement For: 2004 Primary General
 Other (specify) ▼
2004 General

State: WI District: 1

011
Category/
Type

Transaction ID: 22174342
Date of Disbursement

05 / 25 / 2005

Amount of Each Disbursement this Period

-1000.00

Void - Ryan For Congress

SUBTOTAL of Disbursements This Page (optional) ▶

-4500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mike Ross for Congress

Mailing Address 411 S. Victory #206

City Little Rock State AR Zip Code 72201

Purpose of Disbursement
Void - Mike Ross for Congress

Candidate Name
Mr. Mike Ross

Office Sought: House
 Senate
 President

State: AR District 4

Disbursement For: 2004
Primary General
 Other (specify) ▼
2004 General

011
Category/
Type

Transaction ID: 22174337

Date of Disbursement

05 / 25 / 2005

Amount of Each Disbursement this Period

-1000.00

Void - Mike Ross for Congress

Full Name (Last, First, Middle Initial)

B. Voinovich For Senate Committee

Mailing Address 865 Macon Alley

City Columbus State OH Zip Code 43206

Purpose of Disbursement
Void - Voinovich For Senate Committee

Candidate Name
Sen. George Voinovich

Office Sought: House
 Senate
 President

State: OH District 2

Disbursement For: 2004
Primary General
 Other (specify) ▼
2004 General

011
Category/
Type

Transaction ID: 22174340

Date of Disbursement

05 / 25 / 2005

Amount of Each Disbursement this Period

-1500.00

Void - Voinovich For Senate Committee

Full Name (Last, First, Middle Initial)

C. Case For Congress

Mailing Address PO Box 656

City Honolulu State HI Zip Code 96809

Purpose of Disbursement
Void - Case For Congress

Candidate Name
Rep. Ed Case

Office Sought: House
 Senate
 President

State: HI District 2

Disbursement For: 2004
Primary General
 Other (specify) ▼
2004 General

011
Category/
Type

Transaction ID: 22174347

Date of Disbursement

05 / 25 / 2005

Amount of Each Disbursement this Period

-5000.00

Void - Case For Congress

SUBTOTAL of Disbursements This Page (optional) ▶

-7500.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 39 / 39

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

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. National Leadership PAC

Mailing Address 127 4th St. SE, Suite C

City Washington State DC Zip Code 20003

Purpose of Disbursement
Void - National Leadership PAC

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Transaction ID: 22174351

Date of Disbursement

05 / 25 / 2005

Amount of Each Disbursement this Period

-1000.00

Void - National Leadership
PAC

SUBTOTAL of Disbursements This Page (optional) ▶

-1000.00

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

49000.00