

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 Seniors Housing Association (Seniors Housing PAC)

ADDRESS (number and street) 5100 Wisconsin Ave., NW
Suite 307
 Check if different than previously reported. (ACC)
Washington DC 20016

2. **FEC IDENTIFICATION NUMBER** C00325332
3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 09 01 2009 through 09 30 2009

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

Type or Print Name of Treasurer David Schless

Signature of Treasurer Electronically Filed by David Schless Date 03 15 2010

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									
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
American Seniors Housing Association (Seniors Housing PAC)

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		641568.36
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	804303.86									
(c) Total Receipts (from Line 19)	40365.00	325601.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	844668.86	967169.36								
7. Total Disbursements (from Line 31)	13862.00	136362.50								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	830806.86	830806.86								
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**

Write or Type Committee Name

American Seniors Housing Association (Seniors Housing PAC)

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	9

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)	39100.00	305850.00
(ii) Unitemized	1265.00	16751.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	40365.00	322601.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	3000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	40365.00	325601.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	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))	40365.00	325601.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	40365.00	325601.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	0.00	9317.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	9317.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	13000.00	125500.00
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	100.00	525.00
(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))	100.00	525.00
29. Other Disbursements.....	762.00	1020.50
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	13862.00	136362.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	13862.00	136362.50

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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	40365.00	325601.00
34. Total Contribution Refunds (from Line 28(d))	100.00	525.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	40265.00	325076.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	9317.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	9317.00

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

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

FOR LINE NUMBER: PAGE 6 / 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
American Seniors Housing Association (Seniors Housing PAC)

A. Full Name (Last, First, Middle Initial)
Brad W. Frasher

Mailing Address 401 S. Fourth St.
Suite 1900

City State Zip Code
Louisville KY 40202-3426

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

Name of Employer Occupation
Atria Senior Living Group VP, Business Analysis

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
09 / 01 / 2009

Transaction ID: 31357297

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Kelly Lee Lanham

Mailing Address 401 S. Fourth St.
Suite 1900

City State Zip Code
Louisville KY 40202-3426

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

Name of Employer Occupation
Atria Senior Living Group Chief Accounting Officer

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
09 / 01 / 2009

Transaction ID: 31357298

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Bryan Hudson

Mailing Address 401 S. Fourth St.
Suite 1900

City State Zip Code
Louisville KY 40202-3426

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

Name of Employer Occupation
Atria Senior Living Group SVP & General Counsel

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
09 / 01 / 2009

Transaction ID: 31357299

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional) ► 900.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Seniors Housing Association (Seniors Housing PAC)

<p>A. Full Name (Last, First, Middle Initial) Sheela S. Frisch</p> <p>Mailing Address 401 S. Fourth St. Suite 1900</p> <p>City State Zip Code Louisville KY 40202-3426</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Atria Senior Living Group Sr. VP</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2009</p> <p>Transaction ID: 31357300</p> <p>Amount of Each Receipt this Period 250.00</p>
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<p>B. Full Name (Last, First, Middle Initial) Doug W. Owens</p> <p>Mailing Address 401 S. Fourth St. Suite 1900</p> <p>City State Zip Code Louisville KY 40202-3426</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Atria Senior Living Group Chief Technology Officer</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2009</p> <p>Transaction ID: 31357301</p> <p>Amount of Each Receipt this Period 250.00</p>
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<p>C. Full Name (Last, First, Middle Initial) Brenda J Bacon</p> <p>Mailing Address 525 Fellowship Rd. Suite 360</p> <p>City State Zip Code Mount Laurel NJ 08054-3415</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Brandywine Senior Living President and CEO</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 2000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2009</p> <p>Transaction ID: 31357305</p> <p>Amount of Each Receipt this Period 2000.00</p>
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SUBTOTAL of Receipts This Page (optional)	2500.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 21
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Seniors Housing Association (Seniors Housing PAC)

A.	Full Name (Last, First, Middle Initial) Stephen J. Levy	Date of Receipt MM / DD / YYYY 09 / 01 / 2009
	Mailing Address 111 E. Wacker Drive Suite 2200	Transaction ID: 31357306
	City Chicago State IL Zip Code 60601-3757	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Senior Lifestyle Corporation Occupation General Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00	

B.	Full Name (Last, First, Middle Initial) Anne C. Pinter	Date of Receipt MM / DD / YYYY 09 / 01 / 2009
	Mailing Address 401 S. 4th St. Suite 1900	Transaction ID: 31357307
	City Louisville State KY Zip Code 40202-3426	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Atria Senior Living Group Occupation VP, Human Resources Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Jerry L. Doctrow	Date of Receipt MM / DD / YYYY 09 / 01 / 2009
	Mailing Address 1 South Street	Transaction ID: 31357308
	City Baltimore State MD Zip Code 21202-3298	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Stifel Nicolaus & Company, Inc. Occupation Managing Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	3250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 21
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Seniors Housing Association (Seniors Housing PAC)

A. Full Name (Last, First, Middle Initial)
Mark J. Schulte

Mailing Address 23398 Chesapeake Dr.

City State Zip Code
Lake Barrington IL 60010-1973

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Brookdale Senior Living, Inc. Vice Chairman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt MM / DD / YYYY
09 / 01 / 2009

Transaction ID: 31357309

Amount of Each Receipt this Period 3000.00

B. Full Name (Last, First, Middle Initial)
Sherry E Rhodes

Mailing Address 45 Canterbury Lane

City State Zip Code
Eads TN 38028-3567

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Atria Senior Living Group Sr. VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt MM / DD / YYYY
09 / 11 / 2009

Transaction ID: 31501431

Amount of Each Receipt this Period 400.00

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

Mailing Address 401 S. Fourth St.
Suite 1900

City State Zip Code
Louisville KY 40202-3426

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Atria Senior Living Group CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt MM / DD / YYYY
09 / 11 / 2009

Transaction ID: 31501432

Amount of Each Receipt this Period 3000.00

SUBTOTAL of Receipts This Page (optional) 6400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 21
	<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 Seniors Housing Association (Seniors Housing PAC)

A.	Full Name (Last, First, Middle Initial) Michael A. Mejia		Date of Receipt MM / DD / YYYY 09 / 11 / 2009		
	Mailing Address 3511 Rive Bend Dr.		Transaction ID: 31501433		
	City Rosenberg	State TX	Zip Code 77471-4469	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 250.00		
	Name of Employer Atria Senior Living Group		Occupation Sr. VP		

B.	Full Name (Last, First, Middle Initial) Andy S. Kohlberg		Date of Receipt MM / DD / YYYY 09 / 11 / 2009		
	Mailing Address 5790 Fleet St. Suite 300		Transaction ID: 31501434		
	City Carlsbad	State CA	Zip Code 92008-4703	Amount of Each Receipt this Period 2000.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 2000.00		
	Name of Employer Kisco Senior Living, LLC		Occupation President & CEO		

C.	Full Name (Last, First, Middle Initial) Loren B. Shook		Date of Receipt MM / DD / YYYY 09 / 11 / 2009		
	Mailing Address 27123 Calle Arroyo		Transaction ID: 31501435		
	City San Juan Capistran	State CA	Zip Code 92675-2763	Amount of Each Receipt this Period 2000.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 2000.00		
	Name of Employer Silverado Senior Living		Occupation President & CEO		

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 21		
	<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

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NAME OF COMMITTEE (In Full)
American Seniors Housing Association (Seniors Housing PAC)

A.	Full Name (Last, First, Middle Initial) Tom W. Danker	Date of Receipt MM / DD / YYYY 09 / 15 / 2009
	Mailing Address 111 E. Wacker Dr. Suite 2200	Transaction ID: 31517039
	City Chicago State IL Zip Code 60601-3757	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Senior Lifestyle Corporation Occupation CFO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 2000.00	

B.	Full Name (Last, First, Middle Initial) Stan Shuster	Date of Receipt MM / DD / YYYY 09 / 15 / 2009
	Mailing Address 772 La Canada	Transaction ID: 31517040
	City La Jolla State CA Zip Code 92037-6724	Amount of Each Receipt this Period 3000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer The Shuster Companies Occupation Chairman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 3000.00	

C.	Full Name (Last, First, Middle Initial) Mark Jessee	Date of Receipt MM / DD / YYYY 09 / 15 / 2009
	Mailing Address 401 S. Fourth St. Suite 1900	Transaction ID: 31517041
	City Louisville State KY Zip Code 40202-3426	Amount of Each Receipt this Period 650.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Atria Senior Living Group Occupation CFO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 650.00	

SUBTOTAL of Receipts This Page (optional)	5650.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

A.

Full Name (Last, First, Middle Initial)

Rick Wigginton

Mailing Address 401 S. Fourth St.
Suite 1900

City State Zip Code
Louisville KY 40202-3426

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

Name of Employer Occupation
Atria Senior Living Group

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2009

Transaction ID: 31517042

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Julie C. Harding

Mailing Address 401 S. Fourth St.
Suite 1900

City State Zip Code
Louisville KY 40202-3426

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

Name of Employer Occupation
Atria Senior Living Group COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2009

Transaction ID: 31517043

Amount of Each Receipt this Period

650.00

C.

Full Name (Last, First, Middle Initial)

Danny C. McCoy

Mailing Address 2102 Kensington Dr.

City State Zip Code
Tyler TX 75703-2232

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

Name of Employer Occupation
Atria Senior Living Group Sr. VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2009

Transaction ID: 31517047

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)

1350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 21
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Seniors Housing Association (Seniors Housing PAC)

A.

Full Name (Last, First, Middle Initial)
Douglas A. Korey

Mailing Address 1040 Broad St.
Suite 3B

City Shrewsbury State NJ Zip Code 07702-4331

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

Name of Employer Contemporary Healthcare Capital, LLC Occupation Managing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
09 / 15 / 2009

Transaction ID: 31517049

Amount of Each Receipt this Period
2500.00

B.

Full Name (Last, First, Middle Initial)
John W. Dark

Mailing Address Two Ravinia Dr.
Suite 400

City Atlanta State GA Zip Code 30346-2104

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

Name of Employer Prudential Real Estate Investors Occupation Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
09 / 15 / 2009

Transaction ID: 31517050

Amount of Each Receipt this Period
2000.00

C.

Full Name (Last, First, Middle Initial)
Mel A Gamzon

Mailing Address 1230 East Lake Drive
Suite 1380

City Fort Lauderdale State FL Zip Code 33316

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

Name of Employer Senior Housing Investment Advisors, In Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
09 / 21 / 2009

Transaction ID: 31582063

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional) ► **6500.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 21
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Seniors Housing Association (Seniors Housing PAC)

A.

Full Name (Last, First, Middle Initial) Melissa W. Hilton		Date of Receipt MM / DD / YYYY 09 / 21 / 2009
Mailing Address 1001 Pennsylvania Ave, NW Suite 220 South		Transaction ID: 31582064
City Washington	State Zip Code DC 20004-2502	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer CSH, LLC	Occupation Associate	Aggregate Year-to-Date 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Justin I. Robins		Date of Receipt MM / DD / YYYY 09 / 21 / 2009
Mailing Address 111 E. Wacker Drive Suite 2200		Transaction ID: 31582067
City Chicago	State Zip Code IL 60601-3757	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Senior Lifestyle Corporat- ion	Occupation Director of Development	Aggregate Year-to-Date 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) Adam J. Kaplan		Date of Receipt MM / DD / YYYY 09 / 21 / 2009
Mailing Address 111 E. Wacker Dr. Suite 2200		Transaction ID: 31582112
City Chicago	State Zip Code IL 60601-3757	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Senior Lifestyle Corporat- ion	Occupation Operations Specialist	Aggregate Year-to-Date 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 21
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Seniors Housing Association (Seniors Housing PAC)

A.

Full Name (Last, First, Middle Initial)
Teresa L Fay

Mailing Address 111 E. Wacker Drive
Suite 2200

City Chicago State IL Zip Code 60601-3757

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

Name of Employer Senior Lifestyle Corporation Occupation Director of Resident Programs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2009
Transaction ID: 31582113
Amount of Each Receipt this Period 250.00

B.

Full Name (Last, First, Middle Initial)
William P. Blouin

Mailing Address 111 E. Wacker Drive
Suite 2200

City Chicago State IL Zip Code 60601-3757

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

Name of Employer Senior Lifestyle Corporation Occupation VP, Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 21 / 2009
Transaction ID: 31582114
Amount of Each Receipt this Period 300.00

C.

Full Name (Last, First, Middle Initial)
Robert M. Gawronski

Mailing Address 111 E. Wacker Drive
Suite 2200

City Chicago State IL Zip Code 60601-3757

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

Name of Employer Senior Lifestyle Corporation Occupation Vice President, Development & Acquisition

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 21 / 2009
Transaction ID: 31582161
Amount of Each Receipt this Period 750.00

SUBTOTAL of Receipts This Page (optional) ► 1300.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 / 21
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Seniors Housing Association (Seniors Housing PAC)

A.	Full Name (Last, First, Middle Initial) Jerrold H. Frumm	Date of Receipt MM / DD / YYYY 09 / 21 / 2009
	Mailing Address 111 E. Wacker Drive Suite 2200	Transaction ID: 31582162
	City Chicago State IL Zip Code 60601	Amount of Each Receipt this Period 3000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Senior Lifestyle Corporation Occupation Executive Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3000.00	

B.	Full Name (Last, First, Middle Initial) Keven J. Bennema	Date of Receipt MM / DD / YYYY 09 / 21 / 2009
	Mailing Address 111 E. Wacker Dr. Suite 2200	Transaction ID: 31582163
	City Chicago State IL Zip Code 60601-3757	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Senior Lifestyle Corporation Occupation SVP Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00	

C.	Full Name (Last, First, Middle Initial) James B. Klutznick	Date of Receipt MM / DD / YYYY 09 / 21 / 2009
	Mailing Address 111 E. Wacker Drive Suite 2200	Transaction ID: 31582164
	City Chicago State IL Zip Code 60601-3757	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Senior Lifestyle Corporation Occupation Vice Chairman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	6000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 17 / 21	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 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 Seniors Housing Association (Seniors Housing PAC)

A.	Full Name (Last, First, Middle Initial) Carolyn A. Todd		Date of Receipt	
	Mailing Address 500 Stevens Ave. Suite 100		M M / D D / Y Y Y Y 09 / 03 / 2009	
	City	State	Zip Code	Transaction ID: 33964154
	Solana Beach	CA	92075-2055	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		C	0.00
	Name of Employer Senior Resource Group		Occupation Director of HR	[MEMO ITEM] Refund(s) on Schedule B Totaling \$100.00 This changes the YTD Total to \$0.-00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	0.00
TOTAL This Period (last page this line number only)	39100.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 18 / 21

<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 Seniors Housing Association (Seniors Housing PAC)

<p>A. Full Name (Last, First, Middle Initial) Continuing a Majority PAC/CAMPAC</p> <p>Mailing Address 2501 Wisconsin Ave, NW Suite 304</p> <p>City Washington State DC Zip Code 20007</p> <p>Purpose of Disbursement 011 Category/ Type</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 31516289 Date of Disbursement 09 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Ben Cardin For Senate</p> <p>Mailing Address P.O. Box 21093</p> <p>City Catonsville State MD Zip Code 21228</p> <p>Purpose of Disbursement 011 Category/ Type</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: MD District:</p>	<p>Transaction ID: 31516291 Date of Disbursement 09 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Kirk For Senate</p> <p>Mailing Address P.O. Box 8</p> <p>City Winnetka State IL Zip Code 60093</p> <p>Purpose of Disbursement 011 Category/ Type</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: IL District: 10</p>	<p>Transaction ID: 31522536 Date of Disbursement 09 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>

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)

<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 Seniors Housing Association (Seniors Housing PAC)

A.	Full Name (Last, First, Middle Initial) Friends Of Roy Blunt Mailing Address 209 Pennsylvania Ave, SE City Washington State DC Zip Code 20003 Purpose of Disbursement 011 Candidate Name Mr. Roy Blunt Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MO District:	Transaction ID: 31523500 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 6 / 2 0 0 9	Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) Friends Of Byron Dorgan Mailing Address 420 C St. NE City Washington State DC Zip Code 20002 Purpose of Disbursement 011 Candidate Name Sen. Byron Dorgan Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: ND District:	Transaction ID: 31725880 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 9	Amount of Each Disbursement this Period 1000.00
C.	Full Name (Last, First, Middle Initial) Coburn For Senate 2010 Mailing Address 217 Third St. SE City Washington State DC Zip Code 20003 Purpose of Disbursement 011 Candidate Name Sen. Thomas Coburn, M.D. Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OK District:	Transaction ID: 31725881 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 9	Amount of Each Disbursement this Period 3000.00

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

FOR LINE NUMBER:
(check only one)

PAGE 20 / 21

<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 Seniors Housing Association (Seniors Housing PAC)

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

Mailing Address P O Box 15906

City State Zip Code
Chevy Chase MD 20825

Purpose of Disbursement

Category/
Type

Candidate Name
Rep. Richard E. Neal

Office Sought: House Senate President
Disbursement For: 2010 Primary General
State: MA District: 02 Other (specify) ▼

Transaction ID: 31725883

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
Carper For Senate

Mailing Address 19 East Commons Blvd Second Floor

City State Zip Code
New Castle DE 19720

Purpose of Disbursement

Category/
Type

Candidate Name
Sen. Thomas R. Carper

Office Sought: House Senate President
Disbursement For: 2012 Primary General
State: DE District: Other (specify) ▼

Transaction ID: 31725884

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

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 21 / 21

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

A.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 5201 Wisconsin Avenue

City Washington State DC Zip Code 20015

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: 32852684

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2009

Amount of Each Disbursement this Period

750.00

001
Category/
Type

SUBTOTAL of Disbursements This Page (optional) ▶

750.00

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

750.00