

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

American Seniors Housing Association (Seniors Housing PAC)

ADDRESS (number and street) ▼

5225 Wisconsin Ave., NW

Suite 502

☐ Check if different than previously reported. (ACC)

Washington

DC

20015

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 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
Year-End 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 (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

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

David Schless

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

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. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American Seniors Housing Association (Seniors Housing PAC)

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
05 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y
05 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015		851520.26
(b) Cash on Hand at Beginning of Reporting Period.....	952951.26	
(c) Total Receipts (from Line 19)	35013.00	187468.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	987964.26	1038988.26
7. Total Disbursements (from Line 31)	38000.00	89024.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	949964.26	949964.26
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

American Seniors Housing Association (Seniors Housing PAC)

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
05 01 2015

To:

M M / D D / Y Y Y Y Y
05 31 2015
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).....

33750.00

174450.00

(ii) Unitemized

1263.00

8018.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

35013.00

182468.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

5000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

35013.00

187468.00

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 Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

35013.00

187468.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

35013.00

187468.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	38000.00	89000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	24.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	38000.00	89024.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	38000.00	89024.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	35013.00	187468.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	35013.00	187468.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0.00	0.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: F3XA
Transaction ID :

Add Allocation JFC transaction for Boehner for Speaker

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 17

<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)

Full Name (Last, First, Middle Initial)

A. Avi Lev

Mailing Address 1750 East Golf Road

City

Schaumburg

State

IL

Zip Code

60173-5835

FEC ID number of contributing
federal political committee.

C

Name of Employer

Assurance Agency

Occupation

Vice President

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	1	5

Transaction ID : 65585758

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Fred MoonMailing Address 1275 Pennsylvania Avenue, NW
2nd Floor

City

Washington

State

DC

Zip Code

20004-2428

FEC ID number of contributing
federal political committee.

C

Name of Employer

Capitol Seniors Housing

Occupation

Principal, Acquisitions

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	1	5

Transaction ID : 65585760

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Jason DopoulosMailing Address 620 Newport Center Drive
Suite 690

City

Newport Beach

State

CA

Zip Code

92660-8057

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lancaster Pollard

Occupation

Vice President

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	1	5

Transaction ID : 65837572

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional)..... ►

5000.00

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)

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

Full Name (Last, First, Middle Initial)

A. Patrick F. Kennedy

Mailing Address 111 3rd Ave.
Suite 3400

City State Zip Code
Seattle WA 98104-2605

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hawthorn Retirement Group LLC

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 19 / 2015

Transaction ID : 65837573

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Allison A. Holland

Mailing Address 8115 Preston Rd.
Suite 500

City State Zip Code
Dallas TX 75225-6334

FEC ID number of contributing
federal political committee.

C

Name of Employer

Key Bank Real Estate Capital

Occupation

SVP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 19 / 2015

Transaction ID : 65837574

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Kathryn M. Burton-Gray

Mailing Address 500 Newport Center Dr.
Suite 930

City State Zip Code
Newport Beach CA 92660-7018

FEC ID number of contributing
federal political committee.

C

Name of Employer

Red Capital Group

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 19 / 2015

Transaction ID : 65837575

Amount of Each Receipt this Period

3000.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

10000.00

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

Full Name (Last, First, Middle Initial)

A. Noah R. Levy

Mailing Address 7 Giralda Farms
4th Floor

City Madison State NJ Zip Code 07940-1051

FEC ID number of contributing federal political committee.

C

Name of Employer
Prudential Real Estate Investors

Occupation
Managing Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

05 / 19 / 2015

Transaction ID : 65837576

Amount of Each Receipt this Period

3000.00

Full Name (Last, First, Middle Initial)

B. Alice Katz

Mailing Address 10461 Mill Run Circle
Suite 215

City Owings Mills State MD Zip Code 21117-5553

FEC ID number of contributing federal political committee.

C

Name of Employer
The Vinca Group LLC

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 19 / 2015

Transaction ID : 65837630

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

c. Debra A. Cafaro

Mailing Address 353 N. Clark St.
Suite 3300

City Chicago State IL Zip Code 60654-4708

FEC ID number of contributing federal political committee.

C

Name of Employer
Ventas Healthcare Properties

Occupation
CEO, Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

05 / 19 / 2015

Transaction ID : 65837631

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

9000.00

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

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

Full Name (Last, First, Middle Initial)

A. Kelly N. Meissner

Mailing Address 353 North Clark St.
Suite 3300

City State Zip Code
Chicago IL 60654-4708

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ventas Healthcare Properties Inc.

Occupation
Manager, Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 19 / 2015

Transaction ID : 65837632

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Matthew Robinson

Mailing Address 3710 N. Greenview Avenue

City State Zip Code
Chicago IL 60613-3610

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ventas Healthcare Properties, Inc.

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 19 / 2015

Transaction ID : 65837633

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Ankit Patel

Mailing Address 353 N. Clark St.
Suite 3300

City State Zip Code
Chicago IL 60654-4708

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ventas Healthcare Properties Inc.

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 19 / 2015

Transaction ID : 65837635

Amount of Each Receipt this Period

750.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

1750.00

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

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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

Full Name (Last, First, Middle Initial)

A. Jordyn Berger

Mailing Address 353 N Clark Street
Suite 3300

City State Zip Code
Chicago IL 60654-4708

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ventas Healthcare Properties, Inc.

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 19 / 2015

Transaction ID : 65837636

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Chris N. Cummings

Mailing Address 10350 Ormsby Park Place
Suite 300

City State Zip Code
Louisville KY 40223-6178

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ventas Healthcare Properties, Inc.

Occupation
VP, Asset Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

05 / 19 / 2015

Transaction ID : 65837637

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

C. Nicholas W. Jacoby

Mailing Address 2050 Main St.
Suite 800

City State Zip Code
Irvine CA 92614-8260

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ventas Healthcare Properties, Inc.

Occupation
VP, Asset Mgt.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

05 / 19 / 2015

Transaction ID : 65837638

Amount of Each Receipt this Period

750.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

1750.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

Full Name (Last, First, Middle Initial)

A. Thomas S. Blasco

Mailing Address 353 North Clark St.
Suite 3300

City State Zip Code
Chicago IL 60654-4708

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ventas Healthcare Properties, Inc.

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
05 / 19 / 2015

Transaction ID : 65837639

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Tim Sanders

Mailing Address 1910 Towne Center Blvd., Suite 250

City State Zip Code
Annapolis MD 21401-3599

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ventas Healthcare Properties Inc.

Occupation
Senior Investment Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

MM / DD / YYYY
05 / 19 / 2015

Transaction ID : 65837642

Amount of Each Receipt this Period

3000.00

Full Name (Last, First, Middle Initial)

C. Kyle M Henderson

Mailing Address 1275 Pennsylvania Avenue, NW
2nd Floor

City State Zip Code
Washington DC 20004-2428

FEC ID number of contributing
federal political committee.

C

Name of Employer
Capitol Seniors Housing

Occupation
Principal - Asset Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
05 / 22 / 2015

Transaction ID : 65855780

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

3750.00

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)

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

Full Name (Last, First, Middle Initial)

A. David N. Barnes

Mailing Address 2020 W. Rudasill Road

City Tucson State AZ Zip Code 85704-7800

FEC ID number of contributing federal political committee.

C

Name of Employer
Watermark Retirement Communities

Occupation
President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2015

Transaction ID : 65855799

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

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

2500.00

33750.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 17

<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)

Full Name (Last, First, Middle Initial)

A. Ben Cardin For Senate

Mailing Address P.O. Box 21093

City	State	Zip Code
Catonsville	MD	21228

Purpose of Disbursement

011

Candidate Name

Mr. Benjamin Cardin

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: MD District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2015

Transaction ID : 65593769

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Van Hollen For Congress

Mailing Address 10537 St. Paul Street

City	State	Zip Code
Kensington	MD	20895

Purpose of Disbursement

011

Candidate Name

Rep. Chris Van Hollen

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: MD District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2015

Transaction ID : 65593771

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Vern Buchanan For Congress

Mailing Address P. O. Box 48928

City	State	Zip Code
Sarasota	FL	34230

Purpose of Disbursement

011

Candidate Name

Rep. Vern Buchanan

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2015

Transaction ID : 65649814

Amount of Each Disbursement this Period

5000.00

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

7000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR 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 Seniors Housing Association (Seniors Housing PAC)

Full Name (Last, First, Middle Initial)

A. Hatch Election Committee Inc

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		28		2015

Mailing Address P O Box 1480

City	State	Zip Code
Washington	DC	20013

Purpose of Disbursement

011

Transaction ID : 66010473

Amount of Each Disbursement this Period

1000.00

Candidate Name

Sen. Orrin HatchCategory/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: UT

District:

Full Name (Last, First, Middle Initial)

B. Tom Reed For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		28		2015

Mailing Address PO Box 450

City	State	Zip Code
Victor	NY	14564

Purpose of Disbursement

011

Transaction ID : 66011828

Amount of Each Disbursement this Period

5000.00

Candidate Name

Rep. Tom ReedCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 29

Full Name (Last, First, Middle Initial)

C. Grassley Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		28		2015

Mailing Address P. O. Box 1000

City	State	Zip Code
Des Moines	IA	50304

Purpose of Disbursement

011

Transaction ID : 66012663

Amount of Each Disbursement this Period

2500.00

Candidate Name

Charles GrassleyCategory/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: IA

District:

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

8500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR 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 Seniors Housing Association (Seniors Housing PAC)

Full Name (Last, First, Middle Initial)

A. Kline For CongressMailing Address 101 W Burnsville Pkwy Suite 104
Suite 104

City Burnsville State MN Zip Code 55337

Purpose of Disbursement

Candidate Name

Rep. John KlineOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2015

Transaction ID : 66013798

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Friends Of Sam Johnson

Mailing Address 1611 Avenue K

City Plano State TX Zip Code 75074

Purpose of Disbursement

Candidate Name

Rep. Samuel Robert JohnsonOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: TX District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2015

Transaction ID : 66014659

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Boehner for Speaker

Mailing Address 320 First St. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Allocated to Friends of John Boehner

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2015

Transaction ID : 66015493

Amount of Each Disbursement this Period

5000.00

Allocated to Friends of John Boehner

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

15000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR 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 Seniors Housing Association (Seniors Housing PAC)

Full Name (Last, First, Middle Initial)

A. Grassley Committee

Mailing Address P. O. Box 1000

City	State	Zip Code
Des Moines	IA	50304

Purpose of Disbursement

011

Candidate Name

Charles Grassley

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2015
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: IA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2015

Transaction ID : 66023534

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Adrian Smith For CongressMailing Address 3321 Avenue I
Suite 6

City	State	Zip Code
Scottsbluff	NE	69361

Purpose of Disbursement

011

Candidate Name

Rep. Adrian Smith

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NE District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2015

Transaction ID : 66023826

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Category/
Type

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) ▼

State: District:

Date of Disbursement

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

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SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7500.00

38000.00