Image# 13962213924 PAGE 1 / 18

## FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

		Authorized Col			Office Use Only			
1. NAME OF TO COMMITTEE (in full)	YPE OR PRINT ▼	Example: over the	If typing, type ines.	12FE4M5				
American Seniors Housi	ing Association	(Seniors Hous	ing PAC)					
ADDRESS (number and street)	5225 Wisconsin Ave., I	NW						
Check if different	Suite 502							
than previously reported. (ACC)	Washington	DC 20015 - L						
2. FEC IDENTIFICATION NUM	IBER ▼	CITY 🛦		STATE ▲	ZIP CODE ▲			
C C00325332		3. IS THIS REPORT	× NEW OF		MENDED			
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)	➤ May 20 (M	5) Aug	20 (M8) Nov 20 (M11) (Non-Election Year Only)			
(a) Quarterly Reports:	Due on.	Mar 20 (M3)	Jun 20 (M6		20 (M9) Dec 20 (M12) (Non-Election Year Only)			
April 15 Quarterly Report (Q1)		Apr 20 (M4)	Jul 20 (M7)		20 (M10) Jan 31 (YE)			
July 15 Quarterly Report (Q2)	(c) 12-Day  PRE-Election  Report for the	n 📙	ry (12P) ention (12C)	General Special (				
October 15 Quarterly Report (Q3)		out out		Openial (				
January 31 Year-End Report (YE)	, <u> </u>	lection on	M / D D	Y	in the State of			
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day  POST-Electi  Report for the		ral (30G)	Runoff (3	Special (30S)			
Termination Report (TER)	·	lection on	M / D = D /	Y Y Y Y Y	in the State of			
5. Covering Period 04		013 thr	ough 04	M / D D /	2013			
I certify that I have examined this	Report and to the be	st of my knowledge	e and belief it is	true, correct and	d complete.			
Type or Print Name of Treasurer	David Schless							
Signature of Treasurer David S	chless	[Elect	ronically Filed]	Date 05	14 / 2013			
NOTE: Submission of false, erroneo	us, or incomplete inforr	mation may subject	the person signing	this Report to the	ne 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)

2013 04 30 Report Covering the Period: 2013 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 880341.26 January 1, 2013 (b) Cash on Hand at 925361.26 Beginning of Reporting Period..... 138670.00 51650.00 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 977011.26 1019011.26 6(a) and 6(c) for Column B)..... 39500.00 81500.00 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 937511.26 937511.26 (subtract Line 7 from Line 6(d)).....

Debts and Obligations Owed **TO**the Committee (Itemize all on
Schedule C and/or Schedule D) ......

Debts and Obligations Owed BY
 the Committee (Itemize all on Schedule C and/or Schedule D) ......



×

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

#### For further information contact:

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

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

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

# American Seniors Housing Association (Seniors Housing PAC)

I. Receipts	I. Receipts COLUMN A Total This Period						
. Contributions (other than loans) From:							
(a) Individuals/Persons Other							
Than Political Committees		101050.00					
(i) Itemized (use Schedule A)	44850.00	121850.00					
(ii) Unitemized	, 1800.00	6820.00					
(iii) TOTAL (add Lines 11(a)(i) and (ii)▶	, 46650.00	128670.00					
(b) Political Party Committees	0.00	0.00					
(c) Other Political Committees	5000.00	10000.00					
(such as PACs)	5000.00	10000.00					
(d) Total Contributions (add Lines							
11(a)(iii), (b), and (c)) (Carry							
Totals to Line 33, page 5)▶	51650.00	138670.00					
. Transfers From Affiliated/Other							
Party Committees	0.00	0.00					
-							
. All Loans Received	0.00	0.00					
Loan Repayments Received	0.00	0.00					
. Offsets To Operating Expenditures	7						
(Refunds, Rebates, etc.)							
(Carry Totals to Line 37, page 5)	0.00	0.00					
Refunds of Contributions Made	7	5.55					
to Federal Candidates and Other							
Political Committees	0.00	0.00					
	0.00	0.00					
Other Federal Receipts	0.00	0.00					
(Dividends, Interest, etc.)	0.00	0.00					
(a) Non-Federal Account	0.00	2.00					
(from Schedule H3)	0.00	0.00					
	222						
(b) Levin Funds (from Schedule H5)	0.00	0.00					
() (	222						
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00					
Total Pagaints (add Lines 11/d)							
. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	51650.00	138670.00					
12, 10, 17, 10, 10, 17, and 10(0))	31030.00	100070.00					
. Total Federal Receipts							
(subtract Line 18(c) from Line 19)▶	51650.00	138670.00					

#### **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
1.	Operating Expenditures:  (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		July Italia
	(i) Federal Share	0.00	0.00
	··	0.00	0.00
	(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00
	Expenditures	0.00	0.00
	(c) Total Operating Expenditures		
	(add 21(a)(i), (a)(ii), and (b))▶	0.00	0.00
	Transfers to Affiliated/Other Party Committees	0.00	0.00
	Contributions to Federal Candidates/Committees and Other Political Committees	39500.00	76500.00
	Independent Expenditures		
	(use Schedule E)	0.00	0.00
	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
	Refunds of Contributions To:  (a) Individuals/Persons Other Than Political Committees	0.00	5000.00
	(b) Political Party Committees	0.00	0.00
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶	0.00	5000.00
	Other Disbursements	0.00	0.00
	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	· ·		0.00
	(ii) "Levin" Share(b) Federal Election Activity Paid Entirely	0.00	0.00
	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
	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	39500.00	04500.00
	25, 21, 25, 27, 25(d), 25 and 55(6))	33300.00	81500.00
	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	39500.00	81500.00

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) III. Net Contributions/Operating Ex-

penditures

(from Line 11(d), page 3) .....

(from Line 28(d)).....

(subtract Line 34 from Line 33) .....

(add Line 21(a)(i) and Line 21(b)) ........▶

(from Line 15, page 3).....

(subtract Line 37 from Line 36) .....

33. Total Contributions (other than loans)

35. Net Contributions (other than loans)

36. Total Federal Operating Expenditures

37. Offsets to Operating Expenditures

38. Net Operating Expenditures

34. Total Contribution Refunds

Page 5 **COLUMN A** COLUMN B **Total This Period** Calendar Year-to-Date 51650.00 138670.00 5000.00 0.00 51650.00 133670.00 0.00 0.00 0.00 0.00 0.00 0.00

FF	64	NO	126	

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

	LINE	_		:	PAGE	6	OF	18
(che	ck only	or	ne)					
X	11a		11b		11c	12	!	
	13		14		15	16	;	17

	Statements may not be sold or used by any person e name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
, ,	ociation (Seniors Housing PAC)	
Full Name (Last, First, Middle Initial)  Donald O Thompson Jr.		Date of Receipt
Mailing Address 10706 Sikes Place		M M / D D / Y Y Y Y
Suite 150		04 17 2013
City	State Zip Code	Transaction ID : 50832219
Charlotte	NC 28277-8140	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5000.00
Name of Employer	Occupation	
Senior Living Communities	President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	5000.00	
Full Name (Last, First, Middle Initial)  John J Durso		Date of Receipt
Mailing Address Three First National Plaza		M = M / D = D / Y = Y = Y
70 West Madison St-Suite 35		04 17 2013
Chicago	State Zip Code	Transaction ID : 50832220
Chicago	IL 60602-5008	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2000.00
Name of Employer	Occupation	
Ungaretti & Harris	Partner	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	2000.00	
Full Name (Last, First, Middle Initial)		
C. Lawrence A Cohen		Date of Receipt
Mailing Address 300 Park Avenue Suite 1700		04 17 2013
City	State Zip Code	Transaction ID: 50832221
New York	NY 10022-7402	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	3000.00
Name of Employer	Occupation	
Capital Senior Living Corporation	CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	Aggregate real-to-Date ▼	
Other (specify) ▼	3000.00	
SUBTOTAL of Receipts This Page (optional)		10000.00
TOTAL This Period (last page this line number	only)	

Use separate schedule(s)

FOF	R LINE	NU	MBER	:	PAGE	7	OF	18	
(che	ck only	or	ne)						
X	11a		11b		11c	12			
	13		14		15	16	,	17	

for each category of the **Detailed Summary Page** 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) Full Name (Last, First, Middle Initial) Scott M. Brinker Date of Receipt Mailing Address 4500 Dorr St. 04 2013 City Zip Code State Transaction ID: 50832222 OH Toledo 43615-4040 Amount of Each Receipt this Period FEC ID number of contributing C 3000.00 federal political committee. Name of Employer Occupation Health Care REIT. Inc. Executive VP Receipt For: Aggregate Year-to-Date ▼ Primary General 3000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Jeff H. Miller Date of Receipt Mailing Address 4500 Dorr St. 2013 04 17 City State Zip Code Transaction ID: 50832223 OH Toledo 43615-4040 Amount of Each Receipt this Period FEC ID number of contributing 2500.00 federal political committee. Name of Employer Occupation Health Care REIT, Inc. General Counsel & EVP Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) c. George L. Chapman Date of Receipt Mailing Address 4500 Dorr St. 2013 04 17 City Zip Code State Transaction ID: 50832226 OH Toledo 43615-4040 Amount of Each Receipt this Period FEC ID number of contributing 5000.00 С federal political committee. Name of Employer Occupation Chairman & CEO Health Care REIT, Inc. Receipt For: Aggregate Year-to-Date ▼

SUBTOTAL of Receipts This Page (optional)		7	Ξ	Ξ	7		105	00.00	ס	
TOTAL This Period (last page this line number only)		7	_	Ξ	7	_		_	Ξ	

5000.00

Primary

Other (specify)

General

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

FC	DR	LINE	NU	MBER	:	PAGE	8	OF	18
(cl	he	ck only	or	ne)					
	X	11a		11b		11c	12		
		13		14		15	16	;	17

Full Name (Last, First, Middle Initial)  Joseph P. Weisenburger  Mailing Address 4500 Dorr St.  City Toledo  FEC ID number of contributing federal political committee.  Name of Employer Health Care REIT, Inc. Receipt For: Primary Other (specify) ▼  Full Name (Last, First, Middle Initial)  Mike Stephen  Mailing Address 2569 Wisteria St.  City Sarasota  FEC ID number of contributing federal political committee.  City Sarasota  FEC ID number of contributing federal political committee.  Name of Employer Health Care REIT, Inc.  Receipt For: Occupation  C  C  C  Aggregate Year-to-Date ▼  C  C  City Sarasota  FL  34239-4020  C  C  Aggregate Year-to-Date ▼  C  Aggregate Year-to-Date ▼  C  C  Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Toledo  OH 43615-4040  FEC ID number of contributing federal political committee.  Name of Employer Health Care REIT, Inc. Receipt For: Primary Other (specify) ▼  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial)  Mike Stephen Mailing Address 2569 Wisteria St.  City Sarasota FEC ID number of contributing federal political committee.  Name of Employer Health Care REIT, Inc.  Name of Employer Health Care REIT, Inc.  Receipt For: Aggregate Year-to-Date ▼  Coccupation SVP, Marketing  Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
Name of Employer  Health Care REIT, Inc.  Receipt For:  Primary  Other (specify) ▼  Aggregate Year-to-Date ▼  2000.00  Full Name (Last, First, Middle Initial)  Mike Stephen  Mailing Address 2569 Wisteria St.  City  Sarasota  FEC ID number of contributing federal political committee.  Name of Employer  Health Care REIT, Inc.  Receipt For:  Aggregate Year-to-Date ▼  Cupation  Coccupation  State  Cupation  Coccupation  State  Cupation  SVP, Marketing  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼	
Mailing Address 2569 Wisteria St.  City State Zip Code Sarasota FL 34239-4020  FEC ID number of contributing federal political committee.  Name of Employer Health Care REIT, Inc.  Receipt For:  Aggregate Year-to-Date ▼	
Sarasota  FL 34239-4020  FEC ID number of contributing federal political committee.  Name of Employer Health Care REIT, Inc.  Receipt For:  Aggregate Year-to-Date ▼	Date of Receipt
Health Care REIT, Inc.  SVP, Marketing  Receipt For:  Aggregate Year-to-Date ▼	Transaction ID : 50832228  Amount of Each Receipt this Period  5000.00
Primary General Other (specify) ▼ 5000.00	
Full Name (Last, First, Middle Initial)  Mercedes Kerr  Mailing Address 38 Harmony  City State Zip Code  Irvine CA 92602-0920	Date of Receipt    M
FEC ID number of contributing federal political committee.  Name of Employer  Health Care REIT, Inc.  Receipt For:  Primary  Other (specify) ▼  Occupation  VP Marketing  Aggregate Year-to-Date ▼  5000.00	5000.00
SUBTOTAL of Receipts This Page (optional)	

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

	LINE	_		:	PAGE	9	OF	18
(che	ck only	or	ne)					
X	11a		11b		11c	12		
	13		14		15	16	;	17

Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold or used by any pers he name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Seniors Housing As	sociation (Seniors Housing PAC)	
Full Name (Last, First, Middle Initial)  Michelle R. Kelly  Mailing Address 881 W. Cornelia Ave.  Apt. 2  City	State Zip Code	Date of Receipt    M
Chicago  FEC ID number of contributing federal political committee.  Name of Employer  Health Care REIT, Inc.  Receipt For:  Primary General  Other (specify)	Occupation VP  Aggregate Year-to-Date ▼  500.00	Amount of Each Receipt this Period  500.00
Full Name (Last, First, Middle Initial)  Jay Morgan  Mailing Address One SeaGate Suite 1500  City Toledo  FEC ID number of contributing federal political committee.  Name of Employer Health Care REIT  Receipt For: Primary General Other (specify)   Other (specify)	State Zip Code OH 43603  C  Occupation VP-Acute Care Investments  Aggregate Year-to-Date ▼  500.00	Date of Receipt  M
Full Name (Last, First, Middle Initial) John J. Getchey  Mailing Address 4500 Dorr St.  City Toledo  FEC ID number of contributing federal political committee.  Name of Employer Health Care REIT, Inc.  Receipt For:  Primary General Other (specify)	State Zip Code OH 43615-4040  C  Occupation Senior Investment Analyst  Aggregate Year-to-Date ▼  1000.00	Date of Receipt  M M / D 7 2013  Transaction ID: 50832234  Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional).	<b>&gt;</b>	2000.00
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

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for each category of the Detailed Summary Page 13 14 15 16 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) Full Name (Last, First, Middle Initial) Steve W Schroeder Date of Receipt Mailing Address 4500 Dorr St. 04 2013 City Zip Code State Transaction ID: 50832235 OH Toledo 43615-4040 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Health Care REIT. Inc. Asset Mgt. Analyst Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Christopher M. Simon Date of Receipt Mailing Address 4500 Dorr St. 17 04 2013 City State Zip Code Transaction ID: 50832238 OH Toledo 43615-4040 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Health Care REIT, Inc. VP-Asset Mgt. Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Michael A. Crabtree Date of Receipt Mailing Address 4500 Dorr St. 04 17 2013 City Zip Code State Transaction ID: 50832239 OH Toledo 43615-4040 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Health Care REIT Treasurer Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 11 OF 18 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16 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) Full Name (Last, First, Middle Initial) Patrick J. Johnson Jr. Date of Receipt Mailing Address 4500 Dorr St. 04 2013 City Zip Code State Transaction ID: 50832294 OH Toledo 43615-4040 Amount of Each Receipt this Period FEC ID number of contributing C 225.00 federal political committee. Name of Employer Occupation Health Care REIT. Inc. Director Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) Full Name (Last, First, Middle Initial) B. Christian Sweetser Date of Receipt Mailing Address 4500 Dorr St. 17 04 2013 City State Zip Code Transaction ID: 50832303 OH Toledo 43615-4040 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Health Care REIT, Inc. VΡ Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Daniel M. Klein Date of Receipt Mailing Address 4500 Dorr St. 04 17 2013 City Zip Code State Transaction ID: 50832308 OH Toledo 43615-4040 Amount of Each Receipt this Period

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

250.00

С

Occupation

VP, Asset Management

Aggregate Year-to-Date ▼

FEC ID number of contributing

General

federal political committee.

Other (specify)

Name of Employer

Primary

Receipt For:

Health Care REIT, Inc.

250.00

FOR LINE NUMBER: PAGE (check only one) X 11a 11b 11c

12 OF 18 Use separate schedule(s) for each category of the 12 Detailed Summary Page 14 13 15 16 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) Full Name (Last, First, Middle Initial) Susan Thomas Date of Receipt Mailing Address 1516 S. Boston Ave. Suite 301 04 2013 City State Zip Code Transaction ID: 50832361 OK Tulsa 74119-4019 Amount of Each Receipt this Period FEC ID number of contributing 5000.00 federal political committee. Name of Employer Occupation Senior Star Living Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name (Last, First, Middle Initial) B. David M. Boitano Date of Receipt Mailing Address 1019 Regents Blvd. Suite 201 04 19 2013 City State Zip Code Transaction ID: 50879797 WA **Fircrest** 98466-6037 Amount of Each Receipt this Period FEC ID number of contributing 2500.00 federal political committee. Name of Employer Occupation Ventas Healthcare Properties VP, Senior Investment Officer Receipt For: Aggregate Year-to-Date ▼ Primary General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Christine C. Stone Date of Receipt Mailing Address 4500 Dorr St. 04 19 2013 City Zip Code State Transaction ID: 50879806 OH Toledo 43615-4040 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation SVP Health Care REIT Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 7750.00 SUBTOTAL of Receipts This Page (optional).....

- 9

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

FOR LINE NUMBER: PAGE 13 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c

18

Detailed Summary Page 14 13 15 16 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) Full Name (Last, First, Middle Initial) Michael A. Healy Date of Receipt Mailing Address 6200 Gyers Meadow Lane. 04 2013 19 City Zip Code State Transaction ID: 50879807 Ann Arbor MI 48108-7923 Amount of Each Receipt this Period FEC ID number of contributing C 375.00 federal political committee. Name of Employer Occupation SVP, Information Mgt. Health Care REIT Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name (Last, First, Middle Initial) B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 375.00 SUBTOTAL of Receipts This Page (optional)..... 44850.00 TOTAL This Period (last page this line number only).....

·····g··· · · · · · · · · · · · · · · ·			
SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 OF 18 (check only one)  11a 11b X 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Seniors Housing As:	sociation (	Seniors Housing PAC)	
Full Name (Last, First, Middle Initial)  A. Senior Care Inc. Federal PAC			Date of Receipt
Mailing Address 9510 Ormsby Station Rd. Suite 101			04 17 2013
City	State	Zip Code	
Louisville	KY	40223	Transaction ID : 50832362  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		5000.00
Name of Employer	Occupation		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Initial)  Mailing Address			Date of Receipt
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		
Name of Employer	Occupation		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼	
Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address			M = M / D = D / Y = Y = Y
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		
Name of Employer	Occupation		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼	1

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

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

5000.00

5000.00

SCHEDULE B (FEC Form 3X)			FOR LINE N	NUMBER:	PAGE 15 OF 1
ITEMIZED DISBURSEMENTS	Use separate s for each catego Detailed Summ	ory of the	(check only 21b 27	one)	X 23 24 25 2 28b 28c 29 3
Any information copied from such Reports and Stater or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full)					
American Seniors Housing Associa	ation (Senior	s Housin	g PAC)		
Full Name (Last, First, Middle Initial)					
A Alexander For Senate, Inc.				Date of	Disbursement
Mailing Address 228 S. Washington St. Suite 115				04	09 2013
City	State Zip	Code		Tranca	action ID : 50668712
Alexandria	VA 223	14		Hallsa	CHOILID : 300007 12
Purpose of Disbursement			011	Amount	of Each Disbursement this Period
Candidate Name			Cotogony		
Sen. Lamar Alexander			Category/ Type		5000.00
	nent For: 2014 Primary Other (specify)	General •			
State: TN District:					
Full Name (Last, First, Middle Initial)					
- TENN PAC					Disbursement
Mailing Address 101 Constitution Ave, NW Suite 800 W				04	09 / 2013
Washington	State Zip DC 200	Code 01		Transa	action ID : 50668713
Purpose of Disbursement			011	Amount	of Each Disbursement this Period
Candidate Name		- '	Category/ Type		5000.00
Office Sought: House Disburser  Senate President	nent For: Primary Other (specify)	General			
State: District:  Full Name (Last, First, Middle Initial)					
Collins For Senator				Date of	Disbursement
Mailing Address PO Box 1096				04	10 2013
		Code		Transa	action ID : 50675971
Bangor	ME 044	02			
Purpose of Disbursement		- 1	011	Amount	of Each Disbursement this Period
Candidate Name		<del></del>		Amount	or Each Dispursoment this relied
Sen. Susan M. Collins			Category/ Type	L	1000.00
Office Sought:  House Senate President  Disburser	nent For: 2014 Primary Other (specify)	General			
State: ME District:					
SUBTOTAL of Disbursements This Page (optional)					11000.00
					7 7 7 7
TOTAL This Period (last page this line number only)					

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	ED DISBURSEMENTS	Use separate schedule		NOMBEN.
	LD DIODOROLIVILIATO	for each category of the	ne 21h	22 🔀 23 🗆 24 🗆 25 🖂 26
		Detailed Summary Pag	ge   27	28a 28b 28c 29 30l
Any inforr	mation copied from such Reports and State	ments may not be sold or	r used by any pers	on for the purpose of soliciting contributions
	nmercial purposes, other than using the nar			
NAME	OF COMMITTEE (In Full)			
Ame	erican Seniors Housing Associa	ation (Seniors Ho	usina PAC)	
			g ,	
Full Na	ame (Last, First, Middle Initial)			
A. Loek	osack For Congress			Date of Disbursement
				M M / D D / Y Y Y Y
Mailing	Address 228 2nd St. SE			04 15 2013
O:t- :		Chaha Zin Cada		
City		State Zip Code DC 20003		Transaction ID: 50692351
Washir	se of Disbursement	DC 20003		
i uipos	se of Dispursement		011	Amount of Each Disbursement this Period
Candio	date Name			Amount of Each Biobardoment this Feriod
	. David Loebsack		Category/ Type	5000.00
		ment For: 2014	Турс	
000	Senate Sissaison	Primary Genera	al	
	President	Other (specify) ▼		
State:	IA District: 02	(-  <b>)</b> /		
Full Na	ame (Last, First, Middle Initial)			
_	e For Congress			Date of Disbursement
(XIII)	e i di Congress			M = M / D = D / Y = Y = Y
Mailing	g Address 101 W Burnsville Pkwy Suite 104			04 15 2013
	Suite 104			
City		State Zip Code		Transaction ID: 50692352
Burnsv		MN 55337		11ansaction ib . 30092332
Purpos	se of Disbursement			
			011	Amount of Each Disbursement this Period
	date Name		Category/	1000.00
	. John Kline		Туре	
Office		ment For: 2014	.1	
	Senate	Primary General	Al .	
State:	President  MN District: 02	Other (specify) ▼		
	V-			
	ame (Last, First, Middle Initial)			Date of Disbursement
o. Fund	d for America's Future			
Mailing	g Address 211 N. Union St.			04 16 2013
Walling	Suite 200			04 10 2010
City		State Zip Code		
Alexan	dria	VA 22314		Transaction ID : 50746541
Purpos	se of Disbursement			
			011	Amount of Each Disbursement this Period
Candid	date Name		Category/	5000.00
			Type	5000.00
Office	Sought: House Disburse	ment For:		
	Senate	Primary General	al	
	President	Other (specify) ▼		
State:	District:			
SUBTOT	TAL of Disbursements This Page (optional)		·····	11000.00
TOTAL	This Period (last page this line number only	)		

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 17 OF	F 18
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27		2 3
Any information copied from such Reports and State or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full)				
American Seniors Housing Associ	iation (Seniors Housi	ng PAC)		
Full Name (Last, First, Middle Initial)			Date of Disbursement	
- OrrinPAC			M M / D D / Y Y Y Y Y	Υ
Mailing Address 101 Constitution Ave, NW Suite 800 West	7. 0. 1		04 16 2013	_
City	State Zip Code		Transaction ID: 50746944	
Washington	DC 20001			
Purpose of Disbursement		011	Amount of Each Disbursement this Pe	eriod
Candidate Name		Category/ Type	2500.0	00
Office Sought: House Disburse Senate President	ement For:  Primary General  Other (specify)	.,,,,,		
State: District:				
Full Name (Last, First, Middle Initial)  - Charles Boustany Jr Md For Cong	aroes Inc		Date of Disbursement	
Charles boustarry or wid r or Cong	J1633 IIIC			V
Mailing Address 2501 Wisconsin Ave, NW Suite 304			04 23 2013	
City Washington	State Zip Code DC 20007		Transaction ID: 50885887	
Purpose of Disbursement		011	Amount of Each Disbursement this Pe	eriod
Candidate Name				
Rep. Charles Boustany Jr.		Category/ Type	5000.0	00
Office Sought: House Disburse	ement For: 2014	Турс	, , , , , , , , , , , , , , , , , , , ,	
Senate President	Primary General Other (specify) ▼			
State: LA District: 07  Full Name (Last, First, Middle Initial)				
Freedom Fund			Date of Disbursement	
Mailing Address 128 North Columbus St			04 29 2013	
City	State Zip Code		Transaction ID : 50900606	
Alexandria Purpose of Disbursement	VA 22314			
Candidate Name		011 Category/	Amount of Each Disbursement this Pe	
Office Sought: House Disburse	ement For:	Туре	5000.0	JU
Senate President	Primary General Other (specify) ▼			
State: District:	-			
SUBTOTAL of Disbursements This Page (optional).			12500.0	00
TOTAL This Period (last page this line number only	/)			

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 18 OF 18
TEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	NOMBER:
I Emile DioDollocivicitio	for each category of the	21b	22 🔀 23 24 25 26
	Detailed Summary Page	27	28a 28b 28c 29 30l
Any information copied from such Reports and Statem	ents may not be sold or use	ed by any perso	on for the purpose of soliciting contributions
or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)			
American Seniors Housing Associa	tion (Seniors Housi	ng PAC)	
/ / Interroam Comerc Heading / Ideacid		g . , ( <b>o</b> )	
Full Name (Last, First, Middle Initial)			
A. Peters For Congress			Date of Disbursement
			M M / D D / Y Y Y
Mailing Address P.O. Box 21535			04 29 2013
City	toto Zin Codo		
City S Detroit	itate Zip Code MI 48221		Transaction ID: 50900607
Purpose of Disbursement	40221		
Turpose of Biobardomone		011	Amount of Each Disbursement this Period
Candidate Name			11. 11. 11. 11. 11. 11. 11. 11. 11. 11.
Rep. Gary Peters		Category/ Type	5000.00
	nent For: 2014	.,,,,	, , , , , , , , , , , , , , , , , , , ,
	Primary Seneral		
	Other (specify)		
State: MI District: 09	· · · · · · · · · · · · · · · · · · ·		
Full Name (Last, First, Middle Initial)			
3.			Date of Disbursement
			M - M / D - D / Y - Y - Y
Mailing Address			
City	tate Zip Code		
Durage of Dishurasment			
Purpose of Disbursement			Amount of Each Disbursement this Period
Candidate Name			Amount of Each disbursement this Feriod
Candidate Name		Category/ Type	
Office Sought: House Disbursem	ent For:	туре	
	Primary General		
	Other (specify)		
State: District:	(op)) •		
Full Name (Last, First, Middle Initial)			
<b>5.</b>			Date of Disbursement
			M M / D D / Y Y Y
Mailing Address			
City	tate Zip Code		
Purpose of Disbursement	Т		
Fulpose of Dispursement			
Candidate Name			Amount of Each Disbursement this Period
Candidate Name		Category/	
Office Sought: House Disbursem	nent For:	Туре	
	Primary General		
	Other (specify)		
State: District:	C (opcony) ▼		
2.0			
SUBTOTAL of Disbursements This Page (optional)			5000.00
CODITION OF DISDUISEMENTS THIS I age (optional)		<u> </u>	
TOTAL This Period (last page this line number only).			39500.00