

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
Advocat Inc. Political Action Committee

ADDRESS (number and street) 1621 Galleria Blvd
Check if different than previously reported. (ACC) Brentwood TN 37027

2. FEC IDENTIFICATION NUMBER C C00421735
3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] NEW (N) OR [] AMENDED (A)

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

5. Covering Period 01 / 01 / 2013 through 06 / 30 / 2013

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 Kelly J. Gill

Signature of Treasurer Kelly J. Gill [Electronically Filed] Date 07 / 30 / 2013

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Advocat Inc. Political Action Committee

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>		35460.21
(b) Cash on Hand at Beginning of Reporting Period.....	35460.21	
(c) Total Receipts (from Line 19)	21882.44	21882.44
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	57342.65	57342.65
7. Total Disbursements (from Line 31).....	0.00	0.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	57342.65	57342.65
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

Advocat Inc. Political Action Committee

Report Covering the Period: From: 01 / 01 / 2013 To: 06 / 30 / 2013

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).....	19538.56	19538.56
(ii) Unitemized	2343.88	2343.88
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	21882.44	21882.44
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	21882.44	21882.44
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))..... ▶	21882.44	21882.44
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	21882.44	21882.44

DETAILED SUMMARY PAGE
of Disbursements

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.....	0.00	0.00
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	0.00
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)) ..	0.00	0.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	0.00

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)	21882.44	21882.44
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21882.44	21882.44
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

**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 6 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Advocat Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Benita B. Adkins		Date of Receipt MM / DD / YYYY 06 / 21 / 2013 Transaction ID : AE4126215DB214416A62
Mailing Address PO Box 112		Amount of Each Receipt this Period 328.86
City Sandy Hook	State KY	Zip Code 41171-0112
FEC ID number of contributing federal political committee. C		Payroll Deduction: \$36.54/Bi-Weekly
Name of Employer Diversicare Leasing Corporation	Occupation Admin Administrator-exemp	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 433.98	

Full Name (Last, First, Middle Initial) B. Lisa L. Benning		Date of Receipt MM / DD / YYYY 06 / 27 / 2013 Transaction ID : A376CE85CC5564E2DA29
Mailing Address 4381 Highway 7		Amount of Each Receipt this Period 207.48
City Bismarck	State AR	Zip Code 71929-7163
FEC ID number of contributing federal political committee. C		Payroll Deduction: \$15.96/Bi-Weekly
Name of Employer Diversicare Leasing Corporation	Occupation Admin Administrator-exemp	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.48	

Full Name (Last, First, Middle Initial) C. Ruth A. Brown		Date of Receipt MM / DD / YYYY 06 / 20 / 2013 Transaction ID : AC7F94A6CC3804FC8A3C
Mailing Address PO Box 16		Amount of Each Receipt this Period 475.02
City Bogata	State TX	Zip Code 75417-0016
FEC ID number of contributing federal political committee. C		Payroll Deduction: \$36.54/Bi-Weekly
Name of Employer Diversicare Leasing Corporation	Occupation Admin Administrator-exemp	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.02	

SUBTOTAL of Receipts This Page (optional).....▶	1011.36
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 7 OF 20
	<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)
Advocat Inc. Political Action Committee

A. Beverly Cox
Full Name (Last, First, Middle Initial)
Mailing Address 1017 Riverchase Rd SE

City Huntsville	State AL	Zip Code 35803-2327
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FEC ID number of contributing federal political committee. **C**

Name of Employer Diversicare Leasing Corporation	Occupation Admin Administrator-exemp
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
295.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2013
Transaction ID : A98423787E0A44A149A2

Amount of Each Receipt this Period
 295.50

Payroll Deduction: \$29.55/Bi-Weekly

B. Beverly Cox
Full Name (Last, First, Middle Initial)
Mailing Address 1017 Riverchase Rd SE

City Huntsville	State AL	Zip Code 35803-2327
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FEC ID number of contributing federal political committee. **C**

Name of Employer Diversicare Leasing Corporation	Occupation Admin Administrator-exemp
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
385.05

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2013
Transaction ID : A4172E460219E49A695D

Amount of Each Receipt this Period
 89.55

Payroll Deduction: \$29.85/Bi-Weekly

C. Joseph A. Deans
Full Name (Last, First, Middle Initial)
Mailing Address 1030 Sunset Rd

City Brentwood	State TN	Zip Code 37027-8276
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FEC ID number of contributing federal political committee. **C**

Name of Employer Diversicare Management Services	Occupation VP, Bd and Acquisition
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
674.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2013
Transaction ID : A0BB4747B0BAB4A4AA42

Amount of Each Receipt this Period
 674.96

Payroll Deduction: \$51.92/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	1060.01
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 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Advocat Inc. Political Action Committee

A. Edana Y. Duff
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1650
 City Mount Ida State AR Zip Code 71957-1650
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Diversicare Management Services Occupation DMS Clinical Support Mgr
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **429.26**

Date of Receipt **06 / 21 / 2013**
Transaction ID : AAE94E9A776EC499B829
 Amount of Each Receipt this Period **429.26**
 Payroll Deduction: \$33.02/Bi-Weekly

B. Kathi B. Duke
 Full Name (Last, First, Middle Initial)
 Mailing Address 35 Barlow Rd
 City Equality State AL Zip Code 36026-2765
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Diversicare Management Services Occupation Alabama CQI Director
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **501.55**

Date of Receipt **06 / 21 / 2013**
Transaction ID : A25FC7609E25C44C0841
 Amount of Each Receipt this Period **463.32**
 Payroll Deduction: \$38.61/Bi-Weekly

C. Dorcas K. Fannin
 Full Name (Last, First, Middle Initial)
 Mailing Address 8609 Savage Br
 City Catlettsburg State KY Zip Code 41129-8131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Diversicare Management Services Occupation Kentucky Marketing
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **400.01**

Date of Receipt **06 / 21 / 2013**
Transaction ID : A09F01BA062584534BC6
 Amount of Each Receipt this Period **400.01**
 Payroll Deduction: \$30.77/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	1292.59
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 OF 20
	(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)
Advocat Inc. Political Action Committee

A. Deborah R. Farris
Full Name (Last, First, Middle Initial)
Mailing Address 21634 Longwood

City San Antonio	State TX	Zip Code 78259-2128
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FEC ID number of contributing federal political committee. **C**

Name of Employer Diversicare Management Services	Occupation Texas Mds Specialist
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
341.51

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2013

Transaction ID : A9F9891214EFF4F4180C

Amount of Each Receipt this Period
341.51

Payroll Deduction: \$26.27/Bi-Weekly

B. Anne M. Freeman
Full Name (Last, First, Middle Initial)
Mailing Address 25059 US Highway 80

City Opelika	State AL	Zip Code 36804-7936
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FEC ID number of contributing federal political committee. **C**

Name of Employer Diversicare Management Services	Occupation Al Mds Specialist
---	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
267.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2013

Transaction ID : AE039630456BC4712945

Amount of Each Receipt this Period
267.90

Payroll Deduction: \$26.79/Bi-Weekly

C. Danielle P. Galey
Full Name (Last, First, Middle Initial)
Mailing Address 377 Hutchens Rd

City Martin	State TN	Zip Code 38237-5377
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FEC ID number of contributing federal political committee. **C**

Name of Employer Diversicare Leasing Corporation	Occupation Nursing Admin Don-exempt
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
344.89

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2013

Transaction ID : A319B541334FF4EE49C0

Amount of Each Receipt this Period
160.02

Payroll Deduction: \$26.67/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	769.43
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 OF 20
	<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)
Advocat Inc. Political Action Committee

A. Kelly J. Gill
Full Name (Last, First, Middle Initial)

Mailing Address 1621 Galleria Blvd

City Brentwood State TN Zip Code 37027-2926

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

Name of Employer Diversicare Management Services Occupation CEO/President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.03

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2013
Transaction ID : A36F5F86668B64E1CA70

Amount of Each Receipt this Period
 2500.03

Payroll Deduction: \$192.31/Bi-Weekly

B. Joyce D. Griffith
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 62

City Grayson State KY Zip Code 41143-0062

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

Name of Employer Diversicare Management Services Occupation Kentucky Reboc

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2013
Transaction ID : A756103C451954968861

Amount of Each Receipt this Period
 650.00

Payroll Deduction: \$50.00/Bi-Weekly

c. Inga F. Handley
Full Name (Last, First, Middle Initial)

Mailing Address 6151 US Highway 278 E

City Gadsden State AL Zip Code 35903-7001

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

Name of Employer Diversicare Leasing Corporation Occupation Nursing Admin Don-exempt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.13

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2013
Transaction ID : A540A3BBF879A4E5BB72

Amount of Each Receipt this Period
 390.13

Payroll Deduction: \$30.01/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	3540.16
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 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Advocat Inc. Political Action Committee

A. Janice L. Horton
 Full Name (Last, First, Middle Initial)
 Mailing Address 4527 SE Highway 70
 City Arcadia State FL Zip Code 34266-7787
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Diversicare Leasing Corporation Occupation Admin Administrator-exemp
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 398.03

Date of Receipt 06 / 20 / 2013
Transaction ID : A912B45F15908438E808
 Amount of Each Receipt this Period 276.39
 Payroll Deduction: \$30.71/Bi-Weekly

B. Vicki L. Hughes
 Full Name (Last, First, Middle Initial)
 Mailing Address 134 Polk 617
 City Mena State AR Zip Code 71953-0000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Diversicare Leasing Corporation Occupation Admin Administrator-exemp
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 396.37

Date of Receipt 06 / 27 / 2013
Transaction ID : A07B9458B1F9A47EF99F
 Amount of Each Receipt this Period 396.37
 Payroll Deduction: \$30.49/Bi-Weekly

C. Rory L. Jones
 Full Name (Last, First, Middle Initial)
 Mailing Address 1725 Vp Lunn Dr
 City Spring Hill State TN Zip Code 37174-5503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Diversicare Management Services Occupation VP Purchasing & Property
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.04

Date of Receipt 06 / 21 / 2013
Transaction ID : A493449A9FE3549329C1
 Amount of Each Receipt this Period 300.04
 Payroll Deduction: \$23.08/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	972.80
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 12 OF 20
	<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)
Advocat Inc. Political Action Committee

A. Thomas Killingsworth
Full Name (Last, First, Middle Initial)

Mailing Address 2667 Vista Del Arroyo Dr

City San Angelo	State TX	Zip Code 76904-6212
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FEC ID number of contributing federal political committee. **C**

Name of Employer Diversicare Leasing Corporation	Occupation Admin Administrator-exemp
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **424.97**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2013

Transaction ID : AB9E04C3CCDD642A4A4E

Amount of Each Receipt this Period
424.97

Payroll Deduction: \$32.69/Bi-Weekly

B. Randi M. Kiphen
Full Name (Last, First, Middle Initial)

Mailing Address 10880 Gallia Pike Rd

City Wheelersburg	State OH	Zip Code 45694-8443
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FEC ID number of contributing federal political committee. **C**

Name of Employer Diversicare Leasing Corporation	Occupation Admin Administrator-exemp
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **499.20**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2013

Transaction ID : A5E6FC12819364455913

Amount of Each Receipt this Period
499.20

Payroll Deduction: \$38.40/Bi-Weekly

C. Tammy J. Knipp
Full Name (Last, First, Middle Initial)

Mailing Address 667 Indian Hls

City Grayson	State KY	Zip Code 41143-8670
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FEC ID number of contributing federal political committee. **C**

Name of Employer Diversicare Management Services	Occupation Kentucky MDS Specialist
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **318.24**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2013

Transaction ID : A13F2430F97464A19B76

Amount of Each Receipt this Period
318.24

Payroll Deduction: \$24.48/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	1242.41
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 13 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Advocat Inc. Political Action Committee

Full Name (Last, First, Middle Initial)
A. Lorey S. Lowe

Mailing Address PO Box 1813

City State Zip Code
Olive Hill KY 41164-1813

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

Name of Employer Occupation
Diversicare Management Services Kentucky Cqi

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.28

Date of Receipt
06 / 21 / 2013
Transaction ID : AE91FC5256B3A4CF3AFF

Amount of Each Receipt this Period
475.28

Payroll Deduction: \$36.56/Bi-Weekly

Full Name (Last, First, Middle Initial)
B. Lisa A. Martens

Mailing Address 1339 Buckingham Cir

City State Zip Code
Franklin TN 37064-5420

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

Name of Employer Occupation
Diversicare Management Services VP Quality Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
854.62

Date of Receipt
06 / 21 / 2013
Transaction ID : A18E66DD7FAF2470E9B3

Amount of Each Receipt this Period
854.62

Payroll Deduction: \$65.74/Bi-Weekly

Full Name (Last, First, Middle Initial)
C. Randy L. McChristian

Mailing Address 921 Charmont Dr

City State Zip Code
Charleston AR 72933-9083

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

Name of Employer Occupation
Diversicare Management Services Arkansas Director Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
228.72

Date of Receipt
05 / 10 / 2013
Transaction ID : A61BE528B5DE5486FA56

Amount of Each Receipt this Period
99.24

Payroll Deduction: \$24.81/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	1429.14
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 14 OF 20
	<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)
Advocat Inc. Political Action Committee

A. Randy L. McChristian
Full Name (Last, First, Middle Initial)

Mailing Address 921 Charmont Dr

City Charleston State AR Zip Code 72933-9083

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

Name of Employer: Diversicare Management Services
Occupation: Arkansas Director Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **321.03**

Date of Receipt: **06 / 21 / 2013**
Transaction ID : **A389C0B5258CE4D65A51**

Amount of Each Receipt this Period: **92.31**

Payroll Deduction: \$30.77/Bi-Weekly

B. Linda McKay
Full Name (Last, First, Middle Initial)

Mailing Address 20177 Lakeside Dr

City Porter State TX Zip Code 77365-3207

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

Name of Employer: Diversicare Management Services
Occupation: DMS Clinical Support Mgr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **249.99**

Date of Receipt: **06 / 21 / 2013**
Transaction ID : **A369EC31557ED4BE3AF9**

Amount of Each Receipt this Period: **249.99**

Payroll Deduction: \$19.23/Bi-Weekly

C. James R. McKnight Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 1621 Galleria Blvd

City Brentwood State TN Zip Code 37027-2926

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

Name of Employer: Advocat, Inc.
Occupation: CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **865.40**

Date of Receipt: **06 / 21 / 2013**
Transaction ID : **A78550437CFC94DDD806**

Amount of Each Receipt this Period: **865.40**

Payroll Deduction: \$86.54/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	1207.70
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 15 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Advocat Inc. Political Action Committee

A. Wanda C. Meade
 Full Name (Last, First, Middle Initial)
 Mailing Address 3728 State Route 3
 City Catlettsburg State KY Zip Code 41129-9340
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Diversicare Management Services Occupation Kentucky Rvp
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 899.99

Date of Receipt 06 / 21 / 2013
Transaction ID : A6F2CF63930924299B41
 Amount of Each Receipt this Period 899.99
 Payroll Deduction: \$69.23/Bi-Weekly

B. Glenda Nelson
 Full Name (Last, First, Middle Initial)
 Mailing Address 2600 Cole Ave Apt 112
 City Dallas State TX Zip Code 75204-4040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Diversicare Management Services Occupation Texas CQI Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 268.71

Date of Receipt 06 / 21 / 2013
Transaction ID : AB28E61FA37E04616A55
 Amount of Each Receipt this Period 268.71
 Payroll Deduction: \$20.67/Bi-Weekly

C. Treieva Oakley
 Full Name (Last, First, Middle Initial)
 Mailing Address 901 Camellia Rd
 City Oneonta State AL Zip Code 35121-1902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Diversicare Management Services Occupation DMS Training Coordinator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 404.04

Date of Receipt 06 / 21 / 2013
Transaction ID : AA5B16BF3936A46D6A78
 Amount of Each Receipt this Period 404.04
 Payroll Deduction: \$31.08/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 1572.74
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 OF 20
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Advocat Inc. Political Action Committee

Full Name (Last, First, Middle Initial)
A. Amenda M. Palacio

Mailing Address 5383 Southern Blvd
Apt 176

City Dallas State TX Zip Code 75240-7389

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

Name of Employer Diversicare Management Services Occupation Texas Case Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
344.76

Date of Receipt
06 / 21 / 2013
Transaction ID : AE335EF339E25473C836

Amount of Each Receipt this Period
344.76

Payroll Deduction: \$26.52/Bi-Weekly

Full Name (Last, First, Middle Initial)
B. Cindy R. Salyers

Mailing Address 391 Laurel Ave

City Ashland State KY Zip Code 41101-7250

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

Name of Employer Diversicare Leasing Corporation Occupation Admin Administrator-exemp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.75

Date of Receipt
06 / 01 / 2013
Transaction ID : A93FA1814CC5E4F60932

Amount of Each Receipt this Period
310.75

Payroll Deduction: \$28.25/Bi-Weekly

Full Name (Last, First, Middle Initial)
c. Cindy R. Salyers

Mailing Address 391 Laurel Ave

City Ashland State KY Zip Code 41101-7250

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

Name of Employer Diversicare Leasing Corporation Occupation Admin Administrator-exemp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
367.81

Date of Receipt
06 / 27 / 2013
Transaction ID : A46AAE9953CFC461EBDF

Amount of Each Receipt this Period
57.06

Payroll Deduction: \$28.53/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ▶ 712.57

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 17 OF 20
<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)
Advocat Inc. Political Action Committee

A. Laura A. Saxon
 Full Name (Last, First, Middle Initial)
 Mailing Address 3055 Michele Dr
 City State Zip Code
 Mobile AL 36605-4462
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Diversicare Leasing Corporation Admin Administrator-exemp
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 489.45

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2013
Transaction ID : A502F0479C03349EBBA9
 Amount of Each Receipt this Period
 489.45
 Payroll Deduction: \$37.65/Bi-Weekly

B. Trescha A. Snyder
 Full Name (Last, First, Middle Initial)
 Mailing Address 1124 Craig Rd
 City State Zip Code
 Knoxville TN 37919-8238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Diversicare Management Services Director, Dietary Service
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 566.67

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2013
Transaction ID : AB4EFC7E8A2094F0C923
 Amount of Each Receipt this Period
 566.67
 Payroll Deduction: \$43.59/Bi-Weekly

C. Kathie Sullivan
 Full Name (Last, First, Middle Initial)
 Mailing Address 2469 Ar 115
 City State Zip Code
 Smithville AR 72466-0000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Diversicare Management Services Arkansas Cqi Director
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 430.04

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2013
Transaction ID : A05AE94BDC66045CEB80
 Amount of Each Receipt this Period
 430.04
 Payroll Deduction: \$33.08/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	1486.16
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 18 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Advocat Inc. Political Action Committee

A. Liese M. Thornton
 Full Name (Last, First, Middle Initial)
 Mailing Address 2149 W Highway 84
 City Amity State AR Zip Code 71921-8640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Diversicare Management Services Occupation Arkansas Marketing
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **325.00**

Date of Receipt **06 / 21 / 2013**
Transaction ID : A00E97438500D456980E
 Amount of Each Receipt this Period **325.00**
 Payroll Deduction: \$25.00/Bi-Weekly

B. Grady Trew Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 410 Patton Cv
 City Bastrop State TX Zip Code 78602-6641
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Diversicare Leasing Corporation Occupation Admin Administrator-exemp
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **444.99**

Date of Receipt **06 / 20 / 2013**
Transaction ID : A1E38E575D19A478480A
 Amount of Each Receipt this Period **444.99**
 Payroll Deduction: \$34.23/Bi-Weekly

C. Tina M. Ward
 Full Name (Last, First, Middle Initial)
 Mailing Address 575 3rd St NE
 City Bogata State TX Zip Code 75417-5209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Diversicare Leasing Corporation Occupation Nursing Admin Don-exempt
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **414.05**

Date of Receipt **06 / 20 / 2013**
Transaction ID : A181F38D57BF14CE7AA8
 Amount of Each Receipt this Period **414.05**
 Payroll Deduction: \$31.85/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	1184.04
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 19 OF 20
	<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)
Advocat Inc. Political Action Committee

A. Matthew J. Weishaar
 Full Name (Last, First, Middle Initial)
 Mailing Address 1621 Galleria Blvd
 City Brentwood State TN Zip Code 37027-2926
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Diversicare Management Services Occupation VP Finance & Controller
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **801.97**

Date of Receipt **06 / 21 / 2013**
Transaction ID : AD73558D04FCB4B48ABE
 Amount of Each Receipt this Period **801.97**
 Payroll Deduction: \$61.69/Bi-Weekly

B. Chyra D. Worthington
 Full Name (Last, First, Middle Initial)
 Mailing Address 1723 Royal Oaks Dr
 City Malvern State AR Zip Code 72104-5752
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Diversicare Leasing Corporation Occupation Admin Administrator-exemp
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **393.43**

Date of Receipt **06 / 27 / 2013**
Transaction ID : AFFDC5B96D09F444BA0F
 Amount of Each Receipt this Period **333.41**
 Payroll Deduction: \$30.31/Bi-Weekly

C. Samuel R. Wright II
 Full Name (Last, First, Middle Initial)
 Mailing Address 7863 Highway 828
 City Louisa State KY Zip Code 41230-5525
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Diversicare Leasing Corporation Occupation Admin Administrator-exemp
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **459.03**

Date of Receipt **06 / 26 / 2013**
Transaction ID : AD9690B103AC4405BAE7
 Amount of Each Receipt this Period **459.03**
 Payroll Deduction: \$35.31/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... **1594.41**
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 20 OF 20
	<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)
Advocat Inc. Political Action Committee

A. Sarah J. Wright
Full Name (Last, First, Middle Initial)

Mailing Address 1193 Midway Rd

City Hoxie State AR Zip Code 72433-9013

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

Name of Employer Diversicare Leasing Corporation Occupation Admin Administrator-exemp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 228.41

Date of Receipt 04 / 04 / 2013
Transaction ID : A059B254CDEF7404B865

Amount of Each Receipt this Period 228.41

Payroll Deduction: \$32.63/Bi-Weekly

B. Sarah J. Wright
Full Name (Last, First, Middle Initial)

Mailing Address 1193 Midway Rd

City Hoxie State AR Zip Code 72433-9013

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

Name of Employer Diversicare Leasing Corporation Occupation Admin Administrator-exemp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 336.11

Date of Receipt 05 / 16 / 2013
Transaction ID : A4C3B7F48C40041C7BE9

Amount of Each Receipt this Period 107.70

Payroll Deduction: \$35.90/Bi-Weekly

C. Sarah J. Wright
Full Name (Last, First, Middle Initial)

Mailing Address 1193 Midway Rd

City Hoxie State AR Zip Code 72433-9013

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

Name of Employer Diversicare Leasing Corporation Occupation Admin Administrator-exemp

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 463.04

Date of Receipt 06 / 21 / 2013
Transaction ID : AE149205F083445ECA39

Amount of Each Receipt this Period 126.93

Payroll Deduction: \$42.31/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....▶	463.04
TOTAL This Period (last page this line number only).....▶	19538.56