

**FEC  
FORM 3X**

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

Office Use Only

1. NAME OF COMMITTEE (In full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

American Health Care Association Political Action Committee

ADDRESS (number and street)

1201 L Street, NW

Check if different than previously reported. (ACC)

Washington

DC

20005

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00006090

3. IS THIS REPORT

NEW (N) OR

X

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Quarterly Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

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

Mar 20 (M3)

X

Jun 20 (M6)

Sep 20 (M9)

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

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

05

01

2004

through

05

31

2004

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

Type or Print Name of Treasurer

Anna Lee

Signature of Treasurer

Electronically Filed by Anna Lee

Date

08

17

2004

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

Office Use Only

**FEC FORM 3X**  
(Rev. 02/2003)

**SUMMARY PAGE**

**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

American Health Care Association Political Action Committee

Report Covering the Period: From: <sup>M</sup>05 <sup>D</sup>01 <sup>Y</sup>2004 To: <sup>M</sup>05 <sup>D</sup>31 <sup>Y</sup>2004

	<b>COLUMN A</b> This Period	<b>COLUMN B</b> Calendar Year-to-Date
6. (a) Cash on Hand January 1 <sup>Y</sup> 2004 <sup>Y</sup>		298453.50
(b) Cash on Hand at Beginning of Reporting Period .....	226036.41	
(c) Total Receipts (from Line 19) .....	33524.96	252866.15
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	259563.37	551319.65
<hr/>		
7. Total Disbursements (from Line 31) .....	50020.11	341776.39
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	209543.26	209543.26
<hr/>		
9. Debts and Obligations owed <b>TO</b> the committee (itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

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Page 3

Write or Type Committee Name

American Health Care Association Political Action Committee

Report Covering the Period: From: <sup>M</sup>05 <sup>D</sup>01 <sup>Y</sup>2004 To: <sup>M</sup>05 <sup>D</sup>31 <sup>Y</sup>2004

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) .....	28710.41	
(ii) Unitemized .....	4813.49	
(iii) TOTAL (add Lines 11(a)(i) and (ii)) .....	33523.90	252717.15
(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) .....	33523.90	252717.15
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.) .....	1.06	149.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)) .....	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	33524.96	252866.15
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	33524.96	252866.15

**DETAILED SUMMARY PAGE**

of Disbursements

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	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.....	49000.00	337660.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	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.....	1020.11	4116.39
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election ActMty (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	50020.11	341776.39
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 31).....	50020.11	341776.39

**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) .....	33523.90	252717.15
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	33523.90	252717.15
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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 36

(check only one)

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

Full Name (Last, First, Middle Initial) <b>A. Mr Brad Stebbins</b>		Date of Receipt M / D / Y 05 / 03 / 2004
Mailing Address 800 E Whaley		Transaction ID: 18325288
City Longview	State TX	Zip Code 75601-6525
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1250.00
Name of Employer Stebbins Five Companies	Occupation Owner	Aggregate Year-to-Date ▼ 2500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mr Steven Wolf</b>		Date of Receipt M / D / Y 05 / 03 / 2004
Mailing Address 281D Frank Scott Parkway West #B20		Transaction ID: 18325294
City Belleville	State IL	Zip Code 62223-5007
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Eldercare Inc	Occupation President	Aggregate Year-to-Date ▼ 1000.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mr Daniel Salmon</b>		Date of Receipt M / D / Y 05 / 03 / 2004
Mailing Address 85 Beaumont Dr		Transaction ID: 18325290
City Northbridge	State MA	Zip Code 01534
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 125.00
Name of Employer Beaumont Nursing Home	Occupation Administrator	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1875.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 7 / 36  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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

Full Name (Last, First, Middle Initial) <b>A. Mr Don Wessel</b>		Date of Receipt M / D / Y 05 / 03 / 2004
Mailing Address 417 S Main St		Transaction ID: 18325287
City Oberlin	State OH	Zip Code 44074
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 125.00
Name of Employer Welcome Nursing Home Inc	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Mr Ira Alpert</b>		Date of Receipt M / D / Y 05 / 03 / 2004
Mailing Address 285 South Street Suite J		Transaction ID: 18325295
City San Luis Obispo	State CA	Zip Code 93401-5037
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 125.00
Name of Employer Wilshire Foundation Inc	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Mr Mike McDaniel</b>		Date of Receipt M / D / Y 05 / 04 / 2004
Mailing Address 1811 West Lakes Pkwy.		Transaction ID: 18330703
City West Des Moines	State IA	Zip Code 50268-6212
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Care Initiatives	Occupation Senior Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>750.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 8 / 36

(check only one)

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

Full Name (Last, First, Middle Initial) <b>A. Mr. William Gillis</b>		Date of Receipt M / D / Y Y Y Y 05 / 04 / 2004
Mailing Address 8 Avenue 1		Transaction ID: 18325308
City Scarborough	State ME	Zip Code 04074
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Continuum Health Care	Occupation Owner	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mr. Jon Reardon</b>		Date of Receipt M / D / Y Y Y Y 05 / 04 / 2004
Mailing Address 1202 Weiss		Transaction ID: 18330708
City Saginaw	State MI	Zip Code 48602-5471
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Hoyt Nursing & Rehab Center	Occupation Owner	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Ms Jan Thayer</b>		Date of Receipt M / D / Y Y Y Y 05 / 06 / 2004
Mailing Address 404 Woodland Dr		Transaction ID: 18330121
City Grand Island	State NE	Zip Code 68801-6857
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1250.00
Name of Employer Riverside Lodge	Occupation Owner/Administrator	Aggregate Year-to-Date ▼ 2500.00
Receipt For: Primary General Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1750.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



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

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

FOR LINE NUMBER: PAGE 9 / 36

(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Mr David Kyle</b>		Date of Receipt M / D / Y 05 / 06 / 2004
Mailing Address 4821 28th Road South PAYROLL DEDUCTION		Transaction ID: 18325284
City Arlington	State VA	Zip Code 22206-1143
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer AHCA	Occupation Director, Assisted Living	Aggregate Year-to-Date ▼ 225.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mr Stephen L. Spough</b>		Date of Receipt M / D / Y 05 / 06 / 2004
Mailing Address 3861 Shilo Morning Drive		Transaction ID: 18330124
City Nashville	State IN	Zip Code 47448-8743
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 125.00
Name of Employer Spough & Co	Occupation President	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mr John Schaeffer</b>		Date of Receipt M / D / Y 05 / 06 / 2004
Mailing Address 3135 Juniper Lane PAYROLL DEDUCTION		Transaction ID: 18325289
City Falls Church	State VA	Zip Code 22044-1813
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 78.92
Name of Employer AHCA	Occupation Lobbyist	Aggregate Year-to-Date ▼ 682.28
Receipt For: Primary      General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>228.92</b>
TOTAL This Period (last page this line number only) .....	▶	

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 36  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

Full Name (Last, First, Middle Initial) <b>A. Mr. Chip Roachman</b>		Date of Receipt M / D / Y Y Y Y 05 / 06 / 2004
Mailing Address 8858 Avigon Blvd. Payroll Deduction		Transaction ID: 18325267
City Falls Church	State VA	Zip Code 22043-1752
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 192.30
Name of Employer AHCA	Occupation President & CEO	Aggregate Year-to-Date ▼ 1730.70
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mr. John Der</b>		Date of Receipt M / D / Y Y Y Y 05 / 06 / 2004
Mailing Address 1320 North Veibach Street Apt 920 PAYROLL DEDUCTION		Transaction ID: 18325258
City Arlington	State VA	Zip Code 22201-6214
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 84.25
Name of Employer AHCA	Occupation Director, Strat. Action Group	Aggregate Year-to-Date ▼ 529.55
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mr David Kyle</b>		Date of Receipt M / D / Y Y Y Y 05 / 10 / 2004
Mailing Address 4821 28th Road South PAYROLL DEDUCTION		Transaction ID: 18329824
City Arlington	State VA	Zip Code 22208-1143
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer AHCA	Occupation Director, Assisted Living	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary      General Other (specify) ▼		

SUBTOTAL of Receipts TNs Page (optional) .....	▶	<b>301.55</b>
TOTAL This Period (last page this line number only) .....	▶	

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 11 / 36  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

Full Name (Last, First, Middle Initial) <b>A. Mr. John Schaeffler</b>		Date of Receipt M / D / Y Y Y Y 05 / 10 / 2004
Mailing Address 3135 Juniper Lane PAYROLL DEDUCTION		Transaction ID: 18329930
City Falls Church	State VA	Zip Code 22044-1813
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 769.92
Name of Employer AHCA	Occupation Lobbyist	Aggregate Year-to-Date ▼ 769.20
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mr. Chip Roadman</b>		Date of Receipt M / D / Y Y Y Y 05 / 10 / 2004
Mailing Address 8858 Avigon Blvd. Payroll Deduction		Transaction ID: 18329927
City Falls Church	State VA	Zip Code 22043-1752
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 192.30
Name of Employer AHCA	Occupation President & CEO	Aggregate Year-to-Date ▼ 1823.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mr. John Den</b>		Date of Receipt M / D / Y Y Y Y 05 / 10 / 2004
Mailing Address 1320 North Veitech Street Apt 920 PAYROLL DEDUCTION		Transaction ID: 18329923
City Arlington	State VA	Zip Code 22201-6214
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 84.25
Name of Employer AHCA	Occupation Director, Strat. Action Group	Aggregate Year-to-Date ▼ 613.80
Receipt For: Primary      General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) .....	<b>353.47</b>
TOTAL This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 12 / 36

(check only one)

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

Full Name (Last, First, Middle Initial) <b>A. Mr Richard Rau</b>		Date of Receipt M / D / Y 05 / 11 / 2004
Mailing Address 3939 S. 92nd St.		Transaction ID: 18331780
City Greenfield	State WI	Zip Code 53228-2189
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 125.00
Name of Employer Clement Manor Inc.	Occupation CEO	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Mr Wade Peterson</b>		Date of Receipt M / D / Y 05 / 11 / 2004
Mailing Address 201 14th St., NW		Transaction ID: 18331790
City Mandan	State ND	Zip Code 58554-2063
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer MedCenter One Care Center	Occupation Administrator	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. Bruce Yarwood</b>		Date of Receipt M / D / Y 05 / 11 / 2004
Mailing Address 200 P St #F31		Transaction ID: 18331777
City Sacramento	State CA	Zip Code 95814-6259
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1500.00
Name of Employer Yarwood and Associates	Occupation Gov Rel Consultant	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1925.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 13 / 36  
(check only one)  
 11a     11b     11c     12  
           13        14        15        16        17

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

Full Name (Last, First, Middle Initial) <b>A. Ms. Jill Mendlen</b>		Date of Receipt M / D / Y 05 / 11 / 2004
Mailing Address 2151 Calle Poco		Transaction ID: 18331718
City El Cajon	State CA	Zip Code 92019-3540
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Mendlen Group	Occupation	
Receipt For: Primary          General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. Kathy Graves</b>		Date of Receipt M / D / Y 05 / 11 / 2004
Mailing Address PO Box 7		Transaction ID: 18331792
City Gainsboro	State TN	Zip Code 38562-0553
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1250.00
Name of Employer Mabry Health Care & Rehab	Occupation Administrator	
Receipt For: Primary          General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>C. Mr Thomas Mabry</b>		Date of Receipt M / D / Y 05 / 11 / 2004
Mailing Address PO Box 7		Transaction ID: 18331788
City Gainesboro	State TN	Zip Code 38562
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Mabry Health Care	Occupation Administrator	
Receipt For: Primary          General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts TN's Page (optional) .....	<b>2000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 14 / 36

(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Mr. Alan Rosenbloom</b>		Date of Receipt M / D / Y 05 / 11 / 2004
Mailing Address 315 N. 2nd St.		Transaction ID: 18331783
City Harrisburg	State PA	Zip Code 17101-1305
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Pennsylvania Health Care Assn.	Occupation	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mr. Paul Tunnell</b>		Date of Receipt M / D / Y 05 / 11 / 2004
Mailing Address 378 Liberty St.		Transaction ID: 18331791
City San Francisco	State CA	Zip Code 94114-2921
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Kindred Healthcare	Occupation Administrator	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Ms. Nancy Beecham</b>		Date of Receipt M / D / Y 05 / 11 / 2004
Mailing Address 1851 E. Main St Ste. 203		Transaction ID: 18331778
City El Cajon	State CA	Zip Code 92021-5208
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Retro Medical Billing Inc.	Occupation President	Aggregate Year-to-Date ▼ 1000.00
Receipt For: Primary      General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1250.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 15 / 36  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

Full Name (Last, First, Middle Initial) <b>A. Mr. Tony Oglesby</b>		Date of Receipt M / D / Y 05 / 11 / 2004
Mailing Address 30001 Keith St.		Transaction ID: 18331696
City	State	Zip Code
Cleveland	TN	37320
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2500.00
Name of Employer Life Care Centers of America	Occupation President & CEO	Aggregate Year-to-Date ▼ 2500.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mr. John Elliot</b>		Date of Receipt M / D / Y 05 / 13 / 2004
Mailing Address 1409 Woodmere Drive		Transaction ID: 18353140
City	State	Zip Code
Charleston	WV	25314-1939
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1250.00
Name of Employer AMFM Inc	Occupation CEO	Aggregate Year-to-Date ▼ 3750.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mr. James Parker</b>		Date of Receipt M / D / Y 05 / 13 / 2004
Mailing Address PO Box 336250		Transaction ID: 18352844
City	State	Zip Code
Greeley	CO	80633-0805
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Continuum Health Partners Nps Inc	Occupation Chief Finance Officer	Aggregate Year-to-Date ▼ 300.00
Receipt For: Primary      General Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts TN's Page (optional) .....	<b>4050.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 16 / 36  
(check only one)  
 11a     11b     11c     12  
           13        14        15        16        17

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

Full Name (Last, First, Middle Initial) <b>A. Ms. Cheryl Lowney</b>		Date of Receipt M / D / Y 05 / 13 / 2004
Mailing Address 304 Park Place		Transaction ID: 18352843
City Lincoln	State IL	Zip Code 62656-1534
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	
Receipt For: Primary          General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. Cassandra Kamstine</b>		Date of Receipt M / D / Y 05 / 13 / 2004
Mailing Address 14322 - 21st Ave. N		Transaction ID: 18353154
City Plymouth	State MN	Zip Code 55447-4637
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200.00
Name of Employer Birchwood Leasing Partner- ship	Occupation	
Receipt For: Primary          General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Ms. Kimberly Scoble</b>		Date of Receipt M / D / Y 05 / 13 / 2004
Mailing Address 14322 - 21st Ave. N		Transaction ID: 18353248
City Plymouth	State MN	Zip Code 55447-4637
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200.00
Name of Employer Birchwood Leasing Partner- ship	Occupation	
Receipt For: Primary          General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>900.00</b>
TOTAL This Period (last page this line number only) .....	▶	



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

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

FOR LINE NUMBER: PAGE 17 / 36  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

Full Name (Last, First, Middle Initial) <b>A. Mr. Lee Sorensen</b>		Date of Receipt M / D / Y 05 / 13 / 2004
Mailing Address 100 E. San Marcos Blvd. #200		Transaction ID: 18353414
City San Marcos	State CA	Zip Code 92069-2887
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Plum Healthcare Group	Occupation Member	Aggregate Year-to-Date ▼ 1000.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Howard Groff</b>		Date of Receipt M / D / Y 05 / 14 / 2004
Mailing Address 9031 Penn. Ave. South		Transaction ID: 18404866
City Bloomington	State MN	Zip Code 55431-2225
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1250.00
Name of Employer Teahood Care Centers Inc	Occupation President	Aggregate Year-to-Date ▼ 2500.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mr Jay Moskowitz</b>		Date of Receipt M / D / Y 05 / 14 / 2004
Mailing Address 2932 Fenton Street		Transaction ID: 18403878
City Wheat Ridge	State CO	Zip Code 80214-8118
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Quality Life Management	Occupation Administrator	Aggregate Year-to-Date ▼ 1500.00
Receipt For: Primary      General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) .....	<b>2750.00</b>
TOTAL This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 18 / 36

(check only one)

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

Full Name (Last, First, Middle Initial) <b>A. Mr. Raymond Joseph Sierpina, Jr.</b>		Date of Receipt M / D / Y 05 / 14 / 2004
Mailing Address 142B Spring Vale Ave.		Transaction ID: 18403979
City McLean	State VA	Zip Code 22101-3528
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 950.00
Name of Employer AHCA	Occupation National Constituancy Director	Aggregate Year-to-Date ▼ 1000.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mr. Randall Bufford</b>		Date of Receipt M / D / Y 05 / 14 / 2004
Mailing Address 840D Williamsburg Plaza #300		Transaction ID: 18403980
City Louisville	State KY	Zip Code 40222-5093
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Trilogy Health Services	Occupation President & CEO	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Ms. Dana Joe Olson</b>		Date of Receipt M / D / Y 05 / 14 / 2004
Mailing Address 920 S. Chilton Rd.		Transaction ID: 18403978
City Colorado Springs	State CO	Zip Code 80910-2399
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Laurel Manor Care Center	Occupation Executive Director	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary      General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1950.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 10 / 36  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial) <b>A. Ms Sandy Klein</b>		Date of Receipt M / D / Y 05 / 17 / 2004
Mailing Address 4315 Gaidalupe #300		Transaction ID: 18450035
City Austin	State TX	Zip Code 78751-3644
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 125.00
Name of Employer Mariner Health Care	Occupation	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Ms Lucy Rogers</b>		Date of Receipt M / D / Y 05 / 17 / 2004
Mailing Address 213 Third St.		Transaction ID: 18450029
City Macon	State GA	Zip Code 31201-3309
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Care More Inc.	Occupation Administrator	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Ms Gandra Higgin-Strison</b>		Date of Receipt M / D / Y 05 / 20 / 2004
Mailing Address 170 Buckner Ridge		Transaction ID: 18450058
City Madisonville	State KY	Zip Code 42431-3822
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer The Thomas Group	Occupation President	
Receipt For: Primary      General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1375.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 20 / 36  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

Full Name (Last, First, Middle Initial) <b>A. Ms Delta Holloway</b>		Date of Receipt M / D / Y Y Y Y 05 / 20 / 2004
Mailing Address 1475 N. Cole Rd.		Transaction ID: 18450056
City Boise	State ID	Zip Code 83704-8537
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Western Health Care Corp.	Occupation Consultant RN	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mr. Jim Bircham</b>		Date of Receipt M / D / Y Y Y Y 05 / 20 / 2004
Mailing Address 1633 Delton Ave.		Transaction ID: 18450062
City Bernidji	State MN	Zip Code 56601-2537
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Eldercare of Bernidji	Occupation President/CEO	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mr Paul Diaz</b>		Date of Receipt M / D / Y Y Y Y 05 / 21 / 2004
Mailing Address 680 South Fourth Street		Transaction ID: 18450045
City Louisville	State KY	Zip Code 40202-2818
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Kindred HealthCare	Occupation Sr Vice President/CFD	Aggregate Year-to-Date ▼ 1000.00
Receipt For: Primary      General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1500.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 21 / 36

(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Mr Cecil Barcelo</b>		Date of Receipt M / D / Y 05 / 27 / 2004
Mailing Address 411 Alabama		Transaction ID: 18451848
City	State	Zip Code
League City	TX	77573
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Bayland Village	Occupation Administrator	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mr David Kyle</b>		Date of Receipt M / D / Y 05 / 27 / 2004
Mailing Address 4821 28th Road South PAYROLL DEDUCTION		Transaction ID: 18450868
City	State	Zip Code
Arlington	VA	22206-1143
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer AHCA	Occupation Director, Assisted Living	Aggregate Year-to-Date ▼ 275.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Ms Cheryl Repp</b>		Date of Receipt M / D / Y 05 / 27 / 2004
Mailing Address 4001 Ponds Court		Transaction ID: 18451848
City	State	Zip Code
Pleasanton	CA	94568-7523
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 3750.00
Name of Employer CARREI	Occupation President	Aggregate Year-to-Date ▼ 5000.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>4025.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 22 / 36  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial) <b>A. Mr. John Schaeffler</b>		Date of Receipt M / D / Y Y Y Y 05 / 27 / 2004
Mailing Address 3135 Juniper Lane PAYROLL DEDUCTION		Transaction ID: 18450861
City Falls Church	State VA	Zip Code 22044-1813
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 76.92
Name of Employer AHCA	Occupation Lobbyist	Aggregate Year-to-Date ▼ 846.12
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mr. Leonard Russ</b>		Date of Receipt M / D / Y Y Y Y 05 / 27 / 2004
Mailing Address 40 Keogh Lane		Transaction ID: 18450854
City New Rochelle	State NY	Zip Code 10805-1397
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 375.00
Name of Employer Bayberry Nursing Home	Occupation Administrator	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mr. Chip Roadman</b>		Date of Receipt M / D / Y Y Y Y 05 / 27 / 2004
Mailing Address 6856 Avigon Blvd. Payroll Deduction		Transaction ID: 18450858
City Falls Church	State VA	Zip Code 22043-1752
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 192.30
Name of Employer AHCA	Occupation President & CEO	Aggregate Year-to-Date ▼ 2115.30
Receipt For: Primary      General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) .....	<b>644.22</b>
TOTAL This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 23 / 36  
(check only one)

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

Full Name (Last, First, Middle Initial) <b>A. Ms. Gail Sheridan</b>		Date of Receipt M / D / Y 05 / 27 / 2004
Mailing Address 9031 Penn Ave.S		Transaction ID: 18450068
City Bloomington	State MN	Zip Code 55431-2225
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Teahood Care Centers	Occupation Healthcare Mangement	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. John Den</b>		Date of Receipt M / D / Y 05 / 27 / 2004
Mailing Address 1320 North Veibach Street Apt 920 PAYROLL DEDUCTION		Transaction ID: 18450067
City Arlington	State VA	Zip Code 22201-6214
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 84.25
Name of Employer AHCA	Occupation Director, Strat. Action Group	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 698.05	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1084.25</b>
TOTAL This Period (last page this line number only) .....	▶	<b>28710.41</b>

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

Full Name (Last, First, Middle Initial)  
**A. Dave Camp for Congress**

Mailing Address 135 Ashman

City Midland State MI Zip Code 48640

Purpose of Disbursement

Candidate Name  
Mr. Dave Camp

Office Sought:  House  Senate  President  
State: MI District 4

Disbursement For: 2004  
 Primary  General  
Other (specify) ▼

Transaction ID: 18316029  
Date of Disbursement  
05 / 05 / 2004

Amount of Each Disbursement this Period  
1000.00

011  
Category/  
Type

Full Name (Last, First, Middle Initial)  
**B. Friends of Frank Wolf**

Mailing Address P.O. Box 3015

City Oakton State VA Zip Code 22124

Purpose of Disbursement

Candidate Name  
Mr. Frank Wolf

Office Sought:  House  Senate  President  
State: VA District 10

Disbursement For: 2004  
 Primary  General  
Other (specify) ▼

Transaction ID: 18316014  
Date of Disbursement  
05 / 05 / 2004

Amount of Each Disbursement this Period  
2000.00

011  
Category/  
Type

Full Name (Last, First, Middle Initial)  
**C. Nathan Deal for Congress**

Mailing Address 4775 Clarks Bridge Road

City Gainesville State GA Zip Code 30508

Purpose of Disbursement

Candidate Name  
Mr. Nathan Deal

Office Sought:  House  Senate  President  
State: GA District 9

Disbursement For: 2004  
 Primary  General  
Other (specify) ▼

Transaction ID: 18316024  
Date of Disbursement  
05 / 05 / 2004

Amount of Each Disbursement this Period  
1000.00

011  
Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ► **4000.00**

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Ron Lewis for Congress

Mailing Address 1705 N. Dixie Star Plaza, #73  
2233 Rayburn House Ofc Bldg

City State Zip Code  
?Elizabethtown KY 42701

Purpose of Disbursement

Candidate Name  
Mr. Ron Lewis

Office Sought:  House  
Senate  
President  
State: KY District: 2

Disbursement For: 2004  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 18316027

Date of Disbursement

05 / 05 / 2004

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Shadegg for Congress

Mailing Address P.O. Box 45444

City State Zip Code  
Phoenix AZ 85064

Purpose of Disbursement  
Void - Shadegg for Congress

Candidate Name  
Mr. John Shadegg

Office Sought:  House  
Senate  
President  
State: AZ District: 4

Disbursement For: 2004  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 18315867

Date of Disbursement

05 / 05 / 2004

Amount of Each Disbursement this Period

-240.00

Void - Shadegg for Congress

Full Name (Last, First, Middle Initial)

C. Shadegg for Congress

Mailing Address P.O. Box 45444

City State Zip Code  
Phoenix AZ 85064

Purpose of Disbursement  
Void - Shadegg for Congress

Candidate Name  
Mr. John Shadegg

Office Sought:  House  
Senate  
President  
State: AZ District: 4

Disbursement For: 2004  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 18315869

Date of Disbursement

05 / 05 / 2004

Amount of Each Disbursement this Period

-250.00

Void - Shadegg for Congress

SUBTOTAL of Disbursements This Page (optional) ▶

1010.00

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

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

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

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(check only one)

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

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

Mailing Address P.O. Box 45444

City Phoenix State AZ Zip Code 85064

Purpose of Disbursement

Candidate Name  
Mr. John Shadegg

Office Sought:  House  Senate  President  
State: AZ District 4

Disbursement For: 2004  
 Primary  General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 18316035  
Date of Disbursement  
05 / 05 / 2004

Amount of Each Disbursement this Period  
250.00

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

Mailing Address P.O. Box 45444

City Phoenix State AZ Zip Code 85064

Purpose of Disbursement

Candidate Name  
Mr. John Shadegg

Office Sought:  House  Senate  President  
State: AZ District 4

Disbursement For: 2004  
 Primary  General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 18316037  
Date of Disbursement  
05 / 05 / 2004

Amount of Each Disbursement this Period  
240.00

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

Mailing Address PO Box 15703

City Tallahassee State FL Zip Code 32317-5703

Purpose of Disbursement

Candidate Name  
Mr. Allen Boyd

Office Sought:  House  Senate  President  
State: FL District 2

Disbursement For: 2004  
 Primary  General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 18316025  
Date of Disbursement  
05 / 05 / 2004

Amount of Each Disbursement this Period  
1000.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ► **1490.00**

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

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

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

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(check only one)

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

Full Name (Last, First, Middle Initial)

**A. Pickering for Congress**

Mailing Address 661 Highway 51 North  
Suite 2C

City Ridgeland State MS Zip Code 39157

Purpose of Disbursement

Candidate Name  
Mr. Chip Pickering

Office Sought:  House  
Senate  
President  
State: MS District 3

Disbursement For: 2004  
Primary  General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 18316032

Date of Disbursement

05 / 05 / 2004

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Anne Northup for Congress**

Mailing Address 4014 Dutchman's Lane  
Ste. 7B

City Louisville State KY Zip Code 40207

Purpose of Disbursement

Candidate Name  
Ms Anne Meagher Northup

Office Sought:  House  
Senate  
President  
State: KY District 3

Disbursement For: 2004  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 18316023

Date of Disbursement

05 / 05 / 2004

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. DASHPAC**

Mailing Address 424 C street NE First Floor

City Washington State DC Zip Code 20002

Purpose of Disbursement

Candidate Name  
Mr. Tom Daschle

Office Sought: House  
Senate  
President  
State: DC District 0

Disbursement For:  
Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 18316034

Date of Disbursement

05 / 05 / 2004

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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

Mailing Address 4213 Dougherty Street

City Virginia Beach State VA Zip Code 23455

Purpose of Disbursement

Candidate Name  
Ed Schrock

Office Sought:  House  
Senate  
President  
State: VA District 2

Disbursement For: 2004  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 18316020  
Date of Disbursement

05 / 05 / 2004

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)  
B. Coleman for U.S. Senate

Mailing Address 625 N. Washington St.  
Ste. 208

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

Candidate Name  
Mr. Norm Coleman

Office Sought: House  
 Senate  
President  
State: MN District D

Disbursement For: 2008  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 18316031  
Date of Disbursement

05 / 05 / 2004

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)  
C. PRYCE Project

Mailing Address 2042 Peach Orchard Drive  
Ste. 316

City Falls Church State VA Zip Code 22043

Purpose of Disbursement

Candidate Name

Office Sought: House  
Senate  
President  
State: District D

Disbursement For:  
Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 18316017  
Date of Disbursement

05 / 05 / 2004

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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

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

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(check only one)

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

Full Name (Last, First, Middle Initial)

**A. ERICPAC**

Mailing Address 209 Pennsylvania Ave. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

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

011  
Category/  
Type

Transaction ID: 18316D18

Date of Disbursement

05 / 05 / 2004

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. King For Congress**

Mailing Address 126 Des Moines Street  
P.O. Box 576

City Odobolt State IA Zip Code 51458

Purpose of Disbursement

Candidate Name  
Rep. Steve King

Office Sought:  House Senate President  
State: IA District 5  
Disbursement For: 2004  
 Primary General Other (specify) ▼

011  
Category/  
Type

Transaction ID: 18316D01

Date of Disbursement

05 / 05 / 2004

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Mike Pence for Congress**

Mailing Address 802 S. Anderson Street

City Elmwood State IN Zip Code 46038

Purpose of Disbursement

Candidate Name  
Mr. Mike Pence

Office Sought:  House Senate President  
State: IN District 2  
Disbursement For: 2004  
Primary  General Other (specify) ▼

011  
Category/  
Type

Transaction ID: 18326D89

Date of Disbursement

05 / 07 / 2004

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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

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

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

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(check only one)

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

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

Full Name (Last, First, Middle Initial)  
A. Gerald C. Jerry Weller for Congress

Mailing Address PO Box 37

City Joliet State IL Zip Code 60434

Purpose of Disbursement

Candidate Name  
Mr. Jerry Weller

Office Sought:  House  
Senate  
President  
State: IL District: 11

Disbursement For: 2004  
Primary  General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 18340422  
Date of Disbursement

05 / 12 / 2004

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)  
B. Arlene Wohlgemuth for US Congress

Mailing Address PO Box 878

City Burleson State TX Zip Code 76007

Purpose of Disbursement

Candidate Name  
Ms. Arlene Wohlgemuth

Office Sought:  House  
Senate  
President  
State: TX District: 17

Disbursement For: 2004  
Primary  General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 18340451  
Date of Disbursement

05 / 12 / 2004

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)  
C. Anne Northup for Congress

Mailing Address 4014 Dutchman's Lane  
Ste. 7B

City Louisville State KY Zip Code 40207

Purpose of Disbursement

Candidate Name  
Ms Anne Meagher Northup

Office Sought:  House  
Senate  
President  
State: KY District: 3

Disbursement For: 2004  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 183402818  
Date of Disbursement

05 / 14 / 2004

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

6000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

Full Name (Last, First, Middle Initial)  
**A. Citizens for Bunning**

Mailing Address 1717 Dixie Highway, Ste 180

City Fr. Wright State KY Zip Code 41011

Purpose of Disbursement

Candidate Name  
Mr. Jim Bunning

Office Sought:  House  Senate  President  
State: KY District 4

Disbursement For: 2004  
 Primary  General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 18369332  
Date of Disbursement  
05 / 18 / 2004

Amount of Each Disbursement this Period  
3000.00

Full Name (Last, First, Middle Initial)  
**B. Citizens for Bunning**

Mailing Address 1717 Dixie Highway, Ste 180

City Fr. Wright State KY Zip Code 41011

Purpose of Disbursement  
Void - Citizens for Bunning

Candidate Name  
Mr. Jim Bunning

Office Sought:  House  Senate  President  
State: KY District 4

Disbursement For: 2004  
 Primary  General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 18392015  
Date of Disbursement  
05 / 18 / 2004

Amount of Each Disbursement this Period  
-3000.00

Void - Citizens for Bunning

Full Name (Last, First, Middle Initial)  
**C. Becerra for Congress**

Mailing Address 1910 Sunset Blvd Suite 540

City Los Angeles State CA Zip Code 90028

Purpose of Disbursement

Candidate Name  
Mr. Xavier Becerra

Office Sought:  House  Senate  President  
State: CA District 30

Disbursement For: 2004  
 Primary  General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 18391796  
Date of Disbursement  
05 / 18 / 2004

Amount of Each Disbursement this Period  
1000.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ **1000.00**

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

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

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

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(check only one)

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

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

Mailing Address 5152 Sepulveda Blvd #1996

City Sherman Oaks State CA Zip Code 91403

Purpose of Disbursement

Candidate Name  
Mr. Brad Sherman

Office Sought:  House  
Senate  
President  
State: CA District: 24

Disbursement For: 2004  
Primary  General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 18369333  
Date of Disbursement

05 / 18 / 2004

Amount of Each Disbursement this Period

1000.00

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

Mailing Address 1700 L Street

City Sacramento State CA Zip Code 95814

Purpose of Disbursement

Candidate Name  
Mr Mike Thompson

Office Sought:  House  
Senate  
President  
State: CA District: 1

Disbursement For: 2004  
Primary  General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 18391799  
Date of Disbursement

05 / 18 / 2004

Amount of Each Disbursement this Period

2500.00

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

Mailing Address 1911 E. Bendix Dr.

City Tempe State AZ Zip Code 85283

Purpose of Disbursement

Candidate Name  
Rep. Jeffrey Flake

Office Sought:  House  
Senate  
President  
State: AZ District: 6

Disbursement For: 2004  
 Primary General  
Other (specify) ▼

011  
Category/  
Type

Transaction ID: 18391801  
Date of Disbursement

05 / 18 / 2004

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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



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

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

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(check only one)

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

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

Full Name (Last, First, Middle Initial)  
A. Nethercutt for Senate

Mailing Address PO Box 1925

City Spokane State WA Zip Code 99210

Purpose of Disbursement

Candidate Name  
Mr. George Nethercutt

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

011  
Category/  
Type

Transaction ID: 18391803  
Date of Disbursement

05 / 18 / 2004

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)  
B. Prosperity PAC

Mailing Address 7804 Evening Lane

City Alexandria State VA Zip Code 22308

Purpose of Disbursement

Candidate Name

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

011  
Category/  
Type

Transaction ID: 18391784  
Date of Disbursement

05 / 18 / 2004

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)  
C. Gerald C. Jerry Weller for Congress

Mailing Address PO Box 37

City Joliet State IL Zip Code 60434

Purpose of Disbursement

Void - Gerald C. Jerry Weller for Congre

Candidate Name  
Mr. Jerry Weller

Office Sought:  House Disbursement For: 2004  
 Senate  Primary  General  
 President  
 State: IL District: 11 Other (specify) ▼

011  
Category/  
Type

Transaction ID: 18433863  
Date of Disbursement

05 / 25 / 2004

Amount of Each Disbursement this Period

-2500.00

Void - Gerald C. Jerry We-  
ller for Congress

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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

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

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

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(check only one)

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

Full Name (Last, First, Middle Initial)

**A. REFORM PAC**

Mailing Address PO Box 15584

City Washington State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

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

011  
Category/  
Type

Transaction ID: 18433869

Date of Disbursement

05 / 25 / 2004

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. Democratic Congressional Campaign Committee**

Mailing Address 430 South Capitol St

City Washington State DC Zip Code 20003

Purpose of Disbursement

Candidate Name  
DCCC

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

011  
Category/  
Type

Transaction ID: 18449681

Date of Disbursement

05 / 27 / 2004

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

**C. Herseth for Congress**

Mailing Address PO Box 85352

City Sioux Falls State SD Zip Code 57118

Purpose of Disbursement

Candidate Name  
Ms. Stephanie Herseth

Office Sought:  House Senate President State: SD District 1  
Disbursement For: 2004  
 Primary General Other (specify) ▼

011  
Category/  
Type

Transaction ID: 18449681

Date of Disbursement

05 / 27 / 2004

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

18500.00

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

49000.00

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

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

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(check only one)

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

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

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

Mailing Address 1201 L Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement

Candidate Name

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

001  
Category/  
Type

Transaction ID: 18576314  
Date of Disbursement

05 / 31 / 2004

Amount of Each Disbursement this Period

163.29

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

Mailing Address 1201 L Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement

Candidate Name

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

001  
Category/  
Type

Transaction ID: 18576315  
Date of Disbursement

05 / 31 / 2004

Amount of Each Disbursement this Period

856.82

SUBTOTAL of Disbursements This Page (optional) ▶

1020.11

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

1020.11

