

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

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

FOR LINE NUMBER: PAGE 10 OF 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
GGNSC Holdings LLC/Golden Horizons Care PAC

A. MRS. DIXIE L. WILDE
 Full Name (Last, First, Middle Initial)
 Mailing Address 405 SAGEHORN DRIVE
 City State Zip Code
 HARTFORD SD 57033-2360
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GOLDEN LIVING CTR DISTRICT 14 REGIONAL VICE PRES O
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 31 / 2015
Transaction ID : PR768719743514
 Amount of Each Receipt this Period
 50.00
 P/R Deduction (\$25.00 Bi-Weekly)

B. MRS. FRANCES A. KEEARNS
 Full Name (Last, First, Middle Initial)
 Mailing Address 8640 SE ADAMS
 City State Zip Code
 WAKARUSA KS 66546-9716
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GOLDEN LIVINGCENTER - ESKRIDGE ED SR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 31 / 2015
Transaction ID : PR768739643514
 Amount of Each Receipt this Period
 30.00
 P/R Deduction (\$15.00 Bi-Weekly)

C. MS. LUANN A. PONTIUS
 Full Name (Last, First, Middle Initial)
 Mailing Address 675 S SLED RUN
 City State Zip Code
 SANTA CLAUS IN 47579-6217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 LINCOLN HILLS NURSING HOME EXECUTIVE DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 31 / 2015
Transaction ID : PR768740343514
 Amount of Each Receipt this Period
 30.00
 P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 110.00
TOTAL This Period (last page this line number only)..... ▶