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

GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

101 EAST STATE STREET

☐ Check if different than previously reported. (ACC)

KENNETT SQUARE | PA | 19348 –

2. **FEC IDENTIFICATION NUMBER** C00292094

CITY STATE ZIPCODE

3. IS THIS REPORT ☒ NEW (N) **OR** ☐ AMENDED (A)

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report(Q1)
- ☐ July 15 Quarterly Report(Q2)
- ☒ October 15 Quarterly Report(Q3)
- ☐ January 31 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)	☐ 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 (12G)

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 07 01 2008 through 09 30 2008

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 LAURENCE F. LANE

Signature of Treasurer Electronically Filed by LAURENCE F. LANE Date 10 09 2008

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

Office Use Only							

FEC FORM 3X (Rev. 12/2004)

FE6AN026

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

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

Write or Type Committee Name
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From: M M 07 D D 01 Y Y Y Y 2008 To: M M 09 D D 30 Y Y Y Y 2008

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 Y Y Y Y 2008		84833.23
(b) Cash on Hand at Begining of Reporting Period	63753.19	
(c) Total Receipts (from Line 19)	46638.22	115221.10
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	110391.41	200054.33
7. Total Disbursements (from Line 31)	76399.82	166062.74
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	33991.59	33991.59
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	

[X] 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

GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From: M M 07 D D 01 Y Y Y Y 2008 To: M M 09 D D 30 Y Y Y Y 2008

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)	38506.42	74763.36
(ii) Unitemized	7749.88	38721.98
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ▶	46256.30	113485.34
(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) ..... ▶	46256.30	113485.34
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.)	381.92	1735.76
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))	46638.22	115221.10
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	46638.22	115221.10

DETAILED SUMMARY PAGE
of Disbursements

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	899.82	2699.36
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	899.82	2699.36
22. Transfers to Affiliated/Other Party Committees	10000.00	12500.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	63500.00	143000.00
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	2000.00	7863.38
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 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))	76399.82	166062.74
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	76399.82	166062.74

DETAILED SUMMARY PAGE

of Disbursements

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

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)	46256.30	113485.34
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	46256.30	113485.34
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	899.82	2699.36
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	899.82	2699.36

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)
[X] 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)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): ELAINE C ADAMS
Mailing Address: 12 CARTIER ROAD
City: ENFIELD State: CT Zip Code: 06082
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-REGULATORY COMPLIANCE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 212.80
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.21713
Amount of Each Receipt this Period: 15.20

B.
Full Name (Last, First, Middle Initial): ELAINE C ADAMS
Mailing Address: 12 CARTIER ROAD
City: ENFIELD State: CT Zip Code: 06082
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-REGULATORY COMPLIANCE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 228.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.21714
Amount of Each Receipt this Period: 15.20

C.
Full Name (Last, First, Middle Initial): ELAINE C ADAMS
Mailing Address: 12 CARTIER ROAD
City: ENFIELD State: CT Zip Code: 06082
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-REGULATORY COMPLIANCE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 243.20
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.21715
Amount of Each Receipt this Period: 15.20

SUBTOTAL of Receipts This Page (optional) ..... ▶ **45.60**

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

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): ELAINE C ADAMS
Mailing Address: 12 CARTIER ROAD
City: ENFIELD State: CT Zip Code: 06082
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-REGULATORY COMPLIANCE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 258.40
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.21716
Amount of Each Receipt this Period: 15.20

B.
Full Name (Last, First, Middle Initial): ELAINE C ADAMS
Mailing Address: 12 CARTIER ROAD
City: ENFIELD State: CT Zip Code: 06082
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-REGULATORY COMPLIANCE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 273.60
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.21717
Amount of Each Receipt this Period: 15.20

C.
Full Name (Last, First, Middle Initial): ELAINE C ADAMS
Mailing Address: 12 CARTIER ROAD
City: ENFIELD State: CT Zip Code: 06082
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-REGULATORY COMPLIANCE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 288.80
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.21718
Amount of Each Receipt this Period: 15.20

SUBTOTAL of Receipts This Page (optional) ..... ▶ **45.60**

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

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ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JAMES M ADAMS
Mailing Address: 314 MARLDALE DRIVE
City: MIDDLETOWN State: DE Zip Code: 19709
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 350.00
Date of Receipt: 07 / 03 / 2008
Transaction ID: SA11AI.21719
Amount of Each Receipt this Period: 25.00

B.
Full Name (Last, First, Middle Initial): JAMES M ADAMS
Mailing Address: 314 MARLDALE DRIVE
City: MIDDLETOWN State: DE Zip Code: 19709
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 375.00
Date of Receipt: 07 / 18 / 2008
Transaction ID: SA11AI.21720
Amount of Each Receipt this Period: 25.00

C.
Full Name (Last, First, Middle Initial): JAMES M ADAMS
Mailing Address: 314 MARLDALE DRIVE
City: MIDDLETOWN State: DE Zip Code: 19709
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 08 / 01 / 2008
Transaction ID: SA11AI.21721
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) 75.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JAMES M ADAMS
Mailing Address: 314 MARLDALE DRIVE
City: MIDDLETOWN State: DE Zip Code: 19709
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 425.00
Date of Receipt: 08 / 15 / 2008
Transaction ID: SA11AI.21722
Amount of Each Receipt this Period: 25.00

B.
Full Name (Last, First, Middle Initial): JAMES M ADAMS
Mailing Address: 314 MARLDALE DRIVE
City: MIDDLETOWN State: DE Zip Code: 19709
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 08 / 29 / 2008
Transaction ID: SA11AI.21723
Amount of Each Receipt this Period: 25.00

C.
Full Name (Last, First, Middle Initial): JAMES M ADAMS
Mailing Address: 314 MARLDALE DRIVE
City: MIDDLETOWN State: DE Zip Code: 19709
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 475.00
Date of Receipt: 09 / 12 / 2008
Transaction ID: SA11AI.21724
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) 75.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JAMES M ADAMS
Mailing Address: 314 MARLDALE DRIVE
City: MIDDLETOWN State: DE Zip Code: 19709
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 09 / 26 / 2008
Transaction ID: SA11AI.21725
Amount of Each Receipt this Period: 25.00

B.
Full Name (Last, First, Middle Initial): HARRY H ALBERTS
Mailing Address: 213 WITTSHIRE DRIVE
City: KENNETT SQUARE State: PA Zip Code: 19348
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VICE PRESIDENT-INTERNAL AUDIT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 342.02
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.21726
Amount of Each Receipt this Period: 24.43

C.
Full Name (Last, First, Middle Initial): HARRY H ALBERTS
Mailing Address: 213 WITTSHIRE DRIVE
City: KENNETT SQUARE State: PA Zip Code: 19348
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VICE PRESIDENT-INTERNAL AUDIT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 366.45
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.21727
Amount of Each Receipt this Period: 24.43

SUBTOTAL of Receipts This Page (optional) ..... ▶ 73.86

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

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): HARRY H ALBERTS
Mailing Address: 213 WITTSHIRE DRIVE
City: KENNETT SQUARE State: PA Zip Code: 19348
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VICE PRESIDENT-INTERNAL AUDIT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 390.88
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.21728
Amount of Each Receipt this Period: 24.43

B.
Full Name (Last, First, Middle Initial): HARRY H ALBERTS
Mailing Address: 213 WITTSHIRE DRIVE
City: KENNETT SQUARE State: PA Zip Code: 19348
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VICE PRESIDENT-INTERNAL AUDIT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 415.31
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.21729
Amount of Each Receipt this Period: 24.43

C.
Full Name (Last, First, Middle Initial): HARRY H ALBERTS
Mailing Address: 213 WITTSHIRE DRIVE
City: KENNETT SQUARE State: PA Zip Code: 19348
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VICE PRESIDENT-INTERNAL AUDIT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 439.74
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.21730
Amount of Each Receipt this Period: 24.43

SUBTOTAL of Receipts This Page (optional) ..... ▶ 73.29

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 / 261

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): HARRY H ALBERTS
Mailing Address: 213 WITTSHIRE DRIVE
City: KENNETT SQUARE State: PA Zip Code: 19348
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VICE PRESIDENT-INTERNAL AUDIT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 464.17
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.21731
Amount of Each Receipt this Period: 24.43

B.
Full Name (Last, First, Middle Initial): DAVID C ALMQUIST
Mailing Address: 811 GRANTLEY COURT
City: YORK State: PA Zip Code: 17403
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: PRESIDENT-DIVISIONAL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1050.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.21732
Amount of Each Receipt this Period: 75.00

C.
Full Name (Last, First, Middle Initial): DAVID C ALMQUIST
Mailing Address: 811 GRANTLEY COURT
City: YORK State: PA Zip Code: 17403
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: PRESIDENT-DIVISIONAL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1125.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.21733
Amount of Each Receipt this Period: 75.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **174.43**

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): DAVID C ALMQUIST
Mailing Address: 811 GRANTLEY COURT
City: YORK State: PA Zip Code: 17403
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: PRESIDENT-DIVISIONAL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1200.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.21734
Amount of Each Receipt this Period: 75.00

B.
Full Name (Last, First, Middle Initial): DAVID C ALMQUIST
Mailing Address: 811 GRANTLEY COURT
City: YORK State: PA Zip Code: 17403
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: PRESIDENT-DIVISIONAL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1275.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.21735
Amount of Each Receipt this Period: 75.00

C.
Full Name (Last, First, Middle Initial): DAVID C ALMQUIST
Mailing Address: 811 GRANTLEY COURT
City: YORK State: PA Zip Code: 17403
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: PRESIDENT-DIVISIONAL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1350.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.21736
Amount of Each Receipt this Period: 75.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **225.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): DAVID C ALMQUIST
Mailing Address: 811 GRANTLEY COURT
City: YORK State: PA Zip Code: 17403
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: PRESIDENT-DIVISIONAL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1425.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.21737
Amount of Each Receipt this Period: 75.00

B.
Full Name (Last, First, Middle Initial): SUSAN ANSHEN
Mailing Address: 12135 GRAY STAR WAY
City: COLUMBIA State: MD Zip Code: 21044
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VICE PRESIDENT-CLINICAL SVS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.21745
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): SUSAN ANSHEN
Mailing Address: 12135 GRAY STAR WAY
City: COLUMBIA State: MD Zip Code: 21044
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VICE PRESIDENT-CLINICAL SVS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.21746
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) 115.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): SUSAN ANSHEN
Mailing Address: 12135 GRAY STAR WAY
City: COLUMBIA State: MD Zip Code: 21044
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VICE PRESIDENT-CLINICAL SVS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 320.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.21747
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): SUSAN ANSHEN
Mailing Address: 12135 GRAY STAR WAY
City: COLUMBIA State: MD Zip Code: 21044
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VICE PRESIDENT-CLINICAL SVS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 340.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.21748
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): PAUL BACH
Mailing Address: 18 FARM RIDGE COURT
City: BALDWIN State: MD Zip Code: 21013
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-SR CENTERS OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 3015.32
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.21755
Amount of Each Receipt this Period: 215.38

SUBTOTAL of Receipts This Page (optional) ..... ▶ **255.38**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): PAUL BACH
Mailing Address: 18 FARM RIDGE COURT
City: BALDWIN State: MD Zip Code: 21013
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-SR CENTERS OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 3230.70
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.21756
Amount of Each Receipt this Period: 215.38

B.
Full Name (Last, First, Middle Initial): PAUL BACH
Mailing Address: 18 FARM RIDGE COURT
City: BALDWIN State: MD Zip Code: 21013
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-SR CENTERS OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 3446.08
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.21757
Amount of Each Receipt this Period: 215.38

C.
Full Name (Last, First, Middle Initial): PAUL BACH
Mailing Address: 18 FARM RIDGE COURT
City: BALDWIN State: MD Zip Code: 21013
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-SR CENTERS OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 3661.46
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.21758
Amount of Each Receipt this Period: 215.38

SUBTOTAL of Receipts This Page (optional) ..... ▶ **646.14**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): PAUL BACH
Mailing Address: 18 FARM RIDGE COURT
City: BALDWIN State: MD Zip Code: 21013
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-SR CENTERS OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 3876.84
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.21759
Amount of Each Receipt this Period: 215.38

B.
Full Name (Last, First, Middle Initial): PAUL BACH
Mailing Address: 18 FARM RIDGE COURT
City: BALDWIN State: MD Zip Code: 21013
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-SR CENTERS OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 4092.22
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.21760
Amount of Each Receipt this Period: 215.38

C.
Full Name (Last, First, Middle Initial): Dorothy Bassler
Mailing Address: 7-I Willow Tree Garth
City: Cockeysville State: MD Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: Genesis HealthCare Corp
Occupation: Director of Nursing
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 / 17 / 2008
Transaction ID: SA11AI.21660
Amount of Each Receipt this Period: 500.00
Contribution

SUBTOTAL of Receipts This Page (optional) 930.76

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

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): ALEX BELL
Mailing Address: 1600 GARRETT ROAD, APT. A-204
City: UPPER DARBY State: PA Zip Code: 19082
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REGIONAL REIMBURSEMNT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 560.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.21761
Amount of Each Receipt this Period: 40.00

B.
Full Name (Last, First, Middle Initial): ALEX BELL
Mailing Address: 1600 GARRETT ROAD, APT. A-204
City: UPPER DARBY State: PA Zip Code: 19082
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REGIONAL REIMBURSEMNT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.21762
Amount of Each Receipt this Period: 40.00

C.
Full Name (Last, First, Middle Initial): ALEX BELL
Mailing Address: 1600 GARRETT ROAD, APT. A-204
City: UPPER DARBY State: PA Zip Code: 19082
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REGIONAL REIMBURSEMNT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 640.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.21763
Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **120.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): ALEX BELL
Mailing Address: 1600 GARRETT ROAD, APT. A-204
City: UPPER DARBY State: PA Zip Code: 19082
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REGIONAL REIMBURSEMNT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 680.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.21764
Amount of Each Receipt this Period: 40.00

B.
Full Name (Last, First, Middle Initial): ALEX BELL
Mailing Address: 1600 GARRETT ROAD, APT. A-204
City: UPPER DARBY State: PA Zip Code: 19082
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REGIONAL REIMBURSEMNT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 720.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.21765
Amount of Each Receipt this Period: 40.00

C.
Full Name (Last, First, Middle Initial): ALEX BELL
Mailing Address: 1600 GARRETT ROAD, APT. A-204
City: UPPER DARBY State: PA Zip Code: 19082
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REGIONAL REIMBURSEMNT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 760.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.21766
Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) 120.00

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

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): ALICEMAE BELL
Mailing Address: 23 PEMBROKE LANE
City: AGAWAM State: MA Zip Code: 01001
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-CONSULTING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 242.34
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.21767
Amount of Each Receipt this Period: 17.31

B.
Full Name (Last, First, Middle Initial): ALICEMAE BELL
Mailing Address: 23 PEMBROKE LANE
City: AGAWAM State: MA Zip Code: 01001
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-CONSULTING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 259.65
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.21768
Amount of Each Receipt this Period: 17.31

C.
Full Name (Last, First, Middle Initial): ALICEMAE BELL
Mailing Address: 23 PEMBROKE LANE
City: AGAWAM State: MA Zip Code: 01001
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-CONSULTING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 276.96
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.21769
Amount of Each Receipt this Period: 17.31

SUBTOTAL of Receipts This Page (optional) ..... ▶ **51.93**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): ALICEMAE BELL
Mailing Address: 23 PEMBROKE LANE
City: AGAWAM State: MA Zip Code: 01001
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-CONSULTING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 294.27
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.21770
Amount of Each Receipt this Period: 17.31

B.
Full Name (Last, First, Middle Initial): ALICEMAE BELL
Mailing Address: 23 PEMBROKE LANE
City: AGAWAM State: MA Zip Code: 01001
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-CONSULTING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 311.58
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.21771
Amount of Each Receipt this Period: 17.31

C.
Full Name (Last, First, Middle Initial): ALICEMAE BELL
Mailing Address: 23 PEMBROKE LANE
City: AGAWAM State: MA Zip Code: 01001
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-CONSULTING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 328.89
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.21772
Amount of Each Receipt this Period: 17.31

SUBTOTAL of Receipts This Page (optional) ..... ▶ **51.93**

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JEFFREY BERENBACH
Mailing Address: 8007 YELLOWSTONE RD
City: KINGSVILLE State: MD Zip Code: 21087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 700.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.21773
Amount of Each Receipt this Period: 50.00

B.
Full Name (Last, First, Middle Initial): JEFFREY BERENBACH
Mailing Address: 8007 YELLOWSTONE RD
City: KINGSVILLE State: MD Zip Code: 21087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 750.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.21774
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial): JEFFREY BERENBACH
Mailing Address: 8007 YELLOWSTONE RD
City: KINGSVILLE State: MD Zip Code: 21087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 800.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.21775
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) 150.00

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

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial)
JEFFREY BERENBACH
Mailing Address 8007 YELLOWSTONE RD
City: KINGSVILLE State: MD Zip Code: 21087
FEC ID number of contributing federal political committee. C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 850.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.21776
Amount of Each Receipt this Period: 50.00

B.
Full Name (Last, First, Middle Initial)
JEFFREY BERENBACH
Mailing Address 8007 YELLOWSTONE RD
City: KINGSVILLE State: MD Zip Code: 21087
FEC ID number of contributing federal political committee. C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 900.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.21777
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial)
JEFFREY BERENBACH
Mailing Address 8007 YELLOWSTONE RD
City: KINGSVILLE State: MD Zip Code: 21087
FEC ID number of contributing federal political committee. C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 950.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.21778
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **150.00**

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): DAVID BERTHA
Mailing Address: 212 ARDMORE AVENUE
City: HADDONFIELD State: NJ Zip Code: 08033
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: PRESIDENT-GEN HOSPITALITY SVS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 560.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.21781
Amount of Each Receipt this Period: 40.00

B.
Full Name (Last, First, Middle Initial): DAVID BERTHA
Mailing Address: 212 ARDMORE AVENUE
City: HADDONFIELD State: NJ Zip Code: 08033
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: PRESIDENT-GEN HOSPITALITY SVS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.21782
Amount of Each Receipt this Period: 40.00

C.
Full Name (Last, First, Middle Initial): DAVID BERTHA
Mailing Address: 212 ARDMORE AVENUE
City: HADDONFIELD State: NJ Zip Code: 08033
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: PRESIDENT-GEN HOSPITALITY SVS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2600.00
Date of Receipt: 08 / 05 / 2008
Transaction ID: SA11AI.21663
Amount of Each Receipt this Period: 2000.00
Contribution

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2080.00**

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

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): DAVID BERTHA
Mailing Address: 212 ARDMORE AVENUE
City: HADDONFIELD State: NJ Zip Code: 08033
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: PRESIDENT-GEN HOSPITALITY SVS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2640.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.21783
Amount of Each Receipt this Period: 40.00

B.
Full Name (Last, First, Middle Initial): DAVID BERTHA
Mailing Address: 212 ARDMORE AVENUE
City: HADDONFIELD State: NJ Zip Code: 08033
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: PRESIDENT-GEN HOSPITALITY SVS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2680.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.21784
Amount of Each Receipt this Period: 40.00

C.
Full Name (Last, First, Middle Initial): DAVID BERTHA
Mailing Address: 212 ARDMORE AVENUE
City: HADDONFIELD State: NJ Zip Code: 08033
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: PRESIDENT-GEN HOSPITALITY SVS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2720.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.21785
Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **120.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): DAVID BERTHA
Mailing Address: 212 ARDMORE AVENUE
City: HADDONFIELD State: NJ Zip Code: 08033
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: PRESIDENT-GEN HOSPITALITY SVS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2760.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.21786
Amount of Each Receipt this Period: 40.00

B.
Full Name (Last, First, Middle Initial): RICHARD P. BLINN
Mailing Address: 67 BLOSSOM ROAD
City: WINDHAM State: NH Zip Code: 03087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: PRESIDENT-DIVISIONAL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1800.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.21799
Amount of Each Receipt this Period: 100.00

C.
Full Name (Last, First, Middle Initial): RICHARD P. BLINN
Mailing Address: 67 BLOSSOM ROAD
City: WINDHAM State: NH Zip Code: 03087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: PRESIDENT-DIVISIONAL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1900.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.21800
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **240.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): RICHARD P. BLINN
Mailing Address: 67 BLOSSOM ROAD
City: WINDHAM State: NH Zip Code: 03087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: PRESIDENT-DIVISIONAL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2000.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.21801
Amount of Each Receipt this Period: 100.00

B.
Full Name (Last, First, Middle Initial): RICHARD P. BLINN
Mailing Address: 67 BLOSSOM ROAD
City: WINDHAM State: NH Zip Code: 03087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: PRESIDENT-DIVISIONAL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2100.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.21802
Amount of Each Receipt this Period: 100.00

C.
Full Name (Last, First, Middle Initial): RICHARD P. BLINN
Mailing Address: 67 BLOSSOM ROAD
City: WINDHAM State: NH Zip Code: 03087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: PRESIDENT-DIVISIONAL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2150.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.21803
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **250.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): RICHARD P. BLINN
Mailing Address: 67 BLOSSOM ROAD
City: WINDHAM State: NH Zip Code: 03087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: PRESIDENT-DIVISIONAL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2200.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.21804
Amount of Each Receipt this Period: 50.00

B.
Full Name (Last, First, Middle Initial): EDWARD J BOEGGEMAN
Mailing Address: 11 CONCORD WAY
City: CHADDS FORD State: PA Zip Code: 19317
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP & REGIONAL CONTROLLER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 840.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.21805
Amount of Each Receipt this Period: 60.00

C.
Full Name (Last, First, Middle Initial): EDWARD J BOEGGEMAN
Mailing Address: 11 CONCORD WAY
City: CHADDS FORD State: PA Zip Code: 19317
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP & REGIONAL CONTROLLER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 900.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.21806
Amount of Each Receipt this Period: 60.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **170.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 29 / 261

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): EDWARD J BOEGGEMAN
Mailing Address: 11 CONCORD WAY
City: CHADDS FORD State: PA Zip Code: 19317
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP & REGIONAL CONTROLLER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 960.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.21807
Amount of Each Receipt this Period: 60.00

B.
Full Name (Last, First, Middle Initial): EDWARD J BOEGGEMAN
Mailing Address: 11 CONCORD WAY
City: CHADDS FORD State: PA Zip Code: 19317
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP & REGIONAL CONTROLLER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1020.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.21808
Amount of Each Receipt this Period: 60.00

C.
Full Name (Last, First, Middle Initial): EDWARD J BOEGGEMAN
Mailing Address: 11 CONCORD WAY
City: CHADDS FORD State: PA Zip Code: 19317
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP & REGIONAL CONTROLLER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1095.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.21809
Amount of Each Receipt this Period: 75.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **195.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): EDWARD J BOEGGEMAN
Mailing Address: 11 CONCORD WAY
City: CHADDS FORD State: PA Zip Code: 19317
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP & REGIONAL CONTROLLER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1170.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.21810
Amount of Each Receipt this Period: 75.00

B.
Full Name (Last, First, Middle Initial): REGINA BOSSIG
Mailing Address: 236 POPLAR ST
City: FEEDING HILLS State: MA Zip Code: 01030
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: NURSE INSTRUCTOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 209.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.21822
Amount of Each Receipt this Period: 11.00

C.
Full Name (Last, First, Middle Initial): JOSEPH B. BOURNE
Mailing Address: 16 PERRY RIDGE COURT
City: BALTIMORE State: MD Zip Code: 21237
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: SR VP-RESP HEALTH SVS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: 07 / 03 / 2008
Transaction ID: SA11AI.21823
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) 106.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial)
JOSEPH B. BOURNE
Mailing Address 16 PERRY RIDGE COURT
City: BALTIMORE State: MD Zip Code: 21237
FEC ID number of contributing federal political committee. C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: SR VP-RESP HEALTH SVS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 / 18 / 2008
Transaction ID: SA11AI.21824
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial)
JOSEPH B. BOURNE
Mailing Address 16 PERRY RIDGE COURT
City: BALTIMORE State: MD Zip Code: 21237
FEC ID number of contributing federal political committee. C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: SR VP-RESP HEALTH SVS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 320.00
Date of Receipt: 08 / 01 / 2008
Transaction ID: SA11AI.21825
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial)
JOSEPH B. BOURNE
Mailing Address 16 PERRY RIDGE COURT
City: BALTIMORE State: MD Zip Code: 21237
FEC ID number of contributing federal political committee. C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: SR VP-RESP HEALTH SVS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 340.00
Date of Receipt: 08 / 15 / 2008
Transaction ID: SA11AI.21826
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 60.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JOSEPH B. BOURNE
Mailing Address: 16 PERRY RIDGE COURT
City: BALTIMORE State: MD Zip Code: 21237
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: SR VP-RESP HEALTH SVS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: 08 / 29 / 2008
Transaction ID: SA11AI.21827
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): JOSEPH B. BOURNE
Mailing Address: 16 PERRY RIDGE COURT
City: BALTIMORE State: MD Zip Code: 21237
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: SR VP-RESP HEALTH SVS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 380.00
Date of Receipt: 09 / 12 / 2008
Transaction ID: SA11AI.21828
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): JOSEPH B. BOURNE
Mailing Address: 16 PERRY RIDGE COURT
City: BALTIMORE State: MD Zip Code: 21237
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: SR VP-RESP HEALTH SVS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 09 / 26 / 2008
Transaction ID: SA11AI.21829
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) 60.00

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

SCHEDULE A (FEC Form 3X)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): ROBERT M CANNON
Mailing Address: 2408 LANDON DRIVE
City: WILMINGTON State: DE Zip Code: 19810
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-ACCOUNTING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 350.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.21865
Amount of Each Receipt this Period: 25.00

B.
Full Name (Last, First, Middle Initial): ROBERT M CANNON
Mailing Address: 2408 LANDON DRIVE
City: WILMINGTON State: DE Zip Code: 19810
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-ACCOUNTING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 375.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.21866
Amount of Each Receipt this Period: 25.00

C.
Full Name (Last, First, Middle Initial): ROBERT M CANNON
Mailing Address: 2408 LANDON DRIVE
City: WILMINGTON State: DE Zip Code: 19810
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-ACCOUNTING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.21867
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **75.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): ROBERT M CANNON
Mailing Address: 2408 LANDON DRIVE
City: WILMINGTON State: DE Zip Code: 19810
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-ACCOUNTING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 425.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.21868
Amount of Each Receipt this Period: 25.00

B.
Full Name (Last, First, Middle Initial): ROBERT M CANNON
Mailing Address: 2408 LANDON DRIVE
City: WILMINGTON State: DE Zip Code: 19810
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-ACCOUNTING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.21869
Amount of Each Receipt this Period: 25.00

C.
Full Name (Last, First, Middle Initial): ROBERT M CANNON
Mailing Address: 2408 LANDON DRIVE
City: WILMINGTON State: DE Zip Code: 19810
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-ACCOUNTING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 475.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.21870
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) 75.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): PAUL T CASS
Mailing Address: 804 GENERAL STERLING DRIVE
City: WEST CHESTER State: PA Zip Code: 19382
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-SENIOR MEDICAL AFFAIRS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2100.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.21877
Amount of Each Receipt this Period: 150.00

B.
Full Name (Last, First, Middle Initial): PAUL T CASS
Mailing Address: 804 GENERAL STERLING DRIVE
City: WEST CHESTER State: PA Zip Code: 19382
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-SENIOR MEDICAL AFFAIRS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2250.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.21878
Amount of Each Receipt this Period: 150.00

C.
Full Name (Last, First, Middle Initial): PAUL T CASS
Mailing Address: 804 GENERAL STERLING DRIVE
City: WEST CHESTER State: PA Zip Code: 19382
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-SENIOR MEDICAL AFFAIRS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2400.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.21879
Amount of Each Receipt this Period: 150.00

SUBTOTAL of Receipts This Page (optional) 450.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): PAUL T CASS
Mailing Address: 804 GENERAL STERLING DRIVE
City: WEST CHESTER State: PA Zip Code: 19382
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-SENIOR MEDICAL AFFAIRS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2550.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.21880
Amount of Each Receipt this Period: 150.00

B.
Full Name (Last, First, Middle Initial): PAUL T CASS
Mailing Address: 804 GENERAL STERLING DRIVE
City: WEST CHESTER State: PA Zip Code: 19382
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-SENIOR MEDICAL AFFAIRS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2700.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.21881
Amount of Each Receipt this Period: 150.00

C.
Full Name (Last, First, Middle Initial): PAUL T CASS
Mailing Address: 804 GENERAL STERLING DRIVE
City: WEST CHESTER State: PA Zip Code: 19382
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-SENIOR MEDICAL AFFAIRS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2850.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.21882
Amount of Each Receipt this Period: 150.00

SUBTOTAL of Receipts This Page (optional) 450.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): Richard Castor
Mailing Address: 2117 Fox Creek Road
City: Berwyn State: PA Zip Code: 19312
FEC ID number of contributing federal political committee: C
Name of Employer: Genesis HealthCare Corporation
Occupation: Chief Information Officer
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2000.00
Date of Receipt: 09 / 01 / 2008
Transaction ID: SA11AI.21667
Amount of Each Receipt this Period: 2000.00
Contribution

B.
Full Name (Last, First, Middle Initial): MICHAEL CIAMBELLA
Mailing Address: 371 WEST BALTIMORE PIKE
City: MEDIA State: PA Zip Code: 19063
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-STAFF DEVELOPMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.21890
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): MICHAEL CIAMBELLA
Mailing Address: 371 WEST BALTIMORE PIKE
City: MEDIA State: PA Zip Code: 19063
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-STAFF DEVELOPMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.21891
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **2040.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): MICHAEL CIAMBELLA
Mailing Address: 371 WEST BALTIMORE PIKE
City: MEDIA State: PA Zip Code: 19063
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-STAFF DEVELOPMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 320.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.21892
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): MICHAEL CIAMBELLA
Mailing Address: 371 WEST BALTIMORE PIKE
City: MEDIA State: PA Zip Code: 19063
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-STAFF DEVELOPMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 340.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.21893
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): MICHAEL CIAMBELLA
Mailing Address: 371 WEST BALTIMORE PIKE
City: MEDIA State: PA Zip Code: 19063
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-STAFF DEVELOPMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.21894
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): MICHAEL CIAMBELLA
Mailing Address: 371 WEST BALTIMORE PIKE
City: MEDIA State: PA Zip Code: 19063
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-STAFF DEVELOPMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 380.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.21895
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): RICHARD E CODY
Mailing Address: 106 DANFORTH PLACE
City: WILIMINGTON State: DE Zip Code: 19810
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-INFORMATION SYSTEMS 2
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 644.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.21896
Amount of Each Receipt this Period: 46.00

C.
Full Name (Last, First, Middle Initial): RICHARD E CODY
Mailing Address: 106 DANFORTH PLACE
City: WILIMINGTON State: DE Zip Code: 19810
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-INFORMATION SYSTEMS 2
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 690.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.21897
Amount of Each Receipt this Period: 46.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **112.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): RICHARD E CODY
Mailing Address: 106 DANFORTH PLACE
City: WILIMINGTON State: DE Zip Code: 19810
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-INFORMATION SYSTEMS 2
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 736.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.21898
Amount of Each Receipt this Period: 46.00

B.
Full Name (Last, First, Middle Initial): RICHARD E CODY
Mailing Address: 106 DANFORTH PLACE
City: WILIMINGTON State: DE Zip Code: 19810
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-INFORMATION SYSTEMS 2
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 782.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.21899
Amount of Each Receipt this Period: 46.00

C.
Full Name (Last, First, Middle Initial): RICHARD E CODY
Mailing Address: 106 DANFORTH PLACE
City: WILIMINGTON State: DE Zip Code: 19810
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-INFORMATION SYSTEMS 2
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 828.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.21900
Amount of Each Receipt this Period: 46.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **138.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): RICHARD E CODY
Mailing Address: 106 DANFORTH PLACE
City: WILIMINGTON State: DE Zip Code: 19810
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-INFORMATION SYSTEMS 2
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 874.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.21901
Amount of Each Receipt this Period: 46.00

B.
Full Name (Last, First, Middle Initial): EILEEN M. COGGINS
Mailing Address: 406 N. ESSEX AVENUE
City: NARBERTH State: PA Zip Code: 19072
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: SR VP-GENERAL COUNSEL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 630.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.21902
Amount of Each Receipt this Period: 45.00

C.
Full Name (Last, First, Middle Initial): EILEEN M. COGGINS
Mailing Address: 406 N. ESSEX AVENUE
City: NARBERTH State: PA Zip Code: 19072
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: SR VP-GENERAL COUNSEL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 675.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.21903
Amount of Each Receipt this Period: 45.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **136.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): EILEEN M. COGGINS
Mailing Address: 406 N. ESSEX AVENUE
City: NARBERTH State: PA Zip Code: 19072
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: SR VP-GENERAL COUNSEL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 720.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.21904
Amount of Each Receipt this Period: 45.00

B.
Full Name (Last, First, Middle Initial): EILEEN M. COGGINS
Mailing Address: 406 N. ESSEX AVENUE
City: NARBERTH State: PA Zip Code: 19072
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: SR VP-GENERAL COUNSEL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 765.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.21905
Amount of Each Receipt this Period: 45.00

C.
Full Name (Last, First, Middle Initial): EILEEN M. COGGINS
Mailing Address: 406 N. ESSEX AVENUE
City: NARBERTH State: PA Zip Code: 19072
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: SR VP-GENERAL COUNSEL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 810.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.21906
Amount of Each Receipt this Period: 45.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **135.00**

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

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): EILEEN M. COGGINS
Mailing Address: 406 N. ESSEX AVENUE
City: NARBERTH State: PA Zip Code: 19072
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: SR VP-GENERAL COUNSEL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 855.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.21907
Amount of Each Receipt this Period: 45.00

B.
Full Name (Last, First, Middle Initial): MICHELLE L. COSTA
Mailing Address: 109 JILLIAN WAY
City: WESTPORT State: MA Zip Code: 02790
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-CLINICAL OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 700.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.21914
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial): MICHELLE L. COSTA
Mailing Address: 109 JILLIAN WAY
City: WESTPORT State: MA Zip Code: 02790
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-CLINICAL OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 750.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.21915
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **145.00**

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

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): MICHELLE L. COSTA
Mailing Address: 109 JILLIAN WAY
City: WESTPORT State: MA Zip Code: 02790
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-CLINICAL OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 800.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.21916
Amount of Each Receipt this Period: 50.00

B.
Full Name (Last, First, Middle Initial): MICHELLE L. COSTA
Mailing Address: 109 JILLIAN WAY
City: WESTPORT State: MA Zip Code: 02790
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-CLINICAL OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 850.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.21917
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial): MICHELLE L. COSTA
Mailing Address: 109 JILLIAN WAY
City: WESTPORT State: MA Zip Code: 02790
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-CLINICAL OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 900.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.21918
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **150.00**

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): MICHELLE L. COSTA
Mailing Address: 109 JILLIAN WAY
City: WESTPORT State: MA Zip Code: 02790
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-CLINICAL OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 950.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.21919
Amount of Each Receipt this Period: 50.00

B.
Full Name (Last, First, Middle Initial): M. ELLEN CULLEN
Mailing Address: 230 WICKERSHAM ROAD
City: OXFORD State: PA Zip Code: 19363
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-CLINICAL AUDIT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 210.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.21922
Amount of Each Receipt this Period: 15.00

C.
Full Name (Last, First, Middle Initial): M. ELLEN CULLEN
Mailing Address: 230 WICKERSHAM ROAD
City: OXFORD State: PA Zip Code: 19363
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-CLINICAL AUDIT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 225.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.21923
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **80.00**

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): M. ELLEN CULLEN
Mailing Address: 230 WICKERSHAM ROAD
City: OXFORD State: PA Zip Code: 19363
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-CLINICAL AUDIT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.21924
Amount of Each Receipt this Period: 15.00

B.
Full Name (Last, First, Middle Initial): M. ELLEN CULLEN
Mailing Address: 230 WICKERSHAM ROAD
City: OXFORD State: PA Zip Code: 19363
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-CLINICAL AUDIT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 255.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.21925
Amount of Each Receipt this Period: 15.00

C.
Full Name (Last, First, Middle Initial): M. ELLEN CULLEN
Mailing Address: 230 WICKERSHAM ROAD
City: OXFORD State: PA Zip Code: 19363
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-CLINICAL AUDIT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 270.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.21926
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **45.00**

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): M. ELLEN CULLEN
Mailing Address: 230 WICKERSHAM ROAD
City: OXFORD State: PA Zip Code: 19363
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-CLINICAL AUDIT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 285.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.21927
Amount of Each Receipt this Period: 15.00

B.
Full Name (Last, First, Middle Initial): KENNETH CULLEROT
Mailing Address: 44 TANGLEWOOD DRIVE
City: HENNIKER State: NH Zip Code: 03242
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP & REGIONAL CONTROLLER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 420.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.21928
Amount of Each Receipt this Period: 30.00

C.
Full Name (Last, First, Middle Initial): KENNETH CULLEROT
Mailing Address: 44 TANGLEWOOD DRIVE
City: HENNIKER State: NH Zip Code: 03242
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP & REGIONAL CONTROLLER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.21929
Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 75.00

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): KENNETH CULLEROT
Mailing Address: 44 TANGLEWOOD DRIVE
City: HENNIKER State: NH Zip Code: 03242
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP & REGIONAL CONTROLLER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.21930
Amount of Each Receipt this Period: 30.00

B.
Full Name (Last, First, Middle Initial): KENNETH CULLEROT
Mailing Address: 44 TANGLEWOOD DRIVE
City: HENNIKER State: NH Zip Code: 03242
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP & REGIONAL CONTROLLER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 510.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.21931
Amount of Each Receipt this Period: 30.00

C.
Full Name (Last, First, Middle Initial): KENNETH CULLEROT
Mailing Address: 44 TANGLEWOOD DRIVE
City: HENNIKER State: NH Zip Code: 03242
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP & REGIONAL CONTROLLER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 540.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.21932
Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) 90.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): KENNETH CULLEROT
Mailing Address: 44 TANGLEWOOD DRIVE
City: HENNIKER State: NH Zip Code: 03242
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP & REGIONAL CONTROLLER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 570.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.21933
Amount of Each Receipt this Period: 30.00

B.
Full Name (Last, First, Middle Initial): JEFF CUNNINGHAM
Mailing Address: 831 FOUR STREAMS DRIVE
City: WEST CHESTER State: PA Zip Code: 19382
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-CENTRAL BUSINESS OFFC
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 700.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.21941
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial): JEFF CUNNINGHAM
Mailing Address: 831 FOUR STREAMS DRIVE
City: WEST CHESTER State: PA Zip Code: 19382
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-CENTRAL BUSINESS OFFC
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 750.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.21942
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **130.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial)
JEFF CUNNINGHAM
Mailing Address 831 FOUR STREAMS DRIVE
City: WEST CHESTER State: PA Zip Code: 19382
FEC ID number of contributing federal political committee. C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-CENTRAL BUSINESS OFFC
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 800.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.21943
Amount of Each Receipt this Period: 50.00

B.
Full Name (Last, First, Middle Initial)
JEFF CUNNINGHAM
Mailing Address 831 FOUR STREAMS DRIVE
City: WEST CHESTER State: PA Zip Code: 19382
FEC ID number of contributing federal political committee. C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-CENTRAL BUSINESS OFFC
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 850.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.21944
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial)
JEFF CUNNINGHAM
Mailing Address 831 FOUR STREAMS DRIVE
City: WEST CHESTER State: PA Zip Code: 19382
FEC ID number of contributing federal political committee. C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-CENTRAL BUSINESS OFFC
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 900.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.21945
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) 150.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 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)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JEFF CUNNINGHAM
Mailing Address: 831 FOUR STREAMS DRIVE
City: WEST CHESTER State: PA Zip Code: 19382
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-CENTRAL BUSINESS OFFC
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 950.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.21946
Amount of Each Receipt this Period: 50.00

B.
Full Name (Last, First, Middle Initial): KEITH DAVIS
Mailing Address: 33 RICKLAND DRIVE
City: SEWELL State: NJ Zip Code: 08080
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REIMBURSEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 210.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.21976
Amount of Each Receipt this Period: 15.00

C.
Full Name (Last, First, Middle Initial): KEITH DAVIS
Mailing Address: 33 RICKLAND DRIVE
City: SEWELL State: NJ Zip Code: 08080
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REIMBURSEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 225.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.21977
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **80.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): KEITH DAVIS
Mailing Address: 33 RICKLAND DRIVE
City: SEWELL State: NJ Zip Code: 08080
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REIMBURSEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.21978
Amount of Each Receipt this Period: 15.00

B.
Full Name (Last, First, Middle Initial): KEITH DAVIS
Mailing Address: 33 RICKLAND DRIVE
City: SEWELL State: NJ Zip Code: 08080
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REIMBURSEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 255.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.21979
Amount of Each Receipt this Period: 15.00

C.
Full Name (Last, First, Middle Initial): KEITH DAVIS
Mailing Address: 33 RICKLAND DRIVE
City: SEWELL State: NJ Zip Code: 08080
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REIMBURSEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 270.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.21980
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 53 / 261

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): KEITH DAVIS
Mailing Address: 33 RICKLAND DRIVE
City: SEWELL State: NJ Zip Code: 08080
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REIMBURSEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 285.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.21981
Amount of Each Receipt this Period: 15.00

B.
Full Name (Last, First, Middle Initial): CAROLYN DIEFENDERFER
Mailing Address: 1 DUBB DRIVE
City: NEWARK State: DE Zip Code: 19702
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-CORPORATE BILLING SYS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 700.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.21995
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial): CAROLYN DIEFENDERFER
Mailing Address: 1 DUBB DRIVE
City: NEWARK State: DE Zip Code: 19702
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-CORPORATE BILLING SYS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 750.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.21996
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **115.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): CAROLYN DIEFENDERFER
Mailing Address: 1 DUBB DRIVE
City: NEWARK State: DE Zip Code: 19702
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-CORPORATE BILLING SYS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 800.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.21997
Amount of Each Receipt this Period: 50.00

B.
Full Name (Last, First, Middle Initial): CAROLYN DIEFENDERFER
Mailing Address: 1 DUBB DRIVE
City: NEWARK State: DE Zip Code: 19702
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-CORPORATE BILLING SYS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 850.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.21998
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial): CAROLYN DIEFENDERFER
Mailing Address: 1 DUBB DRIVE
City: NEWARK State: DE Zip Code: 19702
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-CORPORATE BILLING SYS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 905.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.21999
Amount of Each Receipt this Period: 55.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **155.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 55 / 261

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): CAROLYN DIEFENDERFER
Mailing Address: 1 DUBB DRIVE
City: NEWARK State: DE Zip Code: 19702
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-CORPORATE BILLING SYS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 960.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22000
Amount of Each Receipt this Period: 55.00

B.
Full Name (Last, First, Middle Initial): THOMAS DIVITTORIO
Mailing Address: 20 SHEFFIELD DRIVE
City: WEST GROVE State: PA Zip Code: 19390
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP & ASST CORPORATE CONTROLLER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1890.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.21989
Amount of Each Receipt this Period: 135.00

C.
Full Name (Last, First, Middle Initial): THOMAS DIVITTORIO
Mailing Address: 20 SHEFFIELD DRIVE
City: WEST GROVE State: PA Zip Code: 19390
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP & ASST CORPORATE CONTROLLER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2025.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.21990
Amount of Each Receipt this Period: 135.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **325.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): THOMAS DIVITTORIO
Mailing Address: 20 SHEFFIELD DRIVE
City: WEST GROVE State: PA Zip Code: 19390
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP & ASST CORPORATE CONTROLLER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2160.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.21991
Amount of Each Receipt this Period: 135.00

B.
Full Name (Last, First, Middle Initial): THOMAS DIVITTORIO
Mailing Address: 20 SHEFFIELD DRIVE
City: WEST GROVE State: PA Zip Code: 19390
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP & ASST CORPORATE CONTROLLER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2295.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.21992
Amount of Each Receipt this Period: 135.00

C.
Full Name (Last, First, Middle Initial): THOMAS DIVITTORIO
Mailing Address: 20 SHEFFIELD DRIVE
City: WEST GROVE State: PA Zip Code: 19390
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP & ASST CORPORATE CONTROLLER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2487.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.21993
Amount of Each Receipt this Period: 192.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **462.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 57 / 261

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): THOMAS DIVITTORIO
Mailing Address: 20 SHEFFIELD DRIVE
City: WEST GROVE State: PA Zip Code: 19390
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP & ASST CORPORATE CONTROLLER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2679.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.21994
Amount of Each Receipt this Period: 192.00

B.
Full Name (Last, First, Middle Initial): CAROL DOCKEY
Mailing Address: 46 ECHO LANE
City: TREMONT State: PA Zip Code: 17981
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 210.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22008
Amount of Each Receipt this Period: 15.00

C.
Full Name (Last, First, Middle Initial): CAROL DOCKEY
Mailing Address: 46 ECHO LANE
City: TREMONT State: PA Zip Code: 17981
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 225.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22009
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **222.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): CAROL DOCKEY
Mailing Address: 46 ECHO LANE
City: TREMONT State: PA Zip Code: 17981
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22010
Amount of Each Receipt this Period: 15.00

B.
Full Name (Last, First, Middle Initial): CAROL DOCKEY
Mailing Address: 46 ECHO LANE
City: TREMONT State: PA Zip Code: 17981
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 255.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22011
Amount of Each Receipt this Period: 15.00

C.
Full Name (Last, First, Middle Initial): CAROL DOCKEY
Mailing Address: 46 ECHO LANE
City: TREMONT State: PA Zip Code: 17981
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 265.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22012
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **40.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one) PAGE 59 / 261

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): CAROL DOCKEY
Mailing Address: 46 ECHO LANE
City: TREMONT State: PA Zip Code: 17981
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 275.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22013
Amount of Each Receipt this Period: 10.00

B.
Full Name (Last, First, Middle Initial): MARY T DOUGHERTY
Mailing Address: 1300 NEW YORK AVE
City: MANASQUAN State: NJ Zip Code: 08736
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-HOSPITALITY SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22021
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): MARY T DOUGHERTY
Mailing Address: 1300 NEW YORK AVE
City: MANASQUAN State: NJ Zip Code: 08736
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-HOSPITALITY SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22022
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **50.00**

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SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one) PAGE 60 / 261

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): MARY T DOUGHERTY
Mailing Address: 1300 NEW YORK AVE
City: MANASQUAN State: NJ Zip Code: 08736
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-HOSPITALITY SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 320.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22023
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): MARY T DOUGHERTY
Mailing Address: 1300 NEW YORK AVE
City: MANASQUAN State: NJ Zip Code: 08736
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-HOSPITALITY SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 340.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22024
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): MARY T DOUGHERTY
Mailing Address: 1300 NEW YORK AVE
City: MANASQUAN State: NJ Zip Code: 08736
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-HOSPITALITY SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22025
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): MARY T DOUGHERTY
Mailing Address: 1300 NEW YORK AVE
City: MANASQUAN State: NJ Zip Code: 08736
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-HOSPITALITY SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 380.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22026
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): JOSEPH DVORAK
Mailing Address: 1408 CHESAPEAKE AVE
City: BALTIMORE State: MD Zip Code: 21220
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-REIMBURSEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 322.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22027
Amount of Each Receipt this Period: 23.00

C.
Full Name (Last, First, Middle Initial): JOSEPH DVORAK
Mailing Address: 1408 CHESAPEAKE AVE
City: BALTIMORE State: MD Zip Code: 21220
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-REIMBURSEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 345.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22028
Amount of Each Receipt this Period: 23.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **66.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JOSEPH DVORAK
Mailing Address: 1408 CHESAPEAKE AVE
City: BALTIMORE State: MD Zip Code: 21220
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-REIMBURSEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 368.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22029
Amount of Each Receipt this Period: 23.00

B.
Full Name (Last, First, Middle Initial): JOSEPH DVORAK
Mailing Address: 1408 CHESAPEAKE AVE
City: BALTIMORE State: MD Zip Code: 21220
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-REIMBURSEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 391.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22030
Amount of Each Receipt this Period: 23.00

C.
Full Name (Last, First, Middle Initial): JOSEPH DVORAK
Mailing Address: 1408 CHESAPEAKE AVE
City: BALTIMORE State: MD Zip Code: 21220
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-REIMBURSEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 414.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22031
Amount of Each Receipt this Period: 23.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **69.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JOSEPH DVORAK
Mailing Address: 1408 CHESAPEAKE AVE
City: BALTIMORE State: MD Zip Code: 21220
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-REIMBURSEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 437.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22032
Amount of Each Receipt this Period: 23.00

B.
Full Name (Last, First, Middle Initial): KAREN Y. DYE
Mailing Address: PO BOX 12166
City: WILMINGTON State: DE Zip Code: 19850
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-REIMBURSEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 209.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22038
Amount of Each Receipt this Period: 11.00

C.
Full Name (Last, First, Middle Initial): GWENDOLYN EAGEN
Mailing Address: 102 BARTON DRIVE
City: SPRING CITY State: PA Zip Code: 19475
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-HRIS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 210.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22039
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 49.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): GWENDOLYN EAGEN
Mailing Address: 102 BARTON DRIVE
City: SPRING CITY State: PA Zip Code: 19475
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-HRIS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 225.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22040
Amount of Each Receipt this Period: 15.00

B.
Full Name (Last, First, Middle Initial): GWENDOLYN EAGEN
Mailing Address: 102 BARTON DRIVE
City: SPRING CITY State: PA Zip Code: 19475
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-HRIS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22041
Amount of Each Receipt this Period: 15.00

C.
Full Name (Last, First, Middle Initial): GWENDOLYN EAGEN
Mailing Address: 102 BARTON DRIVE
City: SPRING CITY State: PA Zip Code: 19475
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-HRIS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 255.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22042
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) 45.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 65 / 261

[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): GWENDOLYN EAGEN
Mailing Address: 102 BARTON DRIVE
City: SPRING CITY State: PA Zip Code: 19475
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-HRIS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 270.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22043
Amount of Each Receipt this Period: 15.00

B.
Full Name (Last, First, Middle Initial): GWENDOLYN EAGEN
Mailing Address: 102 BARTON DRIVE
City: SPRING CITY State: PA Zip Code: 19475
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-HRIS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 285.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22044
Amount of Each Receipt this Period: 15.00

C.
Full Name (Last, First, Middle Initial): SHAWN P. EDDY
Mailing Address: 5303 WESTBROOK DRIVE
City: CROSS LANES State: WV Zip Code: 25313
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR-EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: 07 / 03 / 2008
Transaction ID: SA11AI.22045
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **50.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): SHAWN P. EDDY
Mailing Address: 5303 WESTBROOK DRIVE
City: CROSS LANES State: WV Zip Code: 25313
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR-EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 / 18 / 2008
Transaction ID: SA11AI.22046
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): SHAWN P. EDDY
Mailing Address: 5303 WESTBROOK DRIVE
City: CROSS LANES State: WV Zip Code: 25313
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR-EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 320.00
Date of Receipt: 08 / 01 / 2008
Transaction ID: SA11AI.22047
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): SHAWN P. EDDY
Mailing Address: 5303 WESTBROOK DRIVE
City: CROSS LANES State: WV Zip Code: 25313
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR-EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 340.00
Date of Receipt: 08 / 15 / 2008
Transaction ID: SA11AI.22048
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): SHAWN P. EDDY
Mailing Address: 5303 WESTBROOK DRIVE
City: CROSS LANES State: WV Zip Code: 25313
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR-EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: 08 / 29 / 2008
Transaction ID: SA11AI.22049
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): SHAWN P. EDDY
Mailing Address: 5303 WESTBROOK DRIVE
City: CROSS LANES State: WV Zip Code: 25313
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR-EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 380.00
Date of Receipt: 09 / 12 / 2008
Transaction ID: SA11AI.22050
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): SHAWN P. EDDY
Mailing Address: 5303 WESTBROOK DRIVE
City: CROSS LANES State: WV Zip Code: 25313
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR-EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 09 / 26 / 2008
Transaction ID: SA11AI.22051
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) 60.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial)
J. RICHARD EDWARDS
Mailing Address 29 SOUTH HAMPTON PARISH ROAD
City: LANDENBERG State: PA Zip Code: 19350
FEC ID number of contributing federal political committee. C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VICE PRESIDENT-ASST TREASURER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 350.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22060
Amount of Each Receipt this Period: 25.00

B.
Full Name (Last, First, Middle Initial)
J. RICHARD EDWARDS
Mailing Address 29 SOUTH HAMPTON PARISH ROAD
City: LANDENBERG State: PA Zip Code: 19350
FEC ID number of contributing federal political committee. C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VICE PRESIDENT-ASST TREASURER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 375.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22061
Amount of Each Receipt this Period: 25.00

C.
Full Name (Last, First, Middle Initial)
J. RICHARD EDWARDS
Mailing Address 29 SOUTH HAMPTON PARISH ROAD
City: LANDENBERG State: PA Zip Code: 19350
FEC ID number of contributing federal political committee. C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VICE PRESIDENT-ASST TREASURER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22062
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **75.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial)
J. RICHARD EDWARDS
Mailing Address 29 SOUTH HAMPTON PARISH ROAD
City: LANDENBERG State: PA Zip Code: 19350
FEC ID number of contributing federal political committee. C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VICE PRESIDENT-ASST TREASURER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 425.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22063
Amount of Each Receipt this Period: 25.00

B.
Full Name (Last, First, Middle Initial)
J. RICHARD EDWARDS
Mailing Address 29 SOUTH HAMPTON PARISH ROAD
City: LANDENBERG State: PA Zip Code: 19350
FEC ID number of contributing federal political committee. C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VICE PRESIDENT-ASST TREASURER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 495.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22064
Amount of Each Receipt this Period: 70.00

C.
Full Name (Last, First, Middle Initial)
J. RICHARD EDWARDS
Mailing Address 29 SOUTH HAMPTON PARISH ROAD
City: LANDENBERG State: PA Zip Code: 19350
FEC ID number of contributing federal political committee. C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VICE PRESIDENT-ASST TREASURER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 565.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22065
Amount of Each Receipt this Period: 70.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **165.00**

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): PAMELA ELROD
Mailing Address: 16 FARLEY BROOK RD.
City: CHELMSFORD State: MA Zip Code: 01824
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-SR CENTERS OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 350.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22072
Amount of Each Receipt this Period: 25.00

B.
Full Name (Last, First, Middle Initial): PAMELA ELROD
Mailing Address: 16 FARLEY BROOK RD.
City: CHELMSFORD State: MA Zip Code: 01824
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-SR CENTERS OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 375.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22073
Amount of Each Receipt this Period: 25.00

C.
Full Name (Last, First, Middle Initial): PAMELA ELROD
Mailing Address: 16 FARLEY BROOK RD.
City: CHELMSFORD State: MA Zip Code: 01824
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-SR CENTERS OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22074
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **75.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): PAMELA ELROD
Mailing Address: 16 FARLEY BROOK RD.
City: CHELMSFORD State: MA Zip Code: 01824
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-SR CENTERS OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 425.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22075
Amount of Each Receipt this Period: 25.00

B.
Full Name (Last, First, Middle Initial): PAMELA ELROD
Mailing Address: 16 FARLEY BROOK RD.
City: CHELMSFORD State: MA Zip Code: 01824
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-SR CENTERS OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22076
Amount of Each Receipt this Period: 25.00

C.
Full Name (Last, First, Middle Initial): PAMELA ELROD
Mailing Address: 16 FARLEY BROOK RD.
City: CHELMSFORD State: MA Zip Code: 01824
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-SR CENTERS OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 475.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22077
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **75.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): HOLLY J ESTEL
Mailing Address: 2048 PINECREST DRIVE
City: MORGANTOWN State: WV Zip Code: 26505
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-CLINICAL SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 516.09
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22084
Amount of Each Receipt this Period: 37.32

B.
Full Name (Last, First, Middle Initial): HOLLY J ESTEL
Mailing Address: 2048 PINECREST DRIVE
City: MORGANTOWN State: WV Zip Code: 26505
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-CLINICAL SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 553.41
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22085
Amount of Each Receipt this Period: 37.32

C.
Full Name (Last, First, Middle Initial): HOLLY J ESTEL
Mailing Address: 2048 PINECREST DRIVE
City: MORGANTOWN State: WV Zip Code: 26505
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-CLINICAL SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 590.73
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22086
Amount of Each Receipt this Period: 37.32

SUBTOTAL of Receipts This Page (optional) ..... ▶ **111.96**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): HOLLY J ESTEL
Mailing Address: 2048 PINECREST DRIVE
City: MORGANTOWN State: WV Zip Code: 26505
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-CLINICAL SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 628.05
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22087
Amount of Each Receipt this Period: 37.32

B.
Full Name (Last, First, Middle Initial): HOLLY J ESTEL
Mailing Address: 2048 PINECREST DRIVE
City: MORGANTOWN State: WV Zip Code: 26505
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-CLINICAL SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 665.37
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22088
Amount of Each Receipt this Period: 37.32

C.
Full Name (Last, First, Middle Initial): HOLLY J ESTEL
Mailing Address: 2048 PINECREST DRIVE
City: MORGANTOWN State: WV Zip Code: 26505
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-CLINICAL SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 705.30
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22089
Amount of Each Receipt this Period: 39.93

SUBTOTAL of Receipts This Page (optional) ..... ▶ **114.57**

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 74 / 261

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): CYNTHIA H. FARLEY
Mailing Address: 108 COUNTRY COVE ESTATE
City: SCOTT DEPOT State: WV Zip Code: 25560
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REGIONAL MARKETING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22090
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): CYNTHIA H. FARLEY
Mailing Address: 108 COUNTRY COVE ESTATE
City: SCOTT DEPOT State: WV Zip Code: 25560
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REGIONAL MARKETING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22091
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): CYNTHIA H. FARLEY
Mailing Address: 108 COUNTRY COVE ESTATE
City: SCOTT DEPOT State: WV Zip Code: 25560
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REGIONAL MARKETING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 320.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22092
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): CYNTHIA H. FARLEY
Mailing Address: 108 COUNTRY COVE ESTATE
City: SCOTT DEPOT State: WV Zip Code: 25560
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REGIONAL MARKETING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 340.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22093
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): CYNTHIA H. FARLEY
Mailing Address: 108 COUNTRY COVE ESTATE
City: SCOTT DEPOT State: WV Zip Code: 25560
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REGIONAL MARKETING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22094
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): CYNTHIA H. FARLEY
Mailing Address: 108 COUNTRY COVE ESTATE
City: SCOTT DEPOT State: WV Zip Code: 25560
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REGIONAL MARKETING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 380.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22095
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **60.00**

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): DEAN FEICK
Mailing Address: 159 MERION LANE
City: READING State: PA Zip Code: 19607
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VICE PRESIDENT-CENTERS GROUP
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 350.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22096
Amount of Each Receipt this Period: 25.00

B.
Full Name (Last, First, Middle Initial): DEAN FEICK
Mailing Address: 159 MERION LANE
City: READING State: PA Zip Code: 19607
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VICE PRESIDENT-CENTERS GROUP
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 375.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22097
Amount of Each Receipt this Period: 25.00

C.
Full Name (Last, First, Middle Initial): DEAN FEICK
Mailing Address: 159 MERION LANE
City: READING State: PA Zip Code: 19607
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VICE PRESIDENT-CENTERS GROUP
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22098
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) 75.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): DEAN FEICK
Mailing Address: 159 MERION LANE
City: READING State: PA Zip Code: 19607
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VICE PRESIDENT-CENTERS GROUP
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 425.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22099
Amount of Each Receipt this Period: 25.00

B.
Full Name (Last, First, Middle Initial): DEAN FEICK
Mailing Address: 159 MERION LANE
City: READING State: PA Zip Code: 19607
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VICE PRESIDENT-CENTERS GROUP
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22100
Amount of Each Receipt this Period: 25.00

C.
Full Name (Last, First, Middle Initial): DEAN FEICK
Mailing Address: 159 MERION LANE
City: READING State: PA Zip Code: 19607
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VICE PRESIDENT-CENTERS GROUP
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 475.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22101
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) 75.00

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

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): MARY A. FERRELL
Mailing Address: P.O.BOX 706
City: OAK HILL State: WV Zip Code: 25901
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR-EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 420.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22102
Amount of Each Receipt this Period: 30.00

B.
Full Name (Last, First, Middle Initial): MARY A. FERRELL
Mailing Address: P.O.BOX 706
City: OAK HILL State: WV Zip Code: 25901
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR-EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22103
Amount of Each Receipt this Period: 30.00

C.
Full Name (Last, First, Middle Initial): MARY A. FERRELL
Mailing Address: P.O.BOX 706
City: OAK HILL State: WV Zip Code: 25901
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR-EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22104
Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **90.00**

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): MARY A. FERRELL
Mailing Address: P.O.BOX 706
City: OAK HILL State: WV Zip Code: 25901
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR-EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 510.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22105
Amount of Each Receipt this Period: 30.00

B.
Full Name (Last, First, Middle Initial): MARY A. FERRELL
Mailing Address: P.O.BOX 706
City: OAK HILL State: WV Zip Code: 25901
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR-EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 540.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22106
Amount of Each Receipt this Period: 30.00

C.
Full Name (Last, First, Middle Initial): MARY A. FERRELL
Mailing Address: P.O.BOX 706
City: OAK HILL State: WV Zip Code: 25901
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR-EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 570.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22107
Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **90.00**

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): RICHARD M FINK
Mailing Address: 12 GREENTREE DRIVE
City: PHEONIX State: MD Zip Code: 21131
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REIMBURSEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 420.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22108
Amount of Each Receipt this Period: 30.00

B.
Full Name (Last, First, Middle Initial): RICHARD M FINK
Mailing Address: 12 GREENTREE DRIVE
City: PHEONIX State: MD Zip Code: 21131
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REIMBURSEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22109
Amount of Each Receipt this Period: 30.00

C.
Full Name (Last, First, Middle Initial): RICHARD M FINK
Mailing Address: 12 GREENTREE DRIVE
City: PHEONIX State: MD Zip Code: 21131
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REIMBURSEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22110
Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **90.00**

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SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): RICHARD M FINK
Mailing Address: 12 GREENTREE DRIVE
City: PHEONIX State: MD Zip Code: 21131
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REIMBURSEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 510.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22111
Amount of Each Receipt this Period: 30.00

B.
Full Name (Last, First, Middle Initial): RICHARD M FINK
Mailing Address: 12 GREENTREE DRIVE
City: PHEONIX State: MD Zip Code: 21131
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REIMBURSEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 540.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22112
Amount of Each Receipt this Period: 30.00

C.
Full Name (Last, First, Middle Initial): RICHARD M FINK
Mailing Address: 12 GREENTREE DRIVE
City: PHEONIX State: MD Zip Code: 21131
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REIMBURSEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 570.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22113
Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **90.00**

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): Terri Fisher
Mailing Address: 5215 Homeville Road
City: Oxford State: PA Zip Code: 19363
FEC ID number of contributing federal political committee: C
Name of Employer: Genesis Health Ventures, Inc.
Occupation: Cash Manager
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.21673
Amount of Each Receipt this Period: 400.00
Contribution

B.
Full Name (Last, First, Middle Initial): IRENE FLESHNER
Mailing Address: 4613 ROXBURY DRIVE
City: BETHESDA State: MD Zip Code: 20814
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: SR VP-CLINICAL PRACTICE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1050.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22114
Amount of Each Receipt this Period: 75.00

C.
Full Name (Last, First, Middle Initial): IRENE FLESHNER
Mailing Address: 4613 ROXBURY DRIVE
City: BETHESDA State: MD Zip Code: 20814
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: SR VP-CLINICAL PRACTICE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1125.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22115
Amount of Each Receipt this Period: 75.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **550.00**

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): IRENE FLESHNER
Mailing Address: 4613 ROXBURY DRIVE
City: BETHESDA State: MD Zip Code: 20814
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: SR VP-CLINICAL PRACTICE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1200.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22116
Amount of Each Receipt this Period: 75.00

B.
Full Name (Last, First, Middle Initial): IRENE FLESHNER
Mailing Address: 4613 ROXBURY DRIVE
City: BETHESDA State: MD Zip Code: 20814
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: SR VP-CLINICAL PRACTICE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1275.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22117
Amount of Each Receipt this Period: 75.00

C.
Full Name (Last, First, Middle Initial): IRENE FLESHNER
Mailing Address: 4613 ROXBURY DRIVE
City: BETHESDA State: MD Zip Code: 20814
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: SR VP-CLINICAL PRACTICE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1350.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22118
Amount of Each Receipt this Period: 75.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **225.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 84 / 261

[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): IRENE FLESHNER
Mailing Address: 4613 ROXBURY DRIVE
City: BETHESDA State: MD Zip Code: 20814
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: SR VP-CLINICAL PRACTICE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1425.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22119
Amount of Each Receipt this Period: 75.00

B.
Full Name (Last, First, Middle Initial): LARRY V FOXWELL
Mailing Address: P.O. BOX 457
6017 RIVERSIDE DRIVE
City: SECRETARY State: MD Zip Code: 21664
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-PHYSICIAN SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 700.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22126
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial): LARRY V FOXWELL
Mailing Address: P.O. BOX 457
6017 RIVERSIDE DRIVE
City: SECRETARY State: MD Zip Code: 21664
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-PHYSICIAN SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 750.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22127
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 175.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): LARRY V FOXWELL
Mailing Address: P.O. BOX 457, 6017 RIVERSIDE DRIVE
City: SECRETARY State: MD Zip Code: 21664
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-PHYSICIAN SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 800.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22128
Amount of Each Receipt this Period: 50.00

B.
Full Name (Last, First, Middle Initial): LARRY V FOXWELL
Mailing Address: P.O. BOX 457, 6017 RIVERSIDE DRIVE
City: SECRETARY State: MD Zip Code: 21664
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-PHYSICIAN SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 850.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22129
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial): LARRY V FOXWELL
Mailing Address: P.O. BOX 457, 6017 RIVERSIDE DRIVE
City: SECRETARY State: MD Zip Code: 21664
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-PHYSICIAN SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 900.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22130
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **150.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): LARRY V FOXWELL
Mailing Address: P.O. BOX 457, 6017 RIVERSIDE DRIVE
City: SECRETARY State: MD Zip Code: 21664
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-PHYSICIAN SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 950.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22131
Amount of Each Receipt this Period: 50.00

B.
Full Name (Last, First, Middle Initial): JOHN F FUREY
Mailing Address: 39 BUTTONWOOD DRIVE
City: WOODSTOWN State: NJ Zip Code: 08098
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VICE PRESIDENT-TAX
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 560.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22138
Amount of Each Receipt this Period: 40.00

C.
Full Name (Last, First, Middle Initial): JOHN F FUREY
Mailing Address: 39 BUTTONWOOD DRIVE
City: WOODSTOWN State: NJ Zip Code: 08098
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VICE PRESIDENT-TAX
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22139
Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **130.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JOHN F FUREY
Mailing Address: 39 BUTTONWOOD DRIVE
City: WOODSTOWN State: NJ Zip Code: 08098
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VICE PRESIDENT-TAX
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 640.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22140
Amount of Each Receipt this Period: 40.00

B.
Full Name (Last, First, Middle Initial): JOHN F FUREY
Mailing Address: 39 BUTTONWOOD DRIVE
City: WOODSTOWN State: NJ Zip Code: 08098
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VICE PRESIDENT-TAX
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 680.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22141
Amount of Each Receipt this Period: 40.00

C.
Full Name (Last, First, Middle Initial): JOHN F FUREY
Mailing Address: 39 BUTTONWOOD DRIVE
City: WOODSTOWN State: NJ Zip Code: 08098
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VICE PRESIDENT-TAX
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 720.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22142
Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **120.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JOHN F FUREY
Mailing Address: 39 BUTTONWOOD DRIVE
City: WOODSTOWN State: NJ Zip Code: 08098
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VICE PRESIDENT-TAX
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 760.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22143
Amount of Each Receipt this Period: 40.00

B.
Full Name (Last, First, Middle Initial): MARY V.M. GALVEZ
Mailing Address: 4409 UNDERWOOD ROAD
City: BALTIMORE State: MD Zip Code: 21218
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-CORPORATE COMMUNICATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 420.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22146
Amount of Each Receipt this Period: 30.00

C.
Full Name (Last, First, Middle Initial): MARY V.M. GALVEZ
Mailing Address: 4409 UNDERWOOD ROAD
City: BALTIMORE State: MD Zip Code: 21218
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-CORPORATE COMMUNICATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22147
Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **100.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): MARY V.M. GALVEZ
Mailing Address: 4409 UNDERWOOD ROAD
City: BALTIMORE State: MD Zip Code: 21218
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-CORPORATE COMMUNICATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22148
Amount of Each Receipt this Period: 30.00

B.
Full Name (Last, First, Middle Initial): MARY V.M. GALVEZ
Mailing Address: 4409 UNDERWOOD ROAD
City: BALTIMORE State: MD Zip Code: 21218
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-CORPORATE COMMUNICATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 510.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22149
Amount of Each Receipt this Period: 30.00

C.
Full Name (Last, First, Middle Initial): MARY V.M. GALVEZ
Mailing Address: 4409 UNDERWOOD ROAD
City: BALTIMORE State: MD Zip Code: 21218
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-CORPORATE COMMUNICATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 560.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22150
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **110.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): MARY V.M. GALVEZ
Mailing Address: 4409 UNDERWOOD ROAD
City: BALTIMORE State: MD Zip Code: 21218
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-CORPORATE COMMUNICATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 610.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22151
Amount of Each Receipt this Period: 50.00

B.
Full Name (Last, First, Middle Initial): LINDA P. GARCIA
Mailing Address: 10 CASELLA DRIVE
City: YALESVILLE State: CT Zip Code: 06492
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 442.00
Date of Receipt: 07 / 03 / 2008
Transaction ID: SA11AI.22152
Amount of Each Receipt this Period: 17.00

C.
Full Name (Last, First, Middle Initial): LINDA P. GARCIA
Mailing Address: 10 CASELLA DRIVE
City: YALESVILLE State: CT Zip Code: 06492
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 459.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22153
Amount of Each Receipt this Period: 17.00

SUBTOTAL of Receipts This Page (optional) 84.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): LINDA P. GARCIA
Mailing Address: 10 CASELLA DRIVE
City: YALESVILLE State: CT Zip Code: 06492
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 476.00
Date of Receipt: 07 / 18 / 2008
Transaction ID: SA11AI.22154
Amount of Each Receipt this Period: 17.00

B.
Full Name (Last, First, Middle Initial): LINDA P. GARCIA
Mailing Address: 10 CASELLA DRIVE
City: YALESVILLE State: CT Zip Code: 06492
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 493.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22155
Amount of Each Receipt this Period: 17.00

C.
Full Name (Last, First, Middle Initial): LINDA P. GARCIA
Mailing Address: 10 CASELLA DRIVE
City: YALESVILLE State: CT Zip Code: 06492
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 510.00
Date of Receipt: 08 / 01 / 2008
Transaction ID: SA11AI.22156
Amount of Each Receipt this Period: 17.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **51.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): LINDA P. GARCIA
Mailing Address: 10 CASELLA DRIVE
City: YALESVILLE State: CT Zip Code: 06492
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 527.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22157
Amount of Each Receipt this Period: 17.00

B.
Full Name (Last, First, Middle Initial): LINDA P. GARCIA
Mailing Address: 10 CASELLA DRIVE
City: YALESVILLE State: CT Zip Code: 06492
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 544.00
Date of Receipt: 08 / 15 / 2008
Transaction ID: SA11AI.22158
Amount of Each Receipt this Period: 17.00

C.
Full Name (Last, First, Middle Initial): LINDA P. GARCIA
Mailing Address: 10 CASELLA DRIVE
City: YALESVILLE State: CT Zip Code: 06492
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 561.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22159
Amount of Each Receipt this Period: 17.00

SUBTOTAL of Receipts This Page (optional) 51.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): LINDA P. GARCIA
Mailing Address: 10 CASELLA DRIVE
City: YALESVILLE State: CT Zip Code: 06492
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 578.00
Date of Receipt: 08 / 29 / 2008
Transaction ID: SA11AI.22160
Amount of Each Receipt this Period: 17.00

B.
Full Name (Last, First, Middle Initial): LINDA P. GARCIA
Mailing Address: 10 CASELLA DRIVE
City: YALESVILLE State: CT Zip Code: 06492
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 595.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22161
Amount of Each Receipt this Period: 17.00

C.
Full Name (Last, First, Middle Initial): LINDA P. GARCIA
Mailing Address: 10 CASELLA DRIVE
City: YALESVILLE State: CT Zip Code: 06492
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 612.00
Date of Receipt: 09 / 12 / 2008
Transaction ID: SA11AI.22162
Amount of Each Receipt this Period: 17.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 51.00

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): LINDA P. GARCIA
Mailing Address: 10 CASELLA DRIVE
City: YALESVILLE State: CT Zip Code: 06492
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 629.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22163
Amount of Each Receipt this Period: 17.00

B.
Full Name (Last, First, Middle Initial): LINDA P. GARCIA
Mailing Address: 10 CASELLA DRIVE
City: YALESVILLE State: CT Zip Code: 06492
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 646.00
Date of Receipt: 09 / 26 / 2008
Transaction ID: SA11AI.22164
Amount of Each Receipt this Period: 17.00

C.
Full Name (Last, First, Middle Initial): DENNIS GREGORY
Mailing Address: 17 ONEIDA COURT
City: CHESTER SPRINGS State: PA Zip Code: 19425
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 350.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22168
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 59.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): DENNIS GREGORY
Mailing Address: 17 ONEIDA COURT
City: CHESTER SPRINGS State: PA Zip Code: 19425
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 375.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22169
Amount of Each Receipt this Period: 25.00

B.
Full Name (Last, First, Middle Initial): DENNIS GREGORY
Mailing Address: 17 ONEIDA COURT
City: CHESTER SPRINGS State: PA Zip Code: 19425
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22170
Amount of Each Receipt this Period: 25.00

C.
Full Name (Last, First, Middle Initial): DENNIS GREGORY
Mailing Address: 17 ONEIDA COURT
City: CHESTER SPRINGS State: PA Zip Code: 19425
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 425.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22171
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **75.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): DENNIS GREGORY
Mailing Address: 17 ONEIDA COURT
City: CHESTER SPRINGS State: PA Zip Code: 19425
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22172
Amount of Each Receipt this Period: 25.00

B.
Full Name (Last, First, Middle Initial): DENNIS GREGORY
Mailing Address: 17 ONEIDA COURT
City: CHESTER SPRINGS State: PA Zip Code: 19425
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 475.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22173
Amount of Each Receipt this Period: 25.00

C.
Full Name (Last, First, Middle Initial): NANCY E GRIMES
Mailing Address: 405 GREENWOOD AVENUE
City: WYNCOTE State: PA Zip Code: 19095
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VICE PRESIDENT-CLINICAL SVS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 910.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22174
Amount of Each Receipt this Period: 65.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **115.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): NANCY E GRIMES
Mailing Address: 405 GREENWOOD AVENUE
City: WYNCOTE State: PA Zip Code: 19095
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VICE PRESIDENT-CLINICAL SVS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 975.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22175
Amount of Each Receipt this Period: 65.00

B.
Full Name (Last, First, Middle Initial): NANCY E GRIMES
Mailing Address: 405 GREENWOOD AVENUE
City: WYNCOTE State: PA Zip Code: 19095
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VICE PRESIDENT-CLINICAL SVS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1040.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22176
Amount of Each Receipt this Period: 65.00

C.
Full Name (Last, First, Middle Initial): NANCY E GRIMES
Mailing Address: 405 GREENWOOD AVENUE
City: WYNCOTE State: PA Zip Code: 19095
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VICE PRESIDENT-CLINICAL SVS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1105.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22177
Amount of Each Receipt this Period: 65.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **195.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): NANCY E GRIMES
Mailing Address: 405 GREENWOOD AVENUE
City: WYNCOTE State: PA Zip Code: 19095
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VICE PRESIDENT-CLINICAL SVS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1170.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22178
Amount of Each Receipt this Period: 65.00

B.
Full Name (Last, First, Middle Initial): NANCY E GRIMES
Mailing Address: 405 GREENWOOD AVENUE
City: WYNCOTE State: PA Zip Code: 19095
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VICE PRESIDENT-CLINICAL SVS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1235.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22179
Amount of Each Receipt this Period: 65.00

C.
Full Name (Last, First, Middle Initial): FRANCIS GROSSO
Mailing Address: 28 COMMONWEALTH AVENUE APT #4
City: BOSTON State: MA Zip Code: 02116
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-PHARMACY SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22180
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **150.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): FRANCIS GROSSO
Mailing Address: 28 COMMONWEALTH AVENUE APT #4
City: BOSTON State: MA Zip Code: 02116
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-PHARMACY SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22181
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): FRANCIS GROSSO
Mailing Address: 28 COMMONWEALTH AVENUE APT #4
City: BOSTON State: MA Zip Code: 02116
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-PHARMACY SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 320.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22182
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): FRANCIS GROSSO
Mailing Address: 28 COMMONWEALTH AVENUE APT #4
City: BOSTON State: MA Zip Code: 02116
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-PHARMACY SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 340.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22183
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 60.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): FRANCIS GROSSO
Mailing Address: 28 COMMONWEALTH AVENUE APT #4
City: BOSTON State: MA Zip Code: 02116
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-PHARMACY SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22184
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): FRANCIS GROSSO
Mailing Address: 28 COMMONWEALTH AVENUE APT #4
City: BOSTON State: MA Zip Code: 02116
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-PHARMACY SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 380.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22185
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): MARYLEE GROSSO
Mailing Address: 28 COMMONWEALTH AVENUE #4
City: BOSTON State: MA Zip Code: 02116
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-CLINICAL PRACTICE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22186
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **60.00**

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

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): MARYLEE GROSSO
Mailing Address: 28 COMMONWEALTH AVENUE #4
City: BOSTON State: MA Zip Code: 02116
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-CLINICAL PRACTICE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22187
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): MARYLEE GROSSO
Mailing Address: 28 COMMONWEALTH AVENUE #4
City: BOSTON State: MA Zip Code: 02116
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-CLINICAL PRACTICE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 320.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22188
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): MARYLEE GROSSO
Mailing Address: 28 COMMONWEALTH AVENUE #4
City: BOSTON State: MA Zip Code: 02116
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-CLINICAL PRACTICE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 340.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22189
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): MARYLEE GROSSO
Mailing Address: 28 COMMONWEALTH AVENUE #4
City: BOSTON State: MA Zip Code: 02116
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-CLINICAL PRACTICE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22190
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): MARYLEE GROSSO
Mailing Address: 28 COMMONWEALTH AVENUE #4
City: BOSTON State: MA Zip Code: 02116
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-CLINICAL PRACTICE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 380.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22191
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): KATHY L HADDON
Mailing Address: 312 LEE ROAD
City: FOLLANSBEE State: WV Zip Code: 26037
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1400.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22195
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) 140.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): KATHY L HADDON
Mailing Address: 312 LEE ROAD
City: FOLLANSBEE State: WV Zip Code: 26037
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1500.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22196
Amount of Each Receipt this Period: 100.00

B.
Full Name (Last, First, Middle Initial): KATHY L HADDON
Mailing Address: 312 LEE ROAD
City: FOLLANSBEE State: WV Zip Code: 26037
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1600.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22197
Amount of Each Receipt this Period: 100.00

C.
Full Name (Last, First, Middle Initial): KATHY L HADDON
Mailing Address: 312 LEE ROAD
City: FOLLANSBEE State: WV Zip Code: 26037
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1700.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22198
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 300.00

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): KATHY L HADDON
Mailing Address: 312 LEE ROAD
City: FOLLANSBEE State: WV Zip Code: 26037
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1800.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22199
Amount of Each Receipt this Period: 100.00

B.
Full Name (Last, First, Middle Initial): KATHY L HADDON
Mailing Address: 312 LEE ROAD
City: FOLLANSBEE State: WV Zip Code: 26037
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1900.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22200
Amount of Each Receipt this Period: 100.00

C.
Full Name (Last, First, Middle Initial): Rebecca Haley
Mailing Address: 349 High Ridge Road
City: Chadds Ford State: PA Zip Code: 19317
FEC ID number of contributing federal political committee: C
Name of Employer: Genesis HealthCare Rehab
Occupation: VP HR Rehab
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 09 / 02 / 2008
Transaction ID: SA11AI.21679
Amount of Each Receipt this Period: 500.00
Contribution

SUBTOTAL of Receipts This Page (optional) 700.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): BARBARA J. HAUSWALD
Mailing Address: 413 FOREST LANE
City: NORTH WALES State: PA Zip Code: 19454
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: SR VP & TREASURER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1050.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22220
Amount of Each Receipt this Period: 75.00

B.
Full Name (Last, First, Middle Initial): BARBARA J. HAUSWALD
Mailing Address: 413 FOREST LANE
City: NORTH WALES State: PA Zip Code: 19454
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: SR VP & TREASURER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1125.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22221
Amount of Each Receipt this Period: 75.00

C.
Full Name (Last, First, Middle Initial): BARBARA J. HAUSWALD
Mailing Address: 413 FOREST LANE
City: NORTH WALES State: PA Zip Code: 19454
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: SR VP & TREASURER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 6125.00
Date of Receipt: 08 / 04 / 2008
Transaction ID: SA11AI.21681
Amount of Each Receipt this Period: 5000.00
Contribution

SUBTOTAL of Receipts This Page (optional) ..... ▶ **5150.00**

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SCHEDULE A (FEC Form 3X)
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FOR LINE NUMBER: (check only one) PAGE 106 / 261

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): BARBARA J. HAUSWALD
Mailing Address: 413 FOREST LANE
City: NORTH WALES State: PA Zip Code: 19454
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: SR VP & TREASURER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 6200.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22222
Amount of Each Receipt this Period: 75.00

B.
Full Name (Last, First, Middle Initial): BARBARA J. HAUSWALD
Mailing Address: 413 FOREST LANE
City: NORTH WALES State: PA Zip Code: 19454
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: SR VP & TREASURER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 6275.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22223
Amount of Each Receipt this Period: 75.00

C.
Full Name (Last, First, Middle Initial): BARBARA J. HAUSWALD
Mailing Address: 413 FOREST LANE
City: NORTH WALES State: PA Zip Code: 19454
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: SR VP & TREASURER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 6350.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22224
Amount of Each Receipt this Period: 75.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **225.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): BARBARA J. HAUSWALD
Mailing Address: 413 FOREST LANE
City: NORTH WALES State: PA Zip Code: 19454
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: SR VP & TREASURER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 6425.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22225
Amount of Each Receipt this Period: 75.00

B.
Full Name (Last, First, Middle Initial): KATHRYN HEFLIN
Mailing Address: 497 WINDING CREEK COURT
City: DAVIDSONVILLE State: MD Zip Code: 21035
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 749.98
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22232
Amount of Each Receipt this Period: 53.57

C.
Full Name (Last, First, Middle Initial): KATHRYN HEFLIN
Mailing Address: 497 WINDING CREEK COURT
City: DAVIDSONVILLE State: MD Zip Code: 21035
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 803.55
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22233
Amount of Each Receipt this Period: 53.57

SUBTOTAL of Receipts This Page (optional) ..... ▶ **182.14**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): KATHRYN HEFLIN
Mailing Address: 497 WINDING CREEK COURT
City: DAVIDSONVILLE State: MD Zip Code: 21035
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 857.12
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22234
Amount of Each Receipt this Period: 53.57

B.
Full Name (Last, First, Middle Initial): KATHRYN HEFLIN
Mailing Address: 497 WINDING CREEK COURT
City: DAVIDSONVILLE State: MD Zip Code: 21035
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 910.69
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22235
Amount of Each Receipt this Period: 53.57

C.
Full Name (Last, First, Middle Initial): KATHRYN HEFLIN
Mailing Address: 497 WINDING CREEK COURT
City: DAVIDSONVILLE State: MD Zip Code: 21035
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 964.19
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22236
Amount of Each Receipt this Period: 53.50

SUBTOTAL of Receipts This Page (optional) ..... ▶ **160.64**

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

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): KATHRYN HEFLIN
Mailing Address: 497 WINDING CREEK COURT
City: DAVIDSONVILLE State: MD Zip Code: 21035
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1017.69
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22237
Amount of Each Receipt this Period: 53.50

B.
Full Name (Last, First, Middle Initial): DANIEL A HIRSCHFELD
Mailing Address: 1 SUNSET KNOLL COURT
City: TIMONIUM State: MD Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-SR OPERATIONS REHAB SVS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22244
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): DANIEL A HIRSCHFELD
Mailing Address: 1 SUNSET KNOLL COURT
City: TIMONIUM State: MD Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-SR OPERATIONS REHAB SVS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22245
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **93.50**

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 110 / 261

[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): DANIEL A HIRSCHFELD
Mailing Address: 1 SUNSET KNOLL COURT
City: TIMONIUM State: MD Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-SR OPERATIONS REHAB SVS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 320.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22246
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): DANIEL A HIRSCHFELD
Mailing Address: 1 SUNSET KNOLL COURT
City: TIMONIUM State: MD Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-SR OPERATIONS REHAB SVS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 340.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22247
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): DANIEL A HIRSCHFELD
Mailing Address: 1 SUNSET KNOLL COURT
City: TIMONIUM State: MD Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-SR OPERATIONS REHAB SVS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22248
Amount of Each Receipt this Period: 110.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **150.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): DANIEL A HIRSCHFELD
Mailing Address: 1 SUNSET KNOLL COURT
City: TIMONIUM State: MD Zip Code: 21093
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-SR OPERATIONS REHAB SVS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 560.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22249
Amount of Each Receipt this Period: 110.00

B.
Full Name (Last, First, Middle Initial): NATALIE P. HOLLAND
Mailing Address: 2230 CREST ROAD
City: BALTIMORE State: MD Zip Code: 21209
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-NETWORK DEVELOPMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 259.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22250
Amount of Each Receipt this Period: 18.50

C.
Full Name (Last, First, Middle Initial): NATALIE P. HOLLAND
Mailing Address: 2230 CREST ROAD
City: BALTIMORE State: MD Zip Code: 21209
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-NETWORK DEVELOPMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 277.50
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22251
Amount of Each Receipt this Period: 18.50

SUBTOTAL of Receipts This Page (optional) ..... ▶ **147.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 112 / 261

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): NATALIE P. HOLLAND
Mailing Address: 2230 CREST ROAD
City: BALTIMORE State: MD Zip Code: 21209
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-NETWORK DEVELOPMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 296.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22252
Amount of Each Receipt this Period: 18.50

B.
Full Name (Last, First, Middle Initial): NATALIE P. HOLLAND
Mailing Address: 2230 CREST ROAD
City: BALTIMORE State: MD Zip Code: 21209
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-NETWORK DEVELOPMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 314.50
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22253
Amount of Each Receipt this Period: 18.50

C.
Full Name (Last, First, Middle Initial): NATALIE P. HOLLAND
Mailing Address: 2230 CREST ROAD
City: BALTIMORE State: MD Zip Code: 21209
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-NETWORK DEVELOPMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 333.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22254
Amount of Each Receipt this Period: 18.50

SUBTOTAL of Receipts This Page (optional) 55.50

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): NATALIE P. HOLLAND
Mailing Address: 2230 CREST ROAD
City: BALTIMORE State: MD Zip Code: 21209
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-NETWORK DEVELOPMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 351.50
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22255
Amount of Each Receipt this Period: 18.50

B.
Full Name (Last, First, Middle Initial): Barbara Hoover
Mailing Address: 121 Bridle Trail
City: Venetia State: PA Zip Code: 15367
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-AREA (REHAB SVS)
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 270.00
Date of Receipt: 07 / 03 / 2008
Transaction ID: SA11AI.22256
Amount of Each Receipt this Period: 10.00

C.
Full Name (Last, First, Middle Initial): Barbara Hoover
Mailing Address: 121 Bridle Trail
City: Venetia State: PA Zip Code: 15367
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-AREA (REHAB SVS)
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22257
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **38.50**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): Barbara Hoover
Mailing Address: 121 Bridle Trail
City: Venetia | State: PA | Zip Code: 15367
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-AREA (REHAB SVS)
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 290.00
Date of Receipt: 07 / 18 / 2008
Transaction ID: SA11AI.22258
Amount of Each Receipt this Period: 10.00

B.
Full Name (Last, First, Middle Initial): Barbara Hoover
Mailing Address: 121 Bridle Trail
City: Venetia | State: PA | Zip Code: 15367
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-AREA (REHAB SVS)
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22259
Amount of Each Receipt this Period: 10.00

C.
Full Name (Last, First, Middle Initial): Barbara Hoover
Mailing Address: 121 Bridle Trail
City: Venetia | State: PA | Zip Code: 15367
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-AREA (REHAB SVS)
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 310.00
Date of Receipt: 08 / 01 / 2008
Transaction ID: SA11AI.22260
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): Barbara Hoover
Mailing Address: 121 Bridle Trail
City: Venetia State: PA Zip Code: 15367
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-AREA (REHAB SVS)
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 320.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22261
Amount of Each Receipt this Period: 10.00

B.
Full Name (Last, First, Middle Initial): Barbara Hoover
Mailing Address: 121 Bridle Trail
City: Venetia State: PA Zip Code: 15367
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-AREA (REHAB SVS)
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 330.00
Date of Receipt: 08 / 15 / 2008
Transaction ID: SA11AI.22262
Amount of Each Receipt this Period: 10.00

C.
Full Name (Last, First, Middle Initial): Barbara Hoover
Mailing Address: 121 Bridle Trail
City: Venetia State: PA Zip Code: 15367
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-AREA (REHAB SVS)
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 430.00
Date of Receipt: 08 / 16 / 2008
Transaction ID: SA11AI.21683
Amount of Each Receipt this Period: 100.00
Contribution

SUBTOTAL of Receipts This Page (optional) ..... ▶ **120.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): Barbara Hoover
Mailing Address: 121 Bridle Trail
City: Venetia | State: PA | Zip Code: 15367
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-AREA (REHAB SVS)
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 440.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22263
Amount of Each Receipt this Period: 10.00

B.
Full Name (Last, First, Middle Initial): Barbara Hoover
Mailing Address: 121 Bridle Trail
City: Venetia | State: PA | Zip Code: 15367
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-AREA (REHAB SVS)
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 08 / 29 / 2008
Transaction ID: SA11AI.22264
Amount of Each Receipt this Period: 10.00

C.
Full Name (Last, First, Middle Initial): Barbara Hoover
Mailing Address: 121 Bridle Trail
City: Venetia | State: PA | Zip Code: 15367
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-AREA (REHAB SVS)
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 460.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22265
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): Barbara Hoover
Mailing Address: 121 Bridle Trail
City: Venetia State: PA Zip Code: 15367
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-AREA (REHAB SVS)
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 470.00
Date of Receipt: 09 / 12 / 2008
Transaction ID: SA11AI.22266
Amount of Each Receipt this Period: 10.00

B.
Full Name (Last, First, Middle Initial): Barbara Hoover
Mailing Address: 121 Bridle Trail
City: Venetia State: PA Zip Code: 15367
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-AREA (REHAB SVS)
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22267
Amount of Each Receipt this Period: 10.00

C.
Full Name (Last, First, Middle Initial): Barbara Hoover
Mailing Address: 121 Bridle Trail
City: Venetia State: PA Zip Code: 15367
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-AREA (REHAB SVS)
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 490.00
Date of Receipt: 09 / 26 / 2008
Transaction ID: SA11AI.22268
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): LEANA HOOVER
Mailing Address: 9066 HARRIS PL
City: FREDERICK State: MD Zip Code: 21704
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 420.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22269
Amount of Each Receipt this Period: 30.00

B.
Full Name (Last, First, Middle Initial): LEANA HOOVER
Mailing Address: 9066 HARRIS PL
City: FREDERICK State: MD Zip Code: 21704
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22270
Amount of Each Receipt this Period: 30.00

C.
Full Name (Last, First, Middle Initial): LEANA HOOVER
Mailing Address: 9066 HARRIS PL
City: FREDERICK State: MD Zip Code: 21704
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22271
Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) 90.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 119 / 261

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): LEANA HOOVER
Mailing Address: 9066 HARRIS PL
City: FREDERICK State: MD Zip Code: 21704
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 510.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22272
Amount of Each Receipt this Period: 30.00

B.
Full Name (Last, First, Middle Initial): LEANA HOOVER
Mailing Address: 9066 HARRIS PL
City: FREDERICK State: MD Zip Code: 21704
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 540.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22273
Amount of Each Receipt this Period: 30.00

C.
Full Name (Last, First, Middle Initial): LEANA HOOVER
Mailing Address: 9066 HARRIS PL
City: FREDERICK State: MD Zip Code: 21704
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 570.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22274
Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **90.00**

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): REGINA R. JONES
Mailing Address: 2 WEATHERLY AVENUE
City: NEWPORT State: RI Zip Code: 02840
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-NURSING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: 07 / 03 / 2008
Transaction ID: SA11AI.22302
Amount of Each Receipt this Period: 10.00

B.
Full Name (Last, First, Middle Initial): REGINA R. JONES
Mailing Address: 2 WEATHERLY AVENUE
City: NEWPORT State: RI Zip Code: 02840
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-NURSING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 290.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22303
Amount of Each Receipt this Period: 10.00

C.
Full Name (Last, First, Middle Initial): REGINA R. JONES
Mailing Address: 2 WEATHERLY AVENUE
City: NEWPORT State: RI Zip Code: 02840
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-NURSING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 / 18 / 2008
Transaction ID: SA11AI.22304
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **30.00**

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SCHEDULE A (FEC Form 3X)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): REGINA R. JONES
Mailing Address: 2 WEATHERLY AVENUE
City: NEWPORT State: RI Zip Code: 02840
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-NURSING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 310.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22305
Amount of Each Receipt this Period: 10.00

B.
Full Name (Last, First, Middle Initial): REGINA R. JONES
Mailing Address: 2 WEATHERLY AVENUE
City: NEWPORT State: RI Zip Code: 02840
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-NURSING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 320.00
Date of Receipt: 08 / 01 / 2008
Transaction ID: SA11AI.22306
Amount of Each Receipt this Period: 10.00

C.
Full Name (Last, First, Middle Initial): REGINA R. JONES
Mailing Address: 2 WEATHERLY AVENUE
City: NEWPORT State: RI Zip Code: 02840
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-NURSING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 330.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22307
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **30.00**

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): REGINA R. JONES
Mailing Address: 2 WEATHERLY AVENUE
City: NEWPORT State: RI Zip Code: 02840
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-NURSING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 340.00
Date of Receipt: 08 / 15 / 2008
Transaction ID: SA11AI.22308
Amount of Each Receipt this Period: 10.00

B.
Full Name (Last, First, Middle Initial): REGINA R. JONES
Mailing Address: 2 WEATHERLY AVENUE
City: NEWPORT State: RI Zip Code: 02840
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-NURSING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 350.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22309
Amount of Each Receipt this Period: 10.00

C.
Full Name (Last, First, Middle Initial): REGINA R. JONES
Mailing Address: 2 WEATHERLY AVENUE
City: NEWPORT State: RI Zip Code: 02840
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-NURSING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: 08 / 29 / 2008
Transaction ID: SA11AI.22310
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **30.00**

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

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): REGINA R. JONES
Mailing Address: 2 WEATHERLY AVENUE
City: NEWPORT State: RI Zip Code: 02840
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-NURSING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 370.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22311
Amount of Each Receipt this Period: 10.00

B.
Full Name (Last, First, Middle Initial): REGINA R. JONES
Mailing Address: 2 WEATHERLY AVENUE
City: NEWPORT State: RI Zip Code: 02840
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-NURSING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 380.00
Date of Receipt: 09 / 12 / 2008
Transaction ID: SA11AI.22312
Amount of Each Receipt this Period: 10.00

C.
Full Name (Last, First, Middle Initial): REGINA R. JONES
Mailing Address: 2 WEATHERLY AVENUE
City: NEWPORT State: RI Zip Code: 02840
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-NURSING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 390.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22313
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **30.00**

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): REGINA R. JONES
Mailing Address: 2 WEATHERLY AVENUE
City: NEWPORT State: RI Zip Code: 02840
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-NURSING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 09 / 26 / 2008
Transaction ID: SA11AI.22314
Amount of Each Receipt this Period: 10.00

B.
Full Name (Last, First, Middle Initial): JO ANN JORDAN
Mailing Address: 9 SPAULDING STREET
City: CONCORD State: NH Zip Code: 03301
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-DEMENTIA PROGRAM
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 210.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22315
Amount of Each Receipt this Period: 15.00

C.
Full Name (Last, First, Middle Initial): JO ANN JORDAN
Mailing Address: 9 SPAULDING STREET
City: CONCORD State: NH Zip Code: 03301
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-DEMENTIA PROGRAM
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 225.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22316
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **40.00**

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

SCHEDULE A (FEC Form 3X)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JO ANN JORDAN
Mailing Address: 9 SPAULDING STREET
City: CONCORD State: NH Zip Code: 03301
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-DEMENTIA PROGRAM
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22317
Amount of Each Receipt this Period: 15.00

B.
Full Name (Last, First, Middle Initial): JO ANN JORDAN
Mailing Address: 9 SPAULDING STREET
City: CONCORD State: NH Zip Code: 03301
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-DEMENTIA PROGRAM
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 255.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22318
Amount of Each Receipt this Period: 15.00

C.
Full Name (Last, First, Middle Initial): JO ANN JORDAN
Mailing Address: 9 SPAULDING STREET
City: CONCORD State: NH Zip Code: 03301
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-DEMENTIA PROGRAM
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 270.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22319
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JO ANN JORDAN
Mailing Address: 9 SPAULDING STREET
City: CONCORD State: NH Zip Code: 03301
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-DEMENTIA PROGRAM
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 285.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22320
Amount of Each Receipt this Period: 15.00

B.
Full Name (Last, First, Middle Initial): THOMAS M KELLEY
Mailing Address: 116 SIMMONS DRIVE
City: MILLWOOD State: WV Zip Code: 25262
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR-EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22324
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): THOMAS M KELLEY
Mailing Address: 116 SIMMONS DRIVE
City: MILLWOOD State: WV Zip Code: 25262
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR-EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22325
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) 55.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 127 / 261

[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): THOMAS M KELLEY
Mailing Address: 116 SIMMONS DRIVE
City: MILLWOOD State: WV Zip Code: 25262
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR-EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 320.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22326
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): THOMAS M KELLEY
Mailing Address: 116 SIMMONS DRIVE
City: MILLWOOD State: WV Zip Code: 25262
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR-EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 340.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22327
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): THOMAS M KELLEY
Mailing Address: 116 SIMMONS DRIVE
City: MILLWOOD State: WV Zip Code: 25262
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR-EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22328
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): THOMAS M KELLEY
Mailing Address: 116 SIMMONS DRIVE
City: MILLWOOD State: WV Zip Code: 25262
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR-EXECUTIVE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 380.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22329
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): WALTER J. KIELAR
Mailing Address: 17 CURTIS ROAD
City: SPRINGFIELD State: PA Zip Code: 19064
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-SR CENTERS OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1750.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22330
Amount of Each Receipt this Period: 125.00

C.
Full Name (Last, First, Middle Initial): WALTER J. KIELAR
Mailing Address: 17 CURTIS ROAD
City: SPRINGFIELD State: PA Zip Code: 19064
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-SR CENTERS OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1875.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22331
Amount of Each Receipt this Period: 125.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **270.00**

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): WALTER J. KIELAR
Mailing Address: 17 CURTIS ROAD
City: SPRINGFIELD State: PA Zip Code: 19064
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-SR CENTERS OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2000.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22332
Amount of Each Receipt this Period: 125.00

B.
Full Name (Last, First, Middle Initial): WALTER J. KIELAR
Mailing Address: 17 CURTIS ROAD
City: SPRINGFIELD State: PA Zip Code: 19064
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-SR CENTERS OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2125.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22333
Amount of Each Receipt this Period: 125.00

C.
Full Name (Last, First, Middle Initial): WALTER J. KIELAR
Mailing Address: 17 CURTIS ROAD
City: SPRINGFIELD State: PA Zip Code: 19064
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-SR CENTERS OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2275.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22334
Amount of Each Receipt this Period: 150.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 400.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 130 / 261

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): WALTER J. KIELAR
Mailing Address: 17 CURTIS ROAD
City: SPRINGFIELD State: PA Zip Code: 19064
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-SR CENTERS OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2425.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22335
Amount of Each Receipt this Period: 150.00

B.
Full Name (Last, First, Middle Initial): Dolores Kowal
Mailing Address: 4343 South Woodland Drive
City: Bensalem State: PA Zip Code: 19020
FEC ID number of contributing federal political committee: C
Name of Employer: Genesis HealthCare Corp
Occupation: Director Business Serv
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 08 / 18 / 2008
Transaction ID: SA11AI.21689
Amount of Each Receipt this Period: 250.00
Contribution

C.
Full Name (Last, First, Middle Initial): LAURENCE F. LANE
Mailing Address: 1616 STEPHENS DRIVE
City: WAYNE State: PA Zip Code: 19087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP GOVERNMENT RELATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1400.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22366
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 500.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): LAURENCE F. LANE
Mailing Address: 1616 STEPHENS DRIVE
City: WAYNE State: PA Zip Code: 19087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP GOVERNMENT RELATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1500.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22367
Amount of Each Receipt this Period: 100.00

B.
Full Name (Last, First, Middle Initial): LAURENCE F. LANE
Mailing Address: 1616 STEPHENS DRIVE
City: WAYNE State: PA Zip Code: 19087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP GOVERNMENT RELATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1600.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22368
Amount of Each Receipt this Period: 100.00

C.
Full Name (Last, First, Middle Initial): LAURENCE F. LANE
Mailing Address: 1616 STEPHENS DRIVE
City: WAYNE State: PA Zip Code: 19087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP GOVERNMENT RELATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1700.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22369
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **300.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 132 / 261

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): LAURENCE F. LANE
Mailing Address: 1616 STEPHENS DRIVE
City: WAYNE State: PA Zip Code: 19087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP GOVERNMENT RELATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1800.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22370
Amount of Each Receipt this Period: 100.00

B.
Full Name (Last, First, Middle Initial): LAURENCE F. LANE
Mailing Address: 1616 STEPHENS DRIVE
City: WAYNE State: PA Zip Code: 19087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP GOVERNMENT RELATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1900.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22371
Amount of Each Receipt this Period: 100.00

C.
Full Name (Last, First, Middle Initial): MARK W LATHAM
Mailing Address: 100 CRAM ROAD
City: SANBORNTON State: NH Zip Code: 03269
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22379
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) 220.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 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)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): MARK W LATHAM
Mailing Address: 100 CRAM ROAD
City: SANBORNTON State: NH Zip Code: 03269
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22380
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): MARK W LATHAM
Mailing Address: 100 CRAM ROAD
City: SANBORNTON State: NH Zip Code: 03269
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 320.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22381
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): MARK W LATHAM
Mailing Address: 100 CRAM ROAD
City: SANBORNTON State: NH Zip Code: 03269
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 340.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22382
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) 60.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 134 / 261

[X] 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)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): MARK W LATHAM
Mailing Address: 100 CRAM ROAD
City: SANBORNTON State: NH Zip Code: 03269
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22383
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): MARK W LATHAM
Mailing Address: 100 CRAM ROAD
City: SANBORNTON State: NH Zip Code: 03269
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 380.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22384
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): MARY S LAUKAITIS
Mailing Address: 1301 THISTLEWOOD LANE
City: STEWARTSTOWN State: PA Zip Code: 17363
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REIMBURSEMENT SERVICE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 210.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22385
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) 55.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): MARY S LAUKAITIS
Mailing Address: 1301 THISTLEWOOD LANE
City: STEWARTSTOWN State: PA Zip Code: 17363
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REIMBURSEMENT SERVICE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 225.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22386
Amount of Each Receipt this Period: 15.00

B.
Full Name (Last, First, Middle Initial): MARY S LAUKAITIS
Mailing Address: 1301 THISTLEWOOD LANE
City: STEWARTSTOWN State: PA Zip Code: 17363
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REIMBURSEMENT SERVICE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22387
Amount of Each Receipt this Period: 15.00

C.
Full Name (Last, First, Middle Initial): MARY S LAUKAITIS
Mailing Address: 1301 THISTLEWOOD LANE
City: STEWARTSTOWN State: PA Zip Code: 17363
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REIMBURSEMENT SERVICE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 255.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22388
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) 45.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): MARY S LAUKAITIS
Mailing Address: 1301 THISTLEWOOD LANE
City: STEWARTSTOWN State: PA Zip Code: 17363
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REIMBURSEMENT SERVICE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 270.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22389
Amount of Each Receipt this Period: 15.00

B.
Full Name (Last, First, Middle Initial): MARY S LAUKAITIS
Mailing Address: 1301 THISTLEWOOD LANE
City: STEWARTSTOWN State: PA Zip Code: 17363
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REIMBURSEMENT SERVICE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 285.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22390
Amount of Each Receipt this Period: 15.00

C.
Full Name (Last, First, Middle Initial): TONI LEGGORE
Mailing Address: 3807 BAKER AVENUE
City: ABINGDON State: MD Zip Code: 21009
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-CLINICAL PRACTICE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 210.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22397
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) 45.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 137 / 261

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): TONI LEGGORE
Mailing Address: 3807 BAKER AVENUE
City: ABINGDON State: MD Zip Code: 21009
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-CLINICAL PRACTICE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 225.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22398
Amount of Each Receipt this Period: 15.00

B.
Full Name (Last, First, Middle Initial): TONI LEGGORE
Mailing Address: 3807 BAKER AVENUE
City: ABINGDON State: MD Zip Code: 21009
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-CLINICAL PRACTICE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22399
Amount of Each Receipt this Period: 15.00

C.
Full Name (Last, First, Middle Initial): TONI LEGGORE
Mailing Address: 3807 BAKER AVENUE
City: ABINGDON State: MD Zip Code: 21009
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-CLINICAL PRACTICE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 255.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22400
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) 45.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 138 / 261

[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): TONI LEGGORE
Mailing Address: 3807 BAKER AVENUE
City: ABINGDON State: MD Zip Code: 21009
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-CLINICAL PRACTICE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 270.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22401
Amount of Each Receipt this Period: 15.00

B.
Full Name (Last, First, Middle Initial): TONI LEGGORE
Mailing Address: 3807 BAKER AVENUE
City: ABINGDON State: MD Zip Code: 21009
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-CLINICAL PRACTICE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 285.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22402
Amount of Each Receipt this Period: 15.00

C.
Full Name (Last, First, Middle Initial): DONNA LESLIE
Mailing Address: 118 DEER VALLEY
City: HURRICANE State: WV Zip Code: 25526
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-CLINICAL REIMBURSEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 212.50
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22406
Amount of Each Receipt this Period: 12.50

SUBTOTAL of Receipts This Page (optional) 42.50

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): DONNA LESLIE
Mailing Address: 118 DEER VALLEY
City: HURRICANE State: WV Zip Code: 25526
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-CLINICAL REIMBURSEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 225.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22407
Amount of Each Receipt this Period: 12.50

B.
Full Name (Last, First, Middle Initial): DONNA LESLIE
Mailing Address: 118 DEER VALLEY
City: HURRICANE State: WV Zip Code: 25526
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-CLINICAL REIMBURSEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 237.50
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22408
Amount of Each Receipt this Period: 12.50

C.
Full Name (Last, First, Middle Initial): JOHN F. LOOME
Mailing Address: 3523 RUNNYMEDE PLACE,NW
City: WASHINGTON State: DC Zip Code: 20015
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-REGIONAL MEDICAL DIRECTOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 700.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22416
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 75.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 140 / 261

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JOHN F. LOOME
Mailing Address: 3523 RUNNYMEDE PLACE,NW
City: WASHINGTON State: DC Zip Code: 20015
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-REGIONAL MEDICAL DIRECTOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 750.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22417
Amount of Each Receipt this Period: 50.00

B.
Full Name (Last, First, Middle Initial): JOHN F. LOOME
Mailing Address: 3523 RUNNYMEDE PLACE,NW
City: WASHINGTON State: DC Zip Code: 20015
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-REGIONAL MEDICAL DIRECTOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 800.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22418
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial): JOHN F. LOOME
Mailing Address: 3523 RUNNYMEDE PLACE,NW
City: WASHINGTON State: DC Zip Code: 20015
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-REGIONAL MEDICAL DIRECTOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 850.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22419
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) 150.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JOHN F. LOOME
Mailing Address: 3523 RUNNYMEDE PLACE,NW
City: WASHINGTON State: DC Zip Code: 20015
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-REGIONAL MEDICAL DIRECTOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 900.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22420
Amount of Each Receipt this Period: 50.00

B.
Full Name (Last, First, Middle Initial): JOHN F. LOOME
Mailing Address: 3523 RUNNYMEDE PLACE,NW
City: WASHINGTON State: DC Zip Code: 20015
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-REGIONAL MEDICAL DIRECTOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 950.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22421
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial): DONALEE A LOUX
Mailing Address: 118 SCOTTS GLEN ROAD
City: LINCOLN UNIVERSITY State: PA Zip Code: 19352
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-FINANCIAL SYSTEMS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 350.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22422
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) 125.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 142 / 261

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): DONALEE A LOUX
Mailing Address: 118 SCOTTS GLEN ROAD
City: LINCOLN UNIVERSITY State: PA Zip Code: 19352
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-FINANCIAL SYSTEMS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 375.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22423
Amount of Each Receipt this Period: 25.00

B.
Full Name (Last, First, Middle Initial): DONALEE A LOUX
Mailing Address: 118 SCOTTS GLEN ROAD
City: LINCOLN UNIVERSITY State: PA Zip Code: 19352
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-FINANCIAL SYSTEMS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22424
Amount of Each Receipt this Period: 25.00

C.
Full Name (Last, First, Middle Initial): DONALEE A LOUX
Mailing Address: 118 SCOTTS GLEN ROAD
City: LINCOLN UNIVERSITY State: PA Zip Code: 19352
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-FINANCIAL SYSTEMS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 425.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22425
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **75.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): DONALEE A LOUX
Mailing Address: 118 SCOTTS GLEN ROAD
City: LINCOLN UNIVERSITY State: PA Zip Code: 19352
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-FINANCIAL SYSTEMS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22426
Amount of Each Receipt this Period: 25.00

B.
Full Name (Last, First, Middle Initial): DONALEE A LOUX
Mailing Address: 118 SCOTTS GLEN ROAD
City: LINCOLN UNIVERSITY State: PA Zip Code: 19352
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-FINANCIAL SYSTEMS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 475.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22427
Amount of Each Receipt this Period: 25.00

C.
Full Name (Last, First, Middle Initial): PAUL MAHONEY
Mailing Address: 49 BARRY AVE
City: SOMERSET State: MA Zip Code: 02726
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-HOSPITALITY SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22428
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **70.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one) PAGE 144 / 261

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): PAUL MAHONEY
Mailing Address: 49 BARRY AVE
City: SOMERSET State: MA Zip Code: 02726
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-HOSPITALITY SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22429
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): PAUL MAHONEY
Mailing Address: 49 BARRY AVE
City: SOMERSET State: MA Zip Code: 02726
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-HOSPITALITY SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 320.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22430
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): PAUL MAHONEY
Mailing Address: 49 BARRY AVE
City: SOMERSET State: MA Zip Code: 02726
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-HOSPITALITY SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 340.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22431
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): PAUL MAHONEY
Mailing Address: 49 BARRY AVE
City: SOMERSET State: MA Zip Code: 02726
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-HOSPITALITY SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22432
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): PAUL MAHONEY
Mailing Address: 49 BARRY AVE
City: SOMERSET State: MA Zip Code: 02726
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-HOSPITALITY SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 380.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22433
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): JOSEPH MASON
Mailing Address: 667 MOUNTAIN VIEW DRIVE
City: OAKLAND State: MD Zip Code: 21550
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VICE PRESIDENT-CENTERS GROUP
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 208.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22451
Amount of Each Receipt this Period: 13.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **53.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial)
JOSEPH MASON
Mailing Address 667 MOUNTAIN VIEW DRIVE
City: OAKLAND State: MD Zip Code: 21550
FEC ID number of contributing federal political committee. C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VICE PRESIDENT-CENTERS GROUP
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 221.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22452
Amount of Each Receipt this Period: 13.00

B.
Full Name (Last, First, Middle Initial)
JOSEPH MASON
Mailing Address 667 MOUNTAIN VIEW DRIVE
City: OAKLAND State: MD Zip Code: 21550
FEC ID number of contributing federal political committee. C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VICE PRESIDENT-CENTERS GROUP
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 234.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22453
Amount of Each Receipt this Period: 13.00

C.
Full Name (Last, First, Middle Initial)
JOSEPH MASON
Mailing Address 667 MOUNTAIN VIEW DRIVE
City: OAKLAND State: MD Zip Code: 21550
FEC ID number of contributing federal political committee. C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VICE PRESIDENT-CENTERS GROUP
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 247.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22454
Amount of Each Receipt this Period: 13.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **39.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): LOIS MCCASKEY
Mailing Address: 602 S. CONCORD ROAD
City: WEST CHESTER State: PA Zip Code: 19382
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-SR LABOR MGMT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 700.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22467
Amount of Each Receipt this Period: 50.00

B.
Full Name (Last, First, Middle Initial): LOIS MCCASKEY
Mailing Address: 602 S. CONCORD ROAD
City: WEST CHESTER State: PA Zip Code: 19382
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-SR LABOR MGMT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 750.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22468
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial): LOIS MCCASKEY
Mailing Address: 602 S. CONCORD ROAD
City: WEST CHESTER State: PA Zip Code: 19382
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-SR LABOR MGMT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 800.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22469
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) 150.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): LOIS MCCASKEY
Mailing Address: 602 S. CONCORD ROAD
City: WEST CHESTER State: PA Zip Code: 19382
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-SR LABOR MGMT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 850.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22470
Amount of Each Receipt this Period: 50.00

B.
Full Name (Last, First, Middle Initial): LOIS MCCASKEY
Mailing Address: 602 S. CONCORD ROAD
City: WEST CHESTER State: PA Zip Code: 19382
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-SR LABOR MGMT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 900.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22471
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial): LOIS MCCASKEY
Mailing Address: 602 S. CONCORD ROAD
City: WEST CHESTER State: PA Zip Code: 19382
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-SR LABOR MGMT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 950.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22472
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) 150.00

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

SCHEDULE A (FEC Form 3X)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JAMES J MCELWAIN
Mailing Address: 397 REDBUD DRIVE
City: OXFORD State: PA Zip Code: 19363
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-IT AUDIT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 210.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22473
Amount of Each Receipt this Period: 15.00

B.
Full Name (Last, First, Middle Initial): JAMES J MCELWAIN
Mailing Address: 397 REDBUD DRIVE
City: OXFORD State: PA Zip Code: 19363
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-IT AUDIT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 225.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22474
Amount of Each Receipt this Period: 15.00

C.
Full Name (Last, First, Middle Initial): JAMES J MCELWAIN
Mailing Address: 397 REDBUD DRIVE
City: OXFORD State: PA Zip Code: 19363
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-IT AUDIT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22475
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) 45.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JAMES J MCELWAIN
Mailing Address: 397 REDBUD DRIVE
City: OXFORD State: PA Zip Code: 19363
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-IT AUDIT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 255.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22476
Amount of Each Receipt this Period: 15.00

B.
Full Name (Last, First, Middle Initial): JAMES J MCELWAIN
Mailing Address: 397 REDBUD DRIVE
City: OXFORD State: PA Zip Code: 19363
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-IT AUDIT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 270.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22477
Amount of Each Receipt this Period: 15.00

C.
Full Name (Last, First, Middle Initial): PAUL J. MCGUIRE
Mailing Address: 280 APPLETON COURT
City: KENNETT SQUARE State: PA Zip Code: 19348
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22478
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 50.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): PAUL J. MCGUIRE
Mailing Address: 280 APPLETON COURT
City: KENNETT SQUARE State: PA Zip Code: 19348
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22479
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): PAUL J. MCGUIRE
Mailing Address: 280 APPLETON COURT
City: KENNETT SQUARE State: PA Zip Code: 19348
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 320.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22480
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): PAUL J. MCGUIRE
Mailing Address: 280 APPLETON COURT
City: KENNETT SQUARE State: PA Zip Code: 19348
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 340.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22481
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **60.00**

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): PAUL J. MCGUIRE
Mailing Address: 280 APPLETON COURT
City: KENNETT SQUARE State: PA Zip Code: 19348
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22482
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): PAUL J. MCGUIRE
Mailing Address: 280 APPLETON COURT
City: KENNETT SQUARE State: PA Zip Code: 19348
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 380.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22483
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): JAMES MCKEON
Mailing Address: 1613 BROAD RUN ROAD
City: LANDENBERG State: PA Zip Code: 19350
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: EXECUTIVE VP FINANCE & CFO
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2170.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22484
Amount of Each Receipt this Period: 155.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **195.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JAMES MCKEON
Mailing Address: 1613 BROAD RUN ROAD
City: LANDENBERG State: PA Zip Code: 19350
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: EXECUTIVE VP FINANCE & CFO
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2325.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22485
Amount of Each Receipt this Period: 155.00

B.
Full Name (Last, First, Middle Initial): JAMES MCKEON
Mailing Address: 1613 BROAD RUN ROAD
City: LANDENBERG State: PA Zip Code: 19350
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: EXECUTIVE VP FINANCE & CFO
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2480.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22486
Amount of Each Receipt this Period: 155.00

C.
Full Name (Last, First, Middle Initial): JAMES MCKEON
Mailing Address: 1613 BROAD RUN ROAD
City: LANDENBERG State: PA Zip Code: 19350
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: EXECUTIVE VP FINANCE & CFO
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2635.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22487
Amount of Each Receipt this Period: 155.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **465.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JAMES MCKEON
Mailing Address: 1613 BROAD RUN ROAD
City: LANDENBERG State: PA Zip Code: 19350
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: EXECUTIVE VP FINANCE & CFO
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2827.30
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22488
Amount of Each Receipt this Period: 192.30

B.
Full Name (Last, First, Middle Initial): JAMES MCKEON
Mailing Address: 1613 BROAD RUN ROAD
City: LANDENBERG State: PA Zip Code: 19350
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: EXECUTIVE VP FINANCE & CFO
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 3019.60
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22489
Amount of Each Receipt this Period: 192.30

C.
Full Name (Last, First, Middle Initial): WILLIAM T. MERRILL
Mailing Address: 131 RED HAVEN DRIVE
City: NORTH WALES State: PA Zip Code: 19454
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-HUMAN RESOURCES REGNL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22490
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) 404.60

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): WILLIAM T. MERRILL
Mailing Address: 131 RED HAVEN DRIVE
City: NORTH WALES State: PA Zip Code: 19454
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-HUMAN RESOURCES REGNL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22491
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): WILLIAM T. MERRILL
Mailing Address: 131 RED HAVEN DRIVE
City: NORTH WALES State: PA Zip Code: 19454
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-HUMAN RESOURCES REGNL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 320.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22492
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): WILLIAM T. MERRILL
Mailing Address: 131 RED HAVEN DRIVE
City: NORTH WALES State: PA Zip Code: 19454
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-HUMAN RESOURCES REGNL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 340.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22493
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): WILLIAM T. MERRILL
Mailing Address: 131 RED HAVEN DRIVE
City: NORTH WALES State: PA Zip Code: 19454
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-HUMAN RESOURCES REGNL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22494
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): WILLIAM T. MERRILL
Mailing Address: 131 RED HAVEN DRIVE
City: NORTH WALES State: PA Zip Code: 19454
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-HUMAN RESOURCES REGNL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 380.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22495
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): JOSEPH MONTGOMERY
Mailing Address: 2701 BALD EAGLE CIRCLE
City: AUDUBON State: PA Zip Code: 19403
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-INFORMATION SYSTEMS 2
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 252.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22503
Amount of Each Receipt this Period: 18.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **58.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial)
JOSEPH MONTGOMERY
Mailing Address 2701 BALD EAGLE CIRCLE
City: AUDUBON State: PA Zip Code: 19403
FEC ID number of contributing federal political committee. C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-INFORMATION SYSTEMS 2
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 270.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22504
Amount of Each Receipt this Period: 18.00

B.
Full Name (Last, First, Middle Initial)
JOSEPH MONTGOMERY
Mailing Address 2701 BALD EAGLE CIRCLE
City: AUDUBON State: PA Zip Code: 19403
FEC ID number of contributing federal political committee. C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-INFORMATION SYSTEMS 2
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 288.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22505
Amount of Each Receipt this Period: 18.00

C.
Full Name (Last, First, Middle Initial)
JOSEPH MONTGOMERY
Mailing Address 2701 BALD EAGLE CIRCLE
City: AUDUBON State: PA Zip Code: 19403
FEC ID number of contributing federal political committee. C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-INFORMATION SYSTEMS 2
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 306.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22506
Amount of Each Receipt this Period: 18.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **54.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JOSEPH MONTGOMERY
Mailing Address: 2701 BALD EAGLE CIRCLE
City: AUDUBON State: PA Zip Code: 19403
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-INFORMATION SYSTEMS 2
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 324.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22507
Amount of Each Receipt this Period: 18.00

B.
Full Name (Last, First, Middle Initial): JOSEPH MONTGOMERY
Mailing Address: 2701 BALD EAGLE CIRCLE
City: AUDUBON State: PA Zip Code: 19403
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-INFORMATION SYSTEMS 2
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 342.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22508
Amount of Each Receipt this Period: 18.00

C.
Full Name (Last, First, Middle Initial): LAUREN F MURRAY
Mailing Address: 19 SHIP STREET
City: NEWBURYPORT State: MA Zip Code: 01950
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-REGIONAL SALES AND MTKG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 700.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22533
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **86.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): LAUREN F MURRAY
Mailing Address: 19 SHIP STREET
City: NEWBURYPORT State: MA Zip Code: 01950
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-REGIONAL SALES AND MTKG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 750.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22534
Amount of Each Receipt this Period: 50.00

B.
Full Name (Last, First, Middle Initial): LAUREN F MURRAY
Mailing Address: 19 SHIP STREET
City: NEWBURYPORT State: MA Zip Code: 01950
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-REGIONAL SALES AND MTKG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 800.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22535
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial): LAUREN F MURRAY
Mailing Address: 19 SHIP STREET
City: NEWBURYPORT State: MA Zip Code: 01950
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-REGIONAL SALES AND MTKG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 850.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22536
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **150.00**

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): LAUREN F MURRAY
Mailing Address: 19 SHIP STREET
City: NEWBURYPORT State: MA Zip Code: 01950
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-REGIONAL SALES AND MTKG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 900.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22537
Amount of Each Receipt this Period: 50.00

B.
Full Name (Last, First, Middle Initial): LAUREN F MURRAY
Mailing Address: 19 SHIP STREET
City: NEWBURYPORT State: MA Zip Code: 01950
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-REGIONAL SALES AND MTKG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 950.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22538
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial): KEITH NAUSE
Mailing Address: 5 COOPERSTOWN COURT
City: PHOENIX State: MD Zip Code: 21131
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP & REGIONAL CONTROLLER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 700.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22539
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) 150.00

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

SCHEDULE A (FEC Form 3X)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): KEITH NAUSE
Mailing Address: 5 COOPERSTOWN COURT
City: PHOENIX State: MD Zip Code: 21131
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP & REGIONAL CONTROLLER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 750.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22540
Amount of Each Receipt this Period: 50.00

B.
Full Name (Last, First, Middle Initial): KEITH NAUSE
Mailing Address: 5 COOPERSTOWN COURT
City: PHOENIX State: MD Zip Code: 21131
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP & REGIONAL CONTROLLER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 800.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22541
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial): KEITH NAUSE
Mailing Address: 5 COOPERSTOWN COURT
City: PHOENIX State: MD Zip Code: 21131
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP & REGIONAL CONTROLLER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 850.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22542
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **150.00**

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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 162 / 261

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): KEITH NAUSE
Mailing Address: 5 COOPERSTOWN COURT
City: PHOENIX State: MD Zip Code: 21131
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP & REGIONAL CONTROLLER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 900.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22543
Amount of Each Receipt this Period: 50.00

B.
Full Name (Last, First, Middle Initial): KEITH NAUSE
Mailing Address: 5 COOPERSTOWN COURT
City: PHOENIX State: MD Zip Code: 21131
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP & REGIONAL CONTROLLER
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 950.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22544
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial): DOLORES M NELSON
Mailing Address: 50 GARLAND STREET
City: SPRINGFIELD State: MA Zip Code: 01118
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-CLINICAL REIMBURSEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 204.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22548
Amount of Each Receipt this Period: 12.00

SUBTOTAL of Receipts This Page (optional) 112.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): DOLORES M NELSON
Mailing Address: 50 GARLAND STREET
City: SPRINGFIELD State: MA Zip Code: 01118
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-CLINICAL REIMBURSEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 216.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22549
Amount of Each Receipt this Period: 12.00

B.
Full Name (Last, First, Middle Initial): DOLORES M NELSON
Mailing Address: 50 GARLAND STREET
City: SPRINGFIELD State: MA Zip Code: 01118
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-CLINICAL REIMBURSEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 228.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22550
Amount of Each Receipt this Period: 12.00

C.
Full Name (Last, First, Middle Initial): ARTHUR L O'LEARY
Mailing Address: 79 BROAD STREET
City: HOLLIS State: NH Zip Code: 03049
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 350.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22561
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 49.00

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SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): ARTHUR L O'LEARY
Mailing Address: 79 BROAD STREET
City: HOLLIS State: NH Zip Code: 03049
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 375.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22562
Amount of Each Receipt this Period: 25.00

B.
Full Name (Last, First, Middle Initial): ARTHUR L O'LEARY
Mailing Address: 79 BROAD STREET
City: HOLLIS State: NH Zip Code: 03049
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22563
Amount of Each Receipt this Period: 25.00

C.
Full Name (Last, First, Middle Initial): ARTHUR L O'LEARY
Mailing Address: 79 BROAD STREET
City: HOLLIS State: NH Zip Code: 03049
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 425.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22564
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) 75.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): ARTHUR L O'LEARY
Mailing Address: 79 BROAD STREET
City: HOLLIS State: NH Zip Code: 03049
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22565
Amount of Each Receipt this Period: 25.00

B.
Full Name (Last, First, Middle Initial): ARTHUR L O'LEARY
Mailing Address: 79 BROAD STREET
City: HOLLIS State: NH Zip Code: 03049
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 475.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22566
Amount of Each Receipt this Period: 25.00

C.
Full Name (Last, First, Middle Initial): John Pabst
Mailing Address: 906 Rolandvue Road
City: Ruxton State: MD Zip Code: 21204
FEC ID number of contributing federal political committee: C
Name of Employer: Genesis HealthCare Corp
Occupation: Administrator Sr
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 250.00
Date of Receipt: 08 / 26 / 2008
Transaction ID: SA11AI.21702
Amount of Each Receipt this Period: 250.00
contribution

SUBTOTAL of Receipts This Page (optional) ..... ▶ 300.00

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): MARY M. PERKINS
Mailing Address: 16835 PEMBROKE ROAD
City: LEWES State: DE Zip Code: 19958
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-QUALITY
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 350.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22583
Amount of Each Receipt this Period: 25.00

B.
Full Name (Last, First, Middle Initial): MARY M. PERKINS
Mailing Address: 16835 PEMBROKE ROAD
City: LEWES State: DE Zip Code: 19958
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-QUALITY
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 375.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22584
Amount of Each Receipt this Period: 25.00

C.
Full Name (Last, First, Middle Initial): MARY M. PERKINS
Mailing Address: 16835 PEMBROKE ROAD
City: LEWES State: DE Zip Code: 19958
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-QUALITY
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22585
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 75.00

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): MARY M. PERKINS
Mailing Address: 16835 PEMBROKE ROAD
City: LEWES State: DE Zip Code: 19958
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-QUALITY
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 425.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22586
Amount of Each Receipt this Period: 25.00

B.
Full Name (Last, First, Middle Initial): MARY M. PERKINS
Mailing Address: 16835 PEMBROKE ROAD
City: LEWES State: DE Zip Code: 19958
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-QUALITY
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22587
Amount of Each Receipt this Period: 25.00

C.
Full Name (Last, First, Middle Initial): MARY M. PERKINS
Mailing Address: 16835 PEMBROKE ROAD
City: LEWES State: DE Zip Code: 19958
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-QUALITY
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 475.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22588
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **75.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JEANNE PHILLIPS
Mailing Address: 1816 LENAPE -UNIONVILLE RD
City: WEST CHESTER State: PA Zip Code: 19382
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPOR-ATION
Occupation: VICE PRESIDENT-RISK MANAGEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1400.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22604
Amount of Each Receipt this Period: 100.00

B.
Full Name (Last, First, Middle Initial): JEANNE PHILLIPS
Mailing Address: 1816 LENAPE -UNIONVILLE RD
City: WEST CHESTER State: PA Zip Code: 19382
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPOR-ATION
Occupation: VICE PRESIDENT-RISK MANAGEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1500.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22605
Amount of Each Receipt this Period: 100.00

C.
Full Name (Last, First, Middle Initial): JEANNE PHILLIPS
Mailing Address: 1816 LENAPE -UNIONVILLE RD
City: WEST CHESTER State: PA Zip Code: 19382
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPOR-ATION
Occupation: VICE PRESIDENT-RISK MANAGEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1600.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22606
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) 300.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JEANNE PHILLIPS
Mailing Address: 1816 LENAPE -UNIONVILLE RD
City: WEST CHESTER State: PA Zip Code: 19382
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPOR-ATION
Occupation: VICE PRESIDENT-RISK MANAGEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1700.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22607
Amount of Each Receipt this Period: 100.00

B.
Full Name (Last, First, Middle Initial): JEANNE PHILLIPS
Mailing Address: 1816 LENAPE -UNIONVILLE RD
City: WEST CHESTER State: PA Zip Code: 19382
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPOR-ATION
Occupation: VICE PRESIDENT-RISK MANAGEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1800.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22608
Amount of Each Receipt this Period: 100.00

C.
Full Name (Last, First, Middle Initial): JEANNE PHILLIPS
Mailing Address: 1816 LENAPE -UNIONVILLE RD
City: WEST CHESTER State: PA Zip Code: 19382
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPOR-ATION
Occupation: VICE PRESIDENT-RISK MANAGEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1900.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22609
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **300.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): DAVID M PLOTT
Mailing Address: 433 CHEROKEE DRIVE
City: MECHANICSBURG State: PA Zip Code: 17050
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-LABOR RELATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 210.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22616
Amount of Each Receipt this Period: 15.00

B.
Full Name (Last, First, Middle Initial): DAVID M PLOTT
Mailing Address: 433 CHEROKEE DRIVE
City: MECHANICSBURG State: PA Zip Code: 17050
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-LABOR RELATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 225.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22617
Amount of Each Receipt this Period: 15.00

C.
Full Name (Last, First, Middle Initial): DAVID M PLOTT
Mailing Address: 433 CHEROKEE DRIVE
City: MECHANICSBURG State: PA Zip Code: 17050
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-LABOR RELATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22618
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) 45.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one) PAGE 171 / 261

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): DAVID M PLOTT
Mailing Address: 433 CHEROKEE DRIVE
City: MECHANICSBURG State: PA Zip Code: 17050
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-LABOR RELATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 255.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22619
Amount of Each Receipt this Period: 15.00

B.
Full Name (Last, First, Middle Initial): DAVID M PLOTT
Mailing Address: 433 CHEROKEE DRIVE
City: MECHANICSBURG State: PA Zip Code: 17050
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-LABOR RELATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 270.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22620
Amount of Each Receipt this Period: 15.00

C.
Full Name (Last, First, Middle Initial): DAVID M PLOTT
Mailing Address: 433 CHEROKEE DRIVE
City: MECHANICSBURG State: PA Zip Code: 17050
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-LABOR RELATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 285.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22621
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) 45.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): ANDREA RATHBONE
Mailing Address: 16 BADGER HILL DRIVE
City: MILFORD State: NH Zip Code: 03055
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: 07 / 03 / 2008
Transaction ID: SA11AI.22640
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): ANDREA RATHBONE
Mailing Address: 16 BADGER HILL DRIVE
City: MILFORD State: NH Zip Code: 03055
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 / 18 / 2008
Transaction ID: SA11AI.22641
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): ANDREA RATHBONE
Mailing Address: 16 BADGER HILL DRIVE
City: MILFORD State: NH Zip Code: 03055
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 320.00
Date of Receipt: 08 / 01 / 2008
Transaction ID: SA11AI.22642
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) 60.00

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): ANDREA RATHBONE
Mailing Address: 16 BADGER HILL DRIVE
City: MILFORD State: NH Zip Code: 03055
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 340.00
Date of Receipt: 08 / 15 / 2008
Transaction ID: SA11AI.22643
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): ANDREA RATHBONE
Mailing Address: 16 BADGER HILL DRIVE
City: MILFORD State: NH Zip Code: 03055
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: 08 / 29 / 2008
Transaction ID: SA11AI.22644
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): ANDREA RATHBONE
Mailing Address: 16 BADGER HILL DRIVE
City: MILFORD State: NH Zip Code: 03055
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 380.00
Date of Receipt: 09 / 12 / 2008
Transaction ID: SA11AI.22645
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) 60.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): ANDREA RATHBONE
Mailing Address: 16 BADGER HILL DRIVE
City: MILFORD State: NH Zip Code: 03055
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 09 / 26 / 2008
Transaction ID: SA11AI.22646
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): SUSAN REAGAN
Mailing Address: 1364 FOX RIDGE
City: EASTON State: PA Zip Code: 18040
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REGIONAL MARKETING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 497.01
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22650
Amount of Each Receipt this Period: 34.22

C.
Full Name (Last, First, Middle Initial): SUSAN REAGAN
Mailing Address: 1364 FOX RIDGE
City: EASTON State: PA Zip Code: 18040
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REGIONAL MARKETING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 531.23
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22651
Amount of Each Receipt this Period: 34.22

SUBTOTAL of Receipts This Page (optional) ..... ▶ 88.44

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): SUSAN REAGAN
Mailing Address: 1364 FOX RIDGE
City: EASTON State: PA Zip Code: 18040
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REGIONAL MARKETING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 565.45
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22652
Amount of Each Receipt this Period: 34.22

B.
Full Name (Last, First, Middle Initial): SUSAN REAGAN
Mailing Address: 1364 FOX RIDGE
City: EASTON State: PA Zip Code: 18040
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REGIONAL MARKETING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 599.67
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22653
Amount of Each Receipt this Period: 34.22

C.
Full Name (Last, First, Middle Initial): SUSAN REAGAN
Mailing Address: 1364 FOX RIDGE
City: EASTON State: PA Zip Code: 18040
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REGIONAL MARKETING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 633.89
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22654
Amount of Each Receipt this Period: 34.22

SUBTOTAL of Receipts This Page (optional) ..... ▶ **102.66**

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

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): SUSAN REAGAN
Mailing Address: 1364 FOX RIDGE
City: EASTON State: PA Zip Code: 18040
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REGIONAL MARKETING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 668.11
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22655
Amount of Each Receipt this Period: 34.22

B.
Full Name (Last, First, Middle Initial): RICHARD REILLY
Mailing Address: 130 DEEP HOLLOW ROAD
City: KING OF PRUSSIA State: PA Zip Code: 19406
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ASSOCIATE COUNSEL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 560.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22669
Amount of Each Receipt this Period: 40.00

C.
Full Name (Last, First, Middle Initial): RICHARD REILLY
Mailing Address: 130 DEEP HOLLOW ROAD
City: KING OF PRUSSIA State: PA Zip Code: 19406
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ASSOCIATE COUNSEL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22670
Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) 114.22

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

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): RICHARD REILLY
Mailing Address: 130 DEEP HOLLOW ROAD
City: KING OF PRUSSIA State: PA Zip Code: 19406
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ASSOCIATE COUNSEL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 640.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22671
Amount of Each Receipt this Period: 40.00

B.
Full Name (Last, First, Middle Initial): RICHARD REILLY
Mailing Address: 130 DEEP HOLLOW ROAD
City: KING OF PRUSSIA State: PA Zip Code: 19406
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ASSOCIATE COUNSEL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 680.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22672
Amount of Each Receipt this Period: 40.00

C.
Full Name (Last, First, Middle Initial): RICHARD REILLY
Mailing Address: 130 DEEP HOLLOW ROAD
City: KING OF PRUSSIA State: PA Zip Code: 19406
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ASSOCIATE COUNSEL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 720.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22673
Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **120.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): RICHARD REILLY
Mailing Address: 130 DEEP HOLLOW ROAD
City: KING OF PRUSSIA State: PA Zip Code: 19406
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ASSOCIATE COUNSEL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 760.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22674
Amount of Each Receipt this Period: 40.00

B.
Full Name (Last, First, Middle Initial): ROBERT A REITZ
Mailing Address: 13005 JEROME JAY DRIVE
City: COCKEYSVILLE State: MD Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: PRESIDENT-DIVISIONAL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1820.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22675
Amount of Each Receipt this Period: 130.00

C.
Full Name (Last, First, Middle Initial): ROBERT A REITZ
Mailing Address: 13005 JEROME JAY DRIVE
City: COCKEYSVILLE State: MD Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: PRESIDENT-DIVISIONAL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1950.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22676
Amount of Each Receipt this Period: 130.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 300.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): ROBERT A REITZ
Mailing Address: 13005 JEROME JAY DRIVE
City: COCKEYSVILLE State: MD Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: PRESIDENT-DIVISIONAL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2080.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22677
Amount of Each Receipt this Period: 130.00

B.
Full Name (Last, First, Middle Initial): ROBERT A REITZ
Mailing Address: 13005 JEROME JAY DRIVE
City: COCKEYSVILLE State: MD Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: PRESIDENT-DIVISIONAL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2210.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22678
Amount of Each Receipt this Period: 130.00

C.
Full Name (Last, First, Middle Initial): ROBERT A REITZ
Mailing Address: 13005 JEROME JAY DRIVE
City: COCKEYSVILLE State: MD Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: PRESIDENT-DIVISIONAL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2360.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22679
Amount of Each Receipt this Period: 150.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **410.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): ROBERT A REITZ
Mailing Address: 13005 JEROME JAY DRIVE
City: COCKEYSVILLE State: MD Zip Code: 21030
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: PRESIDENT-DIVISIONAL
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 2510.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22680
Amount of Each Receipt this Period: 150.00

B.
Full Name (Last, First, Middle Initial): THOMAS RUSSO
Mailing Address: 561 KING ST
City: SOUTH WINDSOR State: CT Zip Code: 06074
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 270.00
Date of Receipt: 07 / 03 / 2008
Transaction ID: SA11AI.22697
Amount of Each Receipt this Period: 10.00

C.
Full Name (Last, First, Middle Initial): THOMAS RUSSO
Mailing Address: 561 KING ST
City: SOUTH WINDSOR State: CT Zip Code: 06074
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22698
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **170.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): THOMAS RUSSO
Mailing Address: 561 KING ST
City: SOUTH WINDSOR State: CT Zip Code: 06074
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 290.00
Date of Receipt: 07 / 18 / 2008
Transaction ID: SA11AI.22699
Amount of Each Receipt this Period: 10.00

B.
Full Name (Last, First, Middle Initial): THOMAS RUSSO
Mailing Address: 561 KING ST
City: SOUTH WINDSOR State: CT Zip Code: 06074
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22700
Amount of Each Receipt this Period: 10.00

C.
Full Name (Last, First, Middle Initial): THOMAS RUSSO
Mailing Address: 561 KING ST
City: SOUTH WINDSOR State: CT Zip Code: 06074
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 310.00
Date of Receipt: 08 / 01 / 2008
Transaction ID: SA11AI.22701
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 182 / 261

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): THOMAS RUSSO
Mailing Address: 561 KING ST
City: SOUTH WINDSOR State: CT Zip Code: 06074
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 320.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22702
Amount of Each Receipt this Period: 10.00

B.
Full Name (Last, First, Middle Initial): THOMAS RUSSO
Mailing Address: 561 KING ST
City: SOUTH WINDSOR State: CT Zip Code: 06074
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 330.00
Date of Receipt: 08 / 15 / 2008
Transaction ID: SA11AI.22703
Amount of Each Receipt this Period: 10.00

C.
Full Name (Last, First, Middle Initial): THOMAS RUSSO
Mailing Address: 561 KING ST
City: SOUTH WINDSOR State: CT Zip Code: 06074
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 340.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22704
Amount of Each Receipt this Period: 10.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **30.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 183 / 261

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): THOMAS RUSSO
Mailing Address: 561 KING ST
City: SOUTH WINDSOR State: CT Zip Code: 06074
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 350.00
Date of Receipt: 08 / 29 / 2008
Transaction ID: SA11AI.22705
Amount of Each Receipt this Period: 10.00

B.
Full Name (Last, First, Middle Initial): THOMAS RUSSO
Mailing Address: 561 KING ST
City: SOUTH WINDSOR State: CT Zip Code: 06074
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 368.64
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22706
Amount of Each Receipt this Period: 18.64

C.
Full Name (Last, First, Middle Initial): THOMAS RUSSO
Mailing Address: 561 KING ST
City: SOUTH WINDSOR State: CT Zip Code: 06074
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 387.28
Date of Receipt: 09 / 12 / 2008
Transaction ID: SA11AI.22707
Amount of Each Receipt this Period: 18.64

SUBTOTAL of Receipts This Page (optional) ..... ▶ **47.28**

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

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): THOMAS RUSSO
Mailing Address: 561 KING ST
City: SOUTH WINDSOR State: CT Zip Code: 06074
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 405.92
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22708
Amount of Each Receipt this Period: 18.64

B.
Full Name (Last, First, Middle Initial): THOMAS RUSSO
Mailing Address: 561 KING ST
City: SOUTH WINDSOR State: CT Zip Code: 06074
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 424.56
Date of Receipt: 09 / 26 / 2008
Transaction ID: SA11AI.22709
Amount of Each Receipt this Period: 18.64

C.
Full Name (Last, First, Middle Initial): MARCIA C. SACCO
Mailing Address: 100 PLAIN STREET
City: NORTON State: MA Zip Code: 02766
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-NETWORK DEVELOPMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 700.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22710
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **87.28**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): MARCIA C. SACCO
Mailing Address: 100 PLAIN STREET
City: NORTON State: MA Zip Code: 02766
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-NETWORK DEVELOPMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 750.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22711
Amount of Each Receipt this Period: 50.00

B.
Full Name (Last, First, Middle Initial): MARCIA C. SACCO
Mailing Address: 100 PLAIN STREET
City: NORTON State: MA Zip Code: 02766
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-NETWORK DEVELOPMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 800.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22712
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial): MARCIA C. SACCO
Mailing Address: 100 PLAIN STREET
City: NORTON State: MA Zip Code: 02766
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-NETWORK DEVELOPMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 850.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22713
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **150.00**

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

SCHEDULE A (FEC Form 3X)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): MARCIA C. SACCO
Mailing Address: 100 PLAIN STREET
City: NORTON State: MA Zip Code: 02766
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-NETWORK DEVELOPMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 900.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22714
Amount of Each Receipt this Period: 50.00

B.
Full Name (Last, First, Middle Initial): MARCIA C. SACCO
Mailing Address: 100 PLAIN STREET
City: NORTON State: MA Zip Code: 02766
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-NETWORK DEVELOPMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 950.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22715
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial): JOHN V. SAVO
Mailing Address: 535 WEADLEY ROAD
City: STRAFFORD State: PA Zip Code: 19087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: CONTROLLER-ASSISTANT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 490.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22741
Amount of Each Receipt this Period: 35.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 135.00

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JOHN V. SAVO
Mailing Address: 535 WEADLEY ROAD
City: STRAFFORD State: PA Zip Code: 19087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: CONTROLLER-ASSISTANT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 525.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22742
Amount of Each Receipt this Period: 35.00

B.
Full Name (Last, First, Middle Initial): JOHN V. SAVO
Mailing Address: 535 WEADLEY ROAD
City: STRAFFORD State: PA Zip Code: 19087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: CONTROLLER-ASSISTANT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 560.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22743
Amount of Each Receipt this Period: 35.00

C.
Full Name (Last, First, Middle Initial): JOHN V. SAVO
Mailing Address: 535 WEADLEY ROAD
City: STRAFFORD State: PA Zip Code: 19087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: CONTROLLER-ASSISTANT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 595.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22744
Amount of Each Receipt this Period: 35.00

SUBTOTAL of Receipts This Page (optional) 105.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 188 / 261

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JOHN V. SAVO
Mailing Address: 535 WEADLEY ROAD
City: STRAFFORD State: PA Zip Code: 19087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: CONTROLLER-ASSISTANT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 632.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22745
Amount of Each Receipt this Period: 37.00

B.
Full Name (Last, First, Middle Initial): JOHN V. SAVO
Mailing Address: 535 WEADLEY ROAD
City: STRAFFORD State: PA Zip Code: 19087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: CONTROLLER-ASSISTANT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 669.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22746
Amount of Each Receipt this Period: 37.00

C.
Full Name (Last, First, Middle Initial): IRA M SCHOENBERGER
Mailing Address: 33 WOODSIDE CIRCLE
City: STURBRIDGE State: MA Zip Code: 01566
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 350.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22747
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) 99.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): IRA M SCHOENBERGER
Mailing Address: 33 WOODSIDE CIRCLE
City: STURBRIDGE State: MA Zip Code: 01566
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 375.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22748
Amount of Each Receipt this Period: 25.00

B.
Full Name (Last, First, Middle Initial): IRA M SCHOENBERGER
Mailing Address: 33 WOODSIDE CIRCLE
City: STURBRIDGE State: MA Zip Code: 01566
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22749
Amount of Each Receipt this Period: 25.00

C.
Full Name (Last, First, Middle Initial): IRA M SCHOENBERGER
Mailing Address: 33 WOODSIDE CIRCLE
City: STURBRIDGE State: MA Zip Code: 01566
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 425.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22750
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **75.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): IRA M SCHOENBERGER
Mailing Address: 33 WOODSIDE CIRCLE
City: STURBRIDGE State: MA Zip Code: 01566
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22751
Amount of Each Receipt this Period: 25.00

B.
Full Name (Last, First, Middle Initial): IRA M SCHOENBERGER
Mailing Address: 33 WOODSIDE CIRCLE
City: STURBRIDGE State: MA Zip Code: 01566
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 475.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22752
Amount of Each Receipt this Period: 25.00

C.
Full Name (Last, First, Middle Initial): ERIC SCHULTHEIS
Mailing Address: 5 GAEBEL LANE
City: LANDENBERG State: PA Zip Code: 19350
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-TAX
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 600.32
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22753
Amount of Each Receipt this Period: 42.88

SUBTOTAL of Receipts This Page (optional) ..... ▶ 92.88

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): ERIC SCHULTHEIS
Mailing Address: 5 GAEBEL LANE
City: LANDENBERG State: PA Zip Code: 19350
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-TAX
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 643.20
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22754
Amount of Each Receipt this Period: 42.88

B.
Full Name (Last, First, Middle Initial): ERIC SCHULTHEIS
Mailing Address: 5 GAEBEL LANE
City: LANDENBERG State: PA Zip Code: 19350
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-TAX
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 686.08
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22755
Amount of Each Receipt this Period: 42.88

C.
Full Name (Last, First, Middle Initial): ERIC SCHULTHEIS
Mailing Address: 5 GAEBEL LANE
City: LANDENBERG State: PA Zip Code: 19350
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-TAX
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 728.96
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22756
Amount of Each Receipt this Period: 42.88

SUBTOTAL of Receipts This Page (optional) ..... ▶ **128.64**

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): ERIC SCHULTHEIS
Mailing Address: 5 GAEBEL LANE
City: LANDENBERG State: PA Zip Code: 19350
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-TAX
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 771.84
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22757
Amount of Each Receipt this Period: 42.88

B.
Full Name (Last, First, Middle Initial): ERIC SCHULTHEIS
Mailing Address: 5 GAEBEL LANE
City: LANDENBERG State: PA Zip Code: 19350
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-TAX
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 814.72
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22758
Amount of Each Receipt this Period: 42.88

C.
Full Name (Last, First, Middle Initial): BETTY SCOTT
Mailing Address: 28656 CLUBHOUSE DRIVE
City: EASTON State: MD Zip Code: 21601
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VICE PRESIDENT-CENTERS GROUP
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 350.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22759
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **110.76**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): BETTY SCOTT
Mailing Address: 28656 CLUBHOUSE DRIVE
City: EASTON State: MD Zip Code: 21601
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VICE PRESIDENT-CENTERS GROUP
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 375.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22760
Amount of Each Receipt this Period: 25.00

B.
Full Name (Last, First, Middle Initial): BETTY SCOTT
Mailing Address: 28656 CLUBHOUSE DRIVE
City: EASTON State: MD Zip Code: 21601
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VICE PRESIDENT-CENTERS GROUP
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22761
Amount of Each Receipt this Period: 25.00

C.
Full Name (Last, First, Middle Initial): BETTY SCOTT
Mailing Address: 28656 CLUBHOUSE DRIVE
City: EASTON State: MD Zip Code: 21601
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VICE PRESIDENT-CENTERS GROUP
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 425.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22762
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 75.00

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

SCHEDULE A (FEC Form 3X)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): BETTY SCOTT
Mailing Address: 28656 CLUBHOUSE DRIVE
City: EASTON State: MD Zip Code: 21601
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VICE PRESIDENT-CENTERS GROUP
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22763
Amount of Each Receipt this Period: 25.00

B.
Full Name (Last, First, Middle Initial): BETTY SCOTT
Mailing Address: 28656 CLUBHOUSE DRIVE
City: EASTON State: MD Zip Code: 21601
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VICE PRESIDENT-CENTERS GROUP
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 475.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22764
Amount of Each Receipt this Period: 25.00

C.
Full Name (Last, First, Middle Initial): KAREN SHAMBERG
Mailing Address: 1641 BOW TREE DRIVE
City: WEST CHESTER State: PA Zip Code: 19380
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-REGIONAL SALES&MKTG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 210.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22771
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 65.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): KAREN SHAMBERG
Mailing Address: 1641 BOW TREE DRIVE
City: WEST CHESTER State: PA Zip Code: 19380
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-REGIONAL SALES&MKTG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 225.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22772
Amount of Each Receipt this Period: 15.00

B.
Full Name (Last, First, Middle Initial): KAREN SHAMBERG
Mailing Address: 1641 BOW TREE DRIVE
City: WEST CHESTER State: PA Zip Code: 19380
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-REGIONAL SALES&MKTG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22773
Amount of Each Receipt this Period: 15.00

C.
Full Name (Last, First, Middle Initial): KAREN SHAMBERG
Mailing Address: 1641 BOW TREE DRIVE
City: WEST CHESTER State: PA Zip Code: 19380
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-REGIONAL SALES&MKTG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 255.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22774
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) 45.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): KAREN SHAMBERG
Mailing Address: 1641 BOW TREE DRIVE
City: WEST CHESTER State: PA Zip Code: 19380
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-REGIONAL SALES&MKTG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 270.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22775
Amount of Each Receipt this Period: 15.00

B.
Full Name (Last, First, Middle Initial): KAREN SHAMBERG
Mailing Address: 1641 BOW TREE DRIVE
City: WEST CHESTER State: PA Zip Code: 19380
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-REGIONAL SALES&MKTG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 285.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22776
Amount of Each Receipt this Period: 15.00

C.
Full Name (Last, First, Middle Initial): MICHAEL S. SHERMAN
Mailing Address: 1379 BRYANT COURT
City: AMBLER State: PA Zip Code: 19002
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: SR VP MERGERS AND ACQUISITIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22777
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 50.00

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

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ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): MICHAEL S. SHERMAN
Mailing Address: 1379 BRYANT COURT
City: AMBLER State: PA Zip Code: 19002
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: SR VP MERGERS AND ACQUISITIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22778
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): MICHAEL S. SHERMAN
Mailing Address: 1379 BRYANT COURT
City: AMBLER State: PA Zip Code: 19002
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: SR VP MERGERS AND ACQUISITIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 320.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22779
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): MICHAEL S. SHERMAN
Mailing Address: 1379 BRYANT COURT
City: AMBLER State: PA Zip Code: 19002
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: SR VP MERGERS AND ACQUISITIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 340.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22780
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): MICHAEL S. SHERMAN
Mailing Address: 1379 BRYANT COURT
City: AMBLER State: PA Zip Code: 19002
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: SR VP MERGERS AND ACQUISITIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22781
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): MICHAEL S. SHERMAN
Mailing Address: 1379 BRYANT COURT
City: AMBLER State: PA Zip Code: 19002
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: SR VP MERGERS AND ACQUISITIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 440.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22782
Amount of Each Receipt this Period: 80.00

C.
Full Name (Last, First, Middle Initial): KEN SILVERWOOD
Mailing Address: 1520 GENERALS WAY
City: WEST CHESTER State: PA Zip Code: 19380
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-INTERNAL OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 350.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22783
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) 125.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 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)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): KEN SILVERWOOD
Mailing Address: 1520 GENERALS WAY
City: WEST CHESTER State: PA Zip Code: 19380
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-INTERNAL OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 375.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22784
Amount of Each Receipt this Period: 25.00

B.
Full Name (Last, First, Middle Initial): KEN SILVERWOOD
Mailing Address: 1520 GENERALS WAY
City: WEST CHESTER State: PA Zip Code: 19380
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-INTERNAL OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22785
Amount of Each Receipt this Period: 25.00

C.
Full Name (Last, First, Middle Initial): KEN SILVERWOOD
Mailing Address: 1520 GENERALS WAY
City: WEST CHESTER State: PA Zip Code: 19380
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-INTERNAL OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 425.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22786
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 75.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): KEN SILVERWOOD
Mailing Address: 1520 GENERALS WAY
City: WEST CHESTER State: PA Zip Code: 19380
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-INTERNAL OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 463.46
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22787
Amount of Each Receipt this Period: 38.46

B.
Full Name (Last, First, Middle Initial): KEN SILVERWOOD
Mailing Address: 1520 GENERALS WAY
City: WEST CHESTER State: PA Zip Code: 19380
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: VP-INTERNAL OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 501.92
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22788
Amount of Each Receipt this Period: 38.46

C.
Full Name (Last, First, Middle Initial): LOU ANN SOIKA
Mailing Address: 65 DEER PATH ROAD
City: KENNETT SQUARE State: PA Zip Code: 19348
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-THERAPY MGMT & CONSULTING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 840.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22802
Amount of Each Receipt this Period: 60.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 136.92

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 201 / 261

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): LOU ANN SOIKA
Mailing Address: 65 DEER PATH ROAD
City: KENNETT SQUARE State: PA Zip Code: 19348
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-THERAPY MGMT & CONSULTING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 900.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22803
Amount of Each Receipt this Period: 60.00

B.
Full Name (Last, First, Middle Initial): LOU ANN SOIKA
Mailing Address: 65 DEER PATH ROAD
City: KENNETT SQUARE State: PA Zip Code: 19348
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-THERAPY MGMT & CONSULTING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 960.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22804
Amount of Each Receipt this Period: 60.00

C.
Full Name (Last, First, Middle Initial): LOU ANN SOIKA
Mailing Address: 65 DEER PATH ROAD
City: KENNETT SQUARE State: PA Zip Code: 19348
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-THERAPY MGMT & CONSULTING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1020.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22805
Amount of Each Receipt this Period: 60.00

SUBTOTAL of Receipts This Page (optional) 180.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): LOU ANN SOIKA
Mailing Address: 65 DEER PATH ROAD
City: KENNETT SQUARE State: PA Zip Code: 19348
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-THERAPY MGMT & CONSULTING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1080.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22806
Amount of Each Receipt this Period: 60.00

B.
Full Name (Last, First, Middle Initial): LOU ANN SOIKA
Mailing Address: 65 DEER PATH ROAD
City: KENNETT SQUARE State: PA Zip Code: 19348
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-THERAPY MGMT & CONSULTING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 1140.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22807
Amount of Each Receipt this Period: 60.00

C.
Full Name (Last, First, Middle Initial): GARY J SPROUSE
Mailing Address: 2108 DIDONATO DR
City: CHESTER State: MD Zip Code: 21619
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 350.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22808
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) 170.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): GARY J SPROUSE
Mailing Address: 2108 DIDONATO DR
City: CHESTER State: MD Zip Code: 21619
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22809
Amount of Each Receipt this Period: 50.00

B.
Full Name (Last, First, Middle Initial): GARY J SPROUSE
Mailing Address: 2108 DIDONATO DR
City: CHESTER State: MD Zip Code: 21619
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: PHYSICIAN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22810
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial): RONALD E STEWARD
Mailing Address: 1802 GARFIELD AVENUE 2ND FLOOR
City: WILMINGTON State: DE Zip Code: 19809
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-PROPERTY MANAGEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 533.69
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22820
Amount of Each Receipt this Period: 38.74

SUBTOTAL of Receipts This Page (optional) ..... ▶ **138.74**

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

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): RONALD E STEWARD
Mailing Address: 1802 GARFIELD AVENUE 2ND FLOOR
City: WILMINGTON State: DE Zip Code: 19809
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-PROPERTY MANAGEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 572.43
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22821
Amount of Each Receipt this Period: 38.74

B.
Full Name (Last, First, Middle Initial): RONALD E STEWARD
Mailing Address: 1802 GARFIELD AVENUE 2ND FLOOR
City: WILMINGTON State: DE Zip Code: 19809
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-PROPERTY MANAGEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 611.17
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22822
Amount of Each Receipt this Period: 38.74

C.
Full Name (Last, First, Middle Initial): RONALD E STEWARD
Mailing Address: 1802 GARFIELD AVENUE 2ND FLOOR
City: WILMINGTON State: DE Zip Code: 19809
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-PROPERTY MANAGEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 649.91
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22823
Amount of Each Receipt this Period: 38.74

SUBTOTAL of Receipts This Page (optional) ..... ▶ **116.22**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): RONALD E STEWARD
Mailing Address: 1802 GARFIELD AVENUE 2ND FLOOR
City: WILMINGTON State: DE Zip Code: 19809
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-PROPERTY MANAGEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 688.65
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22824
Amount of Each Receipt this Period: 38.74

B.
Full Name (Last, First, Middle Initial): RONALD E STEWARD
Mailing Address: 1802 GARFIELD AVENUE 2ND FLOOR
City: WILMINGTON State: DE Zip Code: 19809
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-PROPERTY MANAGEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 727.39
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22825
Amount of Each Receipt this Period: 38.74

C.
Full Name (Last, First, Middle Initial): JOHN STOCKMAN
Mailing Address: 21 SKYLINE DRIVE
City: GLEN MILLS State: PA Zip Code: 19342
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ANALYST-ADVISORY
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22826
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) 97.48

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JOHN STOCKMAN
Mailing Address: 21 SKYLINE DRIVE
City: GLEN MILLS State: PA Zip Code: 19342
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ANALYST-ADVISORY
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22827
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): JOHN STOCKMAN
Mailing Address: 21 SKYLINE DRIVE
City: GLEN MILLS State: PA Zip Code: 19342
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ANALYST-ADVISORY
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 320.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22828
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): JOHN STOCKMAN
Mailing Address: 21 SKYLINE DRIVE
City: GLEN MILLS State: PA Zip Code: 19342
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ANALYST-ADVISORY
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 340.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22829
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) 60.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 207 / 261

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JOHN STOCKMAN
Mailing Address: 21 SKYLINE DRIVE
City: GLEN MILLS State: PA Zip Code: 19342
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ANALYST-ADVISORY
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22830
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): JOHN STOCKMAN
Mailing Address: 21 SKYLINE DRIVE
City: GLEN MILLS State: PA Zip Code: 19342
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ANALYST-ADVISORY
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 380.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22831
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): WILLIAM E STURGIS
Mailing Address: 6505 HILLTOP DRIVE
City: BROOKHAVEN State: PA Zip Code: 19015
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-FINANCIAL ANALYSIS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 522.90
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22839
Amount of Each Receipt this Period: 37.35

SUBTOTAL of Receipts This Page (optional) ..... ▶ 77.35

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): WILLIAM E STURGIS
Mailing Address: 6505 HILLTOP DRIVE
City: BROOKHAVEN State: PA Zip Code: 19015
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-FINANCIAL ANALYSIS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 560.25
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22840
Amount of Each Receipt this Period: 37.35

B.
Full Name (Last, First, Middle Initial): WILLIAM E STURGIS
Mailing Address: 6505 HILLTOP DRIVE
City: BROOKHAVEN State: PA Zip Code: 19015
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-FINANCIAL ANALYSIS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 597.60
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22841
Amount of Each Receipt this Period: 37.35

C.
Full Name (Last, First, Middle Initial): WILLIAM E STURGIS
Mailing Address: 6505 HILLTOP DRIVE
City: BROOKHAVEN State: PA Zip Code: 19015
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-FINANCIAL ANALYSIS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 634.95
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22842
Amount of Each Receipt this Period: 37.35

SUBTOTAL of Receipts This Page (optional) 112.05

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): WILLIAM E STURGIS
Mailing Address: 6505 HILLTOP DRIVE
City: BROOKHAVEN State: PA Zip Code: 19015
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-FINANCIAL ANALYSIS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 672.30
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22843
Amount of Each Receipt this Period: 37.35

B.
Full Name (Last, First, Middle Initial): WILLIAM E STURGIS
Mailing Address: 6505 HILLTOP DRIVE
City: BROOKHAVEN State: PA Zip Code: 19015
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-FINANCIAL ANALYSIS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 709.65
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22844
Amount of Each Receipt this Period: 37.35

C.
Full Name (Last, First, Middle Initial): RAYMOND L THIVIERGE
Mailing Address: 11 GREENWAY ROAD
City: WINDHAM State: NH Zip Code: 03087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-SR CENTERS OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 700.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22852
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) 124.70

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 210 / 261

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): RAYMOND L THIVIERGE
Mailing Address: 11 GREENWAY ROAD
City: WINDHAM State: NH Zip Code: 03087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-SR CENTERS OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 750.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22853
Amount of Each Receipt this Period: 50.00

B.
Full Name (Last, First, Middle Initial): RAYMOND L THIVIERGE
Mailing Address: 11 GREENWAY ROAD
City: WINDHAM State: NH Zip Code: 03087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-SR CENTERS OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 800.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22854
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial): RAYMOND L THIVIERGE
Mailing Address: 11 GREENWAY ROAD
City: WINDHAM State: NH Zip Code: 03087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-SR CENTERS OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 850.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22855
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) 150.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): RAYMOND L THIVIERGE
Mailing Address: 11 GREENWAY ROAD
City: WINDHAM State: NH Zip Code: 03087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-SR CENTERS OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 900.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22856
Amount of Each Receipt this Period: 50.00

B.
Full Name (Last, First, Middle Initial): RAYMOND L THIVIERGE
Mailing Address: 11 GREENWAY ROAD
City: WINDHAM State: NH Zip Code: 03087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-SR CENTERS OPERATIONS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 950.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22857
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial): NEIL TOCKMAN
Mailing Address: P.O. BOX 22
City: ELKINS State: NH Zip Code: 03233
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-AREA (REHAB SVS)
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 405.00
Date of Receipt: 07 / 03 / 2008
Transaction ID: SA11AI.22867
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) 115.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): NEIL TOCKMAN
Mailing Address: P.O. BOX 22
City: ELKINS State: NH Zip Code: 03233
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-AREA (REHAB SVS)
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 420.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22868
Amount of Each Receipt this Period: 15.00

B.
Full Name (Last, First, Middle Initial): NEIL TOCKMAN
Mailing Address: P.O. BOX 22
City: ELKINS State: NH Zip Code: 03233
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-AREA (REHAB SVS)
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 435.00
Date of Receipt: 07 / 18 / 2008
Transaction ID: SA11AI.22869
Amount of Each Receipt this Period: 15.00

C.
Full Name (Last, First, Middle Initial): NEIL TOCKMAN
Mailing Address: P.O. BOX 22
City: ELKINS State: NH Zip Code: 03233
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-AREA (REHAB SVS)
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22870
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): NEIL TOCKMAN
Mailing Address: P.O. BOX 22
City: ELKINS State: NH Zip Code: 03233
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-AREA (REHAB SVS)
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 465.00
Date of Receipt: 08 / 01 / 2008
Transaction ID: SA11AI.22871
Amount of Each Receipt this Period: 15.00

B.
Full Name (Last, First, Middle Initial): NEIL TOCKMAN
Mailing Address: P.O. BOX 22
City: ELKINS State: NH Zip Code: 03233
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-AREA (REHAB SVS)
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22872
Amount of Each Receipt this Period: 15.00

C.
Full Name (Last, First, Middle Initial): NEIL TOCKMAN
Mailing Address: P.O. BOX 22
City: ELKINS State: NH Zip Code: 03233
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-AREA (REHAB SVS)
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 495.00
Date of Receipt: 08 / 15 / 2008
Transaction ID: SA11AI.22873
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): NEIL TOCKMAN
Mailing Address: P.O. BOX 22
City: ELKINS State: NH Zip Code: 03233
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-AREA (REHAB SVS)
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 510.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22874
Amount of Each Receipt this Period: 15.00

B.
Full Name (Last, First, Middle Initial): NEIL TOCKMAN
Mailing Address: P.O. BOX 22
City: ELKINS State: NH Zip Code: 03233
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-AREA (REHAB SVS)
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 525.00
Date of Receipt: 08 / 29 / 2008
Transaction ID: SA11AI.22875
Amount of Each Receipt this Period: 15.00

C.
Full Name (Last, First, Middle Initial): NEIL TOCKMAN
Mailing Address: P.O. BOX 22
City: ELKINS State: NH Zip Code: 03233
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-AREA (REHAB SVS)
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 540.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22876
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): NEIL TOCKMAN
Mailing Address: P.O. BOX 22
City: ELKINS State: NH Zip Code: 03233
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-AREA (REHAB SVS)
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 555.00
Date of Receipt: 09 / 12 / 2008
Transaction ID: SA11AI.22877
Amount of Each Receipt this Period: 15.00

B.
Full Name (Last, First, Middle Initial): NEIL TOCKMAN
Mailing Address: P.O. BOX 22
City: ELKINS State: NH Zip Code: 03233
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-AREA (REHAB SVS)
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 570.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22878
Amount of Each Receipt this Period: 15.00

C.
Full Name (Last, First, Middle Initial): NEIL TOCKMAN
Mailing Address: P.O. BOX 22
City: ELKINS State: NH Zip Code: 03233
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-AREA (REHAB SVS)
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 585.00
Date of Receipt: 09 / 26 / 2008
Transaction ID: SA11AI.22879
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): LISA TRAUTMAN
Mailing Address: 4 VIOLET LANE
City: WEST GROVE State: PA Zip Code: 19390
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR REGIONAL EC LINE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22880
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): LISA TRAUTMAN
Mailing Address: 4 VIOLET LANE
City: WEST GROVE State: PA Zip Code: 19390
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR REGIONAL EC LINE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22881
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): LISA TRAUTMAN
Mailing Address: 4 VIOLET LANE
City: WEST GROVE State: PA Zip Code: 19390
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR REGIONAL EC LINE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 320.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22882
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 217 / 261

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): LISA TRAUTMAN
Mailing Address: 4 VIOLET LANE
City: WEST GROVE State: PA Zip Code: 19390
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR REGIONAL EC LINE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 340.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22883
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): LISA TRAUTMAN
Mailing Address: 4 VIOLET LANE
City: WEST GROVE State: PA Zip Code: 19390
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR REGIONAL EC LINE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22884
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): LISA TRAUTMAN
Mailing Address: 4 VIOLET LANE
City: WEST GROVE State: PA Zip Code: 19390
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR REGIONAL EC LINE
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 380.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22885
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **60.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 218 / 261

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JOSEPH J TRIANA
Mailing Address: 218 CEDAR LAKES ROAD
City: RIPLEY State: WV Zip Code: 25271
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR-SR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 325.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22892
Amount of Each Receipt this Period: 25.00

B.
Full Name (Last, First, Middle Initial): JOSEPH J TRIANA
Mailing Address: 218 CEDAR LAKES ROAD
City: RIPLEY State: WV Zip Code: 25271
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR-SR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 350.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22893
Amount of Each Receipt this Period: 25.00

C.
Full Name (Last, First, Middle Initial): JOSEPH J TRIANA
Mailing Address: 218 CEDAR LAKES ROAD
City: RIPLEY State: WV Zip Code: 25271
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR-SR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 375.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22894
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **75.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JOSEPH J TRIANA
Mailing Address: 218 CEDAR LAKES ROAD
City: RIPLEY State: WV Zip Code: 25271
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR-SR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22895
Amount of Each Receipt this Period: 25.00

B.
Full Name (Last, First, Middle Initial): JOSEPH J TRIANA
Mailing Address: 218 CEDAR LAKES ROAD
City: RIPLEY State: WV Zip Code: 25271
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR-SR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 425.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22896
Amount of Each Receipt this Period: 25.00

C.
Full Name (Last, First, Middle Initial): JOSEPH J TRIANA
Mailing Address: 218 CEDAR LAKES ROAD
City: RIPLEY State: WV Zip Code: 25271
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: ADMINISTRATOR-SR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22897
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **75.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): PERRY VALENTINE
Mailing Address: 3675 MANDOLIN DRIVE
City: HAMPSTEAD State: MD Zip Code: 21074
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-HOSPITALITY SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 490.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22904
Amount of Each Receipt this Period: 35.00

B.
Full Name (Last, First, Middle Initial): PERRY VALENTINE
Mailing Address: 3675 MANDOLIN DRIVE
City: HAMPSTEAD State: MD Zip Code: 21074
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-HOSPITALITY SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 525.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22905
Amount of Each Receipt this Period: 35.00

C.
Full Name (Last, First, Middle Initial): PERRY VALENTINE
Mailing Address: 3675 MANDOLIN DRIVE
City: HAMPSTEAD State: MD Zip Code: 21074
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-HOSPITALITY SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 560.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22906
Amount of Each Receipt this Period: 35.00

SUBTOTAL of Receipts This Page (optional) 105.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): PERRY VALENTINE
Mailing Address: 3675 MANDOLIN DRIVE
City: HAMPSTEAD State: MD Zip Code: 21074
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-HOSPITALITY SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 595.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22907
Amount of Each Receipt this Period: 35.00

B.
Full Name (Last, First, Middle Initial): PERRY VALENTINE
Mailing Address: 3675 MANDOLIN DRIVE
City: HAMPSTEAD State: MD Zip Code: 21074
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-HOSPITALITY SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 630.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22908
Amount of Each Receipt this Period: 35.00

C.
Full Name (Last, First, Middle Initial): PERRY VALENTINE
Mailing Address: 3675 MANDOLIN DRIVE
City: HAMPSTEAD State: MD Zip Code: 21074
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-HOSPITALITY SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 665.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22909
Amount of Each Receipt this Period: 35.00

SUBTOTAL of Receipts This Page (optional) 105.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): VICTORIA VALTON
Mailing Address: 112 EDGEWOOD RD
City: TOWSON State: MD Zip Code: 21286
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-EXTERNAL COMMUN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22910
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): VICTORIA VALTON
Mailing Address: 112 EDGEWOOD RD
City: TOWSON State: MD Zip Code: 21286
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-EXTERNAL COMMUN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22911
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): VICTORIA VALTON
Mailing Address: 112 EDGEWOOD RD
City: TOWSON State: MD Zip Code: 21286
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-EXTERNAL COMMUN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 320.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22912
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **60.00**

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): VICTORIA VALTON
Mailing Address: 112 EDGEWOOD RD
City: TOWSON State: MD Zip Code: 21286
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-EXTERNAL COMMUN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 340.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22913
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): VICTORIA VALTON
Mailing Address: 112 EDGEWOOD RD
City: TOWSON State: MD Zip Code: 21286
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-EXTERNAL COMMUN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22914
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): VICTORIA VALTON
Mailing Address: 112 EDGEWOOD RD
City: TOWSON State: MD Zip Code: 21286
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-EXTERNAL COMMUN
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 380.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22915
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **60.00**

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): LIBBIE J. WADE
Mailing Address: 144 PARK BOULEVARD
City: CLARKSBURG State: WV Zip Code: 26301
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 700.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22923
Amount of Each Receipt this Period: 50.00

B.
Full Name (Last, First, Middle Initial): LIBBIE J. WADE
Mailing Address: 144 PARK BOULEVARD
City: CLARKSBURG State: WV Zip Code: 26301
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 750.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22924
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial): LIBBIE J. WADE
Mailing Address: 144 PARK BOULEVARD
City: CLARKSBURG State: WV Zip Code: 26301
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 800.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22925
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **150.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): LIBBIE J. WADE
Mailing Address: 144 PARK BOULEVARD
City: CLARKSBURG State: WV Zip Code: 26301
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 850.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22926
Amount of Each Receipt this Period: 50.00

B.
Full Name (Last, First, Middle Initial): LIBBIE J. WADE
Mailing Address: 144 PARK BOULEVARD
City: CLARKSBURG State: WV Zip Code: 26301
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 900.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22927
Amount of Each Receipt this Period: 50.00

C.
Full Name (Last, First, Middle Initial): LIBBIE J. WADE
Mailing Address: 144 PARK BOULEVARD
City: CLARKSBURG State: WV Zip Code: 26301
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: DIRECTOR-ELDERCARE CENTERS REG
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 950.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22928
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **150.00**

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SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): TIMOTHY M WADE
Mailing Address: 11123 WILLOW GREEN WAY
City: MARRIOTTSVILLE State: MD Zip Code: 21104
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-SR. SPEND MGMT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 350.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22929
Amount of Each Receipt this Period: 25.00

B.
Full Name (Last, First, Middle Initial): TIMOTHY M WADE
Mailing Address: 11123 WILLOW GREEN WAY
City: MARRIOTTSVILLE State: MD Zip Code: 21104
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-SR. SPEND MGMT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 375.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22930
Amount of Each Receipt this Period: 25.00

C.
Full Name (Last, First, Middle Initial): TIMOTHY M WADE
Mailing Address: 11123 WILLOW GREEN WAY
City: MARRIOTTSVILLE State: MD Zip Code: 21104
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-SR. SPEND MGMT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 400.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22931
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **75.00**

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

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): TIMOTHY M WADE
Mailing Address: 11123 WILLOW GREEN WAY
City: MARRIOTTSVILLE State: MD Zip Code: 21104
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-SR. SPEND MGMT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 425.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22932
Amount of Each Receipt this Period: 25.00

B.
Full Name (Last, First, Middle Initial): TIMOTHY M WADE
Mailing Address: 11123 WILLOW GREEN WAY
City: MARRIOTTSVILLE State: MD Zip Code: 21104
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-SR. SPEND MGMT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22933
Amount of Each Receipt this Period: 25.00

C.
Full Name (Last, First, Middle Initial): TIMOTHY M WADE
Mailing Address: 11123 WILLOW GREEN WAY
City: MARRIOTTSVILLE State: MD Zip Code: 21104
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-SR. SPEND MGMT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 475.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22934
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **75.00**

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): SHARON WAREING
Mailing Address: 134 EAST SIDE DRIVE
City: CONCORD State: NH Zip Code: 03301
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-NURSING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 215.32
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22947
Amount of Each Receipt this Period: 15.38

B.
Full Name (Last, First, Middle Initial): SHARON WAREING
Mailing Address: 134 EAST SIDE DRIVE
City: CONCORD State: NH Zip Code: 03301
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-NURSING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 230.70
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22948
Amount of Each Receipt this Period: 15.38

C.
Full Name (Last, First, Middle Initial): SHARON WAREING
Mailing Address: 134 EAST SIDE DRIVE
City: CONCORD State: NH Zip Code: 03301
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-NURSING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 246.08
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22949
Amount of Each Receipt this Period: 15.38

SUBTOTAL of Receipts This Page (optional) ..... ▶ **46.14**

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): SHARON WAREING
Mailing Address: 134 EAST SIDE DRIVE
City: CONCORD State: NH Zip Code: 03301
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-NURSING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 261.46
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22950
Amount of Each Receipt this Period: 15.38

B.
Full Name (Last, First, Middle Initial): SHARON WAREING
Mailing Address: 134 EAST SIDE DRIVE
City: CONCORD State: NH Zip Code: 03301
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-NURSING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 278.20
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22951
Amount of Each Receipt this Period: 16.74

C.
Full Name (Last, First, Middle Initial): SHARON WAREING
Mailing Address: 134 EAST SIDE DRIVE
City: CONCORD State: NH Zip Code: 03301
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-NURSING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 294.94
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22952
Amount of Each Receipt this Period: 16.74

SUBTOTAL of Receipts This Page (optional) ..... ▶ **48.86**

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): Shirley Weaver
Mailing Address: 42 Eastwood Road
City: Berwyn State: PA Zip Code: 19312
FEC ID number of contributing federal political committee: C
Name of Employer: Genesis Health Ventures, Inc.
Occupation: VP Operations Rehab
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 500.00
Date of Receipt: 08 / 18 / 2008
Transaction ID: SA11AI.21709
Amount of Each Receipt this Period: 500.00
contribution

B.
Full Name (Last, First, Middle Initial): KAREN M WELLS
Mailing Address: P.O. BOX 487
City: UNIONVILLE State: PA Zip Code: 19375
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: MANAGER-SR CORP ACCOUNTING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 280.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22960
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): KAREN M WELLS
Mailing Address: P.O. BOX 487
City: UNIONVILLE State: PA Zip Code: 19375
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: MANAGER-SR CORP ACCOUNTING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 300.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22961
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **540.00**

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): KAREN M WELLS
Mailing Address: P.O. BOX 487
City: UNIONVILLE State: PA Zip Code: 19375
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: MANAGER-SR CORP ACCOUNTING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 320.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22962
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): KAREN M WELLS
Mailing Address: P.O. BOX 487
City: UNIONVILLE State: PA Zip Code: 19375
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: MANAGER-SR CORP ACCOUNTING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 340.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22963
Amount of Each Receipt this Period: 20.00

C.
Full Name (Last, First, Middle Initial): KAREN M WELLS
Mailing Address: P.O. BOX 487
City: UNIONVILLE State: PA Zip Code: 19375
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: MANAGER-SR CORP ACCOUNTING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 360.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22964
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **60.00**

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SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): KAREN M WELLS
Mailing Address: P.O. BOX 487
City: UNIONVILLE State: PA Zip Code: 19375
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: MANAGER-SR CORP ACCOUNTING
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 380.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22965
Amount of Each Receipt this Period: 20.00

B.
Full Name (Last, First, Middle Initial): FRANCIS X WERNER
Mailing Address: 119 WOOD LANE
City: HAVERTOWN State: PA Zip Code: 19083
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-EMPLOYEE SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 238.28
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22969
Amount of Each Receipt this Period: 17.02

C.
Full Name (Last, First, Middle Initial): FRANCIS X WERNER
Mailing Address: 119 WOOD LANE
City: HAVERTOWN State: PA Zip Code: 19083
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-EMPLOYEE SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 255.30
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22970
Amount of Each Receipt this Period: 17.02

SUBTOTAL of Receipts This Page (optional) ..... ▶ **54.04**

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): FRANCIS X WERNER
Mailing Address: 119 WOOD LANE
City: HAVERTOWN State: PA Zip Code: 19083
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-EMPLOYEE SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 272.32
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22971
Amount of Each Receipt this Period: 17.02

B.
Full Name (Last, First, Middle Initial): FRANCIS X WERNER
Mailing Address: 119 WOOD LANE
City: HAVERTOWN State: PA Zip Code: 19083
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-EMPLOYEE SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 289.34
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22972
Amount of Each Receipt this Period: 17.02

C.
Full Name (Last, First, Middle Initial): FRANCIS X WERNER
Mailing Address: 119 WOOD LANE
City: HAVERTOWN State: PA Zip Code: 19083
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-EMPLOYEE SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 306.36
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22973
Amount of Each Receipt this Period: 17.02

SUBTOTAL of Receipts This Page (optional) ..... ▶ **51.06**

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)
[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): FRANCIS X WERNER
Mailing Address: 119 WOOD LANE
City: HAVERTOWN State: PA Zip Code: 19083
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-EMPLOYEE SERVICES
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 335.23
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22974
Amount of Each Receipt this Period: 28.87

B.
Full Name (Last, First, Middle Initial): JOSEPH W. WILKS
Mailing Address: 101 KINSTON LN
City: DOWNINGTOWN State: PA Zip Code: 19335
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VICE PRESIDENT-FINANCIAL SYSTM
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 560.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22981
Amount of Each Receipt this Period: 40.00

C.
Full Name (Last, First, Middle Initial): JOSEPH W. WILKS
Mailing Address: 101 KINSTON LN
City: DOWNINGTOWN State: PA Zip Code: 19335
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VICE PRESIDENT-FINANCIAL SYSTM
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 600.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22982
Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **108.87**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JOSEPH W. WILKS
Mailing Address: 101 KINSTON LN
City: DOWNINGTOWN State: PA Zip Code: 19335
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VICE PRESIDENT-FINANCIAL SYSTM
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 640.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22983
Amount of Each Receipt this Period: 40.00

B.
Full Name (Last, First, Middle Initial): JOSEPH W. WILKS
Mailing Address: 101 KINSTON LN
City: DOWNINGTOWN State: PA Zip Code: 19335
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VICE PRESIDENT-FINANCIAL SYSTM
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 680.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22984
Amount of Each Receipt this Period: 40.00

C.
Full Name (Last, First, Middle Initial): JOSEPH W. WILKS
Mailing Address: 101 KINSTON LN
City: DOWNINGTOWN State: PA Zip Code: 19335
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VICE PRESIDENT-FINANCIAL SYSTM
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 720.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22985
Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **120.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JOSEPH W. WILKS
Mailing Address: 101 KINSTON LN
City: DOWNINGTOWN State: PA Zip Code: 19335
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VICE PRESIDENT-FINANCIAL SYSTM
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 760.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22986
Amount of Each Receipt this Period: 40.00

B.
Full Name (Last, First, Middle Initial): JOANNE M. WISELY
Mailing Address: 118 DEEPDALE ROAD
City: WAYNE State: PA Zip Code: 19087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REGULATORY AFFAIRS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 224.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.22987
Amount of Each Receipt this Period: 16.00

C.
Full Name (Last, First, Middle Initial): JOANNE M. WISELY
Mailing Address: 118 DEEPDALE ROAD
City: WAYNE State: PA Zip Code: 19087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REGULATORY AFFAIRS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.22988
Amount of Each Receipt this Period: 16.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **72.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JOANNE M. WISELY
Mailing Address: 118 DEEPDALE ROAD
City: WAYNE State: PA Zip Code: 19087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REGULATORY AFFAIRS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 256.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.22989
Amount of Each Receipt this Period: 16.00

B.
Full Name (Last, First, Middle Initial): JOANNE M. WISELY
Mailing Address: 118 DEEPDALE ROAD
City: WAYNE State: PA Zip Code: 19087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REGULATORY AFFAIRS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 272.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.22990
Amount of Each Receipt this Period: 16.00

C.
Full Name (Last, First, Middle Initial): JOANNE M. WISELY
Mailing Address: 118 DEEPDALE ROAD
City: WAYNE State: PA Zip Code: 19087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REGULATORY AFFAIRS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 288.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.22991
Amount of Each Receipt this Period: 16.00

SUBTOTAL of Receipts This Page (optional) 48.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JOANNE M. WISELY
Mailing Address: 118 DEEPDALE ROAD
City: WAYNE State: PA Zip Code: 19087
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: DIRECTOR-REGULATORY AFFAIRS
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 304.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.22992
Amount of Each Receipt this Period: 16.00

B.
Full Name (Last, First, Middle Initial): JUDSON WORTH
Mailing Address: PO BOX 339
City: MARLINTON State: WV Zip Code: 24954
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 210.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.23012
Amount of Each Receipt this Period: 15.00

C.
Full Name (Last, First, Middle Initial): JUDSON WORTH
Mailing Address: PO BOX 339
City: MARLINTON State: WV Zip Code: 24954
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 225.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.23013
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **46.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JUDSON WORTH
Mailing Address: PO BOX 339
City: MARLINTON State: WV Zip Code: 24954
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.23014
Amount of Each Receipt this Period: 15.00

B.
Full Name (Last, First, Middle Initial): JUDSON WORTH
Mailing Address: PO BOX 339
City: MARLINTON State: WV Zip Code: 24954
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 255.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.23015
Amount of Each Receipt this Period: 15.00

C.
Full Name (Last, First, Middle Initial): JUDSON WORTH
Mailing Address: PO BOX 339
City: MARLINTON State: WV Zip Code: 24954
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 270.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.23016
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **45.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JUDSON WORTH
Mailing Address: PO BOX 339
City: MARLINTON State: WV Zip Code: 24954
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: ADMINISTRATOR
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 285.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.23017
Amount of Each Receipt this Period: 15.00

B.
Full Name (Last, First, Middle Initial): JACK WRIGHT
Mailing Address: 834 NEWHALL ROAD
City: KENNETT SQUARE State: PA Zip Code: 19348
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-PROPERTY MANAGEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 420.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.23018
Amount of Each Receipt this Period: 30.00

C.
Full Name (Last, First, Middle Initial): JACK WRIGHT
Mailing Address: 834 NEWHALL ROAD
City: KENNETT SQUARE State: PA Zip Code: 19348
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-PROPERTY MANAGEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 450.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.23019
Amount of Each Receipt this Period: 30.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 75.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JACK WRIGHT
Mailing Address: 834 NEWHALL ROAD
City: KENNETT SQUARE State: PA Zip Code: 19348
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-PROPERTY MANAGEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 480.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.23020
Amount of Each Receipt this Period: 30.00

B.
Full Name (Last, First, Middle Initial): JACK WRIGHT
Mailing Address: 834 NEWHALL ROAD
City: KENNETT SQUARE State: PA Zip Code: 19348
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-PROPERTY MANAGEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 510.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.23021
Amount of Each Receipt this Period: 30.00

C.
Full Name (Last, First, Middle Initial): JACK WRIGHT
Mailing Address: 834 NEWHALL ROAD
City: KENNETT SQUARE State: PA Zip Code: 19348
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-PROPERTY MANAGEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 545.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.23022
Amount of Each Receipt this Period: 35.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **95.00**

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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FOR LINE NUMBER: (check only one)
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[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): JACK WRIGHT
Mailing Address: 834 NEWHALL ROAD
City: KENNETT SQUARE State: PA Zip Code: 19348
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTH VENTURES, INC.
Occupation: VP-PROPERTY MANAGEMENT
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 580.00
Date of Receipt: 09 / 19 / 2008
Transaction ID: SA11AI.23023
Amount of Each Receipt this Period: 35.00

B.
Full Name (Last, First, Middle Initial): CHRISTINA YOUNG
Mailing Address: 5008 DEER DRIVE
City: DOWNINGTOWN State: PA Zip Code: 19335
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-INFORMATION SVS II
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 210.00
Date of Receipt: 07 / 11 / 2008
Transaction ID: SA11AI.23036
Amount of Each Receipt this Period: 15.00

C.
Full Name (Last, First, Middle Initial): CHRISTINA YOUNG
Mailing Address: 5008 DEER DRIVE
City: DOWNINGTOWN State: PA Zip Code: 19335
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-INFORMATION SVS II
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 225.00
Date of Receipt: 07 / 25 / 2008
Transaction ID: SA11AI.23037
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 65.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): CHRISTINA YOUNG
Mailing Address: 5008 DEER DRIVE
City: DOWNINGTOWN State: PA Zip Code: 19335
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-INFORMATION SVS II
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 240.00
Date of Receipt: 08 / 08 / 2008
Transaction ID: SA11AI.23038
Amount of Each Receipt this Period: 15.00

B.
Full Name (Last, First, Middle Initial): CHRISTINA YOUNG
Mailing Address: 5008 DEER DRIVE
City: DOWNINGTOWN State: PA Zip Code: 19335
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-INFORMATION SVS II
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 255.00
Date of Receipt: 08 / 22 / 2008
Transaction ID: SA11AI.23039
Amount of Each Receipt this Period: 15.00

C.
Full Name (Last, First, Middle Initial): CHRISTINA YOUNG
Mailing Address: 5008 DEER DRIVE
City: DOWNINGTOWN State: PA Zip Code: 19335
FEC ID number of contributing federal political committee: C
Name of Employer: GENESIS HEALTHCARE CORPORATION
Occupation: MANAGER-INFORMATION SVS II
Receipt For: [ ] Primary [ ] General [ ] Other (specify)
Aggregate Year-to-Date: 270.00
Date of Receipt: 09 / 05 / 2008
Transaction ID: SA11AI.23040
Amount of Each Receipt this Period: 15.00

SUBTOTAL of Receipts This Page (optional) 45.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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[X] 11a [ ] 11b [ ] 11c [ ] 12
[ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
CHRISTINA YOUNG

Mailing Address 5008 DEER DRIVE

City: DOWNINGTOWN
State: PA
Zip Code: 19335

FEC ID number of contributing federal political committee.
C

Name of Employer
GENESIS HEALTHCARE CORPORATION

Occupation
MANAGER-INFORMATION SVS II

Receipt For:
[ ] Primary [ ] General
[ ] Other (specify)

Aggregate Year-to-Date
285.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 19 / 2008

Transaction ID: SA11AI.23041

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) **15.00**

TOTAL This Period (last page this line number only) **38506.42**

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): Mellon Bank
Mailing Address: 7th and Market Streets
City: Philadelphia State: PA Zip Code: 19101
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1493.13
Date of Receipt: 07 / 31 / 2008
Transaction ID: SA17.23124
Amount of Each Receipt this Period: 139.29
Interest

B.
Full Name (Last, First, Middle Initial): Mellon Bank
Mailing Address: 7th and Market Streets
City: Philadelphia State: PA Zip Code: 19101
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1620.65
Date of Receipt: 08 / 29 / 2008
Transaction ID: SA17.23125
Amount of Each Receipt this Period: 127.52
Interest

C.
Full Name (Last, First, Middle Initial): Mellon Bank
Mailing Address: 7th and Market Streets
City: Philadelphia State: PA Zip Code: 19101
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: ☐ Primary ☐ General ☐ Other (specify)
Aggregate Year-to-Date: 1735.76
Date of Receipt: 09 / 30 / 2008
Transaction ID: SA17.23126
Amount of Each Receipt this Period: 115.11
Interest

SUBTOTAL of Receipts This Page (optional) ..... ▶ **381.92**

TOTAL This Period (last page this line number only) ..... ▶ **381.92**

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)

X 21b	22	23	24	25	26
27	28a	28b	28c	29	30b

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): Mellon Bank
Mailing Address: 7th and Market Streets
City: Philadelphia State: PA Zip Code: 19101
Purpose of Disbursement: Bank fee
Candidate Name:
Category/Type: 001
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB21B.23127
Date of Disbursement: 07 / 15 / 2008
Amount of Each Disbursement this Period: 299.97

B.
Full Name (Last, First, Middle Initial): Mellon Bank
Mailing Address: 7th and Market Streets
City: Philadelphia State: PA Zip Code: 19101
Purpose of Disbursement: Bank fee
Candidate Name:
Category/Type: 001
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB21B.23128
Date of Disbursement: 08 / 15 / 2008
Amount of Each Disbursement this Period: 299.90

C.
Full Name (Last, First, Middle Initial): Mellon Bank
Mailing Address: 7th and Market Streets
City: Philadelphia State: PA Zip Code: 19101
Purpose of Disbursement: Analysis fee
Candidate Name:
Category/Type: 001
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary / General / Other (specify)
Transaction ID: SB21B.23129
Date of Disbursement: 09 / 15 / 2008
Amount of Each Disbursement this Period: 299.95

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **899.82**

TOTAL This Period (last page this line number only) ..... ▶ **899.82**

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)
[ ] 21b [X] 22 [ ] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITT-EE

Mailing Address 101 EAST STATE STREET

City KENNETT SQUARE State PA Zip Code 19348

Purpose of Disbursement

Candidate Name

Category/Type: 008

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: [ ] Primary [ ] General [ ] Other (specify) ▼

Transaction ID: SB22.23081
Date of Disbursement: MM 08 / DD 20 / YYYY 2008

Amount of Each Disbursement this Period: 8000.00

B.

Full Name (Last, First, Middle Initial)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITT-EE

Mailing Address 101 EAST STATE STREET

City KENNETT SQUARE State PA Zip Code 19348

Purpose of Disbursement
Transfer to GHC PAC NJ

Candidate Name

Category/Type: 008

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify) ▼

Transaction ID: SB22.23082
Date of Disbursement: MM 08 / DD 20 / YYYY 2008

Amount of Each Disbursement this Period: 2000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **10000.00**

TOTAL This Period (last page this line number only) ..... ▶ **10000.00**

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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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): ADLER FOR CONGRESS
Mailing Address: 14 KNIGHTSWOOD DRIVE
City: MARLTON State: NJ Zip Code: 08053
Purpose of Disbursement:
Candidate Name:
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: NJ District: 03
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23071
Date of Disbursement: 08 / 04 / 2008
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): AMERICAN HEALTH CARE ASSOCIATION PAC
Mailing Address: 1201 L Street NW
City: Washington State: DC Zip Code: 20005
Purpose of Disbursement:
Candidate Name:
Category/Type: 012
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23070
Date of Disbursement: 07 / 29 / 2008
Amount of Each Disbursement this Period: 2000.00

C.
Full Name (Last, First, Middle Initial): AMERICAN HEALTH CARE ASSOCIATION PAC
Mailing Address: 1201 L Street NW
City: Washington State: DC Zip Code: 20005
Purpose of Disbursement:
Candidate Name:
Category/Type: 012
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23108
Date of Disbursement: 09 / 15 / 2008
Amount of Each Disbursement this Period: 1500.00

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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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial): AMERICAN HEALTH CARE ASSOCIATION PAC

Mailing Address: 1201 L Street NW

City: Washington State: DC Zip Code: 20005

Purpose of Disbursement:

Candidate Name:

Category/Type: 012

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)

Transaction ID: SB23.23113

Date of Disbursement: 09 / 26 / 2008

Amount of Each Disbursement this Period: 1000.00

B.

Full Name (Last, First, Middle Initial): ANDREWS FOR CONGRESS

Mailing Address: PO Box 295

City: Oaklyn State: NJ Zip Code: 08107

Purpose of Disbursement:

Candidate Name:

Category/Type: 011

Office Sought: [X] House [ ] Senate [ ] President

State: NJ District: 01

Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)

Transaction ID: SB23.23110

Date of Disbursement: 09 / 24 / 2008

Amount of Each Disbursement this Period: 1000.00

C.

Full Name (Last, First, Middle Initial): BOB BRADY FOR CONGRESS

Mailing Address: 2000 Market Street Suite 500

City: PHILADELPHIA State: PA Zip Code: 19103

Purpose of Disbursement:

Candidate Name:

Category/Type: 011

Office Sought: [X] House [ ] Senate [ ] President

State: PA District: 01

Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)

Transaction ID: SB23.23111

Date of Disbursement: 09 / 24 / 2008

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

FOR LINE NUMBER: (check only one)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): BOB SCHAFFER FOR US SENATE
Mailing Address: PO BOX 102135
City: DENVER State: CO Zip Code: 80250
Purpose of Disbursement:
Candidate Name:
Category/Type: 011
Office Sought: [ ] House [X] Senate [ ] President
State: CO District: 00
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23119
Date of Disbursement: 09 / 29 / 2008
Amount of Each Disbursement this Period: 1500.00

B.
Full Name (Last, First, Middle Initial): Charles Dent Congress
Mailing Address: 3626 Evening Star Terrace
City: ALLENTOWN State: PA Zip Code: 18104
Purpose of Disbursement:
Candidate Name:
Category/Type: 011
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23050
Date of Disbursement: 07 / 19 / 2008
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): COLEMAN FOR SENATE 08
Mailing Address: 7300 HUDSON BLVD SUITE 270A
City: ST PAUL State: MN Zip Code: 55128
Purpose of Disbursement:
Candidate Name:
Category/Type: 011
Office Sought: [ ] House [X] Senate [ ] President
State: MN District: 00
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23094
Date of Disbursement: 09 / 03 / 2008
Amount of Each Disbursement this Period: 2000.00

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

FOR LINE NUMBER: (check only one)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): COLLINS FOR SENATOR
Mailing Address: PO BOX 1096
City: BANGOR State: ME Zip Code: 04402
Purpose of Disbursement:
Candidate Name:
Category/Type: 011
Office Sought: [ ] House [X] Senate [ ] President
State: ME District: 00
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23055
Date of Disbursement: 07 / 21 / 2008
Amount of Each Disbursement this Period: 2000.00

B.
Full Name (Last, First, Middle Initial): CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE
Mailing Address: PO BOX 1631
City: BALTIMORE State: MD Zip Code: 21203
Purpose of Disbursement:
Candidate Name:
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: MD District: 07
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23107
Date of Disbursement: 09 / 15 / 2008
Amount of Each Disbursement this Period: 1500.00

C.
Full Name (Last, First, Middle Initial): Delaware Democratic Party
Mailing Address: PO Box 2065
City: Wilmington State: DE Zip Code: 19899
Purpose of Disbursement:
Candidate Name:
Category/Type: 011
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23062
Date of Disbursement: 07 / 29 / 2008
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

FOR LINE NUMBER: (check only one)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial): ELIZABETH DOLE COMMITTEE INC

Mailing Address: PO BOX 2918

City: RALEIGH State: NC Zip Code: 27602

Purpose of Disbursement:

Candidate Name:

Category/Type: 011

Office Sought: [ ] House [X] Senate [ ] President

State: NC District: 00

Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)

Transaction ID: SB23.23096

Date of Disbursement: 09 / 15 / 2008

Amount of Each Disbursement this Period: 1000.00

B.

Full Name (Last, First, Middle Initial): FRIENDS OF CONGRESSMAN TIM HOLDEN

Mailing Address: 18 N. SECOND STREET PO BOX 37
PO BOX 37

City: SAINT CLAIR State: PA Zip Code: 17970

Purpose of Disbursement:

Candidate Name:

Category/Type: 011

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)

Transaction ID: SB23.23061

Date of Disbursement: 07 / 21 / 2008

Amount of Each Disbursement this Period: 1000.00

C.

Full Name (Last, First, Middle Initial): FRIENDS OF GLENN THOMPSON

Mailing Address: 198 PARK ROAD

City: HOWARD State: PA Zip Code: 16841

Purpose of Disbursement:

Candidate Name:

Category/Type: 011

Office Sought: [X] House [ ] Senate [ ] President

State: PA District: 05

Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)

Transaction ID: SB23.23057

Date of Disbursement: 07 / 21 / 2008

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

FOR LINE NUMBER: (check only one)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): FRIENDS OF GLENN THOMPSON
Mailing Address: 198 PARK ROAD
City: HOWARD State: PA Zip Code: 16841
Purpose of Disbursement:
Candidate Name:
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: PA District: 05
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23079
Date of Disbursement: 08 / 20 / 2008
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): FRIENDS OF GORDON SMITH
Mailing Address: 228 S WASHINGTON STE 115
City: ALEXANDRIA State: VA Zip Code: 22314
Purpose of Disbursement:
Candidate Name:
Category/Type: 011
Office Sought: [ ] House [X] Senate [ ] President
State: OR District: 00
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23067
Date of Disbursement: 07 / 29 / 2008
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): FRIENDS OF JOE PITTS
Mailing Address: PO Box 1605
City: Alexandria State: VA Zip Code: 22313
Purpose of Disbursement:
Candidate Name:
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: PA District: 16
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23059
Date of Disbursement: 07 / 21 / 2008
Amount of Each Disbursement this Period: 2000.00

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

FOR LINE NUMBER: (check only one)
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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): GERRY CONNOLLY FOR CONGRESS
Mailing Address: PO BOX 563
City: MERRIFIELD State: VA Zip Code: 22116
Purpose of Disbursement:
Candidate Name:
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: VA District: 11
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23075
Date of Disbursement: 08 / 04 / 2008
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): KRATOVIL FOR CONGRESS
Mailing Address: 222 Main Sail Drive
PO Box 518
City: Stevensville State: MD Zip Code: 21666
Purpose of Disbursement:
Candidate Name:
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: MD District: 01
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23072
Date of Disbursement: 08 / 04 / 2008
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): LINDA STENDER FOR CONGRESS
Mailing Address: P.O. Box 730
City: Scotch Plains State: NJ Zip Code: 07076
Purpose of Disbursement:
Candidate Name:
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: NJ District: 07
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23074
Date of Disbursement: 08 / 04 / 2008
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

FOR LINE NUMBER: (check only one)
[ ] 21b [ ] 22 [X] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): MINNESOTA-COLEMAN VICTORY COMMITTEE
Mailing Address: 7315 Wisconsin Avenue, Suite 310 East
City: Bethesda State: MD Zip Code: 20814
Purpose of Disbursement:
Candidate Name:
Category/Type: 011
Office Sought: [ ] House [ ] Senate [ ] President
State: District: 00
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23086
Date of Disbursement: 08 / 28 / 2008
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE
Mailing Address: 320 FIRST STREET .
City: WASHINGTON State: DC Zip Code: 20003
Purpose of Disbursement:
Candidate Name:
Category/Type: 012
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23077
Date of Disbursement: 08 / 08 / 2008
Amount of Each Disbursement this Period: 3000.00

C.
Full Name (Last, First, Middle Initial): NEW JERSEY DEMOCRATIC STATE COMMITTEE
Mailing Address: 196 West State Street
City: Trenton State: NJ Zip Code: 08608
Purpose of Disbursement:
Candidate Name:
Category/Type: 011
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23053
Date of Disbursement: 07 / 17 / 2008
Amount of Each Disbursement this Period: 2000.00

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)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): PALLONE FOR CONGRESS
Mailing Address: PO BOX 3176
City: Long Branch State: NJ Zip Code: 07740
Purpose of Disbursement:
Candidate Name:
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: NJ District: 06
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23109
Date of Disbursement: 09 / 24 / 2008
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): PASCRELL FOR CONGRESS INC.
Mailing Address: 38 Ivy Street
City: Washington State: DC Zip Code: 20003
Purpose of Disbursement:
Candidate Name:
Category/Type: 011
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23064
Date of Disbursement: 07 / 29 / 2008
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): PASCRELL FOR CONGRESS INC.
Mailing Address: 38 Ivy Street
City: Washington State: DC Zip Code: 20003
Purpose of Disbursement:
Candidate Name:
Category/Type: 011
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23091
Date of Disbursement: 08 / 28 / 2008
Amount of Each Disbursement this Period: 2000.00

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

FOR LINE NUMBER: (check only one)
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[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): PATRICK MURPHY FOR CONGRESS
Mailing Address: P.O. Box 868
City: Levittown State: PA Zip Code: 19058
Purpose of Disbursement:
Candidate Name:
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: PA District: 08
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23114
Date of Disbursement: 09 / 26 / 2008
Amount of Each Disbursement this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): PEOPLE FOR ENGLISH
Mailing Address: PO BOX 1940
City: ERIE State: PA Zip Code: 16507
Purpose of Disbursement:
Candidate Name:
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: PA District: 03
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23088
Date of Disbursement: 08 / 28 / 2008
Amount of Each Disbursement this Period: 2500.00

C.
Full Name (Last, First, Middle Initial): PEOPLE FOR ENGLISH
Mailing Address: PO BOX 1940
City: ERIE State: PA Zip Code: 16507
Purpose of Disbursement:
Candidate Name:
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: PA District: 03
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23101
Date of Disbursement: 09 / 15 / 2008
Amount of Each Disbursement this Period: 1500.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **5000.00**

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)
[ ] 21b [ ] 22 [X] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): REPUBLICAN PARTY OF KENTUCKY
Mailing Address: PO BOX 1068
City: FRANKFORT State: KY Zip Code: 40602
Purpose of Disbursement:
Candidate Name:
Category/Type: 012
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23099
Date of Disbursement: 09 / 15 / 2008
Amount of Each Disbursement this Period: 2500.00

B.
Full Name (Last, First, Middle Initial): SCHWARZ FOR CONGRESS
Mailing Address: POST OFFICE BOX 2063
City: BATTLE CREEK State: MI Zip Code: 49016
Purpose of Disbursement:
Candidate Name:
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: MI District: 07
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23089
Date of Disbursement: 08 / 28 / 2008
Amount of Each Disbursement this Period: 2000.00

C.
Full Name (Last, First, Middle Initial): SENATE MAJORITY COMMITTEE 2008
Mailing Address: 228 S WASHINGTON ST STE 115
City: ALEXANDRIA State: VA Zip Code: 22314
Purpose of Disbursement:
Candidate Name:
Category/Type: 012
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23105
Date of Disbursement: 09 / 15 / 2008
Amount of Each Disbursement this Period: 5000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 9500.00

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)
[ ] 21b [ ] 22 [X] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): SESTAK FOR CONGRESS
Mailing Address: P.O. Box 16
City: Media State: PA Zip Code: 19063
Purpose of Disbursement:
Candidate Name:
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: PA District: 07
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23090
Date of Disbursement: 08 / 28 / 2008
Amount of Each Disbursement this Period: 2000.00

B.
Full Name (Last, First, Middle Initial): SESTAK FOR CONGRESS
Mailing Address: P.O. Box 16
City: Media State: PA Zip Code: 19063
Purpose of Disbursement:
Candidate Name:
Category/Type: 011
Office Sought: [X] House [ ] Senate [ ] President
State: PA District: 07
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23116
Date of Disbursement: 09 / 29 / 2008
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): TEAM SUNUNU
Mailing Address: PO BOX 500
City: RYE State: NH Zip Code: 03870
Purpose of Disbursement:
Candidate Name:
Category/Type: 011
Office Sought: [ ] House [X] Senate [ ] President
State: NH District: 00
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23095
Date of Disbursement: 09 / 03 / 2008
Amount of Each Disbursement this Period: 5000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **8000.00**

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)
[ ] 21b [ ] 22 [X] 23 [ ] 24 [ ] 25 [ ] 26
[ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29 [ ] 30b

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.
Full Name (Last, First, Middle Initial): UDALL FOR COLORADO
Mailing Address: PO BOX 40158
City: DENVER State: CO Zip Code: 80204
Purpose of Disbursement:
Candidate Name:
Category/Type: 011
Office Sought: [ ] House [X] Senate [ ] President
State: CO District: 00
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23117
Date of Disbursement: 09 / 29 / 2008
Amount of Each Disbursement this Period: 1500.00

B.
Full Name (Last, First, Middle Initial): UDALL FOR US ALL
Mailing Address: 3311 CANDELARIA NE SUITE A
City: ALBUQUERQUE State: NM Zip Code: 87107
Purpose of Disbursement:
Candidate Name:
Category/Type: 011
Office Sought: [ ] House [X] Senate [ ] President
State: NM District: 00
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23065
Date of Disbursement: 07 / 29 / 2008
Amount of Each Disbursement this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): WICKER FOR SENATE
Mailing Address: PO BOX 64
City: JACKSON State: MS Zip Code: 39205
Purpose of Disbursement:
Candidate Name:
Category/Type: 011
Office Sought: [ ] House [X] Senate [ ] President
State: MS District: 00
Disbursement For: 2008 [ ] Primary [X] General [ ] Other (specify)
Transaction ID: SB23.23092
Date of Disbursement: 09 / 03 / 2008
Amount of Each Disbursement this Period: 2000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **4500.00**

TOTAL This Period (last page this line number only) ..... ▶ **63500.00**

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)

☐ 21b	☐ 22	☐ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☒ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Friends of Martin O'Malley

Mailing Address 218 E. Lexington Street
Suite 602

City: Baltimore
State: MD
Zip Code: 21202

Purpose of Disbursement

Candidate Name

Category/Type: 011

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.23052

Date of Disbursement
MM 07 / DD 17 / YYYY 2008

Amount of Each Disbursement this Period
2000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶	**2000.00**
TOTAL This Period (last page this line number only) ..... ▶	**2000.00**