

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

American Seniors Housing Association (Seniors Housing PAC)

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2013"/>	<input type="text" value="880341.26"/>	<input type="text" value="880341.26"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="955068.26"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="16100.00"/>	<input type="text" value="515155.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="971168.26"/>	<input type="text" value="1395496.26"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="90000.00"/>	<input type="text" value="514328.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="881168.26"/>	<input type="text" value="881168.26"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

American Seniors Housing Association (Seniors Housing PAC)

Report Covering the Period: From: 12 / 01 / 2013 To: 12 / 31 / 2013

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	16100.00	489545.00
(ii) Unitemized	0.00	15610.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	16100.00	505155.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	16100.00	515155.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	16100.00	515155.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	16100.00	515155.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	90000.00	500000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	5000.00
(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	5000.00
29. Other Disbursements	0.00	9328.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	90000.00	514328.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	90000.00	514328.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	16100.00	515155.00
34. Total Contribution Refunds (from Line 28(d))	0.00	5000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16100.00	510155.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 17
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
American Seniors Housing Association (Seniors Housing PAC)

A. Jason M. McMeen
Full Name (Last, First, Middle Initial)

Mailing Address 150 S. Wacker Dr.
Suite 1305

City Chicago State IL Zip Code 60606-4201

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

Name of Employer MidCap Financial LLC Occupation Managing Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
12 / 02 / 2013
Transaction ID : 55919004

Amount of Each Receipt this Period
500.00

B. Nicholas W. Jacoby
Full Name (Last, First, Middle Initial)

Mailing Address 2050 Main St.
Suite 800

City Irvine State CA Zip Code 92614-8260

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

Name of Employer Ventas Healthcare Properties, Inc. Occupation VP, Asset Mgt.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
12 / 02 / 2013
Transaction ID : 55919005

Amount of Each Receipt this Period
750.00

C. Michel Desjardins
Full Name (Last, First, Middle Initial)

Mailing Address 353 N. Clark St.
Suite 3300

City Chicago State IL Zip Code 60654-4708

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

Name of Employer Ventas Healthcare Properties, Inc. Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
12 / 02 / 2013
Transaction ID : 55919007

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00

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

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NAME OF COMMITTEE (In Full)
American Seniors Housing Association (Seniors Housing PAC)

A. Mark C. Ivancic
 Full Name (Last, First, Middle Initial)
 Mailing Address 353 North Clark St.
 Suite 3300
 City Chicago State IL Zip Code 60654-4708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ventas Healthcare Properties, Inc. Occupation Asset Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2013
Transaction ID : 55919008
 Amount of Each Receipt this Period
 350.00

B. Costa A. Lallas
 Full Name (Last, First, Middle Initial)
 Mailing Address 353 North Clark St.
 Suite 3300
 City Chicago State IL Zip Code 60654-4708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ventas Healthcare Properties, Inc. Occupation Asset Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2013
Transaction ID : 55919009
 Amount of Each Receipt this Period
 250.00

C. Dave L. Liu
 Full Name (Last, First, Middle Initial)
 Mailing Address 353 N. Clark St.
 Suite 3300
 City Chicago State IL Zip Code 60654-4708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ventas Healthcare Properties, Inc. Occupation Manager, Acquisitions
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2013
Transaction ID : 55919692
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	850.00
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 8 OF 17
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American Seniors Housing Association (Seniors Housing PAC)

A. Mark Jessee
 Full Name (Last, First, Middle Initial)
 Mailing Address 401 S. Fourth St.
 Suite 1900
 City Louisville State KY Zip Code 40202-3426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Atria Senior Living Occupation CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2013
Transaction ID : 56919825
 Amount of Each Receipt this Period
 2000.00

B. Kelly Lee Lanham
 Full Name (Last, First, Middle Initial)
 Mailing Address 401 S. Fourth St.
 Suite 1900
 City Louisville State KY Zip Code 40202-3426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Atria Senior Living Occupation EVP & CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2013
Transaction ID : 56919826
 Amount of Each Receipt this Period
 500.00

C. John A. Moore
 Full Name (Last, First, Middle Initial)
 Mailing Address 401 S. Fourth St.
 Suite 1900
 City Louisville State KY Zip Code 40202-3426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Atria Senior Living Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2013
Transaction ID : 56919827
 Amount of Each Receipt this Period
 5000.00

SUBTOTAL of Receipts This Page (optional).....▶	7500.00
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 9 OF 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Seniors Housing Association (Seniors Housing PAC)

A. Sheila S. Stevens
 Full Name (Last, First, Middle Initial)
 Mailing Address 401 S. Fourth St.
 Suite 1900
 City Louisville State KY Zip Code 40202-4436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Atria Senior Living Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2013
Transaction ID : 56919828
 Amount of Each Receipt this Period
 500.00

B. Danny C. McCoy
 Full Name (Last, First, Middle Initial)
 Mailing Address 401 S. Fourth St.
 Suite 1900
 City Louisville State KY Zip Code 40202-4436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Atria Senior Living Occupation Sr. VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2013
Transaction ID : 56919829
 Amount of Each Receipt this Period
 1000.00

C. Bryan Hudson
 Full Name (Last, First, Middle Initial)
 Mailing Address 401 S. Fourth St.
 Suite 1900
 City Louisville State KY Zip Code 40202-3426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Atria Senior Living Occupation SVP & General Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2013
Transaction ID : 56919835
 Amount of Each Receipt this Period
 2000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 3500.00
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 10 OF 17
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Seniors Housing Association (Seniors Housing PAC)

A. Rick Atlas
Full Name (Last, First, Middle Initial)

Mailing Address 181 E 73rd St.
Apt. 7F

City New York State NY Zip Code 10021-3572

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

Name of Employer Atria Senior Living Occupation EVP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
12 / 20 / 2013
Transaction ID : 56919836

Amount of Each Receipt this Period
2500.00

B. Arthur Hessler
Full Name (Last, First, Middle Initial)

Mailing Address 9310 NE Vancouver Mall Dr.
Suite 200

City Vancouver State WA Zip Code 98662-8202

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

Name of Employer Hawthorn Retirement Group Occupation Director of Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
12 / 20 / 2013
Transaction ID : 56919837

Amount of Each Receipt this Period
250.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	2750.00
TOTAL This Period (last page this line number only).....▶	16100.00

**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)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

Full Name (Last, First, Middle Initial)

A. McHenry for Congress

Mailing Address PO Box 1406

City State Zip Code
Hickory NC 28603

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Patrick McHenry

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NC District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		02		2013

Transaction ID : 55914832

Amount of Each Disbursement this Period

5,000.00

Full Name (Last, First, Middle Initial)

B. Friends Of Dennis Ross

Mailing Address PO Box 7310

City State Zip Code
Lakeland FL 33807

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Dennis Ross

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: FL District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		02		2013

Transaction ID : 55914833

Amount of Each Disbursement this Period

5,000.00

Full Name (Last, First, Middle Initial)

C. Boehner for Speaker

Mailing Address 320 First St. SE

City State Zip Code
Washington DC 20003

Purpose of Disbursement

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		02		2013

Transaction ID : 55919860

Amount of Each Disbursement this Period

10,000.00

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

20,000.00

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

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**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)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

Full Name (Last, First, Middle Initial)

A. Tiberi For Congress

Mailing Address 217 Third St., SE

City Washington State DC Zip Code 20003

Purpose of Disbursement

011

Candidate Name

Rep. Patrick Tiberi

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: OH District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		03		2013

Transaction ID : 55922245

Amount of Each Disbursement this Period

5,000.00

Full Name (Last, First, Middle Initial)

B. Pioneer PAC

Mailing Address 217 Third St. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement

011

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		03		2013

Transaction ID : 55923961

Amount of Each Disbursement this Period

5,000.00

Full Name (Last, First, Middle Initial)

C. Diane Black For Congress

Mailing Address PO Box 1437

City Gallatin State TN Zip Code 37066

Purpose of Disbursement

011

Candidate Name

Rep. Diane Black

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TN District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		03		2013

Transaction ID : 55927719

Amount of Each Disbursement this Period

5,000.00

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

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

15000.00

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**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)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

Full Name (Last, First, Middle Initial)

A. Neugebauer Congressional Committee

Mailing Address 104 Hume Ave.

City Alexandria State VA Zip Code 22301

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Randy Neugebauer

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: TX District: 19

Date of Disbursement

MM / DD / YYYY
12 / 03 / 2013

Transaction ID : 55927894

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Mike Thompson for Congress

Mailing Address 236 Massachusetts Ave NE
Suite 508

City Washington State DC Zip Code 20002

Purpose of Disbursement

011

Category/
Type

Candidate Name

Mike Thompson

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CA District: 00

Date of Disbursement

MM / DD / YYYY
12 / 03 / 2013

Transaction ID : 55928213

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Prosperity PAC

Mailing Address 1006 Pendleton St.

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2013

Transaction ID : 56843036

Amount of Each Disbursement this Period

5000.00

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

15000.00

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)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

Full Name (Last, First, Middle Initial)

A. Friends Of Mark Warner

Mailing Address 1029 North Royal Street
Second Floor

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

011

Candidate Name

Mr. Mark Warner

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: VA District:

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2013

Transaction ID : 56843229

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

B. Friends Of Mark Warner

Mailing Address 1029 North Royal Street
Second Floor

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

011

Candidate Name

Mr. Mark Warner

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: VA District:

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2013

Transaction ID : 56843230

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Forward Together PAC

Mailing Address 201 N. Union St.
Suite 300

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2013

Transaction ID : 56843234

Amount of Each Disbursement this Period

5000.00

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

10000.00

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)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

Full Name (Last, First, Middle Initial)

A. Pat Roberts For Senate

Mailing Address 228 S. Washington St.
Suite B-20

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

011

Category/
Type

Candidate Name

Sen. Pat Roberts

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: KS District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2013

Transaction ID : 56843286

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Scott Garrett For Congress

Mailing Address P.O. Box 905

City Newton State NJ Zip Code 07860

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Scott Garrett

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NJ District: 05

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 12 / 2013

Transaction ID : 56846543

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Devin Nunes Campaign Committee

Mailing Address PO Box 6545

City Visalia State CA Zip Code 93290

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Devin Nunes

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CA District: 21

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 12 / 2013

Transaction ID : 56846545

Amount of Each Disbursement this Period

2500.00

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

12500.00

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)

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

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NAME OF COMMITTEE (In Full)

American Seniors Housing Association (Seniors Housing PAC)

Full Name (Last, First, Middle Initial)

A. Friends Of Pat Toomey

Mailing Address 499 South Capitol St NW
Suite 420

City Washington State DC Zip Code 20003

Purpose of Disbursement

011

Category/
Type

Candidate Name

Sen. Pat Toomey

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: PA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	12	/	2013

Transaction ID : 56846549

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. NewDemPAC

Mailing Address 315 C St. SE
Lower Level

City Washington State DC Zip Code 20003

Purpose of Disbursement

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	12	/	2013

Transaction ID : 56846550

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Moving America Forward

Mailing Address 426 C St. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	18	/	2013

Transaction ID : 56884010

Amount of Each Disbursement this Period

5000.00

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

12500.00

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

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