

**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)

PAGE 19 / 23

<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

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)
NEXION HEALTH FUND FOR QUALITY LONG TERM CARE INC

A.	Full Name (Last, First, Middle Initial) AMERICAN HEALTH CARE ASSOCIATION POLITICAL ACTION COMMITTEE	Transaction ID: SB23.5284
	Mailing Address 1201 L STREET, NW	Date of Disbursement 02 / 11 / 2011
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) BEN CARDIN FOR SENATE	Transaction ID: SB23.5295
	Mailing Address P.O. BOX 21093	Date of Disbursement 04 / 06 / 2011
	City CATONSVILLE State MD Zip Code 21228	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement contribution Candidate Name BENJAMIN L CARDIN	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) BOEHNER FOR SPEAKER	Transaction ID: SB23.5311
	Mailing Address 631-B PENNSYLVANIA AVE., SE BASEMENT UNIT	Date of Disbursement 06 / 16 / 2011
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement contribution Candidate Name JOHN A BOEHNER	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 08	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	12500.00
TOTAL This Period (last page this line number only)	