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Image# 201603089009663414

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	or Other Than An Autr	10112ca Gommittee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
Genesis Healthcare Inc	PAC		
ADDRESS (number and street)	101 EAST STATE STREET		
Check if different			
than previously reported. (ACC)	KENNETT SQUARE		PA 19348
2. FEC IDENTIFICATION NU	MBER ▼ CIT	Υ▲	STATE ▲ ZIP CODE ▲
C C00292094		S THIS NEW (N) O	AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	20 (M2) May 20 (M	(Non-Election Year Only)
(a) Quarterly Reports:		20 (M3) Jun 20 (M	(Non-Election Year Only)
April 15 Quarterly Report (Q	1)	20 (M4) Jul 20 (M7	
July 15 Quarterly Report (Q:	(c) 12-Day	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report (Q:	Report for the:	Convention (12C)	Special (12S)
→ January 31 Year-End Report (YI	Floation	n on	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	Election	n on	in the State of
5. Covering Period 10	01 2015	through 12	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examined thi	s 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 LAUR	ENCE F LANE	[Electronically Filed]	Date 03 / 08 / 2016
NOTE: Submission of false, errone	ous, or incomplete information	n may subject the person signin	g this Report to the penalties of 2 U.S.C. §437g.
Office Use Only			FEC FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISRUPSEMENTS

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Genesis Healthcare Inc PAC 10 2015 2015 Report Covering the Period: 12 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 164990.78 January 1, 2015 (b) Cash on Hand at 173604.68 Beginning of Reporting Period..... 44011.68 227620.56 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 392611.34 217616.36 6(a) and 6(c) for Column B)..... 62180.00 237174.98 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 155436.36 155436.36 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Genesis	Healthcare	Inc	PAC
	i icallicale	1110	1 / 10

		: 12 31 2015				
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
•						
	40572.80	166400.51				
(i) Itemized (use Schedule A)	70072.00	100400.31				
(ii) Unitemized	1438.88	52253.55				
	42011.68	218654.06				
p) Political Party Committees	0.00	0.00				
c) Other Political Committees	2.22					
(such as PACs)	0.00	0.00				
,						
	40044.60	218654.06				
	42011.00	2 10034.00				
	0.00	0.00				
arty Committees	0.00	0.00				
II Loans Received	0.00	0.00				
ii Loans neceived						
Description of the Control	0.00	0.00				
1 1	0.00	3.00				
· · · · · · · · · · · · · · · · · · ·	0.00	0.00				
1 2 1	7 7	7				
	2000.00	8966.50				
ther Federal Receipts						
· · · · · · · · · · · · · · · · · · ·	0.00	0.00				
ransfers from Non-Federal and Levin Funds	7					
a) Non-Federal Account						
(from Schedule H3)	0.00	0.00				
) Levin Funds (from Schedule H5)	0.00	0.00				
F						
c) Total Transfers (add 18(a) and 18(b))	0.00	0.00				
	c) Other Political Committees (such as PACs)	a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)				

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	Total This Period						
	Dperating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calendar Year-to-Date					
	(i) Federal Share	0.00	0.00					
	(ii) Non-Federal Share	0.00	0.00					
(b) Other Federal Operating							
,	Expenditures	180.00	750.00					
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	180.00	750.00					
22.	Transfers to Affiliated/Other Party	0.00	40000.00					
	Committees	0.00	10000.00					
F	Federal Candidates/Committees and Other Political Committees	49000.00	200500.00					
	ndependent Expenditures	0.00	0.00					
25. (use Schedule E) Coordinated Party Expenditures	0.00	0.00					
(2 U.S.C. §441a(d)) use Schedule F)	0.00	0.00					
nc '	ann Dannimanta Made	0.00	0.00					
. b. I	Loan Repayments Made	3.50	0.00					
27. L	oans MadeRefunds of Contributions To:	0.00	0.00					
	a) Individuals/Persons Other Than Political Committees	0.00	0.00					
	man i sinical committees							
	b) Political Party Committees	0.00	0.00					
((c) Other Political Committees (such as PACs)	0.00	0.00					
,	d) Total Contribution Refunds							
(d) Total Contribution Refunds(add Lines 28(a), (b), and (c))	0.00	0.00					
29. (Other Disbursements	13000.00	25924.98					
80. F	Federal Election Activity (2 U.S.C. §431(20))							
(a) Allocated Federal Election Activity (from Schedule H6)							
	(i) Federal Share	0.00	0.00					
	(*) #1 - : # Q1 - :	0.00	0.00					
((ii) "Levin" Share b) Federal Election Activity Paid Entirely	0.00	0.00					
`	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					
	Total Disbursements (add Lines 21(c), 22,							
2	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	62180.00	237174.98					
	Total Federal Disbursements							
	subtract Line 21(a)(ii) and Line 30(a)(ii)	62190.00	2077-1-12					
ī	rom Line 31)	62180.00	237174.98					

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		
3. Total Contributions (other than loans) (from Line 11(d), page 3)	42011.68	218654.06		
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00		
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	42011.68	218654.06		
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	180.00	750.00		
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00		
8. Net Operating Expenditures (subtract Line 37 from Line 36)	180.00	750.00		

FOR LINE NUMBER: PAGE 6 OF Use separate schedule(s) (check only one)

I EMIZED I	HECEIP 15		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or for commercia	al purposes, other than using the			erson for the purpose of soliciting contributions to solicit contributions from such committee.
	MMITTEE (In Full) Healthcare Inc PAC			
A. Carolynne	ast, First, Middle Initial) Adams ss 17163 CARRIAGE HORSE D	R		Date of Receipt
City COLORADO		State CO	Zip Code 80921	11 06 2015 Transaction ID : SA11AI.78976
	per of contributing	C	00921	Amount of Each Receipt this Period 25.00
Receipt For: Primary	ALTHCARE CORPORATION	Occupation DIRECTOR Aggregate		Memo Item
3. Carolynne	ast, First, Middle Initial) e Adams ss 17163 CARRIAGE HORSE DI	R		Date of Receipt
City COLORADO	SPRINGS per of contributing	State CO	Zip Code 80921	11 20 2015 Transaction ID : SA11AI.78977 Amount of Each Receipt this Period
federal politication Name of Emp	al committee. bloyer ALTHCARE CORPORATION	Occupation DIRECTOR Aggregate		Memo Item
Full Name (La			550.00	Date of Receipt
City COLORADO	SPRINGS per of contributing	State CO	Zip Code 80921	12 04 2015 Transaction ID : SA11AI.78978 Amount of Each Receipt this Period
federal political Name of Emp GENESIS HE Receipt For: Primary	al committee. bloyer ALTHCARE CORPORATION	Occupation DIRECTOR Aggregate		Memo Item
SUBTOTAL of	Receipts This Page (optional)			75.00
TOTAL THIS PE	eriod (last page this line number	Orlly)		

	_	FOR LINE NUMBER: PAGE 7 OF 375									
Use separate schedule(s) for each category of the	(ch	eck only	or or	ne)							
Detailed Summary Page	>	1 1a		11b		11c		12			
		13		14		15		16		17	
not be sold or used by any pe	rson	for the	pur	ose o	f so	liciting	СО	ntril	outio	ns	
dress of any political committee to solicit contributions from such committee.											

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) Carolynne Adams Date of Receipt Mailing Address 17163 CARRIAGE HORSE DR 2015 12 18 City Zip Code State Transaction ID: SA11AI.78979 CO **COLORADO SPRINGS** 80921 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION DIRECTOR Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) B. Carolynne Adams Date of Receipt Mailing Address 17163 CARRIAGE HORSE DR 12 31 2015 City State Zip Code Transaction ID: SA11AI.78980 **COLORADO SPRINGS** CO 80921 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **DIRECTOR** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 625.00 Full Name (Last, First, Middle Initial) c. ELAINE C ADAMS Date of Receipt Mailing Address 12 CARTIER ROAD 06 11 2015 City State Zip Code Transaction ID: SA11AI.77951 CT **ENFIELD** 06082 Amount of Each Receipt this Period FEC ID number of contributing C 15.20 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION MANAGER-REGULATORY COMPLIANCE Receipt For: Aggregate Year-to-Date ▼ Primary General 319.20 Other (specify) 65.20 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

FOR LINE NUMBER: **PAGE** 8 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

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 Inc PAC Full Name (Last, First, Middle Initial) ELAINE C ADAMS Date of Receipt Mailing Address 12 CARTIER ROAD 2015 11 20 City Zip Code State Transaction ID: SA11AI.77952 CT **ENFIELD** 06082 Amount of Each Receipt this Period FEC ID number of contributing 15.20 federal political committee. Memo Item Name of Employer Occupation MANAGER-REGULATORY COMPLIANCE GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 334.40 Other (specify) Full Name (Last, First, Middle Initial) B. ELAINE C ADAMS Date of Receipt Mailing Address 12 CARTIER ROAD 12 04 2015 City State Zip Code Transaction ID: SA11AI.77953 **ENFIELD** CT 06082 Amount of Each Receipt this Period FEC ID number of contributing 15.20 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION MANAGER-REGULATORY COMPLIANCE Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 349,60 Full Name (Last, First, Middle Initial) c. ELAINE C ADAMS Date of Receipt Mailing Address 12 CARTIER ROAD M M / 12 18 2015 City Zip Code State Transaction ID: SA11AI.77954 CT **ENFIELD** 06082 Amount of Each Receipt this Period FEC ID number of contributing С 15.20 federal political committee. Memo Item Name of Employer Occupation MANAGER-REGULATORY COMPLIANCE GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 364.80 Other (specify) 45.60 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

MIDDLETOWN

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

	F	OR	LINE	NU	MBER	:	PAGE	9	OF	3	375
Use separate schedule(s)	(0	he	ck only	or	ne)						
for each category of the Detailed Summary Page		×	11a		11b		11c	12			
			13		14		15	16			17

Amount of Each Receipt this Period

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 Inc PAC Full Name (Last, First, Middle Initial) A. ELAINE C ADAMS Date of Receipt Mailing Address 12 CARTIER ROAD 31 2015 12 City State Zip Code Transaction ID: SA11AI.77955 CT 06082 **ENFIELD** Amount of Each Receipt this Period FEC ID number of contributing C 15.20 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION MANAGER-REGULATORY COMPLIANCE Receipt For: Aggregate Year-to-Date ▼ Primary General 380.00 Other (specify) Full Name (Last, First, Middle Initial) B. JAMES M ADAMS Date of Receipt Mailing Address 314 MARLDALE DRIVE 11 06 2015 City State Zip Code Transaction ID: SA11AI.78079

FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	Occupation ADMINISTRATOR-EXECUTIVE Aggregate Year-to-Date ▼ 525.00	25.00 Memo Item
Full Name (Last, First, Middle Initial) JAMES M ADAMS Mailing Address 314 MARLDALE DRIVE City MIDDLETOWN FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary	State Zip Code DE 19709 C Occupation ADMINISTRATOR-EXECUTIVE Aggregate Year-to-Date ▼ 550.00	Date of Receipt 11 20 2015 Transaction ID: SA11AI.78080 Amount of Each Receipt this Period 25.00 Memo Item
CURTOTAL of Descints This Days (outlines)		65.20

19709

DE

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

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

					MBER	:	PAGE	= 1	10 C)F	375
Use separate schedule(s)	(0	(check only one)									
for each category of the Detailed Summary Page		X	11a		11b		11c		12		
			13		14		15		16		17
not be sold or used by any person for the purpose of soliciting contributions dress of any political committee to solicit contributions from such committee.											

	Detailed Summary Page	13 14 15 16 17
	Statements may not be sold or used by any pers e name and address of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC	· · · · · · · · · · · · · · · · · · ·	
Full Name (Last, First, Middle Initial) A. JAMES M ADAMS		Date of Receipt
Mailing Address 314 MARLDALE DRIVE		12 04 2015
City	State Zip Code	Transaction ID : SA11AI.78081
MIDDLETOWN	DE 19709	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	ADMINISTRATOR-EXECUTIVE	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	575.00	
Full Name (Last, First, Middle Initial) B. JAMES M ADAMS		Date of Receipt
Mailing Address 314 MARLDALE DRIVE		12 18 2015
City	State Zip Code	Transaction ID: SA11AI.78082
MIDDLETOWN	DE 19709	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION Receipt For:	ADMINISTRATOR-EXECUTIVE	
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	600.00	
Full Name (Last, First, Middle Initial) C. JAMES M ADAMS		Date of Receipt
Mailing Address 314 MARLDALE DRIVE		12 31 2015
City MIDDLETOWN	State Zip Code DE 19709	Transaction ID : SA11AI.78083 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	ADMINISTRATOR-EXECUTIVE	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	625.00	
SUBTOTAL of Receipts This Page (optional)	>	75.00
TOTAL This Period (last page this line number	only)	

Llee congrete cohodule(s)		_		_	MBER	:	PAGE		11 (OF	37	5
Use separate schedule(s)	(C	(check only one)										
for each category of the Detailed Summary Page		X	11a		11b		11c		12			
			13		14		15		16		17	7
not be sold or used by any person for the purpose of soliciting contributions dress of any political committee to solicit contributions from such committee.												

·	and by any person for the purpose of collecting contributions
Any information copied from such Reports and Statements may not be sold or us or for commercial purposes, other than using the name and address of any politic	
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC	
Full Name (Last, First, Middle Initial) A. JEFFREY D ADAMS	Date of Receipt
Mailing Address 114 BORDEN WAY	11 06 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Zip Code LINCOLN UNIVERSITY PA 19352	Transaction ID : SA11AI.78656 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	20.00
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Occupation VP-CUSTOMER SYSTEMS Aggregate Year-to-Date ▼	Memo Item
Other (specify) ▼	420.00
Full Name (Last, First, Middle Initial) 3. JEFFREY D ADAMS Mailing Address 114 BORDEN WAY	Date of Receipt 11 202015
City State Zip Code LINCOLN UNIVERSITY PA 19352	Transaction ID : SA11AI.78657 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	20.00 Memo Item
Name of Employer GENESIS HEALTHCARE CORPORATION Occupation VP-CUSTOMER SYSTEMS	I Memo rem
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼	440.00
Full Name (Last, First, Middle Initial) 2. JEFFREY D ADAMS	Date of Receipt
Mailing Address 114 BORDEN WAY	12
City State Zip Code LINCOLN UNIVERSITY PA 19352	Transaction ID : SA11AI.78658 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	20.00
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify) ▼ Occupation VP-CUSTOMER SYSTEMS Aggregate Year-to-Date ▼	460.00
SUBTOTAL of Receipts This Page (optional)	60.00
TOTAL This Period (last page this line number only)	······································

Receipt For:

mage# 201603089009663425					
SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s)				
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) JEFFREY D ADAMS			e to solicit contributions from such committee.		
Mailing Address 114 BORDEN WAY City	State	Zip Code	Date of Receipt M		
EINCOLN UNIVERSITY FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	1	19352 DMER SYSTEMS Year-to-Date ▼ 480.00	Amount of Each Receipt this Period 20.00 Memo Item		
Full Name (Last, First, Middle Initial) JEFFREY D ADAMS Mailing Address 114 BORDEN WAY City LINCOLN UNIVERSITY FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)		Zip Code 19352 DMER SYSTEMS Year-to-Date ▼ 500.00	Date of Receipt 12 31 2015 Transaction ID : SA11AI.78660 Amount of Each Receipt this Period 20.00 Memo Item		
Full Name (Last, First, Middle Initial) DAVID C ALMQUIST Mailing Address 811 GRANTLEY COURT City YORK	State PA	Zip Code 17403	Date of Receipt 11 06 2015 Transaction ID : SA11AI.77971 Amount of Each Receipt this Period		
FEC ID number of contributing	C		150.00		

c. DAVID C ALMQUIST Mailing Address 811 GRANTLEY COURT City Sta

P YORK FEC ID number of contributing C federal political committee. Memo Item Name of Employer Occupation **EXECUTIVE VICE PRESIDENT** GENESIS HEALTHCARE CORPORATION

Aggregate Year-to-Date ▼

Primary General Other (specify) ▼	3150.00									
SUBTOTAL of Receipts This Page (optional)	_	- 1	Ξ	I	7	Ξ	190.0	00		
TOTAL This Period (last page this line number	Ξ	,	Ι	Ξ	,	Ξ				

FOR LINE NUMBER: PAGE 13 OF 375

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	and Statements may not be sold or used by any ing the name and address of any political committee	
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PA	С	
Full Name (Last, First, Middle Initial) A. DAVID C ALMQUIST Mailing Address 811 GRANTLEY COUR	RT	Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City YORK	State Zip Code PA 17403	Transaction ID : SA11AI.77972 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Coounstion	150.00 Memo Item
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	Occupation EXECUTIVE VICE PRESIDENT Aggregate Year-to-Date 3300.00	
Full Name (Last, First, Middle Initial) B. DAVID C ALMQUIST Mailing Address 811 GRANTLEY COUR	T	Date of Receipt 12 04 2015
City YORK	State Zip Code PA 17403	Transaction ID : SA11AI.77973 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer GENESIS HEALTHCARE CORPORATIO	Occupation EXECUTIVE VICE PRESIDENT	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3450.00	
Full Name (Last, First, Middle Initial) C. DAVID C ALMQUIST	<u>'</u>	Date of Receipt
Mailing Address 811 GRANTLEY COUF		12 18 2015
City YORK	State Zip Code PA 17403	Transaction ID : SA11AI.77974 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00 Memo Item
Name of Employer	Occupation	Wellio telli
GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 3600.00	
SUBTOTAL of Receipts This Page (option	nal)	450.00
TOTAL This Period (last page this line nu	ımber only)	

Receipt For:

Primary

Other (specify)

GENESIS HEALTHCARE CORPORATION

General

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

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

SCHEDULE A ITEMIZED REC

lm	age# 201603089009663427						
IT	EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER: PAGE 14 OF 375 (check only one) X 11a					
	for commercial purposes, other than using the						
	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC						
Α.	Full Name (Last, First, Middle Initial) DAVID C ALMQUIST			Date of Receipt			
Λ.	Mailing Address 811 GRANTLEY COURT	State	Zip Code	12 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	City YORK	PA	17403	Transaction ID : SA11AI.77975 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		150.00			
	Name of Employer	Occupation		Memo Item			
	GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)		E VICE PRESIDENT Year-to-Date ▼ 3750.00]			
 В.	Full Name (Last, First, Middle Initial) TANATHA K AMOS			Date of Receipt			
	Mailing Address 8930 WINDY RIDGE ROAD			11 27 2015			
	City SANDYVILLE	State WV	Zip Code 25275	Transaction ID : SA11AI.78547 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		10.00			
	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation ADMINISTF		Memo Item			
Receipt For: Primary General Other (specify) ▼ Aggregate			Year-to-Date ▼ 210.00				
- С.	Full Name (Last, First, Middle Initial) TANATHA K AMOS			Date of Receipt			
	Mailing Address 8930 WINDY RIDGE ROAD	01-1-	7. 0.4	12 11 2015			
	City SANDYVILLE	State WV	Zip Code 25275	Transaction ID : SA11AI.78548 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		10.00			
	Name of Employer	Occupation		Memo Item			

220.00

ADMINISTRATOR

Aggregate Year-to-Date ▼

9

FOR LINE NUMBER: PAGE 15 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS	5	for each category of the Detailed Summary Page	X 11a								
			to solicit contributions from such committee.								
NAME OF COMMITTEE (In Genesis Healthcare	,										
Full Name (Last, First, Midd TANATHA K AMOS	le Initial)		Date of Receipt								
Mailing Address 8930 WIND	OY RIDGE ROAD State	7:n Oada	12 24 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
City SANDYVILLE	WV	Zip Code 25275	Transaction ID : SA11AI.78549 Amount of Each Receipt this Period								
FEC ID number of contribut federal political committee.	C		10.00								
Name of Employer GENESIS HEALTHCARE COReceipt For:		RATOR	Memo Item								
Primary Gen Other (specify) ▼		Year-to-Date ▼ 230.00									
Full Name (Last, First, Mido B. PAUL BACH	lle Initial)		Date of Receipt								
Mailing Address 18 FARM F	RIDGE COURT		11 06 2015								
City BALDWIN	State MD	Zip Code 21013	Transaction ID : SA11AI.77794 Amount of Each Receipt this Period								
FEC ID number of contribut federal political committee.	C		192.30								
Name of Employer GENESIS HEALTH VENTUR	Occupation RES, INC. VP-SR CEN	ITERS OPERATIONS	Memo Item								
Receipt For: Primary Gen Other (specify) ▼		Year-to-Date ▼ 4038.30									
Full Name (Last, First, Midd C. PAUL BACH	le Initial)		Date of Receipt								
Mailing Address 18 FARM F	RIDGE COURT		11 20 2015								
City BALDWIN	State MD	Zip Code 21013	Transaction ID : SA11AI.77795 Amount of Each Receipt this Period								
FEC ID number of contribut federal political committee.	ing		192.30								
Name of Employer	Occupation		Memo Item								
GENESIS HEALTH VENTUR		NTERS OPERATIONS	_								
Primary Gen Other (specify) ▼		Year-to-Date ▼ 4230.60									
SUBTOTAL of Receipts This	Page (optional)		394.60								

FOR LINE NUMBER: PAGE 16 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and		
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Receipt For: Primary General Other (specify) ▼ Aggrega	Zip Code 21013 on EENTERS OPERATIONS te Year-to-Date ▼ 4422.90	Date of Receipt 12 04 2015 Transaction ID: SA11AI.77796 Amount of Each Receipt this Period 192.30 Memo Item
Receipt For:	Zip Code 21013 on ENTERS OPERATIONS te Year-to-Date ▼ 4615.20	Date of Receipt 12 18 2015 Transaction ID: SA11AI.77797 Amount of Each Receipt this Period 192.30 Memo Item
Possint For:	Zip Code 21013 on EENTERS OPERATIONS te Year-to-Date ▼ 4807.50	Date of Receipt 12 31 2015 Transaction ID : SA11AI.77798 Amount of Each Receipt this Period 192.30 Memo Item
SUBTOTAL of Receipts This Page (optional)		576.90

Other (specify)

Full Name (Last, First, Middle Initial)

mage# 201603089009663430		
SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 OF 375 (check only one) X 11a
Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) Cheryl Baker Mailing Address 280 COUNTY ROAD 341 City State	Zip Code	Date of Receipt 11 06 2015 Transaction ID: SA11AI.78856
FLORENCE AL FEC ID number of contributing federal political committee.	35634	Amount of Each Receipt this Period
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (consist) Other (consist)		Memo Item

В.	Cheryl Baker		Date of Receipt
	Mailing Address 280 COUNTY ROAD 341		11 20 2015
	City	State Zip Code	Transaction ID : SA11AI.78857
	FLORENCE	AL 35634	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10.00
	Name of Employer	Occupation	Memo Item
	GENESIS HEALTHCARE CORPORATION	ADMINISTRATOR	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	
C.	Full Name (Last, First, Middle Initial) Cheryl Baker		Date of Receipt
	Mailing Address 280 COUNTY ROAD 341		12 04 2015
	City	State Zip Code	Transaction ID : SA11AI.78858
	FLORENCE	AL 35634	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	10.00
	Name of Employer	Occupation	Memo Item
	GENESIS HEALTHCARE CORPORATION	ADMINISTRATOR	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	
[SUBTOTAL of Receipts This Page (optional)		30.00

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

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CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 18 OF 375 (check only one)
	Detailed Summary Page	X 11a
	Statements may not be sold or used by any p	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) Cheryl Baker		Date of Receipt
Mailing Address 280 COUNTY ROAD 341		12 18 _ 2015 _
City FLORENCE	State Zip Code AL 35634	Transaction ID : SA11AI.78859 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation ADMINISTRATOR	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) Cheryl Baker Mailing Address 280 COUNTY ROAD 341		Date of Receipt
City FLORENCE	State Zip Code AL 35634	12 31 2015 Transaction ID : SA11AI.78860 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation ADMINISTRATOR	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) ALEX BELL		Date of Receipt
Mailing Address 1600 GARRETT ROAD, APT	Г. А-204	11 06 2015
City UPPER DARBY	State Zip Code PA 19082	Transaction ID : SA11AI.77931 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation DIRECTOR-REGIONAL REIMBURSEMNT	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 840.00	1

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

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

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City

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 19 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16 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 Inc PAC Full Name (Last, First, Middle Initial) ALEX BELL Date of Receipt Mailing Address 1600 GARRETT ROAD, APT. A-204 2015 11 20 Zip Code State Transaction ID: SA11AI.77932 PΑ **UPPER DARBY** 19082 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION DIRECTOR-REGIONAL REIMBURSEMNT Receipt For: Aggregate Year-to-Date ▼ Primary General 880.00 Other (specify) Full Name (Last, First, Middle Initial) B. ALEX BELL Date of Receipt Mailing Address 1600 GARRETT ROAD, APT. A-204 12 04 2015 City State Zip Code Transaction ID: SA11AI.77933 **UPPER DARBY** PA 19082 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION DIRECTOR-REGIONAL REIMBURSEMNT Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 920.00 Full Name (Last, First, Middle Initial) c. ALEX BELL Date of Receipt Mailing Address 1600 GARRETT ROAD, APT. A-204 M M / 12 18 2015 State Zip Code Transaction ID: SA11AI.77934 PΑ **UPPER DARBY** 19082 Amount of Each Receipt this Period FEC ID number of contributing С 40.00 federal political committee. Memo Item Name of Employer Occupation DIRECTOR-REGIONAL REIMBURSEMNT GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼

960.00

City

Primary

Other (specify)

General

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

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

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9

Primary

Other (specify)

Receipt For:

GENESIS HEALTH VENTURES, INC.

General

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

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SCHEDULE A (ITEMIZED RECE

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	FOR LINE NUMBER: PAGE 20 OF 375 (check only one) X 11a								
	ny information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions to solicit contributions from such committee.						
	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC									
Α.	Full Name (Last, First, Middle Initial) ALEX BELL			Date of Receipt						
	Mailing Address 1600 GARRETT ROAD, APT.	A-204		12 31 _ 2015 _						
	City UPPER DARBY	State PA	Zip Code 19082	Transaction ID : SA11AI.77935 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		40.00						
	Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)		R-REGIONAL REIMBURSEMNT Year-to-Date ▼ 1000.00	Memo Item						
— В.	Full Name (Last, First, Middle Initial) ALICEMAE BELL Mailing Address 23 PEMBROKE LANE			Date of Receipt						
	City AGAWAM	State MA	Zip Code 01001	11 06 2015 Transaction ID : SA11AI.77872 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		10.00						
	Name of Employer GENESIS HEALTH VENTURES, INC.	Occupation	R-CONSULTING	Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00							
- С.	Full Name (Last, First, Middle Initial) ALICEMAE BELL	Date of Receipt								
	Mailing Address 23 PEMBROKE LANE			11 20 / Y Y Y Y Y Y Y						
	City AGAWAM	State MA	Zip Code 01001	Transaction ID : SA11AI.77873 Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	C		10.00						
	Name of Employer	Occupation	1	Memo Item						

220.00

DIRECTOR-CONSULTING

Aggregate Year-to-Date ▼

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FOR LINE NUMBER: PAGE 21 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

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 Inc PAC Full Name (Last, First, Middle Initial) ALICEMAE BELL Date of Receipt Mailing Address 23 PEMBROKE LANE 04 2015 12 City Zip Code State Transaction ID: SA11AI.77874 MA **AGAWAM** 01001 Amount of Each Receipt this Period FEC ID number of contributing C 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTH VENTURES, INC. DIRECTOR-CONSULTING Receipt For: Aggregate Year-to-Date ▼ Primary General 230.00 Other (specify) Full Name (Last, First, Middle Initial) B. ALICEMAE BELL Date of Receipt Mailing Address 23 PEMBROKE LANE 12 18 2015 City State Zip Code Transaction ID: SA11AI.77875 **AGAWAM** MA 01001 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTH VENTURES, INC. **DIRECTOR-CONSULTING** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 240,00 Full Name (Last, First, Middle Initial) c. ALICEMAE BELL Date of Receipt Mailing Address 23 PEMBROKE LANE M M / 12 31 2015 City Zip Code State Transaction ID: SA11AI.77876 MA **AGAWAM** 01001 Amount of Each Receipt this Period FEC ID number of contributing С 10.00 federal political committee. Memo Item Name of Employer Occupation **DIRECTOR-CONSULTING** GENESIS HEALTH VENTURES, INC. Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 30.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: PAGE 22 OF 375									75	
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Any information copied from su or for commercial purposes, otl															
NAME OF COMMITTEE (In Genesis Healthcare	Full)														
Full Name (Last, First, Midd A. JEFFREY BERENBAC						Date of	Rec	eipt							
Mailing Address 8007 YELL	OWSTONE RD					м - м 1_1	/	06	/ Y	2015	Y				
City KINGSVILLE		State MD	Zip Code 21087			Transa		n ID : Sa ach Red		7838					
FEC ID number of contributi federal political committee.	ing	C				150.00									
Name of Employer GENESIS HEALTH VENTUR Receipt For: Primary Gene Other (specify) ▼	·		ELDERCARE (ear-to-Date ▼	CENTERS REG 3150.00]	Men	no Ite	em							
Full Name (Last, First, Midd 3. JEFFREY BERENBA Mailing Address 8007 YELL	CH					Date of									
City KINGSVILLE		State MD		Transaction ID : SA11AI.77839 Amount of Each Receipt this Period 150.00											
FEC ID number of contributi federal political committee.	ing	С													
Name of Employer GENESIS HEALTH VENTUR	ES, INC.	Occupation DIRECTOR-E	ELDERCARE C	CENTERS REG		Men	no Ite	em							
Receipt For: Primary Gene Other (specify) ▼	eral	Aggregate Ye	ear-to-Date ▼	3300.00											
Full Name (Last, First, Midd JEFFREY BERENBA						Date of	Rec	eipt							
Mailing Address 8007 YELL	OWSTONE RD					12	/	04	/ Y	2015	Y				
City KINGSVILLE		State MD	Zip Code 21087					on ID : Sa ach Red							
FEC ID number of contribution federal political committee.	ng	С					7		7	150.0	0				
Name of Employer GENESIS HEALTH VENTUR	RES, INC.	Occupation DIRECTOR-E	ELDERCARE (CENTERS REG		Men	no lte	em							
Receipt For: Primary Gene Other (specify) ▼	eral	Aggregate Ye	ear-to-Date ▼	3450.00											
SUBTOTAL of Receipts This I	Page (optional)				•		,		,	450.0	0				
TOTAL This Period (last page	this line number o	nly)			•		,		-,						

FOR LINE NUMBER: (check only one) PAGE 23 OF Use separate schedule(s)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and Sta or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) JEFFREY BERENBACH Mailing Address 8007 YELLOWSTONE RD City KINGSVILLE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTH VENTURES, INC. Receipt For: Primary Other (specify) City General Other (specify)	State Zip Code MD 21087 C Occupation DIRECTOR-ELDERCARE CENTERS REG Aggregate Year-to-Date ▼ 3600.00	Date of Receipt 12 18 2015 Transaction ID: SA11AI.77841 Amount of Each Receipt this Period 150.00 Memo Item
Full Name (Last, First, Middle Initial) JEFFREY BERENBACH Mailing Address 8007 YELLOWSTONE RD City KINGSVILLE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTH VENTURES, INC. Receipt For: Primary Other (specify) Other (specify)	State Zip Code MD 21087 C Occupation DIRECTOR-ELDERCARE CENTERS REG Aggregate Year-to-Date ▼ 3750.00	Date of Receipt 12 31 2015 Transaction ID: SA11AI.77842 Amount of Each Receipt this Period 150.00 Memo Item
Full Name (Last, First, Middle Initial) Michael Berg Mailing Address 8700 SIGNAL CT NE City ALBUQUERQUE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code NM 87122 C Occupation COUNSEL-DEPUTY GENERAL CORP Aggregate Year-to-Date ▼ 840.00	Date of Receipt 11 06 2015 Transaction ID: SA11AI.79021 Amount of Each Receipt this Period 40.00 Memo Item
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number of	·	340.00

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Use separate schedule(s) for each category of the	(((check only one)										
Detailed Summary Page												
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not be sold or used by any person for the purpose of soliciting contributions dress of any political committee to solicit contributions from such committee.									3			

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Any or	y information copied from such Reports and St for commercial purposes, other than using the	atements may	not be sold o	or used by any political committe	person ee to so	for the policit con	purp ntribu	ose of so	oliciting m such	contribut	ons ee.			
	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC													
	Full Name (Last, First, Middle Initial) Michael Berg					Date of	Red	eipt						
	Mailing Address 8700 SIGNAL CT NE					M = M		20	/ Y	2015	Y			
	City ALBUQUERQUE	State NM		Transaction ID : SA11AI.79022 Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С		40.00										
	Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	Occupation COUNSEL-D Aggregate Yo		Memo Item										
3.	Full Name (Last, First, Middle Initial) Michael Berg Mailing Address 8700 SIGNAL CT NE					Date of	Red	ceipt 04	/ Y	2015	Y			
	City ALBUQUERQUE		Transa		on ID : Sa Each Red		9023							
	FEC ID number of contributing federal political committee.	С		25.00 Memo Item										
(Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation COUNSEL-D	EPUTY GENE	RAL CORP		Mer	mo It	em						
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼	905.00										
С.	Full Name (Last, First, Middle Initial) Michael Berg					Date of	Red	ceipt						
	Mailing Address 8700 SIGNAL CT NE					12	/	18	/ Y	2015	Y			
-	City ALBUQUERQUE	State NM	Zip Code 87122					on ID : S Each Red						
	FEC ID number of contributing federal political committee.	С					_	,	7	25.0	0			
	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation COUNSEL-D	EPUTY GENE	RAL CORP		Mer	no It	em						
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼	930.00										
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Detailed Summary Page			13		14		15		16			17
not be sold or used by any pedress of any political committee							_					

Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any perse e name and address of any political committee to	
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) A. Michael Berg Mailing Address 8700 SIGNAL CT NE City	State Zip Code	Date of Receipt 12 31 2015 Transaction ID: SA11AI.79025
ALBUQUERQUE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) Other (specify)	NM 87122 C Occupation COUNSEL-DEPUTY GENERAL CORP Aggregate Year-to-Date ▼ 955.00	Amount of Each Receipt this Period 25.00 Memo Item
Full Name (Last, First, Middle Initial) GARY B BERNETT Mailing Address 429 COLLEGE AVE City HAVERFORD FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code PA 19041 C Occupation VP-MEDICAL AFFAIRS Aggregate Year-to-Date ▼ 840.00	Date of Receipt 11 06 2015 Transaction ID : SA11AI.78219 Amount of Each Receipt this Period 40.00 Memo Item
Full Name (Last, First, Middle Initial) GARY B BERNETT Mailing Address 429 COLLEGE AVE City HAVERFORD FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code PA 19041 C Occupation VP-MEDICAL AFFAIRS Aggregate Year-to-Date ▼ 880.00	Date of Receipt 11 20 2015 Transaction ID: SA11AI.78220 Amount of Each Receipt this Period 40.00 Memo Item
SUBTOTAL of Receipts This Page (optional)	>	105.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: (check only one) PAGE 26 OF Use separate schedule(s)

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a
			erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc	PAC		
Full Name (Last, First, Middle Initial GARY B BERNETT Mailing Address 429 COLLEGE AV City HAVERFORD FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPOR Receipt For: Primary Other (specify)	State PA C Occupation VP-MEDIC, Aggregate	Zip Code 19041 In AL AFFAIRS Year-to-Date ▼	Date of Receipt 12 04 2015 Transaction ID : SA11AI.78221 Amount of Each Receipt this Period 40.00 Memo Item
Full Name (Last, First, Middle Initial GARY B BERNETT Mailing Address 429 COLLEGE AV City HAVERFORD FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPOR Receipt For: Primary General Other (specify)	State PA C Occupation VP-MEDICA	Zip Code 19041 AL AFFAIRS Year-to-Date ▼ 960.00	Date of Receipt 12 18 2015 Transaction ID: SA11AI.78222 Amount of Each Receipt this Period 40.00 Memo Item
Full Name (Last, First, Middle Initial GARY B BERNETT Mailing Address 429 COLLEGE AV City HAVERFORD FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPOR Receipt For: Primary Other (specify)	State PA C Occupation VP-MEDIC	Zip Code 19041 In AL AFFAIRS Year-to-Date ▼ 1000.00	Date of Receipt 12 31 2015 Transaction ID: SA11AI.78223 Amount of Each Receipt this Period 40.00 Memo Item
SUBTOTAL of Receipts This Page (<u> </u>		120.00
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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: PAGE 27 OF 375 (check only one) X 11a							
Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and									
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC									
Full Name (Last, First, Middle Initial) A. DAVID BERTHA		Date of Receipt							
Mailing Address 212 ARDMORE AVENUE	7. 0.4	11 06 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
City State HADDONFIELD NJ	Zip Code 08033	Transaction ID : SA11AI.77828 Amount of Each Receipt this Period							
FEC ID number of contributing									

V_{-}								
Α.	Full Name (Last, First, Middle Initial) DAVID BERTHA		Date of Receipt					
	Mailing Address 212 ARDMORE AVENUE		11 06 _ 2015 _					
	City	State Zip Code	Transaction ID : SA11AI.77828					
	HADDONFIELD	NJ 08033	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С	40.00					
	Name of Employer	Occupation	- Memo Item					
	GENESIS HEALTH VENTURES, INC.	PRESIDENT-GEN HOSPITALITY SVS						
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 840.00						
— В	Full Name (Last, First, Middle Initial) DAVID BERTHA		Date of Receipt					
٠.	Mailing Address 212 ARDMORE AVENUE		11 20 2015					
	City	State Zip Code	Transaction ID : SA11AI.77829					
	HADDONFIELD	NJ 08033	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	eral political committee.						
	Name of Employer GENESIS HEALTH VENTURES, INC.	Occupation PRESIDENT-GEN HOSPITALITY SVS	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 880.00						
<u> </u>	Full Name (Last, First, Middle Initial) DAVID BERTHA		Date of Receipt					
	Mailing Address 212 ARDMORE AVENUE		12 04 2015					
	City	State Zip Code	Transaction ID : SA11AI.77830					
	HADDONFIELD	NJ 08033	Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	C	40.00					
	Name of Employer	Occupation	Memo Item					
	GENESIS HEALTH VENTURES, INC.	PRESIDENT-GEN HOSPITALITY SVS						
	Receipt For:	Aggregate Year-to-Date ▼	1					
	Primary General Other (specify) ▼	920.00						
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not be sold or used by any person for the purpose of soliciting contributions dress of any political committee to solicit contributions from such committee.												

Any information copied from such Reports and St or for commercial purposes, other than using the							
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC							
Full Name (Last, First, Middle Initial) DAVID BERTHA Mailing Address 242 ARRMORE AVENUE		Date of Receipt					
Mailing Address 212 ARDMORE AVENUE		12 18 2015					
City HADDONFIELD	State Zip Code NJ 08033	Transaction ID : SA11AI.77831 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С	40.00					
Name of Employer GENESIS HEALTH VENTURES, INC. Receipt For: Primary General Other (specify) ▼	Occupation PRESIDENT-GEN HOSPITALITY SVS Aggregate Year-to-Date ▼ 960.00	Memo Item					
Full Name (Last, First, Middle Initial) B. DAVID BERTHA		Date of Receipt					
Mailing Address 212 ARDMORE AVENUE		12 31 2015					
City HADDONFIELD	State Zip Code NJ 08033	Transaction ID : SA11AI.77832 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	40.00					
Name of Employer GENESIS HEALTH VENTURES, INC.	Occupation PRESIDENT-GEN HOSPITALITY SVS	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00						
Full Name (Last, First, Middle Initial) C. Mildred Bickling		Date of Receipt					
Mailing Address 282 Baker Road		11 06 2015					
City Cochranville	State Zip Code PA 19330	Transaction ID : SA11AI.78461 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	10.00					
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation DIRECTOR-SR DEMENTIA SW PRACT	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00						
SUBTOTAL of Receipts This Page (optional)	>	90.00					
TOTAL This Period (last page this line number of	only)						

FOR LINE NUMBER: PAGE 29 OF 375

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NAME OF COMMITTEE (In Full)										
Genesis Healthcare Inc PAC										
Full Name (Last, First, Middle Initial) A. Mildred Bickling			Date	of Re	eceipt					
Mailing Address 282 Baker Road			11		20	/ Y	2015	Y		
City	State	Zip Code	Tran	sact	ion ID : S	A11AI.	78462			
Cochranville	PA	19330	Amou	nt of	Each Re	ceipt th	is Period			
FEC ID number of contributing federal political committee.	С			_	,	7	10.0	00		
Name of Employer	Occupation		<u> </u>	lemo l	ltem					
GENESIS HEALTHCARE CORPORATION	DIRECTOR	-SR DEMENTIA SW PRACT								
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General		220.00								
Other (specify) ▼		220.00								
Full Name (Last, First, Middle Initial) 3. Mildred Bickling			Date	of Re	eceint					
Mailing Address 282 Baker Road			12	M /	04	/ Y	2015	Y		
City	State	Zip Code			ion ID : S	6A11AI.				
Cochranville	PA	19330	Amou	nt of	Each Re	ceipt th	nis Period			
FEC ID number of contributing federal political committee.	С			_	,		10.0	00		
Name of Employer	Occupation		<u> </u>	lemo	ltem					
GENESIS HEALTHCARE CORPORATION	DIRECTOR	-SR DEMENTIA SW PRACT								
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General Other (specify) ▼		230.00								
Full Name (Last, First, Middle Initial) C. Mildred Bickling			Date	of Re	eceipt					
Mailing Address 282 Baker Road			M 12	_	18	/ Y	2015	Y		
City	State	Zip Code	Trar	ısact	ion ID : S	3A11AI.	78464			
Cochranville	PA	19330	Amou	nt of	Each Re	ceipt th	is Period			
FEC ID number of contributing federal political committee.	С			_	,	7	10.0	00		
Name of Employer	Occupation		\neg \square \bowtie	lemo l	ltem					
GENESIS HEALTHCARE CORPORATION	DIRECTOR	-SR DEMENTIA SW PRACT								
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General Other (specify) ▼		240.00								
Carlot (opcolity)		, , , , , ,								
SUBTOTAL of Receipts This Page (optional)					,	,	30.0	00		
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) Mildred Bickling Mailing Address 282 Baker Road City	State Zip Code	Date of Receipt 12 31 2015
Cochranville FEC ID number of contributing federal political committee.	PA 19330	Transaction ID : SA11AI.78465 Amount of Each Receipt this Period 10.00 Memo Item
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) Other	Occupation DIRECTOR-SR DEMENTIA SW PRACT Aggregate Year-to-Date ▼ 250.00	Menio itelii
Full Name (Last, First, Middle Initial) Barbara Bierstedt Mailing Address 8131 BIG OAK TRAIL City	State Zip Code	Date of Receipt 11 06 2015
HOUSTON FEC ID number of contributing federal political committee.	TX 77040	Transaction ID : SA11AI.78916 Amount of Each Receipt this Period 10.00
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	Occupation DIRECTOR-CONSULTANT NURSE Aggregate Year-to-Date ▼ 210.00	Memo Item
Full Name (Last, First, Middle Initial) Barbara Bierstedt Mailing Address 8131 BIG OAK TRAIL City HOUSTON FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For:	State Zip Code TX 77040 C Occupation DIRECTOR-CONSULTANT NURSE Aggregate Year-to-Date ▼	Date of Receipt 11 20 2015 Transaction ID: SA11AI.78917 Amount of Each Receipt this Period 10.00 Memo Item
Primary General Other (specify) ▼	220.00	30.00
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number of		

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	y information copied from such Reports and Sta for commercial purposes, other than using the n										
	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC										
۹.	Full Name (Last, First, Middle Initial) Barbara Bierstedt			Date of Receipt							
	Mailing Address 8131 BIG OAK TRAIL City	State	Zip Code	12 04 2015 Transaction ID : SA11Al.78918							
	HOUSTON	TX	77040	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		10.00							
		Occupation DIRECTOR	-CONSULTANT NURSE	Memo Item							
	Receipt For: Primary General	Aggregate	Year-to-Date ▼								
	Other (specify)		230.00								
3.	Full Name (Last, First, Middle Initial) Barbara Bierstedt			Date of Receipt							
	Mailing Address 8131 BIG OAK TRAIL	12 18 2015									
	City HOUSTON	State TX	Zip Code 77040	Transaction ID : SA11AI.78919 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		10.00							
	CENESIS HEALTHCARE CORROBATION	Occupation DIRECTOR	-CONSULTANT NURSE	Memo Item							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00								
С.	Full Name (Last, First, Middle Initial) Barbara Bierstedt			Date of Receipt							
	Mailing Address 8131 BIG OAK TRAIL	Otal	7in Code	12 31 2015							
	City HOUSTON	State TX	Zip Code 77040	Transaction ID : SA11AI.78920 Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		10.00							
	Name of Employer	Memo Item									
		DIRECTOR	-CONSULTANT NURSE								
	Receipt For: Primary General	Aggregate	Year-to-Date ▼								
	Other (specify) ▼		250.00								
s	UBTOTAL of Receipts This Page (optional)			30.00							
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) RICHARD P BLINN Mailing Address 67 BLOSSOM ROAD City WINDHAM FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify) Contributing federal political committee.	State Zip Code NH 03087 C Occupation EXECUTIVE VICE PRESIDENT Aggregate Year-to-Date ▼ 3150.00	Date of Receipt 11 06 2015 Transaction ID: SA11AI.78312 Amount of Each Receipt this Period 150.00 Memo Item
Full Name (Last, First, Middle Initial) RICHARD P BLINN Mailing Address 67 BLOSSOM ROAD City WINDHAM FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code NH 03087 C Occupation EXECUTIVE VICE PRESIDENT Aggregate Year-to-Date ▼ 3300.00	Date of Receipt 11 20 2015 Transaction ID: SA11AI.78313 Amount of Each Receipt this Period 150.00 Memo Item
Full Name (Last, First, Middle Initial) RICHARD P BLINN Mailing Address 67 BLOSSOM ROAD City WINDHAM FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code NH 03087 C Occupation EXECUTIVE VICE PRESIDENT Aggregate Year-to-Date ▼ 3450.00	Date of Receipt 12 04 2015 Transaction ID: SA11AI.78314 Amount of Each Receipt this Period 150.00 Memo Item
SUBTOTAL of Receipts This Page (optional)		450.00

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Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)	• •						
Genesis Healthcare Inc PAC							
Full Name (Last, First, Middle Initial) A. RICHARD P BLINN		Date of Receipt					
Mailing Address 67 BLOSSOM ROAD	12 18 _ 2015 _						
City	State Zip Code	Transaction ID : SA11AI.78315					
WINDHAM	NH 03087	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	150.00					
Name of Employer	Occupation	Memo Item					
GENESIS HEALTHCARE CORPORATION Receipt For:	EXECUTIVE VICE PRESIDENT						
Primary General	Aggregate Year-to-Date ▼						
Other (specify) ▼	3600.00						
Full Name (Last, First, Middle Initial) 3. RICHARD P BLINN		Date of Receipt					
Mailing Address 67 BLOSSOM ROAD		12 31 2015					
City	State Zip Code	Transaction ID : SA11AI.78316					
WINDHAM EEC ID number of contributing	NH 03087	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	150.00					
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation	Memo Item					
Receipt For:	Aggregate Veer to Date W						
Primary General	Aggregate Year-to-Date ▼						
Other (specify) ▼	3750.00						
Full Name (Last, First, Middle Initial) C. Joseph Bourne		Date of Receipt					
Mailing Address 16 PERRY RIDGE COURT		11 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City BALTIMORE	State Zip Code MD 21237	Transaction ID : SA11AI.78496 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С	50.00					
Name of Employer	Name of Employer Occupation						
GENESIS HEALTHCARE CORPORATION	SVP-MGD CARE REVENUE DEVLOPMNT						
Receipt For: Primary General	Aggregate Year-to-Date ▼						
Other (specify) ▼	700.00						
SUBTOTAL of Receipts This Page (optional)		350.00					
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) Joseph Bourne Mailing Address 16 PERRY RIDGE COURT City BALTIMORE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code MD 21237 C Occupation SVP-MGD CARE REVENUE DEVLOPMNT Aggregate Year-to-Date ▼ 750.00	Date of Receipt 11 20 2015 Transaction ID: SA11AI.78497 Amount of Each Receipt this Period 50.00 Memo Item
Full Name (Last, First, Middle Initial) Joseph Bourne Mailing Address 16 PERRY RIDGE COURT City BALTIMORE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code MD 21237 C Occupation SVP-MGD CARE REVENUE DEVLOPMNT Aggregate Year-to-Date ▼ 800.00	Date of Receipt 12 04 2015 Transaction ID: SA11AI.78498 Amount of Each Receipt this Period 50.00 Memo Item
Full Name (Last, First, Middle Initial) Joseph Bourne Mailing Address 16 PERRY RIDGE COURT City BALTIMORE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code MD 21237 C Occupation SVP-MGD CARE REVENUE DEVLOPMNT Aggregate Year-to-Date ▼ 850.00	Date of Receipt 12
SUBTOTAL of Receipts This Page (optional)	>	150.00
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC	
Concolo i localiticate ino i 710	
Full Name (Last, First, Middle Initial) Joseph Bourne Mailing Address 16 PERRY RIDGE COURT	Date of Receipt
City State Zip Code BALTIMORE MD 21237 FEC ID number of contributing	Transaction ID : SA11AI.78500 Amount of Each Receipt this Period 50.00
Receipt For: Primary Other (specify) ▼ Occupation Occupation SVP-MGD CARE REVENUE DEVLOPMNT Aggregate Year-to-Date ▼ 900.00	Memo Item
Full Name (Last, First, Middle Initial) Carol Britt Mailing Address 302 N SCOTT ST City State Zip Code	Date of Receipt 11 19 2015 Transaction ID: SA11AI.78842
MADISONVILLE KY 42431 FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period 10.00 Memo Item
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Occupation ADMINISTRATOR Aggregate Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial) C. Carol Britt Mailing Address 302 N SCOTT ST	Date of Receipt 12 03 2015
City State Zip Code MADISONVILLE KY 42431 FEC ID number of contributing federal political committee. Name of Employer Occupation	Transaction ID : SA11AI.78843 Amount of Each Receipt this Period 10.00 Memo Item
GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify) Administrator Aggregate Year-to-Date 220.00	
SUBTOTAL of Receipts This Page (optional)	70.00

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Use separate schedule(s)	(check only one)									
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC						
Full Name (Last, First, Middle Initial) Carol Britt Mailing Address 302 N SCOTT ST		Date of Receipt				
City	State Zip Code	12 17 2015 Transaction ID : SA11AI.78844				
MADISONVILLE FEC ID number of contributing federal political committee. Name of Employer	C Occupation	Amount of Each Receipt this Period 10.00 Memo Item				
GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	ADMINISTRATOR Aggregate Year-to-Date ▼ 230.00					
Full Name (Last, First, Middle Initial) Carol Britt Mailing Address 302 N SCOTT ST		Date of Receipt				
City MADISONVILLE	State Zip Code KY 42431	12 31 2015 Transaction ID : SA11AI.78845 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	10.00				
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation ADMINISTRATOR	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00					
Full Name (Last, First, Middle Initial) Julie Britton		Date of Receipt				
Mailing Address 6 DERBY CIRCLE	11 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City HORSHAM	State Zip Code PA 19044	Transaction ID : SA11AI.78044 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	35.00 Memo Item				
Name of Employer						
GENESIS HEALTHCARE CORPORATION Receipt For: □ Primary □ General □ Other (specify) ▼	VP-CLINICAL OPERATIONS RN Aggregate Year-to-Date ▼ 735.00					
SUBTOTAL of Receipts This Page (optional)		55.00				
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\rangle	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC										
Α.	Full Name (Last, First, Middle Initial) Julie Britton Mailing Address 6 DERBY CIRCLE City HORSHAM	State PA	Zip Code 19044	_ [acti	ceipt 20 on ID:		1. 78 0		Y
	FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)		AL OPERATIONS RN Year-to-Date ▼ 770.00		Mei	mo l	tem	7		35.0	00
В.	Full Name (Last, First, Middle Initial) Julie Britton Mailing Address 6 DERBY CIRCLE City HORSHAM FEC ID number of contributing federal political committee.	State PA	Zip Code 19044	_ [/ acti	ceipt 04 on ID : \$.2 1.780		00
	Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	Occupation VP-CLINICA	AL OPERATIONS RN Year-to-Date ▼ 805.00	- Ĉ	Me	mo l	tem				
C.	Full Name (Last, First, Middle Initial) Julie Britton Mailing Address 6 DERBY CIRCLE	Chaha	7in Code		ate of	/	18	J L	2	015	Y
	City HORSHAM FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)		Zip Code 19044 AL OPERATIONS RN Year-to-Date ▼ 840.00		mount		ion ID : Each Ro				00
s	UBTOTAL of Receipts This Page (optional)						,			105.0	00
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\rangle	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC			
Α.	Full Name (Last, First, Middle Initial) Julie Britton Mailing Address 6 DERBY CIRCLE City HORSHAM FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)		Zip Code 19044 AL OPERATIONS RN Year-to-Date ▼	Date of Receipt 12 31 2015 Transaction ID : SA11AI.78048 Amount of Each Receipt this Period 35.00 Memo Item
В.	Full Name (Last, First, Middle Initial) ROBIN BROWN Mailing Address 22 MOLLY LANE City SEBAGO FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)		Zip Code 04029 -CLINICAL REIMBURSEMENT Year-to-Date ▼ 525.00	Date of Receipt 11 06 2015 Transaction ID : SA11AI.78675 Amount of Each Receipt this Period 25.00 Memo Item
C.	Full Name (Last, First, Middle Initial) ROBIN BROWN Mailing Address 22 MOLLY LANE City SEBAGO FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)		Zip Code 04029 -CLINICAL REIMBURSEMENT Year-to-Date ▼ 550.00	Date of Receipt 11 20 2015 Transaction ID: SA11Al.78676 Amount of Each Receipt this Period 25.00 Memo Item
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Т	OTAL This Period (last page this line number of	onlv)		

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Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) **ROBIN BROWN** Date of Receipt Mailing Address 22 MOLLY LANE 04 2015 12 City Zip Code State Transaction ID: SA11AI.78677 ME **SEBAGO** 04029 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION MANAGER-CLINICAL REIMBURSEMENT Receipt For: Aggregate Year-to-Date ▼ Primary General 575.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** ROBIN BROWN Date of Receipt Mailing Address 22 MOLLY LANE 12 18 2015 City State Zip Code Transaction ID: SA11AI.78678 **SEBAGO** ME 04029 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION MANAGER-CLINICAL REIMBURSEMENT Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 600.00 Full Name (Last, First, Middle Initial) c. ROBIN BROWN Date of Receipt Mailing Address 22 MOLLY LANE M M / 12 31 2015 Zip Code City State Transaction ID: SA11AI.78679 ME **SEBAGO** 04029 Amount of Each Receipt this Period FEC ID number of contributing С 25.00 federal political committee. Memo Item Name of Employer Occupation

Primary General Other (specify) ▼						
SUBTOTAL of Receipts This Page (optional)			75.	00		
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MANAGER-CLINICAL REIMBURSEMENT

Aggregate Year-to-Date ▼

Receipt For:

GENESIS HEALTHCARE CORPORATION

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not be sold or used by any person for the purpose of soliciting contributions											

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 Inc PAC

Full Name (Last, First, Middle Initial)

Warren Burke

Mailing Address 8565 TRAILVIEW DR

Full Name (Last, First, Middle Initial) Narren Burke		Date of Receipt
Mailing Address 8565 TRAILVIEW DR.		11 06 2015
City ELLICOTT CITY	State Zip Code MD 21043	Transaction ID : SA11AI.77818 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	VP-PHYSICIAN SERVICES	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	
Full Name (Last, First, Middle Initial) 3. Warren Burke		Date of Receipt
Mailing Address 8565 TRAILVIEW DR.		11 20 2015
City	State Zip Code	Transaction ID : SA11AI.77819
ELLICOTT CITY	MD 21043	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VP-PHYSICIAN SERVICES	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	
Full Name (Last, First, Middle Initial) C. Warren Burke		Date of Receipt
Mailing Address 8565 TRAILVIEW DR.		12 04 2015
City ELLICOTT CITY	State Zip Code MD 21043	Transaction ID : SA11AI.77820 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	VP-PHYSICIAN SERVICES	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	460.00	
SUBTOTAL of Receipts This Page (optional)	>	60.00
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) Warren Burke Date of Receipt Mailing Address 8565 TRAILVIEW DR. 2015 12 18 City Zip Code State Transaction ID: SA11AI.77821 MD **ELLICOTT CITY** 21043 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP-PHYSICIAN SERVICES Receipt For: Aggregate Year-to-Date ▼ Primary General 480.00 Other (specify) Full Name (Last, First, Middle Initial) B. Warren Burke Date of Receipt Mailing Address 8565 TRAILVIEW DR. 12 31 2015 City State Zip Code Transaction ID: SA11AI.77822 **ELLICOTT CITY** MD 21043 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP-PHYSICIAN SERVICES Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500,00 Full Name (Last, First, Middle Initial) c. Janice Burnap Date of Receipt Mailing Address 201 OAKCREST DR M M / 06 11 2015 City State Zip Code Transaction ID: SA11AI.79081 NC WAKE FOREST 27587 Amount of Each Receipt this Period FEC ID number of contributing С 36.45 federal political committee. Memo Item Name of Employer Occupation **DIRECTOR-RISK MGMT PROGRAMS** GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 740.60 Other (specify) 76.45 SUBTOTAL of Receipts This Page (optional).....

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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) 1. Janice Burnap		Date of Receipt
Mailing Address 201 OAKCREST DR		11 20 2015
City	State Zip Code NC 27587	Transaction ID : SA11AI.79082
WAKE FOREST		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	34.75
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION Receipt For:	DIRECTOR-RISK MGMT PROGRAMS	
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	775.35	
Full Name (Last, First, Middle Initial) 3. Janice Burnap		Date of Receipt
Mailing Address 201 OAKCREST DR		12 04 2015
City	State Zip Code	Transaction ID : SA11AI.79083
WAKE FOREST	NC 27587	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	34.75
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation	Memo Item
Receipt For:	DIRECTOR-RISK MGMT PROGRAMS	
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	810.10	
Full Name (Last, First, Middle Initial) C. Janice Burnap		Date of Receipt
Mailing Address 201 OAKCREST DR		12 18 _ 2015 _
City WAKE FOREST	State Zip Code NC 27587	Transaction ID : SA11AI.79084 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.65
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	DIRECTOR-RISK MGMT PROGRAMS	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	851.75	
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$\overline{\ \ }$	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Α.	Full Name (Last, First, Middle Initial) Janice Burnap Mailing Address 201 OAKCREST DR City WAKE FOREST FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code NC 27587 C Occupation DIRECTOR-RISK MGMT PROGRAMS Aggregate Year-to-Date ▼ 895.81	Date of Receipt 12 31 2015 Transaction ID: SA11Al.79085 Amount of Each Receipt this Period 44.06 Memo Item
В.	Full Name (Last, First, Middle Initial) Marsha Butler Mailing Address 2222 Ebbvale Road City Manchester FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) Other (specify)	State Zip Code MD 21102 C Occupation VP-AREA SALES & MARKETING Aggregate Year-to-Date ▼ 525.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C.	Full Name (Last, First, Middle Initial) Marsha Butler Mailing Address 2222 Ebbvale Road City Manchester FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	State Zip Code MD 21102 C Occupation VP-AREA SALES & MARKETING Aggregate Year-to-Date ▼ 550.00	Date of Receipt M M / 20 / 2015 Transaction ID: SA11AI.78356 Amount of Each Receipt this Period 25.00 Memo Item
s	UBTOTAL of Receipts This Page (optional)	>	94.06
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Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and ad NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) Marsha Butler Date of Receipt Mailing Address 2222 Ebbvale Road 04 2015 12 City Zip Code State Transaction ID: SA11AI.78357 MD Manchester 21102 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP-AREA SALES & MARKETING Receipt For: Aggregate Year-to-Date ▼ Primary General 575.00 Other (specify) Full Name (Last, First, Middle Initial) B. Marsha Butler Date of Receipt Mailing Address 2222 Ebbvale Road 12 18 2015 City State Zip Code Transaction ID: SA11AI.78358 Manchester MD 21102 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP-AREA SALES & MARKETING Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Marsha Butler Date of Receipt Mailing Address 2222 Ebbvale Road M M / 12 31 2015 City State Zip Code Transaction ID: SA11AI.78359 MD Manchester 21102 Amount of Each Receipt this Period FEC ID number of contributing С 25.00 federal political committee. Memo Item Name of Employer Occupation **VP-AREA SALES & MARKETING** GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 625.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional).....

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Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)		
Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) ROBERT M CANNON Mailing Address 354 BORTONS MILL ROAD City CHERRY HILL FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code NJ 08034 C Occupation DIRECTOR-ACCOUNTING Aggregate Year-to-Date ▼ 525.00	Date of Receipt 11 06 2015 Transaction ID: SA11AI.78108 Amount of Each Receipt this Period 25.00 Memo Item
Full Name (Last, First, Middle Initial) ROBERT M CANNON Mailing Address 354 BORTONS MILL ROAD City CHERRY HILL FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code NJ 08034 C Occupation DIRECTOR-ACCOUNTING Aggregate Year-to-Date ▼ 550,00	Date of Receipt 11 20 2015 Transaction ID: SA11AI.78109 Amount of Each Receipt this Period 25.00 Memo Item
Full Name (Last, First, Middle Initial) ROBERT M CANNON Mailing Address 354 BORTONS MILL ROAD City	State Zip Code	Date of Receipt 12 04 2015 Transaction ID: SA11Al.78110
CHERRY HILL FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	NJ 08034 C Occupation DIRECTOR-ACCOUNTING Aggregate Year-to-Date ▼ 575.00	Amount of Each Receipt this Period 25.00 Memo Item
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) ROBERT M CANNON Mailing Address 354 BORTONS MILL ROAD		Date of Receipt
City CHERRY HILL FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code NJ 08034 C Occupation DIRECTOR-ACCOUNTING Aggregate Year-to-Date ▼ 600.00	Transaction ID: SA11AI.78111 Amount of Each Receipt this Period 25.00 Memo Item
Full Name (Last, First, Middle Initial) ROBERT M CANNON Mailing Address 354 BORTONS MILL ROAD City	State Zip Code	Date of Receipt M
CHERRY HILL FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION	NJ 08034 C Occupation DIRECTOR-ACCOUNTING	Amount of Each Receipt this Period 25.00 Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 625,00	
Full Name (Last, First, Middle Initial) Betty Clune Mailing Address 1930 PEBBLE LAKE CIR City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code AL 35235 C Occupation MANAGER-RGNL REV CYC MGMT QA Aggregate Year-to-Date ▼ 420.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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or for commercial purposes, other than using the r NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) Betty Clune Mailing Address 1930 PEBBLE LAKE CIR City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)		State AL Occupation MANAGER	Zip Code 35235	erson for the purpose of soliciting contributions
В.	Full Name (Last, First, Middle Initial) Betty Clune Mailing Address 1930 PEBBLE LAKE CIR City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼		Zip Code 35235	Date of Receipt 12 04 2015 Transaction ID: SA11AI.79073 Amount of Each Receipt this Period 20.00 Memo Item
C.	Full Name (Last, First, Middle Initial) Betty Clune Mailing Address 1930 PEBBLE LAKE CIR City BIRMINGHAM FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For:		Zip Code 35235 -RGNL REV CYC MGMT QA Year-to-Date ▼	Date of Receipt 12 18 2015 Transaction ID : SA11AI.79074 Amount of Each Receipt this Period 20.00 Memo Item

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) Betty Clune Date of Receipt Mailing Address 1930 PEBBLE LAKE CIR 2015 12 31 City Zip Code State Transaction ID: SA11AI.79075 **BIRMINGHAM** AL 35235 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION MANAGER-RGNL REV CYC MGMT QA Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. RICHARD E CODY Date of Receipt Mailing Address 106 DANFORTH PLACE 11 06 2015 City State Zip Code Transaction ID: SA11AI.77990 WILIMINGTON DE 19810 Amount of Each Receipt this Period FEC ID number of contributing 46.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **VP-IS SUPPORT** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 966.00 Full Name (Last, First, Middle Initial) c. RICHARD E CODY Date of Receipt Mailing Address 106 DANFORTH PLACE M M / 11 20 2015 City Zip Code State Transaction ID: SA11AI.77991 DE WILIMINGTON 19810 Amount of Each Receipt this Period FEC ID number of contributing С 46.00 federal political committee. Memo Item Name of Employer Occupation **VP-IS SUPPORT** GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 1012.00 Other (specify) 112.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 9

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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
WILIMINGTON FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify) ▼ Ag	State Zip Code DE 19810 cupation -IS SUPPORT gregate Year-to-Date ▼	Date of Receipt 12 04 2015 Transaction ID: SA11AI.77992 Amount of Each Receipt this Period 46.00 Memo Item
WILIMINGTON FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Proceint For:	State Zip Code DE 19810 cupation -IS SUPPORT gregate Year-to-Date ▼	Date of Receipt 12 18 2015 Transaction ID: SA11AI.77993 Amount of Each Receipt this Period 46.00 Memo Item
WILIMINGTON FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Property For:	State Zip Code DE 19810 cupation -IS SUPPORT Igregate Year-to-Date ▼	Date of Receipt 12 31 2015 Transaction ID : SA11AI.77994 Amount of Each Receipt this Period 46.00 Memo Item
SUBTOTAL of Receipts This Page (optional)		138.00

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Any information copied from such Reports and a commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC			
Full Name (Last, First, Middle Initial) PATRICIA COLANTON Mailing Address 9 WYMAN ROAD City BILLERICA FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	Aggregate	Zip Code 01821 SIDENT-REGNL HUMAN RES Year-to-Date ▼	Date of Receipt 11 06 2015 Transaction ID: SA11AI.78426 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) PATRICIA COLANTON Mailing Address 9 WYMAN ROAD City BILLERICA FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)		Zip Code 01821 SIDENT-REGNL HUMAN RES Year-to-Date ▼ 220.00	Date of Receipt 11 20 2015 Transaction ID: SA11AI.78427 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) PATRICIA COLANTON Mailing Address 9 WYMAN ROAD City BILLERICA FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)		Zip Code 01821 SIDENT-REGNL HUMAN RES Year-to-Date ▼	Date of Receipt 12 04 2015 Transaction ID: SA11AI.78428 Amount of Each Receipt this Period 10.00 Memo Item

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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) PATRICIA COLANTON Mailing Address 9 WYMAN ROAD		Date of Receipt 12 18 2015
City BILLERICA FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code MA 01821 C Occupation VICE PRESIDENT-REGNL HUMAN RES Aggregate Year-to-Date ▼ 240.00	Transaction ID : SA11AI.78429 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) PATRICIA COLANTON Mailing Address 9 WYMAN ROAD City BILLERICA FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	State Zip Code MA 01821 C Occupation VICE PRESIDENT-REGNL HUMAN RES Aggregate Year-to-Date ▼ 250.00	Date of Receipt 12 31 2015 Transaction ID: SA11AI.78430 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) Mary Cook Mailing Address 2520-1 BALD MOUNTAIN RE City CLARKS SUMMIT FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code PA 18411 C Occupation MANAGER-CLINICAL OPERATIONS RN Aggregate Year-to-Date ▼ 210.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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\rangle	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		, , , , , , , , , , , , , , , , , , ,	
Α.	Mailing Address 2520-1 BALD MOUNTAIN RD City CLARKS SUMMIT FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	Aggregate	Zip Code 18411 -CLINICAL OPERATIONS RN Year-to-Date ▼ 220.00	Date of Receipt M M M / 20 2015 Transaction ID: SA11AI.78482 Amount of Each Receipt this Period 10.00 Memo Item
В.	Full Name (Last, First, Middle Initial) Mary Cook Mailing Address 2520-1 BALD MOUNTAIN RD City CLARKS SUMMIT FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼		Zip Code 18411 CLINICAL OPERATIONS RN Year-to-Date ▼ 230.00	Date of Receipt 12 04 2015 Transaction ID: SA11AI.78483 Amount of Each Receipt this Period 10.00 Memo Item
C.	Full Name (Last, First, Middle Initial) Mary Cook Mailing Address 2520-1 BALD MOUNTAIN RD City CLARKS SUMMIT FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)		Zip Code 18411 -CLINICAL OPERATIONS RN Year-to-Date ▼ 240.00	Date of Receipt 12 18 2015 Transaction ID : SA11AI.78484 Amount of Each Receipt this Period 10.00 Memo Item
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	GENESIS HEALTHCARE CORPORATION	MANAGER	-CLII	NICAL OPE	ERATION	IS RN											
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В.	Full Name (Last, First, Middle Initial) MICHELE LYNN CORNWELL							Date of	Re	ceipt							
	Mailing Address 563 BRECKENRIDGE WAY						\neg	M = M	/	D D	/ Y	Y	Y Y	1			
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	City	State		Zip Code						on ID : S							
	SHENANDOAH JUNCTION	WV		25442			\dashv	Amount	of	Each Re	eceipt th	is Per	riod				
	FEC ID number of contributing federal political committee.	С							_	7	-		10.00				
	Name of Employer	Occupation	1				\dashv	Mei	mo I	tem							
	GENESIS HEALTHCARE CORPORATION	ADMINISTR	RATO	OR-SR													
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	Primary General	33 - 3	-														
	Other (specify) ▼		7	1	21	0.00											
C.	Full Name (Last, First, Middle Initial) MICHELE LYNN CORNWELL							Date of	Re	ceipt							
٠.	Mailing Address 563 BRECKENRIDGE WAY						\dashv	M = M	/	D = D	/ Y	Y	Y Y	1			
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	federal political committee.	C				1		<u></u>	_	7	7	_	10.00	_			
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Any information copied from such Reports and Statements may 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 Inc PAC Full Name (Last, First, Middle Initial) MICHELE LYNN CORNWELL Date of Receipt Mailing Address 563 BRECKENRIDGE WAY 2015 12 24 City Zip Code State Transaction ID: SA11AI.78522 WV SHENANDOAH JUNCTION 25442 Amount of Each Receipt this Period FEC ID number of contributing C 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION ADMINISTRATOR-SR Receipt For: Aggregate Year-to-Date ▼ Primary General 230.00 Other (specify) Full Name (Last, First, Middle Initial) B. Antonio Costa Date of Receipt Mailing Address 1062 ELKGROVE AVE 11 06 2015 City State Zip Code Transaction ID: SA11AI.78321 **VENICE** CA 90291 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP-CLINICAL OPERATIONS RN Receipt For:

Other (specify) 210.00 Full Name (Last, First, Middle Initial) c. Antonio Costa Date of Receipt Mailing Address 1062 ELKGROVE AVE 20 11 2015 City State Zip Code Transaction ID: SA11AI.78322 CA **VENICE** 90291 Amount of Each Receipt this Period FEC ID number of contributing C 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP-CLINICAL OPERATIONS RN Receipt For: Aggregate Year-to-Date ▼ Primary General

220.00

Aggregate Year-to-Date ▼

Primary

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General

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not be sold or used by any person for the purpose of soliciting contributions												

Any information copied from such Reports and Statements may 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 Inc PAC Full Name (Last, First, Middle Initial) Antonio Costa Date of Receipt Mailing Address 1062 ELKGROVE AVE 04 2015 12 City State Zip Code Transaction ID: SA11AI.78323 CA **VENICE** 90291 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP-CLINICAL OPERATIONS RN Receipt For: Aggregate Year-to-Date ▼ Primary General 230.00 Other (specify) Full Name (Last, First, Middle Initial) B. Antonio Costa Date of Receipt Mailing Address 1062 ELKGROVE AVE 12 18 2015 City State Zip Code Transaction ID: SA11AI.78324 **VENICE** CA 90291 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP-CLINICAL OPERATIONS RN Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 240.00 Full Name (Last, First, Middle Initial) c. Antonio Costa Date of Receipt Mailing Address 1062 ELKGROVE AVE 12 31 2015 City State Zip Code Transaction ID: SA11AI.78325 CA **VENICE** 90291 Amount of Each Receipt this Period FEC ID number of contributing С 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP-CLINICAL OPERATIONS RN Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify)

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not be sold or used by any person for the purpose of soliciting contributions											

	Statements may not be sold or used by any perse name and address of any political committee to	
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) A. Michelle Costa Mailing Address 109 Jillian Way City Westport FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION	State Zip Code MA 02790 C Occupation VP-CLINICAL OPERATIONS RN	Date of Receipt 11 06 2015 Transaction ID: SA11AI.78282 Amount of Each Receipt this Period 50.00 Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00	
Full Name (Last, First, Middle Initial) Michelle Costa Mailing Address 109 Jillian Way	Date of Receipt	
City Westport FEC ID number of contributing federal political committee.	State Zip Code MA 02790	Transaction ID : SA11AI.78283 Amount of Each Receipt this Period 50.00
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation VP-CLINICAL OPERATIONS RN Aggregate Year-to-Date ▼ 1100.00	Memo Item
Full Name (Last, First, Middle Initial) Michelle Costa Mailing Address 109 Jillian Way City Westport FEC ID number of contributing	State Zip Code MA 02790	Date of Receipt 12 04 2015 Transaction ID: SA11AI.78284 Amount of Each Receipt this Period 50.00
rederal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify) ▼	Occupation VP-CLINICAL OPERATIONS RN Aggregate Year-to-Date ▼ 1150.00	Memo Item
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			person for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc P.	AC		
Full Name (Last, First, Middle Initial) Michelle Costa			Date of Receipt
Mailing Address 109 Jillian Way			12 18 2015
City Westport	State MA	Zip Code 02790	Transaction ID : SA11AI.78285 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer GENESIS HEALTHCARE CORPORAT	Occupation TON VP-CLINICA	L OPERATIONS RN	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate \	∕ear-to-Date ▼ 1200.00	
Full Name (Last, First, Middle Initial) B. Michelle Costa			Date of Receipt
Mailing Address 109 Jillian Way			12 31 2015
City	State	Zip Code	Transaction ID : SA11AI.78286
Westport	MA	02790	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00

GE	me of Employer NESIS HEALTHCARE CORPORATION ceipt For: Primary General Other (specify)	Occupation VP-CLINICAL OPERATIONS RN Aggregate Year-to-Date ▼ 1250.00	Memo Item
c . <u>V</u>	I Name (Last, First, Middle Initial) ICKIE L COX illing Address 5760 SUMMIT BRIDGE ROA	D	Date of Receipt 11 06 2015
	DWNSEND	State Zip Code DE 19734	Transaction ID : SA11AI.77881 Amount of Each Receipt this Period
fed	C ID number of contributing eral political committee.	C	20.00 Memo Item
GE	me of Employer ENESIS HEALTHCARE CORPORATION ceipt For: Primary General Other (specify)	Occupation ADMINISTRATOR-EXECUTIVE Aggregate Year-to-Date ▼ 420.00	
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not be sold or used by any pedress of any political committee		· ·								

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) VICKIE L COX Date of Receipt Mailing Address 5760 SUMMIT BRIDGE ROAD 20 2015 11 City State Zip Code Transaction ID: SA11AI.77882 DE **TOWNSEND** 19734 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION ADMINISTRATOR-EXECUTIVE Receipt For: Aggregate Year-to-Date ▼ Primary General 440.00 Other (specify) Full Name (Last, First, Middle Initial) B. VICKIE L COX Date of Receipt Mailing Address 5760 SUMMIT BRIDGE ROAD 12 04 2015 City State Zip Code Transaction ID: SA11AI.77883 **TOWNSEND** DE 19734 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION ADMINISTRATOR-EXECUTIVE Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 460,00 Full Name (Last, First, Middle Initial) c. VICKIE L COX Date of Receipt Mailing Address 5760 SUMMIT BRIDGE ROAD M M / 12 18 2015 City State Zip Code Transaction ID: SA11AI.77884 DE **TOWNSEND** 19734 Amount of Each Receipt this Period FEC ID number of contributing С 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION ADMINISTRATOR-EXECUTIVE Receipt For: Aggregate Year-to-Date ▼ Primary General 480.00 Other (specify) 60.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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or for commercial purposes, other than using the		y any person for the purpose of soliciting contributions of mmittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) VICKIE L COX Mailing Address 5760 SUMMIT BRIDGE ROA City TOWNSEND FEC ID number of contributing federal political committee.	State Zip Code DE 19734	Date of Receipt 12 31 2015 Transaction ID : SA11AI.77885 Amount of Each Receipt this Period 20.00
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	Occupation ADMINISTRATOR-EXECUTIVE Aggregate Year-to-Date ▼ 500.	Memo Item
Full Name (Last, First, Middle Initial) 3. John Crotty Mailing Address 13 KIMBERLY DR		Date of Receipt 11 06 2015
City SOUTH HADLEY FEC ID number of contributing federal political committee.	State Zip Code MA 01075	Transaction ID : SA11AI.78747 Amount of Each Receipt this Period 20.00
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: □ Primary □ General Other (specify) ▼	Occupation ADMINISTRATOR Aggregate Year-to-Date ▼ 420.	Memo Item
Full Name (Last, First, Middle Initial) 2. John Crotty Mailing Address 13 KIMBERLY DR		Date of Receipt 11 20 2015
City SOUTH HADLEY FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	State Zip Code MA 01075 C Occupation ADMINISTRATOR Aggregate Year-to-Date ▼ 440.	Transaction ID : SA11AI.78748 Amount of Each Receipt this Period 20.00 Memo Item
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Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) John Crotty Date of Receipt Mailing Address 13 KIMBERLY DR 04 2015 12 City State Zip Code Transaction ID: SA11AI.78749 MA SOUTH HADLEY 01075 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **ADMINISTRATOR** Receipt For: Aggregate Year-to-Date ▼ Primary General 460.00 Other (specify) Full Name (Last, First, Middle Initial) B. John Crotty Date of Receipt Mailing Address 13 KIMBERLY DR 12 18 2015 City State Zip Code Transaction ID: SA11AI.78750 SOUTH HADLEY MA 01075 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **ADMINISTRATOR** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 480,00 Full Name (Last, First, Middle Initial) c. Mary Crotty Date of Receipt Mailing Address 6 Munroe Drive 06 11 2015 City State Zip Code Transaction ID: SA11AI.78402 MA Rockport 01966 Amount of Each Receipt this Period FEC ID number of contributing С 35.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP-QUALITY IMPROVEMENT Receipt For: Aggregate Year-to-Date ▼ Primary General 735.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional).....

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Any information copied from such Reports and State or for commercial purposes, other than using the na	ments may not be sold or used by any persor me and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)	<u>,</u>						
Genesis Healthcare Inc PAC							
Full Name (Last, First, Middle Initial) A. Mary Crotty		Date of Receipt					
Mailing Address 6 Munroe Drive		11 20 2015					
City	State Zip Code	Transaction ID : SA11AI.78403					
Rockport	MA 01966	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	35.00					
Name of Employer O	ccupation	Memo Item					
	P-QUALITY IMPROVEMENT						
	aggregate Year-to-Date ▼						
Primary General Other (specify) ▼	770.00						
Full Name (Last, First, Middle Initial) Mary Crotty		Date of Receipt					
Mailing Address 6 Munroe Drive		12 04 2015					
City	State Zip Code	Transaction ID : SA11AI.78404					
Rockport	MA 01966	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	35.00					
	ecupation	Memo Item					
	P-QUALITY IMPROVEMENT						
	ggregate Year-to-Date ▼						
Primary General Other (specify) ▼	805.00						
Full Name (Last, First, Middle Initial) C. Mary Crotty		Date of Receipt					
Mailing Address 6 Munroe Drive		12 18 _ 2015 _					
City	State Zip Code	Transaction ID : SA11AI.78405					
Rockport	MA 01966	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	35.00					
Name of Employer O	ecupation	Memo Item					
	P-QUALITY IMPROVEMENT						
	ggregate Year-to-Date ▼						
Primary General Other (specify) ▼	840.00						
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	not be sold or used by any person for the purpose of soliciting contributions less of any political committee to solicit contributions from such committee.									

or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Α.	Full Name (Last, First, Middle Initial) Mary Crotty		Date of Receipt
	Mailing Address 6 Munroe Drive		12 31 _ 2015 _
	City	State Zip Code	Transaction ID : SA11AI.78406
	Rockport	MA 01966	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	35.00
	Name of Employer	Occupation	Memo Item
	GENESIS HEALTHCARE CORPORATION	VP-QUALITY IMPROVEMENT	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	875.00	
В.	Full Name (Last, First, Middle Initial) KENNETH CULLEROT		Date of Receipt
	Mailing Address 44 TANGLEWOOD DRIVE		11 06 2015
	City	State Zip Code	Transaction ID : SA11AI.77804
	HENNIKER	NH 03242	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer	Occupation	Memo Item
	GENESIS HEALTH VENTURES, INC.	VP & REGIONAL CONTROLLER	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1050.00	
c.	Full Name (Last, First, Middle Initial) KENNETH CULLEROT		Date of Receipt
	Mailing Address 44 TANGLEWOOD DRIVE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City HENNIKER	State Zip Code NH 03242	Transaction ID : SA11AI.77805
		1011 03242	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer	Occupation	Memo Item
	GENESIS HEALTH VENTURES, INC.	VP & REGIONAL CONTROLLER	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼	1100.00	
s	UBTOTAL of Receipts This Page (optional)		135.00
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$\left. \right\rangle$	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC											
Α.	Full Name (Last, First, Middle Initial) KENNETH CULLEROT					Date of	Rec	ceipt				
	Mailing Address 44 TANGLEWOOD DRIVE					12	/	04	/ Y	201	Y Y 5	
	City HENNIKER	State NH	Zip Code 03242						SA11AI.7			
	FEC ID number of contributing federal political committee.	С					_	,	-	-	50.00	
	Name of Employer	Occupation				Mer	mo It	em				
	GENESIS HEALTH VENTURES, INC. Receipt For:		NAL CONTRO	•								
	Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼	1150.00								
В.	Full Name (Last, First, Middle Initial) KENNETH CULLEROT					Date of	Rec	ceipt				
	Mailing Address 44 TANGLEWOOD DRIVE					12	/	18	/ Y	201	Y Y	
	City	State NH	Zip Code						SA11AI.7			
	FEC ID number of contributing federal political committee.	С	03242			Amount	of E	each R	eceipt thi	_	fiod 50.00	
	Name of Employer GENESIS HEALTH VENTURES, INC.	Occupation VP & REGIO	NAL CONTRO	DLLER		Mer	mo It	em				
	Receipt For: Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼	1200.00								
— С.	Full Name (Last, First, Middle Initial) KENNETH CULLEROT					Date of	Rec	ceipt				
	Mailing Address 44 TANGLEWOOD DRIVE					M M	/	31	/ Y	201		
	City HENNIKER	State NH	Zip Code 03242						SA11AI.7 eceipt thi			
	FEC ID number of contributing federal political committee.	С						,	7		50.00	
	Name of Employer	Occupation				Mer	mo It	em				
	GENESIS HEALTH VENTURES, INC. Receipt For:		ONAL CONTRO									
	Primary General	Aggregate `	Year-to-Date ▼									
	Other (specify) ▼		, , ,	1250.00								
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) JEFF CUNNINGHAM Mailing Address 831 FOUR STREAMS DRIVE	Date of Receipt	
City WEST CHESTER FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTH VENTURES, INC. Receipt For: Primary General Other (specify) ▼	State Zip Code PA 19382 C Occupation DIRECTOR-CENTRAL BUSINESS OFFC Aggregate Year-to-Date ▼ 1050.00	11 06 2015 Transaction ID : SA11AI.78127 Amount of Each Receipt this Period 50.00 Memo Item
Full Name (Last, First, Middle Initial) JEFF CUNNINGHAM Mailing Address 831 FOUR STREAMS DRIVE City	State Zip Code	Date of Receipt 11 20 2015
WEST CHESTER FEC ID number of contributing federal political committee.	PA 19382	Transaction ID : SA11AI.78128 Amount of Each Receipt this Period 50.00
Name of Employer GENESIS HEALTH VENTURES, INC. Receipt For: Primary General Other (specify) ▼	Occupation DIRECTOR-CENTRAL BUSINESS OFFC Aggregate Year-to-Date ▼ 1100.00	Memo Item
Full Name (Last, First, Middle Initial) JEFF CUNNINGHAM Mailing Address 831 FOUR STREAMS DRIVE City WEST CHESTER FEC ID number of contributing federal political committee. Name of Employer	State Zip Code PA 19382 C Occupation	Date of Receipt 12 04 2015 Transaction ID : SA11AI.78129 Amount of Each Receipt this Period 50.00 Memo Item
GENESIS HEALTH VENTURES, INC. Receipt For: Primary General Other (specify) ▼	DIRECTOR-CENTRAL BUSINESS OFFC Aggregate Year-to-Date ▼ 1150.00	
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Any information copied from such Reports and State or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) JEFF CUNNINGHAM Mailing Address 831 FOUR STREAMS DRIVE City WEST CHESTER FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTH VENTURES, INC. Receipt For: Primary General Other (specify)	State Zip Code PA 19382 C Occupation DIRECTOR-CENTRAL BUSINESS OFFC Aggregate Year-to-Date ▼ 1200.00	Date of Receipt 12 18 2015 Transaction ID: SA11AI.78130 Amount of Each Receipt this Period 50.00 Memo Item
Full Name (Last, First, Middle Initial) JEFF CUNNINGHAM Mailing Address 831 FOUR STREAMS DRIVE City WEST CHESTER FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTH VENTURES, INC. Receipt For: Primary General Other (specify)	State Zip Code PA 19382 C Occupation DIRECTOR-CENTRAL BUSINESS OFFC Aggregate Year-to-Date ▼ 1250.00	Date of Receipt 12 31 2015 Transaction ID: SA11AI.78131 Amount of Each Receipt this Period 50.00 Memo Item
Full Name (Last, First, Middle Initial) PAULA D'AMICO Mailing Address 12 FLYWAY DRIVE City NEWTOWN SQUARE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code PA 19073 C Occupation VP-PROJECT MANAGEMENT Aggregate Year-to-Date 1680.00	Date of Receipt 11 06 2015 Transaction ID: SA11AI.78541 Amount of Each Receipt this Period 80.00 Memo Item
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number of	·	180.00

FOR LINE NUMBER: PAGE 66 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16

ITEMIZED RECEIPTS 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 Inc PAC Full Name (Last, First, Middle Initial) PAULA D'AMICO Date of Receipt Mailing Address 12 FLYWAY DRIVE 2015 11 20 City Zip Code State Transaction ID: SA11AI.78542 PΑ **NEWTOWN SQUARE** 19073 Amount of Each Receipt this Period FEC ID number of contributing 80.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP-PROJECT MANAGEMENT Receipt For: Aggregate Year-to-Date ▼ Primary General 1760.00 Other (specify) Full Name (Last, First, Middle Initial) B. PAULA D'AMICO Date of Receipt Mailing Address 12 FLYWAY DRIVE 12 04 2015 City State Zip Code Transaction ID: SA11AI.78543 **NEWTOWN SQUARE** PA 19073 Amount of Each Receipt this Period FEC ID number of contributing 80.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP-PROJECT MANAGEMENT Receipt For: Aggregate Year-to-Date ▼ Primary General 1840.00 Other (specify) Full Name (Last, First, Middle Initial) c. PAULA D'AMICO Date of Receipt Mailing Address 12 FLYWAY DRIVE M M / 12 18 2015 State Zip Code Transaction ID: SA11AI.78544 PΑ **NEWTOWN SQUARE** 19073 Amount of Each Receipt this Period FEC ID number of contributing С 80.00 federal political committee. Memo Item Name of Employer Occupation VP-PROJECT MANAGEMENT GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 1920.00 Other (specify) 240.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

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not be sold or used by any pedress of any political committee												

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) PAULA D'AMICO Date of Receipt Mailing Address 12 FLYWAY DRIVE 31 2015 12 City State Zip Code Transaction ID: SA11AI.78545 PΑ **NEWTOWN SQUARE** 19073 Amount of Each Receipt this Period FEC ID number of contributing C 80.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP-PROJECT MANAGEMENT Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) B. KEITH DAVIS Date of Receipt Mailing Address 33 RICKLAND DRIVE 11 06 2015 City State Zip Code Transaction ID: SA11AI.77946 **SEWELL** NJ 08080 Amount of Each Receipt this Period FEC ID number of contributing 65.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **DIRECTOR-REIMBURSEMENT** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1365.00 Full Name (Last, First, Middle Initial) c. KEITH DAVIS Date of Receipt Mailing Address 33 RICKLAND DRIVE 20 11 2015 City State Zip Code Transaction ID: SA11AI.77947 NJ **SEWELL** 08080 Amount of Each Receipt this Period FEC ID number of contributing С 65.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **DIRECTOR-REIMBURSEMENT** Receipt For: Aggregate Year-to-Date ▼ Primary General 1430.00 Other (specify)

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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC				
Full Name (Last, First, Middle Initial) A. KEITH DAVIS			Date of Receipt	
Mailing Address 33 RICKLAND DRIVE			12 04 2015	
City SEWELL	State NJ	Zip Code 08080	Transaction ID : SA11AI.77948 Amount of Each Receipt this Period	od
FEC ID number of contributing federal political committee.	C			5.00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation	R-REIMBURSEMENT	Memo Item	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1495.00		
Full Name (Last, First, Middle Initial) B. KEITH DAVIS			Date of Receipt	
Mailing Address 33 RICKLAND DRIVE			12 18 2015	Y
City SEWELL	State NJ	Zip Code 08080	Transaction ID : SA11AI.77949 Amount of Each Receipt this Perio	od
FEC ID number of contributing federal political committee.	C			5.00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation DIRECTOR	-REIMBURSEMENT	Memo Item	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1560.00		
Full Name (Last, First, Middle Initial) C. KEITH DAVIS			Date of Receipt	
Mailing Address 33 RICKLAND DRIVE			12 31 2015	Y
City SEWELL	State NJ	Zip Code 08080	Transaction ID : SA11AI.77950 Amount of Each Receipt this Peric	od
FEC ID number of contributing federal political committee.	C			5.00
Name of Employer	Occupation		Memo Item	
GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼		R-REIMBURSEMENT Year-to-Date ▼ 1625.00		
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line numb			199	5.00

		LINE			:	PAGE	6	9 (OF	375
Use separate schedule(s)	(che	ck only	or	ne)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		17
not be sold or used by any person for the purpose of soliciting contributions										

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contribu 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 Inc PAC Full Name (Last, First, Middle Initial) CAROLYN DIEFENDERFER Date of Receipt Mailing Address 1 DUBB DRIVE 06 2015 11 City Zip Code State Transaction ID: SA11AI.78039 DE **NEWARK** 19702 Amount of Each Receipt this Period FEC ID number of contributing 55.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTH VENTURES, INC. DIRECTOR-CORPORATE BILLING SYS Receipt For: Aggregate Year-to-Date ▼ Primary General 1155.00 Other (specify) Full Name (Last, First, Middle Initial) B. CAROLYN DIEFENDERFER Date of Receipt Mailing Address 1 DUBB DRIVE 20 11 2015 City State Zip Code Transaction ID: SA11AI.78040 **NEWARK** DE 19702 Amount of Each Receipt this Period FEC ID number of contributing 55.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTH VENTURES, INC. **DIRECTOR-CORPORATE BILLING SYS** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1210.00 Full Name (Last, First, Middle Initial) c. CAROLYN DIEFENDERFER Date of Receipt Mailing Address 1 DUBB DRIVE 04 12 2015 City State Zip Code Transaction ID: SA11AI.78041 DE **NEWARK** 19702 Amount of Each Receipt this Period FEC ID number of contributing С 55.00 federal political committee. Memo Item Name of Employer Occupation DIRECTOR-CORPORATE BILLING SYS GENESIS HEALTH VENTURES, INC. Receipt For: Aggregate Year-to-Date ▼ Primary General 1265.00 Other (specify) 165.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

9

Image# 201603089009663483		
SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 OF 375 (check only one) X 11a
Any information copied from such Reports and Statements ${\bf m}$ or for commercial purposes, other than using the name and		
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) A. CAROLYN DIEFENDERFER		Date of Receipt
Mailing Address 1 DUBB DRIVE		M = M / D = D / Y = Y = Y

NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) A. CAROLYN DIEFENDERFER		Date of Receipt
Mailing Address 1 DUBB DRIVE		12 18 _ 2015 _
City NEWARK	State Zip Code DE 19702	Transaction ID : SA11AI.78042 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	55.00
Name of Employer GENESIS HEALTH VENTURES, INC. Receipt For: Primary General Other (specify)	Occupation DIRECTOR-CORPORATE BILLING SYS Aggregate Year-to-Date ▼ 1320.00	Memo Item
Full Name (Last, First, Middle Initial) B. CAROLYN DIEFENDERFER		Date of Receipt
Mailing Address 1 DUBB DRIVE City NEWARK	State Zip Code DE 19702	12 31 2015 Transaction ID : SA11AI.78043 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	55.00
Name of Employer GENESIS HEALTH VENTURES, INC.	Occupation DIRECTOR-CORPORATE BILLING SYS	- Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1375.00	
Full Name (Last, First, Middle Initial) C. THOMAS DIVITTORIO		Date of Receipt
Mailing Address 20 SHEFFIELD DRIVE		11 06 2015
City WEST GROVE	State Zip Code PA 19390	Transaction ID : SA11AI.78195 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.00
Name of Employer GENESIS HEALTH VENTURES, INC.	Occupation VP & ASST CORPORATE CONTROLLER	- Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4032.00	
SUBTOTAL of Receipts This Page (optional	al)	302.00
TOTAL This Period (last page this line num	nber only)	

FOR LINE NUMBER: PAGE 71 OF 375

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and State or for commercial purposes, other than using the nar		
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
WEST GROVE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTH VENTURES, INC. Receipt For: Primary General Other (specify) ▼	State Zip Code PA 19390 C ccupation P & ASST CORPORATE CONTROLLER ggregate Year-to-Date ▼ 4224.00	Date of Receipt 11 20 2015 Transaction ID: SA11AI.78196 Amount of Each Receipt this Period 192.00 Memo Item
WEST GROVE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTH VENTURES, INC.	State Zip Code PA 19390 C ccupation P & ASST CORPORATE CONTROLLER ggregate Year-to-Date ▼ 4416.00	Date of Receipt 12 04 2015 Transaction ID : SA11AI.78197 Amount of Each Receipt this Period 192.00 Memo Item
WEST GROVE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTH VENTURES, INC. VIEW Descript For:	State Zip Code PA 19390 C ccupation P & ASST CORPORATE CONTROLLER ggregate Year-to-Date 4608.00	Date of Receipt 12
SUBTOTAL of Receipts This Page (optional)	·	576.00

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:						PAGE 72 OF 375					
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Any information copied from such Reports and S or for commercial purposes, other than using the										
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		- '								
Full Name (Last, First, Middle Initial) THOMAS DIVITTORIO					Date of	Rece	eipt			
Mailing Address 20 SHEFFIELD DRIVE City	State	Zip Code		_	12	/ actio	31 n ID : S/	L	2015 8199	Y
WEST GROVE	PA	19390			Amount					
FEC ID number of contributing federal political committee.	С							7	192.0	00
Name of Employer	Occupation				Men	no Ite	m			
GENESIS HEALTH VENTURES, INC. Receipt For:	VP & ASST	CORPORATE C	ONTROLLER							
Primary General	Aggregate	Year-to-Date ▼								
Other (specify) ▼			4800.00							
Full Name (Last, First, Middle Initial) 3. Jason Dobry					Date of	Rece	eipt			
Mailing Address 421 PRESCOTT DRIVE					M = M	/	06	/ Y	2015	Y
City CHESTER SPRINGS	State PA	Zip Code 19425			Transa Amount		n ID : SA ach Red			
FEC ID number of contributing federal political committee.	С				Mon	no Ito		7	40.0	00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation DIRECTOR	-SR. SPEND MG	MT		Men	no Ite	m			
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General Other (specify) ▼		A A	840.00							
Full Name (Last, First, Middle Initial) C. Jason Dobry					Date of	Rece	eipt			
Mailing Address 421 PRESCOTT DRIVE					M - M	/	20		2015	Y
City	State	Zip Code			Transa		n ID : S	A11AI.7	8962	
CHESTER SPRINGS	PA	19425		-	Amount	of E	ach Rec	eipt this	Period	
FEC ID number of contributing federal political committee.	С							7	40.0	00
Name of Employer	Occupation				Men	no Ite	m			
GENESIS HEALTHCARE CORPORATION Receipt For:	-	-SR. SPEND MG	MT	_						
Primary General	Aggregate	Year-to-Date ▼								
Other (specify) ▼	L		880.00							
SUBTOTAL of Receipts This Page (optional)			>			,		1	272.0	0
TOTAL This Period (last page this line number	only)		>					7		

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	(check city che)
		ny person for the purpose of soliciting contributions mittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) Jason Dobry Mailing Address 421 PRESCOTT DRIVE City CHESTER SPRINGS FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For:	State Zip Code PA 19425 C Occupation DIRECTOR-SR. SPEND MGMT Aggregate Year-to-Date ▼	Date of Receipt 12 04 2015 Transaction ID: SA11AI.78963 Amount of Each Receipt this Period 40.00 Memo Item
Primary General Other (specify) ▼	920.00	
Full Name (Last, First, Middle Initial) B. Jason Dobry Mailing Address 421 PRESCOTT DRIVE		Date of Receipt 12 18 2015
City CHESTER SPRINGS	State Zip Code	Transaction ID : SA11AI.78964

	Name of Employer	Occupation	Memo Item
	GENESIS HEALTHCARE CORPORATION	DIRECTOR-SR. SPEND MGMT	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 920.00	
В.	Full Name (Last, First, Middle Initial) Jason Dobry		Date of Receipt
	Mailing Address 421 PRESCOTT DRIVE City	State Zip Code	12 18 2015
	CHESTER SPRINGS	PA 19425	Transaction ID : SA11AI.78964
	FEC ID number of contributing federal political committee.	C 13423	Amount of Each Receipt this Period 40.00
	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation DIRECTOR-SR. SPEND MGMT	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 960.00	
C.	Full Name (Last, First, Middle Initial) Jason Dobry		Date of Receipt
	Mailing Address 421 PRESCOTT DRIVE		12 31 2015
	City	State Zip Code	Transaction ID : SA11AI.78965
	CHESTER SPRINGS	PA 19425	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer	Occupation	Memo Item
	GENESIS HEALTHCARE CORPORATION	DIRECTOR-SR. SPEND MGMT	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Ş	SUBTOTAL of Receipts This Page (optional)	>	120.00

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

	FOR LINE NUMBER:	PAGE 74 OF 375
Use separate schedule(s) for each category of the	(check only one)	
Detailed Summary Page	X 11a 11b	11c 12
zotanou cummary rago	13 14	15 16 17
not be sold or used by any pe	erson for the purpose of s	soliciting contributions
dress of any political committee	to solicit contributions from	om such committee.

	Detailed Suffillary Fage	13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) CAROL DOCKEY Mailing Address 46 ECHO LANE		Date of Receipt
City	State Zip Code	11 06 2015 Transaction ID : SA11Al.78365
TREMONT FEC ID number of contributing federal political committee.	PA 17981	Amount of Each Receipt this Period 10.00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation ADMINISTRATOR	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial) CAROL DOCKEY Mailing Address 46 ECHO LANE		Date of Receipt
City TREMONT	State Zip Code PA 17981	11 20 2015 Transaction ID : SA11AI.78366 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	10.00 Memo Item
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For:	Occupation ADMINISTRATOR	Memortem
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	
Full Name (Last, First, Middle Initial) CAROL DOCKEY		Date of Receipt
Mailing Address 46 ECHO LANE City	State Zip Code	12 04 2015 Transaction ID : SA11AI.78367
TREMONT	PA 17981	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation ADMINISTRATOR	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	
SUBTOTAL of Receipts This Page (optional)		30.00
TOTAL This Period (last page this line number	only)	

		FOR LINE NUMBER: PAGE 75 OF 375								'5	
Use separate schedule(s) for each category of the	(0	he	ck only	or	ie)						
Detailed Summary Page		X	11a		11b		11c		12		
			13		14		15		16	1	7
not be sold or used by any pedress of any political committee							_				

		13 14 15 16
Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and a	ay not be sold or used by any personddress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) • CAROL DOCKEY		Date of Receipt
Mailing Address 46 ECHO LANE		12 18 2015
City State	Zip Code	Transaction ID : SA11AI.78368
TREMONT PA	17981	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		10.00
Name of Employer Occupation	l	Memo Item
GENESIS HEALTHCARE CORPORATION ADMINIST	RATOR	
	Year-to-Date ▼	
Primary General Other (specify) ▼	240.00	
Full Name (Last, First, Middle Initial) CAROL DOCKEY		Date of Receipt
Mailing Address 46 ECHO LANE		12 31 2015
City State	Zip Code	Transaction ID : SA11AI.78369
TREMONT PA	17981	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		10.00
Name of Employer Occupation		Memo Item
GENESIS HEALTHCARE CORPORATION ADMINISTR	RATOR	
	Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) C. Novaleigh Dodge-Krupa		Date of Receipt
Mailing Address 162 PLEASANT STREET		11 06 2015
City State	Zip Code	Transaction ID : SA11AI.78258
READING MA	01867	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		40.00
Name of Employer Occupation		Memo Item
	TIONS REHAB SERVICES	
	Year-to-Date ▼	
Primary General Other (specify) ▼	840.00	
SUBTOTAL of Receipts This Page (optional)		60.00
TOTAL This Period (last page this line number only)	•	

Use separate schedule(s)	FOR LINE NUMBER: PAGE 76 OF 375 (check only one)							
for each category of the Detailed Summary Page	X 11a 11b 11c 12							
	erson for the purpose of soliciting contributions to solicit contributions from such committee.	-						
	Date of Receipt	-						

		tatements may not be sold or used by any personame and address of any political committee to	
\geq	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Α.	Full Name (Last, First, Middle Initial) Novaleigh Dodge-Krupa Mailing Address 162 PLEASANT STREET		Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
	City READING	State Zip Code MA 01867	Transaction ID : SA11AI.78259 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VP OPERATIONS REHAB SERVICES	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 880.00	
В.	Full Name (Last, First, Middle Initial) Novaleigh Dodge-Krupa Mailing Address 162 PLEASANT STREET		Date of Receipt
	City READING	State Zip Code MA 01867	12 04 2015 Transaction ID : SA11AI.78260 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	40.00
	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VP OPERATIONS REHAB SERVICES	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 920.00	
С.	Full Name (Last, First, Middle Initial) Novaleigh Dodge-Krupa		Date of Receipt
	Mailing Address 162 PLEASANT STREET	7.0.1	12 18 2015
	READING	State Zip Code MA 01867	Transaction ID : SA11AI.78261 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VP OPERATIONS REHAB SERVICES	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 960.00	
s	UBTOTAL of Receipts This Page (optional)		120.00
т	OTAL This Period (last page this line number	only)	

City

City

City

Primary

Other (specify)

General

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 77 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16 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 Inc PAC Full Name (Last, First, Middle Initial) Novaleigh Dodge-Krupa Date of Receipt Mailing Address 162 PLEASANT STREET 2015 12 31 Zip Code State Transaction ID: SA11AI.78262 READING MA 01867 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP OPERATIONS REHAB SERVICES Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. SHAWN P EDDY Date of Receipt Mailing Address 5109 BRIAR MEADOW DRIVE 11 06 2015 State Zip Code Transaction ID: SA11AI.78069 **CROSS LANES** WV 25313 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VICE PRESIDENT-CENTERS GROUP Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 420,00 Full Name (Last, First, Middle Initial) c. SHAWN P EDDY Date of Receipt Mailing Address 5109 BRIAR MEADOW DRIVE M M / 11 20 2015 Zip Code State Transaction ID: SA11AI.78070 WV **CROSS LANES** 25313 Amount of Each Receipt this Period FEC ID number of contributing С 20.00 federal political committee. Memo Item Name of Employer Occupation VICE PRESIDENT-CENTERS GROUP GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼

440.00

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80.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 78 OF 375 (check only one)
TEMIZED RECEIL TO		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC			
Full Name (Last, First, Middle Initial) A. SHAWN P EDDY			Date of Receipt
Mailing Address 5109 BRIAR MEADOW DRIV	Έ		12 04 2015
City CROSS LANES	State WV	Zip Code 25313	Transaction ID : SA11AI.78071 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		20.00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VICE PRES	SIDENT-CENTERS GROUP	Memo Item
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 460.00	
Full Name (Last, First, Middle Initial) 3. SHAWN P EDDY			Date of Receipt
Mailing Address 5109 BRIAR MEADOW DRIV	E		12 18 2015
City CROSS LANES	State WV	Zip Code 25313	Transaction ID : SA11AI.78072 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		20.00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VICE PRES	SIDENT-CENTERS GROUP	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 480.00	
Full Name (Last, First, Middle Initial) SHAWN P EDDY			Date of Receipt
Mailing Address 5109 BRIAR MEADOW DRIV	Έ		12 31 2015
City CROSS LANES	State WV	Zip Code 25313	Transaction ID : SA11AI.78073 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		20.00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VICE PRES	SIDENT-CENTERS GROUP	Memo Item
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 500.00	

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

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

60.00

FOR LINE NUMBER: PAGE 79 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12

	Detailed Summary Page	13 14 15 16 17
	I Statements may not be sold or used by any pers the name and address of any political committee to	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC	· ·	
Full Name (Last, First, Middle Initial) A. DAWN L EDWARDS		Date of Receipt
Mailing Address 22618 CAMRYN WAY		11 06 2015
City QUEEN ANNE	State Zip Code MD 21657	Transaction ID : SA11AI.78024 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer	Occupation MANACER CLINICAL OPERATIONS PN	- Memo Item
GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	MANAGER-CLINICAL OPERATIONS RN Aggregate Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial) B. DAWN L EDWARDS		Date of Receipt
Mailing Address 22618 CAMRYN WAY		11 20 2015
City QUEEN ANNE	State Zip Code MD 21657	Transaction ID : SA11AI.78025 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	10.00 Memo Item
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation MANAGER-CLINICAL OPERATIONS RN	Wellio itelli
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	
Full Name (Last, First, Middle Initial) C. DAWN L EDWARDS		Date of Receipt
Mailing Address 22618 CAMRYN WAY		12 04 2015
City QUEEN ANNE	State Zip Code MD 21657	Transaction ID : SA11AI.78026 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	Occupation MANAGER-CLINICAL OPERATIONS RN Aggregate Year-to-Date ▼ 230.00	Memo Item
SUBTOTAL of Receipts This Page (optional).	·····	30.00
TOTAL This Period (last page this line number	er only)	

Use separate schedule(s)	FOR LINE NUMBER: PAGE 80 OF 375	
for each category of the Detailed Summary Page	(check only one)	
	13 14 15 16 17	
, , ,	erson for the purpose of soliciting contributions to solicit contributions from such committee.	

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Any information copied from such Reports and S or for commercial purposes, other than using the									
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC									
Full Name (Last, First, Middle Initial) DAWN L EDWARDS Mailing Address 22618 CAMRYN WAY					M = M			Y	Y
City QUEEN ANNE	State MD	Zip Code 21657				action ID :	SA11AI.		_
FEC ID number of contributing federal political committee.	С				Mer	no Item	7	10.0	
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For:		·CLINICAL OP Year-to-Date ¶		RN	III Mei	no item			
Primary General Other (specify) ▼		7	240.00						
Full Name (Last, First, Middle Initial) B. DAWN L EDWARDS Mailing Address 22618 CAMRYN WAY					Date of	Receipt	D / Y	YYY	Υ
City QUEEN ANNE	State MD	Zip Code 21657				31 action ID : of Each F	SA11AI.7		
FEC ID number of contributing federal political committee.	С							10.0	00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation MANAGER-	CLINICAL OP	ERATIONS R	N	I	no item			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date	250.00						
Full Name (Last, First, Middle Initial) C. J. Richard Edwards					Date of	Receipt			
Mailing Address 29 SOUTHAMPTON PARISH	l ROAD				M = M	06		2015	Y
City LANDENBERG	State PA	Zip Code 19350				action ID : of Each F			
FEC ID number of contributing federal political committee.	С						7	70.0	00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VP AND TR	EASURER			Mer	no Item			
Receipt For: Primary General	Aggregate	Year-to-Date \		-					
Other (specify) ▼		7 7	980.00	,					
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FEC ID number of contributing federal political committee.

Name of Employer

Occupation

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and Statem	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 81 OF 375 (check only one) X 11a
or for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
LANDENBERG FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Proposite For:	State Zip Code PA 19350	Date of Receipt 11 20 2015 Transaction ID: SA11AI.78566 Amount of Each Receipt this Period 70.00 Memo Item
- •	State Zip Code PA 19350	Date of Receipt 12 04 2015 Transaction ID : SA11Al.78567 Amount of Each Receipt this Period

Memo Item

	Receipt For: Primary Other (specify)	VP AND TREASURER Aggregate Year-to-Date ▼ 1120.00	
C.	Full Name (Last, First, Middle Initial) J. Richard Edwards Mailing Address 29 SOUTHAMPTON PARISH City	f ROAD State Zip Code	Date of Receipt 12 18 2015 Transaction ID : SA11AI.78568
	LANDENBERG FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	PA 19350 C Occupation VP AND TREASURER Aggregate Year-to-Date ▼ 1190.00	Amount of Each Receipt this Period 70.00 Memo Item
	NIDTOTAL of Descripto This Descriptoral		210.00

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) J. Richard Edwards Mailing Address 29 SOUTHAMPTON PARISH City LANDENBERG FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	ROAD State Zip Code PA 19350 C Occupation VP AND TREASURER Aggregate Year-to-Date ▼ 1260.00	Date of Receipt 12 31 2015 Transaction ID : SA11AI.78569 Amount of Each Receipt this Period 70.00 Memo Item
Full Name (Last, First, Middle Initial) Linda Edwards Mailing Address 7689 CLINK RD NE City MOSES LAKE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code WA 98837 C Occupation EXECUTIVE DIRECTOR Aggregate Year-to-Date ▼ 210.00	Date of Receipt 11 16 2015 Transaction ID: SA11AI.78872 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) Linda Edwards Mailing Address 7689 CLINK RD NE City MOSES LAKE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code WA 98837 C Occupation EXECUTIVE DIRECTOR Aggregate Year-to-Date ▼ 220.00	Date of Receipt 11 30 2015 Transaction ID: SA11AI.78873 Amount of Each Receipt this Period 10.00 Memo Item
SUBTOTAL of Receipts This Page (optional)		90.00
TOTAL This Period (last page this line number	only)	

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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC	, , ,	
Full Name (Last, First, Middle Initial) Linda Edwards Mailing Address 7689 CLINK RD NE City	State Zip Code	Date of Receipt 12 14 2015 Transaction ID: SA11AI.78874
MOSES LAKE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	WA 98837 C Occupation EXECUTIVE DIRECTOR Aggregate Year-to-Date ▼ 230.00	Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) Linda Edwards Mailing Address 7689 CLINK RD NE City MOSES LAKE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code WA 98837 C Occupation EXECUTIVE DIRECTOR Aggregate Year-to-Date ▼ 240.00	Date of Receipt 12 28 2015 Transaction ID: SA11AI.78875 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) Randy Edwards Mailing Address 1208 25TH AVE SW City GREAT FALLS FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code MT 59404 C Occupation ADMINISTRATOR Aggregate Year-to-Date ▼ 400.00	Date of Receipt 11 02 2015 Transaction ID : SA11AI.78861 Amount of Each Receipt this Period 20.00 Memo Item
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		40.00

FOR LINE NUMBER: PAGE 84 OF 375

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) Randy Edwards Mailing Address 1208 25TH AVE SW City GREAT FALLS FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code MT 59404 C Occupation ADMINISTRATOR Aggregate Year-to-Date ▼ 420.00	Date of Receipt 11 16 2015 Transaction ID: SA11AI.78862 Amount of Each Receipt this Period 20.00 Memo Item
Full Name (Last, First, Middle Initial) Randy Edwards Mailing Address 1208 25TH AVE SW City GREAT FALLS FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code MT 59404 C Occupation ADMINISTRATOR Aggregate Year-to-Date ▼ 440.00	Date of Receipt 11 30 2015 Transaction ID : SA11Al.78863 Amount of Each Receipt this Period 20.00 Memo Item
Full Name (Last, First, Middle Initial) Randy Edwards Mailing Address 1208 25TH AVE SW City GREAT FALLS FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) Other (specify)	State Zip Code MT 59404 C Occupation ADMINISTRATOR Aggregate Year-to-Date ▼ 460.00	Date of Receipt 12 14 2015 Transaction ID: SA11AI.78864 Amount of Each Receipt this Period 20.00 Memo Item
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Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC												
Full Name (Last, First, Middle Initial) Randy Edwards Mailing Address 1208 25TH AVE SW City GREAT FALLS FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For:	State MT C Occupation ADMINISTE	RATOR		mount	/ acti	28 on ID	8 : S	A11AI.	2 788		O	
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) B. Holly Eichhorn Mailing Address 10 WEST MERRITT STREE City PLAINS FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	State PA C Occupation ADMINISTR			mount	/ acti	00 on ID Each	6 : S /	A11AI.	20 784		0	
Full Name (Last, First, Middle Initial) Holly Eichhorn Mailing Address 10 WEST MERRITT STREE City PLAINS FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION	State PA C Occupation ADMINISTI			mount	acti	20 on ID	0 : S	SA11AL.	20 784		_	

Aggregate Year-to-Date ▼

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60.00

		PAGE 86 OF 375
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Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) A. Holly Eichhorn Date of Receipt Mailing Address 10 WEST MERRITT STREET 12 04 2015 City State Zip Code Transaction ID: SA11AI.78453 PΑ 18705 **PLAINS** Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **ADMINISTRATOR** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) \blacktriangledown 460.00 Full Name (Last, First, Middle Initial) B. Holly Eichhorn Date of Receipt Mailing Address 10 WEST MERRITT STREET 12 18 2015 City State Zip Code Transaction ID: SA11AI.78454 **PLAINS** PΑ 18705 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer Occupation

Receipt For: Primary General Other (specify)	OCCUPATION ADMINISTRATOR Aggregate Year-to-Date ▼ 480.00	
Full Name (Last, First, Middle In Holly Eichhorn Mailing Address 10 WEST MERI City PLAINS FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORECIPE For: Primary General	State Zip Code PA 18705 C Occupation ADMINISTRATOR Aggregate Year-to-Date Aggregate Year-to-Date	Date of Receipt 12 31 2015 Transaction ID: SA11AI.78455 Amount of Each Receipt this Period 20.00 Memo Item
Other (specify) ▼ SUBTOTAL of Receipts This Page	500.00 • (optional)	60.00

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Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) Regina Elizabeth Elkins Date of Receipt Mailing Address 706 GILMARYS ROAD 11 06 2015 City Zip Code State Transaction ID: SA11AI.78000 MD **BALTIMORE** 21210 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION MANAGER-HUMAN RESOURCES REGNL Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) Full Name (Last, First, Middle Initial) B. Regina Elizabeth Elkins Date of Receipt Mailing Address 706 GILMARYS ROAD 20 11 2015 City State Zip Code Transaction ID: SA11AI.78001 **BALTIMORE** MD 21210 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION MANAGER-HUMAN RESOURCES REGNL Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 220.00 Full Name (Last, First, Middle Initial) c. Regina Elizabeth Elkins Date of Receipt Mailing Address 706 GILMARYS ROAD 04 12 2015 City State Zip Code Transaction ID: SA11AI.78002 MD **BALTIMORE** 21210 Amount of Each Receipt this Period FEC ID number of contributing С 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION MANAGER-HUMAN RESOURCES REGNL Receipt For: Aggregate Year-to-Date ▼ Primary General 230.00 Other (specify) 30.00 SUBTOTAL of Receipts This Page (optional).....

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ITEMIZED RECEIPTS Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) Regina Elizabeth Elkins Date of Receipt Mailing Address 706 GILMARYS ROAD 2015 12 18 City Zip Code State Transaction ID: SA11AI.78003 MD **BALTIMORE** 21210 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION MANAGER-HUMAN RESOURCES REGNL Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) B. Regina Elizabeth Elkins Date of Receipt Mailing Address 706 GILMARYS ROAD 12 31 2015 City State Zip Code Transaction ID: SA11AI.78004 **BALTIMORE** MD 21210 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION MANAGER-HUMAN RESOURCES REGNL Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 Full Name (Last, First, Middle Initial) c. CHRISTINE M. EMRICK Date of Receipt Mailing Address 2312 BLUE JAY DRIVE 06 11 2015 City State Zip Code Transaction ID: SA11AI.78771 PΑ NAZARETH 18064 Amount of Each Receipt this Period FEC ID number of contributing С 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION DIRECTOR-REGIONAL SALES-MKTG Receipt For: Aggregate Year-to-Date ▼ Primary General 420.00 Other (specify) 40.00 SUBTOTAL of Receipts This Page (optional).....

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

FOR LINE NUMBER: PAGE 89 OF 375 Use separate schedule(s) (check only one) for each category of the X 112 11b 110 12

	Detailed Summary Page	13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) A. CHRISTINE M. EMRICK		Date of Receipt
Mailing Address 2312 BLUE JAY DRIVE		1.1 20 2015
City	State Zip Code	Transaction ID : SA11AI.78772
NAZARETH	PA 18064	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	DIRECTOR-REGIONAL SALES-MKTG	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	440.00	
Full Name (Last, First, Middle Initial) 3. CHRISTINE M. EMRICK		Date of Receipt
Mailing Address 2312 BLUE JAY DRIVE		12 04 2015
City	State Zip Code	Transaction ID : SA11AI.78773
NAZARETH	PA 18064	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	DIRECTOR-REGIONAL SALES-MKTG	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	, 460.00	
Full Name (Last, First, Middle Initial) C. CHRISTINE M. EMRICK		Date of Receipt
Mailing Address 2312 BLUE JAY DRIVE		12 18 2015
City NAZARETH	State Zip Code PA 18064	Transaction ID : SA11AI.78774 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	DIRECTOR-REGIONAL SALES-MKTG	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	480.00	
SUBTOTAL of Receipts This Page (optional)		60.00
TOTAL This Period (last page this line number of		

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Detailed Summary Page		X	11a		11b		11c		12			
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Any information copied from such Reports and 3 or for commercial purposes, other than using th	Statements may not be sold or used by any pers e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) CHRISTINE M. EMRICK Mailing Address 2312 BLUE JAY DRIVE		Date of Receipt
City NAZARETH FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General	State Zip Code PA 18064 C Occupation DIRECTOR-REGIONAL SALES-MKTG Aggregate Year-to-Date ▼	12 31 2015 Transaction ID : SA11AI.78775 Amount of Each Receipt this Period 20.00 Memo Item
Other (specify) ▼ Full Name (Last, First, Middle Initial) B. HOLLY J ESTEL	500.00	Date of Receipt
Mailing Address 2048 PINECREST DRIVE City MORGANTOWN	State Zip Code WV 26505	Date of Receipt 11 06 2015 Transaction ID: SA11AI.78224 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation DIRECTOR-CLINICAL OPERATIONS	92.72 Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1644.95	
Full Name (Last, First, Middle Initial) HOLLY J ESTEL Mailing Address 2048 PINECREST DRIVE City	State Zip Code	Date of Receipt M = M
MORGANTOWN FEC ID number of contributing federal political committee.	WV 26505	Amount of Each Receipt this Period 79.96
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	Occupation DIRECTOR-CLINICAL OPERATIONS Aggregate Year-to-Date ▼ 1724.91	Memo Item
SUBTOTAL of Receipts This Page (optional)	>	192.68
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FOR LINE NUMBER: PAGE 91 OF 375 Use separate schedule(s) (check only one)

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the		rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) HOLLY J ESTEL Mailing Address 2048 PINECREST DRIVE City MORGANTOWN FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code WV 26505 C Occupation DIRECTOR-CLINICAL OPERATIONS Aggregate Year-to-Date ▼ 1796.93	Date of Receipt 12 04 2015 Transaction ID: SA11AI.78226 Amount of Each Receipt this Period 72.02 Memo Item
Full Name (Last, First, Middle Initial) HOLLY J ESTEL Mailing Address 2048 PINECREST DRIVE City MORGANTOWN FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code WV 26505 C Occupation DIRECTOR-CLINICAL OPERATIONS Aggregate Year-to-Date ▼ 1885.36	Date of Receipt 12 18 2015 Transaction ID: SA11AI.78227 Amount of Each Receipt this Period 88.43 Memo Item
Full Name (Last, First, Middle Initial) HOLLY JESTEL Mailing Address 2048 PINECREST DRIVE City MORGANTOWN FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	State Zip Code WV 26505 C Occupation DIRECTOR-CLINICAL OPERATIONS Aggregate Year-to-Date ▼ 1961.59	Date of Receipt 12 31 2015 Transaction ID : SA11AI.78228 Amount of Each Receipt this Period 76.23 Memo Item
SUBTOTAL of Receipts This Page (optional)	•	236.68
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\setminus	NAME OF COMMITTEE (In Full)													
	Genesis Healthcare Inc PAC													
Α.	Full Name (Last, First, Middle Initial) CYNTHIA H FARLEY			Date of Receipt										
	Mailing Address 108 COUNTRY COVE ESTA	TE			M = M	/	06		2015	Y				
	City	State	Zip Code		Trans	sact	ion ID	: SA11AI	1.78523					
	SCOTT DEPOT	WV	25560	_	Amoun	t of	Each	Receipt t	his Period					
	FEC ID number of contributing federal political committee.	С					7	,	20.00	0				
	Name of Employer	Occupation			Me	emo l	ltem							
	GENESIS HEALTHCARE CORPORATION	DIRECTOR	R-REGIONAL MARKETING											
	Receipt For:	Aggregate	Year-to-Date ▼											
	Primary General Other (specify) ▼		420.00											
В.	Full Name (Last, First, Middle Initial) CYNTHIA H FARLEY		Date o	f Re	eceipt									
	Mailing Address 108 COUNTRY COVE ESTA	TE			11 20 2015									
	City SCOTT DEPOT	State WV	Zip Code 25560		Transaction ID : SA11AI.78524 Amount of Each Receipt this Period 20.00									
	FEC ID number of contributing federal political committee.	С												
	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation	-REGIONAL MARKETING		Me	emo	ltem							
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	Primary General	7.99.094.0	Tour to Bato V	1										
	Other (specify) ▼		440.00	Ц										
<u>С</u> .	Full Name (Last, First, Middle Initial) CYNTHIA H FARLEY				Date o	f Re	eceipt							
	Mailing Address 108 COUNTRY COVE ESTA	TE			M = M	/	04		2015	Y				
	City	State	Zip Code		Trans	sact	ion ID	: SA11A	1.78525					
	SCOTT DEPOT	WV	25560	_	Amoun	t of	Each	Receipt t	his Period					
	FEC ID number of contributing federal political committee.	С				Ξ	7	,	20.00	0				
	Name of Employer	Occupation		Memo Item										
	GENESIS HEALTHCARE CORPORATION	DIRECTOR	R-REGIONAL MARKETING											
	Receipt For:	Aggregate	Year-to-Date ▼											
	Primary General	 												

460.00

Other (specify)

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SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 93 OF 375 (check only one)									
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC												
Full Name (Last, First, Middle Initial) A. CYNTHIA H FARLEY			Date of Receipt									
Mailing Address 108 COUNTRY COVE ESTA	ATE		M = M / D = D / Y = Y = Y									
City	State	Zip Code	12 18 2015 Transaction ID : SA11AI.78526									
SCOTT DEPOT	WV	25560	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		20.00									
Name of Employer	Occupation		Memo Item									
GENESIS HEALTHCARE CORPORATION		R-REGIONAL MARKETING										
Receipt For:	Aggregate	Year-to-Date ▼										
Primary General Other (specify) ▼		480.00										
Full Name (Last, First, Middle Initial) 3. CYNTHIA H FARLEY			Date of Receipt									
Mailing Address 108 COUNTRY COVE ESTA	ATE		12 31 _2015 _									
City	State	Zip Code	Transaction ID : SA11AI.78527									
SCOTT DEPOT	WV	25560	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		20.00									
Name of Employer	Occupation		Memo Item									
GENESIS HEALTHCARE CORPORATION	DIRECTOR	-REGIONAL MARKETING										
Receipt For:	Aggregate	Year-to-Date ▼										
Primary General Other (specify) ▼		500.00										
Full Name (Last, First, Middle Initial) C. Sara Farmer			Date of Receipt									
Mailing Address 9035 VILLAGE			11 06 2015									
City	State	Zip Code	Transaction ID : SA11AI.78941									
ALBUQUERQUE	NM	87122	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		37.00									
Name of Employer	Occupation		Memo Item									
GENESIS HEALTHCARE CORPORATION	DIRECTOR	R-REIMBURSEMENT										
Receipt For:	Aggregate	Year-to-Date ▼										
Primary General Other (specify) ▼		777.00	1									
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FOR LINE NUMBER: PAGE 94 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

ITEMIZED RECEIPTS 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 Inc PAC Full Name (Last, First, Middle Initial) Sara Farmer Date of Receipt Mailing Address 9035 VILLAGE 20 2015 11 City Zip Code State Transaction ID: SA11AI.78942 NM **ALBUQUERQUE** 87122 Amount of Each Receipt this Period FEC ID number of contributing 37.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION DIRECTOR-REIMBURSEMENT Receipt For: Aggregate Year-to-Date ▼ Primary General 814.00 Other (specify) Full Name (Last, First, Middle Initial) B. Sara Farmer Date of Receipt Mailing Address 9035 VILLAGE 12 04 2015 City State Zip Code Transaction ID: SA11AI.78943 **ALBUQUERQUE** NM 87122 Amount of Each Receipt this Period FEC ID number of contributing 37.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **DIRECTOR-REIMBURSEMENT** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 851,00 Full Name (Last, First, Middle Initial) **c.** Sara Farmer Date of Receipt Mailing Address 9035 VILLAGE M M / 12 18 2015 Zip Code State Transaction ID: SA11AI.78944 NM **ALBUQUERQUE** 87122 Amount of Each Receipt this Period FEC ID number of contributing С 37.00 federal political committee. Memo Item Name of Employer Occupation **DIRECTOR-REIMBURSEMENT** GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 888.00 Other (specify) 111.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

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$\left. \right\rangle$	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC											
Α.	Full Name (Last, First, Middle Initial) Sara Farmer Mailing Address 9035 VILLAGE					M = 1						
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	FEC ID number of contributing federal political committee.	С				Amount of Each Receipt this Period 37.00						
	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation DIRECTOR		BURSEMEN	ΙΤ	M	emo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to	o-Date ▼	925.00							
В.	Full Name (Last, First, Middle Initial) Thomas Farnan Mailing Address 4 Spyglass Point					Date of	of Receipt	D / Y	YYYY			
	City Bedford	State NH		p Code		11 Tran	06 saction ID nt of Each	SA11AI.7	2015 8476			
	FEC ID number of contributing federal political committee.	С					,	rieceipt till	15.00			
	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation DIRECTOR		EIMBURSEN	MENT		emo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to	o-Date ▼	315.00							
С.	Full Name (Last, First, Middle Initial) Thomas Farnan					Date of	of Receipt					
	Mailing Address 4 Spyglass Point City	State	7ir	p Code		11 T-20	20 saction ID		2015			
	Bedford	NH		3110			nt of Each					
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	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation DIRECTOR	-SR RE	EIMBURSE	MENT	M	emo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to	o-Date ▼	330.00							
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Receipt For: Primary General Other (specify) ▼	State Zip Code NH 03110 C Occupation DIRECTOR-SR REIMBURSEMENT Aggregate Year-to-Date ▼ 345.00	Date of Receipt 12 04 2015 Transaction ID: SA11AI.78478 Amount of Each Receipt this Period 15.00 Memo Item
Full Name (Last, First, Middle Initial) Thomas Farnan Mailing Address 4 Spyglass Point City Bedford FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code NH 03110 C Occupation DIRECTOR-SR REIMBURSEMENT Aggregate Year-to-Date 360.00	Date of Receipt 12 18 2015 Transaction ID : SA11AI.78479 Amount of Each Receipt this Period 15.00 Memo Item
Full Name (Last, First, Middle Initial) Thomas Farnan Mailing Address 4 Spyglass Point City Bedford FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify) Other (specify)	State Zip Code NH 03110 C Occupation DIRECTOR-SR REIMBURSEMENT Aggregate Year-to-Date ▼ 375.00	Date of Receipt 12 31 2015 Transaction ID: SA11AI.78480 Amount of Each Receipt this Period 15.00 Memo Item
SUBTOTAL of Receipts This Page (optional)		45.00

FOR LINE NUMBER: PAGE 97 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

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 Inc PAC Full Name (Last, First, Middle Initial) DEAN FEICK Date of Receipt Mailing Address 159 MERION LANE 2015 11 06 City Zip Code State Transaction ID: SA11AI.77823 PΑ READING 19607 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTH VENTURES, INC. VICE PRESIDENT-CENTERS GROUP Receipt For: Aggregate Year-to-Date ▼ Primary General 1050.00 Other (specify) Full Name (Last, First, Middle Initial) B. DEAN FEICK Date of Receipt Mailing Address 159 MERION LANE 20 11 2015 City State Zip Code Transaction ID: SA11AI.77824 **READING** PA 19607 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTH VENTURES, INC. VICE PRESIDENT-CENTERS GROUP Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1100.00 Full Name (Last, First, Middle Initial) c. DEAN FEICK Date of Receipt Mailing Address 159 MERION LANE M M / 12 04 2015 City State Zip Code Transaction ID: SA11AI.77825 PΑ READING 19607 Amount of Each Receipt this Period FEC ID number of contributing С 50.00 federal political committee. Memo Item Name of Employer Occupation VICE PRESIDENT-CENTERS GROUP GENESIS HEALTH VENTURES, INC. Receipt For: Aggregate Year-to-Date ▼ Primary General 1150.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

FOR LINE NUMBER: PAGE 98 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16

ITEMIZED RECEIPTS 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 Inc PAC Full Name (Last, First, Middle Initial) DEAN FEICK Date of Receipt Mailing Address 159 MERION LANE 18 2015 12 City Zip Code State Transaction ID: SA11AI.77826 PΑ READING 19607 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTH VENTURES, INC. VICE PRESIDENT-CENTERS GROUP Receipt For: Aggregate Year-to-Date ▼ Primary General 1200.00 Other (specify) Full Name (Last, First, Middle Initial) B. DEAN FEICK Date of Receipt Mailing Address 159 MERION LANE 12 31 2015 City State Zip Code Transaction ID: SA11AI.77827 **READING** PA 19607 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTH VENTURES, INC. VICE PRESIDENT-CENTERS GROUP Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1250.00 Full Name (Last, First, Middle Initial) c. RICHARD M FINK Date of Receipt Mailing Address 12 GREENTREE DRIVE M M / 11 06 2015 City Zip Code State Transaction ID: SA11AI.78170 MD **PHEONIX** 21131 Amount of Each Receipt this Period FEC ID number of contributing С 30.00 federal political committee. Memo Item Name of Employer Occupation **DIRECTOR-REIMBURSEMENT** GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 630.00 Other (specify) 130.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

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	Date of Receipt								
Mailing Address 12 GREENTREE DRIVE									
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Occupation	Memo Item								
DIRECTOR-REIMBURSEMENT									
Aggregate Year-to-Date ▼									
660.00									
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State Zip Code	Transaction ID : SA11AI.78172								
MD 21131	Amount of Each Receipt this Period								
С	30.00								
Occupation	Memo Item								
DIRECTOR-REIMBURSEMENT									
Aggregate Year-to-Date ▼									
690.00									
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State Zip Code	Transaction ID : SA11AI.78173								
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) RICHARD M FINK Mailing Address 12 GREENTREE DRIVE City PHEONIX FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify) City PHEONIX	State Zip Code MD 21131 C Occupation DIRECTOR-REIMBURSEMENT Aggregate Year-to-Date ▼ 750.00	Date of Receipt 12 31 2015 Transaction ID: SA11AI.78174 Amount of Each Receipt this Period 30.00 Memo Item
Full Name (Last, First, Middle Initial) IRENE FLESHNER Mailing Address 4613 ROXBURY DRIVE City BETHESDA FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTH VENTURES, INC. Receipt For: Primary General Other (specify)	State Zip Code MD 20814 C Occupation SR VP-CLINICAL PRACTICE Aggregate Year-to-Date ▼ 500.00	Date of Receipt 11 06 2015 Transaction ID: SA11AI.78155 Amount of Each Receipt this Period 25.00 Memo Item
Full Name (Last, First, Middle Initial) IRENE FLESHNER Mailing Address 4613 ROXBURY DRIVE City BETHESDA FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTH VENTURES, INC. Receipt For: Primary General Other (specify)	State Zip Code MD 20814 C Occupation SR VP-CLINICAL PRACTICE Aggregate Year-to-Date ▼ 525.00	Date of Receipt 11 20 2015 Transaction ID: SA11AI.78156 Amount of Each Receipt this Period 25.00 Memo Item
SUBTOTAL of Receipts This Page (optional)	>	80.00
TOTAL This Period (last page this line number o	nly)	

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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Possint For:	Zip Code 20814 ion CLINICAL PRACTICE tte Year-to-Date ▼ 550.00	Date of Receipt 12 04 2015 Transaction ID: SA11AI.78157 Amount of Each Receipt this Period 25.00 Memo Item
Full Name (Last, First, Middle Initial) B. IRENE FLESHNER Mailing Address 4613 ROXBURY DRIVE		Date of Receipt

Α.	Full Name (Last, First, Middle Initial) IRENE FLESHNER		Date of Receipt
Λ.	Mailing Address 4613 ROXBURY DRIVE		12 04 2015
	City	State Zip Code	Transaction ID : SA11AI.78157
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	FEC ID number of contributing federal political committee.	С	25.00
	Name of Employer	Occupation	Memo Item
	GENESIS HEALTH VENTURES, INC.	SR VP-CLINICAL PRACTICE	
	Receipt For:		
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
В.	Full Name (Last, First, Middle Initial) IRENE FLESHNER		Date of Receipt
	Mailing Address 4613 ROXBURY DRIVE		12 18 2015
	City	State Zip Code	Transaction ID : SA11AI.78158
	BETHESDA	MD 20814	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	25.00
	Name of Employer GENESIS HEALTH VENTURES, INC.	Occupation SR VP-CLINICAL PRACTICE	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 575.00	
— С.	Full Name (Last, First, Middle Initial) IRENE FLESHNER		Date of Receipt
٠.	Mailing Address 4613 ROXBURY DRIVE		12 31 2015
	City	State Zip Code	Transaction ID : SA11AI.78159
	BETHESDA	MD 20814	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	25.00
	Name of Employer	Occupation	Memo Item
	GENESIS HEALTH VENTURES, INC.	SR VP-CLINICAL PRACTICE	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
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Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) Robert Furia Mailing Address 131 CORNERSTONE DR City Date of Receipt PA 19073 FEC ID number of contributing federal political committies. Robert Furia Mailing Address 131 CORNERSTONE DR City Phrimary General Other (specify) ▼ State Zip Code PA 19073 Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Robert Furia Mailing Address 131 CORNERSTONE DR City Phrimary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Robert Furia Mailing Address 131 CORNERSTONE DR City Phrimary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Robert Furia Mailing Address 131 CORNERSTONE DR City Phrimary General Other (specify) ▼ State Zip Code PA 19073 Aggregate Year-to-Date ▼ Cocupation PhrySiCIAN PhrySiCIAN Robert Furia Mailing Address 131 CORNERSTONE DR City Robert Furia Mailing Address 131 CORNERSTONE DR City Robert Furia Mailing Address 131 CORNERSTONE DR City Primary General City State Zip Code PA 19073 Aggregate Year-to-Date ▼ Date of Receipt 11 20 2015 Transaction ID: SA11Al/78730 Amount of Each Receipt this Period Total Transaction ID: SA11Al/78731 Amount of Each Receipt this Period Transaction ID: SA11Al/78731 Amount of Each Receipt this Period Transaction ID: SA11Al/78731 Amount of Each Receipt this Period Transaction ID: SA11Al/78731 Amount of Each Receipt this Period Transaction ID: SA11Al/78731 Amount of Each Receipt this Period Transaction ID: SA11Al/78731 Amount of Each Receipt this Period Transaction ID: SA11Al/78731 Amount of Each Receipt this Period Transaction ID: SA11Al/78731 Amount of Each Receipt this Period Transaction ID: SA11Al/78731 Transaction ID: SA11Al/78	An or	y information copied from such Reports and St for commercial purposes, other than using the	atements ma name and ac	y not be sold or u ddress of any polit	sed by any persical committee to	son for the p	ourpose of soliciting contributions
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Primary General Other (specify) ▼ 525.00 Full Name (Last, First, Middle Initial) Robert Furia Mailing Address 131 CORNERSTONE DR City State Zip Code NEWTOWN SQUARE PA 19073 FEC ID number of contributing federal political committee. Name of Employer General Other (specify) ▼ 550.00 Full Name (Last, First, Middle Initial) Robert Furia Mailing Address 131 CORNERSTONE DR City Primary General Other (specify) ▼ 550.00 FEC ID number of contributing General Other (specify) ▼ 575.00 Date of Receipt Transaction ID: SA11AI.78730 Amount of Each Receipt his Period Memo Item Date of Receipt Transaction ID: SA11AI.78731 Amount of Each Receipt his Period City Other (specify) ▼ 575.00 Date of Receipt Transaction ID: SA11AI.78731 Amount of Each Receipt his Period Transaction ID: SA11AI.78731 Amount of Each Receipt his Period Transaction ID: SA11AI.78731 Amount of Each Receipt his Period Transaction ID: SA11AI.78731 Amount of Each Receipt his Period Transaction ID: SA11AI.78731 Amount of Each Receipt his Period Transaction ID: SA11AI.78731 Amount of Each Receipt his Period Transaction ID: SA11AI.78731 Amount of Each Receipt his Period Transaction ID: SA11AI.78731 Amount of Each Receipt his Period Transaction ID: SA11AI.78731 Amount of Each Receipt his Period Transaction ID: SA11AI.78731 Amount of Each Receipt his Period Transaction ID: SA11AI.78731 Amount of Each Receipt his Period Transaction ID: SA11AI.78731 Amount of Each Receipt his Period Transaction ID: SA11AI.78731 Amount of Each Receipt his Period Transaction ID: SA11AI.78731 Amount of Each Receipt his Period Transaction ID: SA11AI.78731 Amount of Each Receipt his Period Transaction ID: SA11AI.78731 Amount of Each Receipt his Period Transaction ID: SA11AI.78731 Amount of Each Receipt his Period						-	
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Robert Furia Mailing Address 131 CORNERSTONE DR City State Zip Code PA 19073 FEC ID number of contributing federal political committee. Name of Employer General Other (specify) ▼ State Zip Code Primary General Mailing Address 131 CORNERSTONE DR City State Zip Code PHYSICIAN Receipt For: Aggregate Year-to-Date ▼ PA 19073 Full Name (Last, First, Middle Initial) Robert Furia Mailing Address 131 CORNERSTONE DR City State Zip Code NEWTOWN SQUARE PA 19073 FEC ID number of contributing federal political committee. Name of Employer General Occupation PHYSICIAN Receipt For: State Zip Code PA 19073 FEC ID number of contributing federal political committee. Name of Employer General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ FO5.00 SUBTOTAL of Receipts This Page (optional)		Other (specify) ▼		7	525.00		
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Full Name (Last, First, Middle Initial) Travis Giese Mailing Address 2037 RIVERCREST DR APT City TWIN FALLS FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code ID 83301 C Occupation DIRECTOR-NURSING Aggregate Year-to-Date 525.00	Date of Receipt 11 16 2015 Transaction ID: SA11AI.79092 Amount of Each Receipt this Period 25.00 Memo Item
Full Name (Last, First, Middle Initial) B. Travis Giese Mailing Address 2037 RIVERCREST DR APT		Date of Receipt
City TWIN FALLS FEC ID number of contributing federal political committee.	State Zip Code ID 83301	Transaction ID : SA11AI.79093 Amount of Each Receipt this Period 25.00
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Full Name (Last, First, Middle Initial) Travis Giese Mailing Address 2037 RIVERCREST DR APT City TWIN FALLS FEC ID number of contributing federal political committee.	208 State Zip Code ID 83301	Date of Receipt 12 28 2015 Transaction ID : SA11AI.79095 Amount of Each Receipt this Period 25.00						
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	Occupation DIRECTOR-NURSING Aggregate Year-to-Date ▼ 600.00	Memo Item						
Full Name (Last, First, Middle Initial) Catherine Golaszewski Mailing Address 29 LOMURNO LANE City CAPE MAY COURT HOUSE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For:	State Zip Code NJ 08210 C Occupation MANAGER-CLINICAL OPERATIONS RN	Date of Receipt 11 06 2015 Transaction ID : SA11AI.78536 Amount of Each Receipt this Period 10.00 Memo Item						
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) Catherine Golaszewski Date of Receipt Mailing Address 29 LOMURNO LANE 04 2015 12 City Zip Code State Transaction ID: SA11AI.78538 CAPE MAY COURT HOUSE NJ 08210 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation MANAGER-CLINICAL OPERATIONS RN GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) B. Catherine Golaszewski Date of Receipt Mailing Address 29 LOMURNO LANE 12 18 2015 City State Zip Code Transaction ID: SA11AI.78539 NJ CAPE MAY COURT HOUSE 08210 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION MANAGER-CLINICAL OPERATIONS RN Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250,00 Full Name (Last, First, Middle Initial) c. Catherine Golaszewski Date of Receipt Mailing Address 29 LOMURNO LANE M = M 12 31 2015 City Zip Code State Transaction ID: SA11AI.78540 NJ CAPE MAY COURT HOUSE 08210 Amount of Each Receipt this Period FEC ID number of contributing С 10.00 federal political committee. Memo Item Name of Employer Occupation MANAGER-CLINICAL OPERATIONS RN GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) 30.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

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Receipt For: Primary General Other (specify) ▼ Aggre	40026	Date of Receipt 11 06 2015 Transaction ID: SA11AI.79011 Amount of Each Receipt this Period 71.42 Memo Item
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SUBTOTAL of Receipts This Page (optional)	>	214.26

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Pagaint For:	40026	Date of Receipt 12 18 2015 Transaction ID : SA11AI.79014 Amount of Each Receipt this Period 80.05 Memo Item						
Full Name (Last, First, Middle Initial) B. Jim Grady Mailing Address 1311 OLD TAYLOR TRAIL		Date of Receipt						

	Other (specify) ▼	1800.64	
В.	Full Name (Last, First, Middle Initial) Jim Grady		Date of Receipt
	Mailing Address 1311 OLD TAYLOR TRAIL		12 31 2015
	City	State Zip Code	Transaction ID : SA11AI.79015
	GOSHEN	KY 40026	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	71.42
	Name of Employer	Occupation	Memo Item
	GENESIS HEALTHCARE CORPORATION	VP OPERATIONS	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1872.06	
C.	Full Name (Last, First, Middle Initial) DENNIS GREGORY		Date of Receipt
	Mailing Address 17 ONEIDA COURT		11 06 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID : SA11AI.77853
	CHESTER SPRINGS	PA 19425	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	35.00
	Name of Employer	Occupation	Memo Item
	GENESIS HEALTH VENTURES, INC.	DIRECTOR-ELDERCARE CENTERS REG	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 735.00	
H	SUBTOTAL of Receipts This Page (optional)	only).	186.47

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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) DENNIS GREGORY Mailing Address 17 ONEIDA COURT		Date of Receipt
City CHESTER SPRINGS FEC ID number of contributing federal political committee.	State Zip Code PA 19425	11 20 2015 Transaction ID : SA11AI.77854 Amount of Each Receipt this Period 35.00
Name of Employer GENESIS HEALTH VENTURES, INC. Receipt For: Primary General Other (specify) ▼	Occupation DIRECTOR-ELDERCARE CENTERS REG Aggregate Year-to-Date ▼ 770.00	Memo Item
Full Name (Last, First, Middle Initial) B. DENNIS GREGORY Mailing Address 17 ONEIDA COURT		Date of Receipt 12 04 2015
City CHESTER SPRINGS FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTH VENTURES, INC.	State Zip Code PA 19425 C Occupation DIRECTOR-ELDERCARE CENTERS REG	Transaction ID : SA11AI.77855 Amount of Each Receipt this Period 35.00 Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 805.00	
Full Name (Last, First, Middle Initial) DENNIS GREGORY Mailing Address 17 ONEIDA COURT City CHESTER SPRINGS	State Zip Code PA 19425	Date of Receipt 12 18 2015 Transaction ID : SA11AI.77856
CHESTER SPRINGS FEC ID number of contributing federal political committee.	PA 19425	Amount of Each Receipt this Period 35.00
Name of Employer GENESIS HEALTH VENTURES, INC. Receipt For: Primary General Other (specify) ▼	Occupation DIRECTOR-ELDERCARE CENTERS REG Aggregate Year-to-Date ▼ 840.00	Memo Item
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	Genesis Healthcare Inc PAC											
Α.	Full Name (Last, First, Middle Initial) DENNIS GREGORY				Date o	of Re	eceipt					
	Mailing Address 17 ONEIDA COURT				12	/	3′		2015	Y		
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	GENESIS HEALTH VENTURES, INC.	DIRECTOR	R-ELDERCARE CENTERS REG									
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В.	Full Name (Last, First, Middle Initial) MARYLEE GROSSO	I			Date o	of Re	eceipt					
	Mailing Address 28 COMMONWEALTH AVEN	NUE #4			1_1	/	06		2015	Y		
	City BOSTON	State MA	Zip Code 02116						AI.78015 this Period	_		
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	Mailing Address 28 COMMONWEALTH AVE	NUE #4			M = M	/	20		2015	Y		
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	BOSTON	MA	02116						this Period			
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Full Name (Last, First, Middle Initial) MARYLEE GROSSO			Date of Receipt											
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Primary General Other (specify) ▼	Year-to-Date ▼ 460.00													
Full Name (Last, First, Middle Initial) 3. MARYLEE GROSSO				ate of	Re	ecei	ipt							
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Full Name (Last, First, Middle Initial) C. MARYLEE GROSSO			С	ate of	Re	ecei	ipt							
Mailing Address 28 COMMONWEALTH AVEN				M = M 12	/		31	/ Y	2015	Y				
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\	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC												
	Full Name (Last, First, Middle Initial) MICHAEL P GUGLIELMO			Date of Receipt									
	Mailing Address 1503 STALEY CIRCLE			11 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y									
	City HARLEYSVILLE	State PA	Zip Code 19438						A11AI.				
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o.	Full Name (Last, First, Middle Initial) MICHAEL P GUGLIELMO				ate of	Re	ece	ipt					
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or for commercial purposes, other than using th	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) A. MICHAEL P GUGLIELMO		Date of Receipt
Mailing Address 1503 STALEY CIRCLE	Chata Zin Code	12 18 2015
City HARLEYSVILLE	State Zip Code PA 19438	Transaction ID : SA11AI.78688 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For:	Occupation VP-STRATEGIC STAFFING	Memo Item
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	
Full Name (Last, First, Middle Initial) B. MICHAEL P GUGLIELMO		Date of Receipt
Mailing Address 1503 STALEY CIRCLE		12 31 2015
City HARLEYSVILLE	State Zip Code PA 19438	Transaction ID : SA11AI.78689 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VP-STRATEGIC STAFFING	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	
Full Name (Last, First, Middle Initial) C. KATHY L HADDON		Date of Receipt
Mailing Address 312 LEE ROAD		11 06 2015 _
City FOLLANSBEE	State Zip Code WV 26037	Transaction ID : SA11AI.77906 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VICE PRESIDENT-CENTERS GROUP	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2100.00	
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) A. KATHY L HADDON Mailing Address 312 LEE ROAD		Date of Receipt
City FOLLANSBEE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	State Zip Code WV 26037 C Occupation VICE PRESIDENT-CENTERS GROUP Aggregate Year-to-Date ▼ 2200.00	Transaction ID: SA11AI.77907 Amount of Each Receipt this Period 100.00 Memo Item
Full Name (Last, First, Middle Initial) KATHY L HADDON Mailing Address 312 LEE ROAD City FOLLANSBEE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	State Zip Code WV 26037 C Occupation VICE PRESIDENT-CENTERS GROUP Aggregate Year-to-Date ▼ 2300.00	Date of Receipt 12 04 2015 Transaction ID: SA11AI.77908 Amount of Each Receipt this Period 100.00 Memo Item
Full Name (Last, First, Middle Initial) KATHY L HADDON Mailing Address 312 LEE ROAD City FOLLANSBEE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	State Zip Code WV 26037 C Occupation VICE PRESIDENT-CENTERS GROUP Aggregate Year-to-Date ▼ 2400.00	Date of Receipt 12 18 2015 Transaction ID: SA11AI.77909 Amount of Each Receipt this Period 100.00 Memo Item
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC										
Full Name (Last, First, Middle Initial) A. KATHY L HADDON				ate of	Red	ceipt				
Mailing Address 312 LEE ROAD			1	M = M	/	31			2015	
City FOLLANSBEE	State WV	Zip Code 26037		Trans		on ID	: SA11 Receipt	AI.779	910	
FEC ID number of contributing federal political committee.	С			inount	OI L	_acii i	neceipt	1115 1	100.00)
Name of Employer	Occupation		- [Mer	no It	em				
GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)		Year-to-Date ▼ 2500.00]							
Full Name (Last, First, Middle Initial) 3. KAREN HALSTED			С	ate of	Red	ceipt				
Mailing Address 350 CALVERT CIRCLE			1	M = M	/	06			015	
City KENNETT SQUARE	State PA	Zip Code 19348		Trans		n ID :	: SA11<i>A</i> Receipt	AI.780	74	_
FEC ID number of contributing federal political committee.	С		[,	,		10.00)
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation MANAGER-	HUMAN RESOURCES REGNL		Mer	mo It	em				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00]							
Full Name (Last, First, Middle Initial) . KAREN HALSTED				ate of	Red	ceipt				
Mailing Address 350 CALVERT CIRCLE				M - M	/	20			2015	
City KENNETT SQUARE	State PA	Zip Code 19348	A				: SA11 / Receipt			
FEC ID number of contributing federal political committee.	С] [Mor	mo lt	, am	7		10.00)
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation	-HUMAN RESOURCES REGNL		wier	iio il	CIII				
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	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) KAREN HALSTED Mailing Address 350 CALVERT CIRCLE City KENNETT SQUARE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify) General Other (specify)		Zip Code 19348 -HUMAN RESOURCES REGNL Year-to-Date ▼	Date of Receipt 12 04 2015 Transaction ID: SA11AI.78076 Amount of Each Receipt this Period 10.00 Memo Item
В.	Full Name (Last, First, Middle Initial) KAREN HALSTED Mailing Address 350 CALVERT CIRCLE City KENNETT SQUARE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify) Other (specify)		Zip Code 19348 -HUMAN RESOURCES REGNL Year-to-Date ▼ 240.00	Date of Receipt 12 18 2015 Transaction ID: SA11AI.78077 Amount of Each Receipt this Period 10.00 Memo Item
C.	Full Name (Last, First, Middle Initial) KAREN HALSTED Mailing Address 350 CALVERT CIRCLE City KENNETT SQUARE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For:		Zip Code 19348 -HUMAN RESOURCES REGNL Year-to-Date ▼	Date of Receipt 12 31 2015 Transaction ID : SA11AI.78078 Amount of Each Receipt this Period 10.00 Memo Item

250.00

Primary

Other (specify) ▼

General

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A .	Full Name (Last, First, Middle Initial)				Date of	f Red	ceipt				
	Mailing Address 56 Covington Drive City	State	Zip Code	[11 Trans		13 on ID :	J L	2015 2012	Y	
Shrewsbury FEC ID number of contributing federal political committee. Name of Employer Genesis HealthCare Corp Receipt For: Primary General Other (specify)			17361	_ A	Amount	t of E	Each F	Receipt	this Perio	d 5.00	
			Year-to-Date ▼ 700.00	- []	Mei	mo It	em				
В.	Full Name (Last, First, Middle Initial) Robert Harris Mailing Address 56 Covington Drive				Date of		ceipt 27		2015	Y	
	City Shrewsbury FEC ID number of contributing federal political committee.	State PA	Zip Code 17361					SA11A Receipt	this Perio	d 5.00	
	Name of Employer Genesis HealthCare Corp Receipt For: Primary General Other (specify) Other	Occupation Director Aggregate	Year-to-Date ▼ 735.00]]	Me	mo It	em				
<u>с</u> .	Full Name (Last, First, Middle Initial) Robert Harris Mailing Address 56 Covington Drive				Date of		ceipt		y y y y 2015	Y	
	City Shrewsbury FEC ID number of contributing federal political committee.	State PA	Zip Code 17361					_		d 5.00	
	Name of Employer Genesis HealthCare Corp Receipt For:	Occupation Director Aggregate	Year-to-Date ▼	 	Mei	mo lt	em				

770.00

Primary

Other (specify) ▼

General

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Image# 201603089009663531 SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 118 OF 375 (check only one) X 11a
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC	Statements ma e name and a	ay not be sold or used by any peddress of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Robert Harris Mailing Address 56 Covington Drive City Shrewsbury FEC ID number of contributing federal political committee. Name of Employer Genesis HealthCare Corp Receipt For: Primary General Other (specify)	State PA C Occupation Director Aggregate	Zip Code 17361 Year-to-Date ▼	Date of Receipt 12 24 2015 Transaction ID: SA11AI.78425 Amount of Each Receipt this Period 35.00 Memo Item
Full Name (Last, First, Middle Initial) Wm. Craig Harris Mailing Address 102 PATRIOT DRIVE City COLLEGEVILLE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For:	State PA C Occupation VP OPERA		Date of Receipt 11 06 2015 Transaction ID: SA11AI.78292 Amount of Each Receipt this Period 20.00 Memo Item

	Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	Occupation VP OPERATIONS Aggregate Year-to-Date ▼ 420.00	Memo Item
C.	Full Name (Last, First, Middle Initial) Wm. Craig Harris Mailing Address 102 PATRIOT DRIVE		Date of Receipt 11 20 2015
	City	State Zip Code	Transaction ID : SA11AI.78293
	COLLEGEVILLE	PA 19426	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer	Occupation	Memo Item
	GENESIS HEALTHCARE CORPORATION	VP OPERATIONS	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

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Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) Wm. Craig Harris Date of Receipt Mailing Address 102 PATRIOT DRIVE 04 2015 12 City State Zip Code Transaction ID: SA11AI.78294 PΑ **COLLEGEVILLE** 19426 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **VP OPERATIONS** Receipt For: Aggregate Year-to-Date ▼ Primary General 460.00 Other (specify) Full Name (Last, First, Middle Initial) B. Wm. Craig Harris Date of Receipt Mailing Address 102 PATRIOT DRIVE 12 18 2015 City State Zip Code Transaction ID: SA11AI.78295 COLLEGEVILLE PA 19426 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **VP OPERATIONS** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 480,00 Full Name (Last, First, Middle Initial) **c.** Wm. Craig Harris Date of Receipt Mailing Address 102 PATRIOT DRIVE 12 31 2015 City State Zip Code Transaction ID: SA11AI.78296 PΑ COLLEGEVILLE 19426 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer Occupation **VP OPERATIONS** GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 60.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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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: PAGE 120 OF 375 (check only one) X 11a
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
BELCHERTOWN FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION DIF	State Zip Code MA 01007 Coupation RECTOR-REIMBURSMNT SVS GROUP agregate Year-to-Date 210.00	Date of Receipt 11 06 2015 Transaction ID: SA11AI.77926 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) B. DENINE HASTINGS Mailing Address 7 FOX RUN DR City	State Zip Code	Date of Receipt 11 20 2015

City	State Zip Code	Transaction ID : SA11AI.77927
BELCHERTOWN	MA 01007	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation DIRECTOR-REIMBURSMNT SVS GROUP	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	
Full Name (Last, First, Middle Initial) C. DENINE HASTINGS		Date of Receipt
Mailing Address 7 FOX RUN DR		12 04 2015
City	State Zip Code	Transaction ID : SA11AI.77928
BELCHERTOWN	MA 01007	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer	Occupation	- Memo Item
GENESIS HEALTHCARE CORPORATION	DIRECTOR-REIMBURSMNT SVS GROUP	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	
SUBTOTAL of Receipts This Page (optional)		30.00

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\rangle	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC										
A.	Full Name (Last, First, Middle Initial) DENINE HASTINGS Mailing Address 7 FOX RUN DR City BELCHERTOWN FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)		Zip Code 01007 -REIMBURSMNT SVS GROUP Year-to-Date ▼	_ [mount	/ acti	18 ion ID : S		. 779		
В.	Full Name (Last, First, Middle Initial) DENINE HASTINGS Mailing Address 7 FOX RUN DR City	State	Zip Code		ate of	′	ceipt 31 on ID : S	A11A	_2	015 30	Y
	BELCHERTOWN FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation		Al L	-	of mol	Each Re	ceipt t	his F	Period 10.0	00
	Receipt For: Primary General Other (specify) ▼		-REIMBURSMNT SVS GROUP Year-to-Date ▼ 250.00								
C.	Full Name (Last, First, Middle Initial) Barbara Hauswald Mailing Address 131 W. SPRINGFIELD AVE				ate of	Re	ceipt	/ [Y = Y	Y	Y
	City PHILADELPHIA FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)		Zip Code 19118 TEGIC DEVELOP Year-to-Date ▼ 808.50		mount		06 ion ID : \$ Each Re		1.782		50
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Any information copied from such Reports and Statements may 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 Inc PAC Full Name (Last, First, Middle Initial) Barbara Hauswald Date of Receipt Mailing Address 131 W. SPRINGFIELD AVE 20 2015 11 City Zip Code State Transaction ID: SA11AI.78264 PΑ **PHILADELPHIA** 19118 Amount of Each Receipt this Period FEC ID number of contributing 38.50 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION SVP STRATEGIC DEVELOP Receipt For: Aggregate Year-to-Date ▼ Primary General 847.00 Other (specify) Full Name (Last, First, Middle Initial) B. Barbara Hauswald Date of Receipt Mailing Address 131 W. SPRINGFIELD AVE 12 04 2015 City State Zip Code Transaction ID: SA11AI.78265 **PHILADELPHIA** PA 19118 Amount of Each Receipt this Period FEC ID number of contributing 38.50 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION SVP STRATEGIC DEVELOP Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 885.50 Full Name (Last, First, Middle Initial) **c.** Barbara Hauswald Date of Receipt Mailing Address 131 W. SPRINGFIELD AVE M M / 12 18 2015 City State Zip Code Transaction ID: SA11AI.78266 PΑ **PHILADELPHIA** 19118 Amount of Each Receipt this Period FEC ID number of contributing C 38.50 federal political committee. Memo Item Name of Employer Occupation SVP STRATEGIC DEVELOP GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 924.00 Other (specify) 115.50

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ITEMIZED RECEIPTS

SCHEDULE A (FEC Form 3X) FOR LINE NUMBER: PAGE 123 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16 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 Inc PAC Full Name (Last, First, Middle Initial) Barbara Hauswald Date of Receipt Mailing Address 131 W. SPRINGFIELD AVE 2015 12 31 City Zip Code State Transaction ID: SA11AI.78267 PΑ **PHILADELPHIA** 19118 Amount of Each Receipt this Period FEC ID number of contributing 38.50 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION SVP STRATEGIC DEVELOP Receipt For: Aggregate Year-to-Date ▼ Primary General 962.50 Other (specify) Full Name (Last, First, Middle Initial) **B.** KATHRYN HEFLIN Date of Receipt Mailing Address 497 WINDING CREEK COURT 11 06 2015 City State Zip Code Transaction ID: SA11AI.78340 DAVIDSONVILLE MD 21035 Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTH VENTURES, INC. DIRECTOR-ELDERCARE CENTERS REG Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1575.00 Full Name (Last, First, Middle Initial) c. KATHRYN HEFLIN Date of Receipt Mailing Address 497 WINDING CREEK COURT M M / 11 20 2015 City Zip Code State Transaction ID: SA11AI.78341 MD DAVIDSONVILLE 21035 Amount of Each Receipt this Period FEC ID number of contributing С 75.00 federal political committee. Memo Item Name of Employer Occupation DIRECTOR-ELDERCARE CENTERS REG GENESIS HEALTH VENTURES, INC. Receipt For: Aggregate Year-to-Date ▼ Primary General

1650.00

Other (specify)

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Any information copied from such Reports and Staten or for commercial purposes, other than using the name		
MAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) KATHRYN HEFLIN Mailing Address 497 WINDING CREEK COURT		Date of Receipt
- ,	State Zip Code MD 21035	Transaction ID : SA11AI.78342 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		75.00
GENESIS HEALTH VENTURES, INC. DIF	ecupation RECTOR-ELDERCARE CENTERS REG aggregate Year-to-Date ▼ 1725.00	Memo Item
Full Name (Last, First, Middle Initial)		Date of Receipt

Full Name (Last, First, Middle Initial) A. KATHRYN HEFLIN	Date of Receipt	
Mailing Address 497 WINDING CREEK COU	JRT	12 04 2015
City DAVIDSONVILLE	State Zip Code MD 21035	Transaction ID : SA11AI.78342 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer GENESIS HEALTH VENTURES, INC.	Occupation DIRECTOR-ELDERCARE CENTERS REG	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1725.00	
Full Name (Last, First, Middle Initial) 3. KATHRYN HEFLIN		Date of Receipt
Mailing Address 497 WINDING CREEK COL		12 18 2015
City DAVIDSONVILLE	State Zip Code MD 21035	Transaction ID : SA11AI.78343 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer GENESIS HEALTH VENTURES, INC.	Occupation DIRECTOR-ELDERCARE CENTERS REG	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1800.00	
Full Name (Last, First, Middle Initial) C. KATHRYN HEFLIN		Date of Receipt
Mailing Address 497 WINDING CREEK CO		12 31 2015
City DAVIDSONVILLE	State Zip Code MD 21035	Transaction ID : SA11AI.78344 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTH VENTURES, INC. Receipt For: Primary General	DIRECTOR-ELDERCARE CENTERS REG Aggregate Year-to-Date ▼	
Other (specify) ▼	1875.00	
SUBTOTAL of Receipts This Page (optional).		225.00
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	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Α.	Full Name (Last, First, Middle Initial) Suzannah Herring Mailing Address 2400 FM 3081 City	State Zip Code	Date of Receipt 11 06 2015 Transaction ID: SA11AI.78936
	WILLIS FEC ID number of contributing federal political committee.	TX 77378	Amount of Each Receipt this Period 10.00 Memo Item
	Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	Occupation VICE PRESIDENT Aggregate Year-to-Date ▼ 210.00	
B.	Full Name (Last, First, Middle Initial) Suzannah Herring Mailing Address 2400 FM 3081 City WILLIS FEC ID number of contributing	State Zip Code TX 77378	Date of Receipt 11 20 2015 Transaction ID: SA11AI.78937 Amount of Each Receipt this Period
	red is finitial of continuing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	Occupation VICE PRESIDENT Aggregate Year-to-Date 220.00	Memo Item
C.	Full Name (Last, First, Middle Initial) Suzannah Herring Mailing Address 2400 FM 3081 City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	WILLIS FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: □ Primary □ General Other (specify) ▼	TX 77378 C Occupation VICE PRESIDENT Aggregate Year-to-Date ▼ 230.00	Amount of Each Receipt this Period 10.00 Memo Item
S	UBTOTAL of Receipts This Page (optional)	>	30.00
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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a
	Statements may not be sold or used by any pene name and address of any political committee	
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) Suzannah Herring Mailing Address 2400 FM 3081 City WILLIS FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code TX 77378 C Occupation VICE PRESIDENT Aggregate Year-to-Date ▼	Date of Receipt 12 18 2015 Transaction ID: SA11AI.78939 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) Suzannah Herring Mailing Address 2400 FM 3081 City WILLIS FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code TX 77378 C Occupation VICE PRESIDENT Aggregate Year-to-Date ▼ 250.00	Date of Receipt 12 31 2015 Transaction ID : SA11AI.78940 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) Godfrey Hilado Mailing Address 73 CREEK BLUFF WAY City ORMOND BEACH FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	State Zip Code FL 32174 C Occupation DIRECTOR-PROVIDER RELATIONS Aggregate Year-to-Date ▼ 315.00	Date of Receipt 11 06 2015 Transaction ID: SA11AI.78397 Amount of Each Receipt this Period 15.00 Memo Item
SUBTOTAL of Receipts This Page (optional)		35.00
TOTAL This Period (last page this line number	er only)	

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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: PAGE (check only one) X 11a 11b 11c 15	127 OF 375
Any information copied from such Reports and Statements \mathbf{m} or for commercial purposes, other than using the name and			
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC			
Possint For:	Zip Code 32174 n R-PROVIDER RELATIONS e Year-to-Date ▼ 330.00		Period 15.00
Full Name (Last, First, Middle Initial) B. Godfrey Hilado Mailing Address 73 CREEK BLUFF WAY		Date of Receipt	Y Y Y

	federal political committee.	C	15.00
	Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For:	Occupation DIRECTOR-PROVIDER RELATIONS Aggregate Year-to-Date ▼	Memo Item
	Primary General Other (specify) ▼	330.00	
В.	Full Name (Last, First, Middle Initial) Godfrey Hilado		Date of Receipt
	Mailing Address 73 CREEK BLUFF WAY		12 04 2015
	City	State Zip Code	Transaction ID : SA11AI.78399
	ORMOND BEACH	FL 32174	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	15.00
	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation DIRECTOR-PROVIDER RELATIONS	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 345.00	
C.	Full Name (Last, First, Middle Initial) Godfrey Hilado		Date of Receipt
	Mailing Address 73 CREEK BLUFF WAY		12 18 2015
	City	State Zip Code	Transaction ID : SA11AI.78400
	ORMOND BEACH	FL 32174	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	15.00
	Name of Employer	Occupation	Memo Item
	GENESIS HEALTHCARE CORPORATION	DIRECTOR-PROVIDER RELATIONS	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	360.00	
S	SUBTOTAL of Receipts This Page (optional)	<u> </u>	45.00
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the	(check on	FOR LINE NUMBER: PAGE 128 OF 375 (check only one)							
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	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC											
Α.	Full Name (Last, First, Middle Initial) Godfrey Hilado			Date o	of Red	ceipt						
	Mailing Address 73 CREEK BLUFF WAY			12	/	31		2015				
	City	State	Zip Code	Trans	sacti	on ID :	SA11AI.7					
	ORMOND BEACH	FL	32174	Amoun	nt of I	Each F	Receipt this	s Period				
	FEC ID number of contributing federal political committee.	C				,	,	15.00)			
	Name of Employer	Occupation	1	<u> Ме</u>	emo It	em						
	GENESIS HEALTHCARE CORPORATION		R-PROVIDER RELATIONS									
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	Primary General	Aggregate	Teal-to-Date V									
	Other (specify) ▼	L	375.00									
В.	Full Name (Last, First, Middle Initial) LAURA E HILLENBRAND			Date o	of Red	ceipt						
	Mailing Address 767 PISGAH ROAD			11	/	06		2015				
	City	State	Zip Code				SA11AI.7					
	BRUCETON MILLS	WV	26525	Amoun	it of I	Each F	Receipt this	s Period				
	FEC ID number of contributing federal political committee.	С				,	,	10.00)			
	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation	R-REGIONAL REIMBURSEMNT		emo It	em						
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General Other (specify) ▼		210.00]								
С .	Full Name (Last, First, Middle Initial) LAURA E HILLENBRAND			Date o	of Red	ceipt						
	Mailing Address 767 PISGAH ROAD			11	/	20		2015				
	City	State	Zip Code	Trans	sacti	on ID :	SA11AI.7	7902				
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC			
Full Name (Last, First, Middle Initial) LAURA E HILLENBRAND Mailing Address 767 PISGAH ROAD City BRUCETON MILLS FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify) Other (specify)		Zip Code 26525 -REGIONAL REIMBURSEMNT Year-to-Date ▼	Date of Receipt 12 04 2015 Transaction ID: SA11AI.77903 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) LAURA E HILLENBRAND Mailing Address 767 PISGAH ROAD City BRUCETON MILLS FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State WV C Occupation DIRECTOR-	Zip Code 26525 -REGIONAL REIMBURSEMNT Year-to-Date ▼	Date of Receipt 12 18 2015 Transaction ID: SA11AI.77904 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) LAURA E HILLENBRAND Mailing Address 767 PISGAH ROAD City BRUCETON MILLS	State WV	Zip Code 26525	Date of Receipt 12 31 2015 Transaction ID : SA11AI.77905 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)		-REGIONAL REIMBURSEMNT Year-to-Date ▼ 250.00	10.00 Memo Item

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Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) A. DANIEL A HIRSCHFELD Date of Receipt Mailing Address 1 SUNSET KNOLL COURT 06 2015 11 City Zip Code State Transaction ID: SA11AI.78646 MD **TIMONIUM** 21093 Amount of Each Receipt this Period FEC ID number of contributing 150.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION EXECUTIVE VICE PRESIDENT Receipt For: Aggregate Year-to-Date ▼ Primary General 3150.00 Other (specify) Full Name (Last, First, Middle Initial) B. DANIEL A HIRSCHFELD Date of Receipt Mailing Address 1 SUNSET KNOLL COURT 20 11 2015 City State Zip Code Transaction ID: SA11AI.78647 **TIMONIUM** MD 21093 Amount of Each Receipt this Period FEC ID number of contributing 150.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION EXECUTIVE VICE PRESIDENT Receipt For: Aggregate Year-to-Date ▼ Primary General 3300.00 Other (specify) Full Name (Last, First, Middle Initial) c. DANIEL A HIRSCHFELD Date of Receipt Mailing Address 1 SUNSET KNOLL COURT M M / 04 12 2015 City Zip Code State Transaction ID: SA11AI.78648 MD **TIMONIUM** 21093 Amount of Each Receipt this Period FEC ID number of contributing С 150.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **EXECUTIVE VICE PRESIDENT** Receipt For: Aggregate Year-to-Date ▼ Primary General 3450.00 Other (specify) 450.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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		PAGE 131 OF 375
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) DANIEL A HIRSCHFELD Mailing Address 1 SUNSET KNOLL COURT		Date of Receipt
City	State Zip Code	12 18 2015 Transaction ID : SA11Al.78649
TIMONIUM	MD 21093	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation EXECUTIVE VICE PRESIDENT	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3600.00	
Full Name (Last, First, Middle Initial) DANIEL A HIRSCHFELD Mailing Address 4 SUNSET (ALGUE COURT		Date of Receipt
Mailing Address 1 SUNSET KNOLL COURT		12 31 _2015 _
City	State Zip Code	Transaction ID : SA11AI.78650
TIMONIUM	MD 21093	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation EXECUTIVE VICE PRESIDENT	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3750.00	
Full Name (Last, First, Middle Initial) C. Robert Hoch		Date of Receipt
Mailing Address 237 BIEBER MILL RD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City OLEY	State Zip Code PA 19547	Transaction ID : SA11AI.78471 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	VP OPERATIONS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
SUBTOTAL of Receipts This Page (optional)		310.00
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC											
Full Name (Last, First, Middle Initial) A. Robert Hoch			D	ate of	Re	ceip	pt				
Mailing Address 237 BIEBER MILL RD				M = M	/	D	20	/ Y		015	Y
City OLEY	State PA	Zip Code 19547					ID:S/				
FEC ID number of contributing federal political committee.	C			1		7		7		10.0	0
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VP OPERA		 	Mer	no It	tem	1				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 220.00									
Full Name (Last, First, Middle Initial) B. Robert Hoch			D	ate of	Re	ceip	pt				
Mailing Address 237 BIEBER MILL RD				M = M	′	D	04	/ Y)15	Y
City OLEY	State PA	Zip Code 19547					ID:SA				
FEC ID number of contributing federal political committee.	С			1	!	7		7	_	10.0	0
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VP OPERA			Ivier	mo l	item	1				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.00									
Full Name (Last, First, Middle Initial) C. Robert Hoch			D	ate of	Re	ceip	pt				
Mailing Address 237 BIEBER MILL RD			_	M M	/	_	18	/ Y)15	Y
City OLEY	State PA	Zip Code 19547					ID:S				
FEC ID number of contributing federal political committee.	С			Ξ	_	7		7	Ξ	10.0	0
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VP OPERA	TIONS	□ □	Mer	mo I	ltem	า				
Receipt For: Primary Other (specify)		Year-to-Date ▼ 240.00									
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Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC			
Full Name (Last, First, Middle Initial) A. Robert Hoch Mailing Address 237 BIEBER MILL RD			Date of Receipt 12 31 2015
City OLEY FEC ID number of contributing federal political committee. Name of Employer	State Zip PA 195	Code 547	Transaction ID : SA11AI.78475 Amount of Each Receipt this Period 10.00 Memo Item
GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	VP OPERATIONS Aggregate Year-to-	250.00	
Full Name (Last, First, Middle Initial) B. NATALIE P HOLLAND Mailing Address 2306 SULGRAVE AVENUE City BALTIMORE	State Zip MD 212	Code 209	Date of Receipt 11 06 2015 Transaction ID : SA11AI.77981 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	Occupation VP-DEVELOPMENT Aggregate Year-to-l		Memo Item
C. NATALIE P HOLLAND Mailing Address 2306 SULGRAVE AVENUE City		Code	Date of Receipt 11 20 2015 Transaction ID : SA11AI.77982
FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION	MD 212 C Occupation VP-DEVELOPMENT		Amount of Each Receipt this Period 18.50 Memo Item

Aggregate Year-to-Date ▼

407.00

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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) NATALIE P HOLLAND Mailing Address 2306 SULGRAVE AVENUE		Date of Receipt
	01-12	12 04 2015
City BALTIMORE	State Zip Code MD 21209	Transaction ID : SA11AI.77983 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	18.50
Name of Employer	Occupation VP DEVELOPMENT	Memo Item
GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	VP-DEVELOPMENT Aggregate Year-to-Date ▼ 425.50	
Full Name (Last, First, Middle Initial) B. NATALIE P HOLLAND		Date of Receipt
Mailing Address 2306 SULGRAVE AVENUE		12 18 _ 2015 _
City	State Zip Code	Transaction ID : SA11AI.77984
BALTIMORE FEC. ID number of contributing	MD 21209	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	18.50
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VP DEVELOPMENT	Memo Item
Receipt For: Primary General Other (specify)	VP-DEVELOPMENT Aggregate Year-to-Date ▼ 444.00	
Full Name (Last, First, Middle Initial) C. NATALIE P HOLLAND		Date of Receipt
Mailing Address 2306 SULGRAVE AVENUE		12 31 _ 2015 _
City BALTIMORE	State Zip Code MD 21209	Transaction ID : SA11AI.77985 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	18.50
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION Receipt For:	VP-DEVELOPMENT	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 462.50	
SUBTOTAL of Receipts This Page (optional)		55.50
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FOR LINE NUMBER: PAGE 135 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16

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 Inc PAC Full Name (Last, First, Middle Initial) Barbara Hoover Date of Receipt Mailing Address 121 Bridle Trail 2015 11 27 City Zip Code State Transaction ID: SA11AI.78095 PΑ Venetia 15367 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION DIRECTOR-AREA (REHAB SVS) Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) Full Name (Last, First, Middle Initial) B. Barbara Hoover Date of Receipt Mailing Address 121 Bridle Trail 12 2015 11 City State Zip Code Transaction ID: SA11AI.78096 PA Venetia 15367 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **DIRECTOR-AREA (REHAB SVS)** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 220,00 Full Name (Last, First, Middle Initial) c. Barbara Hoover Date of Receipt Mailing Address 121 Bridle Trail M = M 12 24 2015 City State Zip Code Transaction ID: SA11AI.78097 PΑ Venetia 15367 Amount of Each Receipt this Period FEC ID number of contributing С 10.00 federal political committee. Memo Item Name of Employer Occupation DIRECTOR-AREA (REHAB SVS) GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 230.00 Other (specify) 30.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 136 OF 375 (check only one) X 11a
Any information copied from such Reports and Statement or for commercial purposes, other than using the name a NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Possint For:	27292	Date of Receipt 11 06 2015 Transaction ID: SA11AI.78991 Amount of Each Receipt this Period 69.74 Memo Item
Full Name (Last, First, Middle Initial) Darin Hopping Mailing Address 130 FOXGLOVE LN		Date of Receipt

Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP OPER Receipt For: Aggregat Primary General Other (specify) Full Name (Last, First, Middle Initial) **B.** Darin Hopping Mailing Address 130 FOXGLOVE LN 11 20 2015 City Zip Code State Transaction ID: SA11AI.78992 **LEXINGTON** NC 27292 Amount of Each Receipt this Period FEC ID number of contributing 69.74 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **VP OPERATIONS** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1609,11 Full Name (Last, First, Middle Initial) c. Darin Hopping Date of Receipt Mailing Address 130 FOXGLOVE LN M M / 04 12 2015 Zip Code City State Transaction ID: SA11AI.78993 NC **LEXINGTON** 27292 Amount of Each Receipt this Period FEC ID number of contributing C 69.74 federal political committee. Memo Item Name of Employer Occupation **VP OPERATIONS** GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 1678.85 Other (specify) 209.22 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC	he name and address of any political commit	tee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Darin Hopping Mailing Address 130 FOXGLOVE LN City LEXINGTON FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code NC 27292 C Occupation VP OPERATIONS Aggregate Year-to-Date ▼ 1748.59	Date of Receipt 12 18 2015 Transaction ID: SA11AI.78994 Amount of Each Receipt this Period 69.74 Memo Item
Full Name (Last, First, Middle Initial) B. Darin Hopping Mailing Address 130 FOXGLOVE LN City LEXINGTON FEC ID number of contributing federal political committee.	State Zip Code NC 27292	Date of Receipt 12 31 2015 Transaction ID : SA11AI.78995 Amount of Each Receipt this Period

		12 31 2015
City	State Zip Code	Transaction ID : SA11AI.78995
LEXINGTON	NC 27292	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	118.62
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VP OPERATIONS	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1867.21	
Full Name (Last, First, Middle Initial) PAMELA M HUENKE		Date of Receipt
Mailing Address 2719 FOSTER AVENUE		11 06 2015
City BALTIMORE	State Zip Code MD 21224	Transaction ID : SA11AI.78180 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	10.00
Name of Employer	Occupation	- Memo Item
GENESIS HEALTHCARE CORPORATION	MANAGER-HUMAN RESOURCES REGNL	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
SURTOTAL of Receipts This Page (optional)		198.36

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$\overline{\ \ }$	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC												
Δ.	Full Name (Last, First, Middle Initial) PAMELA M HUENKE						Date of	Red	ceipt				
٦.	Mailing Address 2719 FOSTER AVENUE						M = M		D D	/ Y	201 <i>E</i>		1
	City BALTIMORE	State MD	Zip Cod 21224	de					20 on ID : S				
	FEC ID number of contributing federal political committee.	C	LILLT				Amount	of L	Each Re	ceipt thi	-	o.00	
	Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: □ Primary □ General Other (specify) ▼	Occupation MANAGER-H		▼	REGNL		Men	no It	em				
3.	Full Name (Last, First, Middle Initial) PAMELA M HUENKE Mailing Address 2719 FOSTER AVENUE						Date of	Red	D D	/ Y	Y	I Y	1
	City BALTIMORE	State MD	Zip Cod 21224	de		12 04 2 Transaction ID : SA11AI.781 Amount of Each Receipt this					od		
	FEC ID number of contributing federal political committee.	С							,	7	10	0.00	
	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation MANAGER-H	HUMAN RES	SOURCES	REGNL		Mer	no It	em				
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date		30.00								
	Full Name (Last, First, Middle Initial) PAMELA M HUENKE						Date of	Red	ceipt				
	Mailing Address 2719 FOSTER AVENUE						12	/	18	/ Y	2015	" Y	
	City BALTIMORE	State MD	Zip Cod 21224	de					on ID : S Each Re			od	
	FEC ID number of contributing federal political committee.	С							,	7	10	0.00	
	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation MANAGER-I	HUMAN RE	SOURCES	REGNL		Mer	no It	em				
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	Year-to-Date		0.00								
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FOR LINE NUMBER: PAGE 139 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16

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 Inc PAC Full Name (Last, First, Middle Initial) PAMELA M HUENKE Date of Receipt Mailing Address 2719 FOSTER AVENUE 2015 12 31 City Zip Code State Transaction ID: SA11AI.78184 MD **BALTIMORE** 21224 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION MANAGER-HUMAN RESOURCES REGNL Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. SHAYNE M. HUTCHINSON Date of Receipt Mailing Address 123 BARRINGTON DRIVE 20 11 2015 City State Zip Code Transaction ID: SA11AI.78681 SCOTT DEPOT WV 25560 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION ADMINISTRATOR-SR Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 210,00 Full Name (Last, First, Middle Initial) c. SHAYNE M. HUTCHINSON Date of Receipt Mailing Address 123 BARRINGTON DRIVE 12 04 2015 City Zip Code State Transaction ID: SA11AI.78682 WV SCOTT DEPOT 25560 Amount of Each Receipt this Period FEC ID number of contributing С 10.00 federal political committee. Memo Item Name of Employer Occupation ADMINISTRATOR-SR GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) 30.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

FOR LINE NUMBER: PAGE 140 OF 375

ITEMIZED RECEIPTS	3	for each category of the Detailed Summary Page	(check only one) X 11a
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (Ir Genesis Healthcar	· ·		
Full Name (Last, First, Midd SHAYNE M. HUTCHII Mailing Address 123 BARR	NSON		Date of Receipt
City SCOTT DEPOT FEC ID number of contribu	State WV	Zip Code 25560	12 18 2015 Transaction ID : SA11AI.78683 Amount of Each Receipt this Period
federal political committee. Name of Employer GENESIS HEALTHCARE C Receipt For: Primary Ger Other (specify) ▼	Occupation ORPORATION ADMINISTI		Memo Item
Full Name (Last, First, Midd B. SHAYNE M. HUTCH Mailing Address 123 BARR	INSON		Date of Receipt
City SCOTT DEPOT	State WV	Zip Code 25560	12 31 2015 Transaction ID : SA11AI.78684 Amount of Each Receipt this Period
FEC ID number of contributed federal political committee.	C		10.00
Name of Employer GENESIS HEALTHCARE CO	OCCUPATION ADMINISTR		Memo Item
Receipt For: Primary Ger Other (specify) ▼		Year-to-Date ▼ 240.00	
Full Name (Last, First, Midd C. WILLIAM E JERVIS			Date of Receipt
Mailing Address 10 KIRKC		7.0	11 06 2015
City WEST CHESTER	State PA	Zip Code 19382	Transaction ID : SA11AI.77848 Amount of Each Receipt this Period
FEC ID number of contributed federal political committee.	C		10.00 Memo Item
Name of Employer	Occupation		Memortem
GENESIS HEALTHCARE C	ORPORATION DIRECTOR	R-SR INTERNAL AUDIT	
Receipt For: Primary Ger Other (specify) ▼		Year-to-Date ▼ 210.00	
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IEWIZ	ED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
or for con	nmercial purposes, other than using the			erson for the purpose of soliciting contributions to solicit contributions from such committee.
	OF COMMITTEE (In Full) esis Healthcare Inc PAC			
City WEST FEC ID federal Name GENES Receip	Amme (Last, First, Middle Initial) LIAM E JERVIS Address 10 KIRKCALDY DRIVE CHESTER Donumber of contributing political committee. of Employer SIS HEALTHCARE CORPORATION to For: Primary General Other (specify)		Zip Code 19382 -SR INTERNAL AUDIT Year-to-Date ▼ 220.00	Date of Receipt 11 20 2015 Transaction ID: SA11AI.77849 Amount of Each Receipt this Period 10.00 Memo Item
Mailing City WEST FEC ID federal Name GENES Receip	Ame (Last, First, Middle Initial) LIAM E JERVIS Address 10 KIRKCALDY DRIVE CHESTER Donumber of contributing political committee. of Employer SIS HEALTHCARE CORPORATION It For: Primary General Other (specify)	1	Zip Code 19382 -SR INTERNAL AUDIT Year-to-Date ▼ 230.00	Date of Receipt 12 04 2015 Transaction ID: SA11AI.77850 Amount of Each Receipt this Period 10.00 Memo Item
C. WILI Mailing City WEST FEC II federal Name GENES Receip	Ame (Last, First, Middle Initial) LIAM E JERVIS Address 10 KIRKCALDY DRIVE CHESTER Donumber of contributing political committee. of Employer SIS HEALTHCARE CORPORATION of For: Primary General Other (specify)		Zip Code 19382 2-SR INTERNAL AUDIT Year-to-Date ▼	Date of Receipt 12 18 2015 Transaction ID : SA11AI.77851 Amount of Each Receipt this Period 10.00 Memo Item
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) WILLIAM E JERVIS Mailing Address 10 KIRKCALDY DRIVE City WEST CHESTER FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify) Call Name (Last, First, Middle Initial)	State Zip Code PA 19382 C Occupation DIRECTOR-SR INTERNAL AUDIT Aggregate Year-to-Date ▼ 250.00	Date of Receipt 12 31 2015 Transaction ID: SA11AI.77852 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) REGINA R JONES Mailing Address 2 WEATHERLY AVENUE City NEWPORT FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify) Other (specify)	State Zip Code RI 02840 C Occupation DIRECTOR-NURSING Aggregate Year-to-Date ▼ 400.00	Date of Receipt 11 06 2015 Transaction ID: SA11AI.77863 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) REGINA R JONES Mailing Address 2 WEATHERLY AVENUE City NEWPORT FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	State Zip Code RI 02840 C Occupation DIRECTOR-NURSING Aggregate Year-to-Date ▼ 410.00	Date of Receipt 11 13 2015 Transaction ID: SA11AI.77864 Amount of Each Receipt this Period 10.00 Memo Item
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Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma	ly not be sold or used by any p	erson for the purpose of soliciting contributions e to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC					
Full Name (Last, First, Middle Initial) REGINA R JONES Mailing Address 2 WEATHERLY AVENUE City	State	Zip Code	Date of Receipt 11 20 2015		
NEWPORT	RI	02840	Transaction ID : SA11AI.77865 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		10.00 Memo Item		
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation DIRECTOR	-NURSING			
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 420.00			
Full Name (Last, First, Middle Initial) B. REGINA R JONES			Date of Receipt		
Mailing Address 2 WEATHERLY AVENUE City	State	Zip Code	11 27 2015		
NEWPORT	RI	02840	Transaction ID : SA11AI.77866 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		10.00		
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation DIRECTOR-	NURSING	Memo Item		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 430.00	1		

Date of Receipt

Full Name (Last, First, Middle Initial) c. REGINA R JONES

Other (specify)

Mailing Address 2 WEATHERLY AVENUE		12 04 2015
City	State Zip Code	Transaction ID : SA11AI.77867
NEWPORT	RI 02840	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer	Occupation	- Memo Item
GENESIS HEALTHCARE CORPORATION	DIRECTOR-NURSING	
Receipt For:	Aggregate Year-to-Date ▼	
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Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) REGINA R JONES Date of Receipt Mailing Address 2 WEATHERLY AVENUE 2015 12 City State Zip Code Transaction ID: SA11AI.77868 RΙ **NEWPORT** 02840 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **DIRECTOR-NURSING** Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name (Last, First, Middle Initial) B. REGINA R JONES Date of Receipt Mailing Address 2 WEATHERLY AVENUE 12 18 2015 City State Zip Code Transaction ID: SA11AI.77869 **NEWPORT** RΙ 02840 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **DIRECTOR-NURSING** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 460,00 Full Name (Last, First, Middle Initial) c. REGINA R JONES Date of Receipt Mailing Address 2 WEATHERLY AVENUE 12 24 2015 City State Zip Code Transaction ID: SA11AI.77870 RΙ **NEWPORT** 02840 Amount of Each Receipt this Period FEC ID number of contributing С 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **DIRECTOR-NURSING** Receipt For: Aggregate Year-to-Date ▼ Primary General 470.00 Other (specify) 30.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 145 OF 375

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\	COMMITTEE (In Full) s Healthcare Inc PAC							
REGINA Mailing Add City NEWPOR' FEC ID nu federal poli Name of E GENESIS I Receipt Fo Prima Othe	mber of contributing itical committee. imployer HEALTHCARE CORPORATION or: ary General r (specify)	State RI C Occupation DIRECTOR Aggregate		12 Trans	A Saction ID ::	SA11AI.		<u></u>
Mary Ka Mailing Add City BOGOTA FEC ID nu federal poli Name of E GENESIS F Receipt Fo	mber of contributing itical committee.	State NJ C Occupation ADMINISTR Aggregate		1.1 Trans Amoun	Francisco Receipt 27 Saction ID: State of Each Receipt 27 Emoltem	SA11AI.		<u></u>
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NAME OF COMMITTEE (In Full)		, μ								
Genesis Healthcare Inc PAC										
Full Name (Last, First, Middle Initial) A. Mary Kalman				Date of	Re	ceipt				
Mailing Address 471 LARCH AVENUE				12	/	24) / Y	2015	Y	
City	State NJ	Zip Code					SA11AI.			
BOGOTA	INJ	07603		Amount	of	Each R	Receipt th	is Perio	d	
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GENESIS HEALTHCARE CORPORATION	ADMINIST	RATOR								
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General Other (specify) ▼		230.00	1							
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Full Name (Last, First, Middle Initial) B. Thomas Kelley				Date of	Re	ceipt				
Mailing Address 804 FORESTBROOK DRIVE	≣			M = M	/	06) / Y	2015	Y	
City	State	Zip Code		Trans	acti	on ID :	SA11AI.	78297		
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Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation ADMINISTF			Mei	mo I	tem				
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General	33 3		1							
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Full Name (Last, First, Middle Initial) C. Thomas Kelley				Date of	Re	ceipt				
Mailing Address 804 FORESTBROOK DRIV	 E			M = M	1 /	D = D) / Y	- Y - Y	Y	
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City HURRICANE	State WV	Zip Code 25526					SA11AI.			
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GENESIS HEALTHCARE CORPORATION	ADMINISTI	RATOR-SR								
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Primary General Other (specify) ▼		440.00	7							
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SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 147 OF 375 (check only one) X 11a
Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and a		
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last First Middle Initial)		

	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Α.	Full Name (Last, First, Middle Initial) Thomas Kelley		Date of Receipt
	Mailing Address 804 FORESTBROOK DRIVE		12 04 2015
	City HURRICANE	State Zip Code WV 25526	Transaction ID : SA11AI.78299 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	Occupation ADMINISTRATOR-SR Aggregate Year-to-Date ▼ 460.00	- Memo Item
В.	Full Name (Last, First, Middle Initial) Thomas Kelley		Date of Receipt
	Mailing Address 804 FORESTBROOK DRIVE City HURRICANE	State Zip Code WV 25526	12 18 2015 Transaction ID : SA11AI.78300 Amount of Each Receipt this Period
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	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation ADMINISTRATOR-SR	- Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	
<u>с</u> .	Full Name (Last, First, Middle Initial) Thomas Kelley		Date of Receipt
	Mailing Address 804 FORESTBROOK DRIVE		12 31 2015
	City HURRICANE	State Zip Code WV 25526	Transaction ID : SA11AI.78301 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation ADMINISTRATOR-SR	- Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
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s may not be sold or used by any pers and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
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e Zip Code	11 13 2015 Transaction ID : SA11AI.78837
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744.79	
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7 Codo	11 27 2015
e Zip Code 43302	Transaction ID : SA11AI.78838 Amount of Each Receipt this Period
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781.83	
	Date of Receipt
	12 11 2015
e Zip Code	Transaction ID : SA11AI.78839

Any information copied from such Reports and Statements or for commercial purposes, other than using the name a NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) Shannon Kellogg Mailing Address 1454 MARION CARDINGTON RD E City State ОН **MARION** FEC ID number of contributing federal political committee. Name of Employer Occup GENESIS HEALTHCARE CORPORATION **ADMIN** Receipt For: Aggreg Primary General Other (specify) Full Name (Last, First, Middle Initial) B. Shannon Kellogg Mailing Address 1454 MARION CARDINGTON RD E City State **MARION** ОН FEC ID number of contributing federal political committee. Name of Employer Occup GENESIS HEALTHCARE CORPORATION ADMIN Receipt For: Aggre Primary General Other (specify) Full Name (Last, First, Middle Initial) c. Shannon Kellogg Mailing Address 1454 MARION CARDINGTON RD E City State ОН MARION 43302 Amount of Each Receipt this Period FEC ID number of contributing C 38.63 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION ADMINISTRATOR-SR Receipt For: Aggregate Year-to-Date ▼ Primary General 820.46 Other (specify) 112.71 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Full Name (Last, First, Middle Initial)

Mailing Address 12 BLANTYRE CIR

Primary

B. WALTER J KIELAR

General

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for each	arate schedule(s) category of the Summary Page	FOR LINE NUMBER: PAGE 149 OF 375 (check only one) X 11a						
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC									
Full Name (Last, First, Middle Initial) A. Shannon Kellogg			Date of Receipt						
Mailing Address 1454 MARION CARDINGTON		1-	12 24 / Y = Y = Y = Y						
City MARION	State Zip Coc OH 43302	ae	Transaction ID : SA11AI.78840 Amount of Each Receipt this Period						
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Name of Employer	Occupation		Memo Item						
GENESIS HEALTHCARE CORPORATION Receipt For:	ADMINISTRATOR-SR Aggregate Year-to-Date	· V							
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City	State Zip Code	Transaction ID : SA11AI.77784
THORNTON	PA 19373	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VP-SR CENTERS OPERATIONS	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3150.00	
Full Name (Last, First, Middle Initial) C. WALTER J KIELAR		Date of Receipt
Mailing Address 12 BLANTYRE CIR		11 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.77785
THORNTON	PA 19373	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	VP-SR CENTERS OPERATIONS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3300.00	
SUBTOTAL of Receipts This Page (optional)		337.04

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) WALTER J KIELAR Mailing Address 12 BLANTYRE CIR City THORNTON FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	State Zip Code PA 19373 C Occupation VP-SR CENTERS OPERATIONS Aggregate Year-to-Date ▼ 3450.00	Date of Receipt 12 04 2015 Transaction ID: SA11Al.77786 Amount of Each Receipt this Period 150.00 Memo Item
Full Name (Last, First, Middle Initial) WALTER J KIELAR Mailing Address 12 BLANTYRE CIR City THORNTON FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code PA 19373 C Occupation VP-SR CENTERS OPERATIONS Aggregate Year-to-Date ▼ 3600.00	Date of Receipt 12 18 2015 Transaction ID: SA11AI.77787 Amount of Each Receipt this Period 150.00 Memo Item
Full Name (Last, First, Middle Initial) WALTER J KIELAR Mailing Address 12 BLANTYRE CIR City THORNTON FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code PA 19373 C Occupation VP-SR CENTERS OPERATIONS Aggregate Year-to-Date ▼ 3750.00	Date of Receipt 12 31 2015 Transaction ID : SA11AI.77788 Amount of Each Receipt this Period 150.00 Memo Item
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TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) Mark Kilmer Mailing Address 4529 ERIE STREET City RACINE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code WI 53402 C Occupation VP OPERATIONS REHAB SERVICES Aggregate Year-to-Date ▼ 210.00	Date of Receipt 11 27 2015 Transaction ID: SA11AI.78913 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) Mark Kilmer Mailing Address 4529 ERIE STREET City RACINE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code WI 53402 C Occupation VP OPERATIONS REHAB SERVICES Aggregate Year-to-Date ▼ 220.00	Date of Receipt 12 11 2015 Transaction ID: SA11AI.78914 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) Mark Kilmer Mailing Address 4529 ERIE STREET City RACINE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code WI 53402 C Occupation VP OPERATIONS REHAB SERVICES Aggregate Year-to-Date ▼ 230.00	Date of Receipt 12 24 2015 Transaction ID : SA11AI.78915 Amount of Each Receipt this Period 10.00 Memo Item
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Genesis Healthcare Inc PAC										
Full Name (Last, First, Middle Initial) RICHARD S KINCAID Mailing Address 2903 CORNUS WAY			D	ate of						
City	State	Zip Code	_ [11 Trans		L	06	A11AL	2015	Y
JOPPA	MD	21085							is Period	
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Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation ADMINIST			Mei	110 1	itein	1			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00								
Full Name (Last, First, Middle Initial) 3. RICHARD S KINCAID			D	ate of	Re	eceip	ipt			
Mailing Address 2903 CORNUS WAY			_ [M M	/	D	20	/ Y	2015	Y
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Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation ADMINISTI			ivier	mo l	item	n			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 220.00]							
Full Name (Last, First, Middle Initial) C. RICHARD S KINCAID			D	ate of	Re	eceip	ipt			
Mailing Address 2903 CORNUS WAY				M M	/		04	/ Y	2015	Y
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) RICHARD S KINCAID Mailing Address 2903 CORNUS WAY		Date of Receipt
City JOPPA FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code MD 21085 C Occupation ADMINISTRATOR Aggregate Year-to-Date ▼ 240.00	Transaction ID : SA11AI.77782 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) RICHARD S KINCAID Mailing Address 2903 CORNUS WAY City JOPPA FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	State Zip Code MD 21085 C Occupation ADMINISTRATOR Aggregate Year-to-Date ▼ 250.00	Date of Receipt 12 31 2015 Transaction ID: SA11AI.77783 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) Trevor Kinney Mailing Address 825 SWAMP RD. City COVENTRY FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code CT 06238 C Occupation VP OPERATIONS Aggregate Year-to-Date ▼ 1367.44	Date of Receipt 11 06 2015 Transaction ID: SA11AI.78190 Amount of Each Receipt this Period 67.41 Memo Item
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Α.	Full Name (Last, First, Middle Initial) Trevor Kinney Mailing Address 825 SWAMP RD.				ate of	′	20	/ TY	20	015	Y
	City COVENTRY	State CT	Zip Code 06238				on ID : S				
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or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC	name and a	ddress of any political committee	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Trevor Kinney Mailing Address 825 SWAMP RD. City COVENTRY FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	State CT C Occupation VP OPERA Aggregate		Date of Receipt 12 31 2015 Transaction ID : SA11AI.78194 Amount of Each Receipt this Period 63.13 Memo Item
Full Name (Last, First, Middle Initial) Dale Kirry Mailing Address 12910 50TH PL W City MUKILTEO FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State WA C Occupation VICE PRES Aggregate		Date of Receipt 11 06 2015 Transaction ID: SA11AI.78892 Amount of Each Receipt this Period 10.00 Memo Item

Dale Kirry		Date of Receipt
Mailing Address 12910 50TH PL W		11 20 / Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.78893
MUKILTEO	WA 98275	Amount of Each Receipt this Period
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Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) A. Dale Kirry Date of Receipt Mailing Address 12910 50TH PL W 04 2015 12 City State Zip Code Transaction ID: SA11AI.78894 WA **MUKILTEO** 98275 Amount of Each Receipt this Period FEC ID number of contributing C 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VICE PRESIDENT Receipt For: Aggregate Year-to-Date ▼ Primary General 230.00 Other (specify) Full Name (Last, First, Middle Initial) B. Dale Kirry Date of Receipt Mailing Address 12910 50TH PL W 12 18 2015 City State Zip Code Transaction ID: SA11AI.78895 **MUKILTEO** WA 98275 Amount of Each Receipt this Period FEC ID number of contributing C 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VICE PRESIDENT Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 240.00 Full Name (Last, First, Middle Initial) **c.** Dale Kirry Date of Receipt Mailing Address 12910 50TH PL W M M / 12 31 2015 City State Zip Code Transaction ID: SA11AI.78896 WA **MUKILTEO** 98275 Amount of Each Receipt this Period FEC ID number of contributing С 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VICE PRESIDENT Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 30.00 SUBTOTAL of Receipts This Page (optional).....

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SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 157 OF 375 (check only one) X 11a
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC			
Full Name (Last, First, Middle Initial) A. SHERRIE L KNASTER			Date of Receipt
Mailing Address 2414 OVERLOOK DRIVE			11 27 2015
City GILBERTSVILLE	State PA	Zip Code 19525	Transaction ID : SA11AI.78114 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		10.00
Name of Employer	Occupation		Memo Item
GENESIS HEALTHCARE CORPORATION Receipt For: □ Primary □ General Other (specify) ▼		R-AREA REHAB SVS Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial) 3. SHERRIE L KNASTER	'		Date of Receipt
Mailing Address 2414 OVERLOOK DRIVE			12 112015
City GILBERTSVILLE	State PA	Zip Code 19525	Transaction ID : SA11AI.78115 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		10.00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation	:-AREA REHAB SVS	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 220.00	
Full Name (Last, First, Middle Initial) C. SHERRIE L KNASTER			Date of Receipt
Mailing Address 2414 OVERLOOK DRIVE			12 24 2015 _
City GILBERTSVILLE	State PA	Zip Code 19525	Transaction ID : SA11AI.78116 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		10.00
Name of Employer	Occupation		Memo Item
GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	T -	R-AREA REHAB SVS Year-to-Date ▼ 230.00	

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Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) ERIN KNOEPFEL Mailing Address 9128 VALLEY VIEW DRIVE City CLARKS SUMMIT FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code PA 18411 C Occupation DIRECTOR-CONSULTING Aggregate Year-to-Date ▼ 630.00	Date of Receipt 11 06 2015 Transaction ID: SA11AI.78584 Amount of Each Receipt this Period 30.00 Memo Item
Full Name (Last, First, Middle Initial) ERIN KNOEPFEL Mailing Address 9128 VALLEY VIEW DRIVE City CLARKS SUMMIT FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code PA 18411 C Occupation DIRECTOR-CONSULTING Aggregate Year-to-Date ▼ 660.00	Date of Receipt 11 20 2015 Transaction ID: SA11AI.78585 Amount of Each Receipt this Period 30.00 Memo Item
Full Name (Last, First, Middle Initial) ERIN KNOEPFEL Mailing Address 9128 VALLEY VIEW DRIVE City CLARKS SUMMIT FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code PA 18411 C Occupation DIRECTOR-CONSULTING Aggregate Year-to-Date ▼ 690.00	Date of Receipt 12 04 2015 Transaction ID: SA11AI.78586 Amount of Each Receipt this Period 30.00 Memo Item
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) ERIN KNOEPFEL Date of Receipt Mailing Address 9128 VALLEY VIEW DRIVE 2015 12 18 City Zip Code State Transaction ID: SA11AI.78587 PΑ **CLARKS SUMMIT** 18411 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION DIRECTOR-CONSULTING Receipt For: Aggregate Year-to-Date ▼ Primary General 720.00 Other (specify) Full Name (Last, First, Middle Initial) B. ERIN KNOEPFEL Date of Receipt Mailing Address 9128 VALLEY VIEW DRIVE 12 31 2015 City State Zip Code Transaction ID: SA11AI.78588 **CLARKS SUMMIT** PA 18411 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **DIRECTOR-CONSULTING** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 750,00 Full Name (Last, First, Middle Initial) c. JANICE KOLESKY Date of Receipt Mailing Address 530 FREEMAN SCHOOL RD M M / 11 06 2015 City State Zip Code Transaction ID: SA11AI.78150 PΑ **HARLEYSVILLE** 19438 Amount of Each Receipt this Period FEC ID number of contributing С 10.00 federal political committee. Memo Item Name of Employer Occupation **DIRECTOR-REGIONAL SALES-MKTG** GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) 70.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 -9

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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) A. JANICE KOLESKY Mailing Address 530 FREEMAN SCHOOL RD City HARLEYSVILLE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code PA 19438 C Occupation DIRECTOR-REGIONAL SALES-MKTG Aggregate Year-to-Date ▼ 220.00	Date of Receipt 11 20 2015 Transaction ID : SA11AI.78151 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) B. JANICE KOLESKY Mailing Address 530 FREEMAN SCHOOL RD		Date of Receipt 12 04 2015
City HARLEYSVILLE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General	State Zip Code PA 19438 C Occupation DIRECTOR-REGIONAL SALES-MKTG Aggregate Year-to-Date ▼	Transaction ID : SA11AI.78152 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) C. JANICE KOLESKY Mailing Address 530 FREEMAN SCHOOL RD City HARLEYSVILLE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	State Zip Code PA 19438 C Occupation DIRECTOR-REGIONAL SALES-MKTG Aggregate Year-to-Date 240.00	Date of Receipt 12 18 2015 Transaction ID : SA11AI.78153 Amount of Each Receipt this Period 10.00 Memo Item
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC			_								

Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) JANICE KOLESKY		Date of Receipt
Mailing Address 530 FREEMAN SCHOOL RI)	12 31 2015
City HARLEYSVILLE	State Zip Code PA 19438	Transaction ID : SA11AI.78154 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General	Occupation DIRECTOR-REGIONAL SALES-MKTG Aggregate Year-to-Date ▼ 250.00	Memo Item
Other (specify) ▼ Full Name (Last, First, Middle Initial) Mary Anne Kurowski	230.00	Date of Receipt
Mailing Address 18 MEMEL DRIVE City THORNTON	State Zip Code PA 19373	11 06 2015 Transaction ID : SA11AI.78160 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VP-SN ALF SYSTEMS	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00	
Full Name (Last, First, Middle Initial) . Mary Anne Kurowski		Date of Receipt
Mailing Address 18 MEMEL DRIVE		11 20 2015
City THORNTON	State Zip Code PA 19373	Transaction ID : SA11AI.78161 Amount of Each Receipt this Period
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Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VP-SN ALF SYSTEMS	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	
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Other (specify)

Name of Employer

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Receipt For:

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Full Name (Last, First, Middle Initial) Mary Anne Kurowski Mailing Address 18 MEMEL DRIVE City THORNTON FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code PA 19373 C Occupation VP-SN ALF SYSTEMS Aggregate Year-to-Date ▼ 1150.00	Date of Receipt 12 04 2015 Transaction ID : SA11AI.78162 Amount of Each Receipt this Period 50.00 Memo Item
Full Name (Last, First, Middle Initial) Mary Anne Kurowski Mailing Address 18 MEMEL DRIVE City THORNTON FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code PA 19373 C Occupation VP-SN ALF SYSTEMS Aggregate Year-to-Date ▼	Date of Receipt 12 18 2015 Transaction ID: SA11AI.78163 Amount of Each Receipt this Period 50.00 Memo Item
Full Name (Last, First, Middle Initial) Mary Anne Kurowski Mailing Address 18 MEMEL DRIVE City	State Zip Code	Date of Receipt 12 31 2015 Transaction ID: SA11AL 78164

c. Mary Anne Kurowski Mailing Address 18 MEMEL DRIVE City Sta РΑ **THORNTON** 19373

Memo Item

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Amount of Each Receipt this Period 50.00

GENESIS HEALTHCARE CORPORATION VP-SN ALF SYSTEMS Aggregate Year-to-Date ▼

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Name of Employer

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GENESIS HEALTHCARE CORPORATION

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Occupation

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$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC									
۹.	Full Name (Last, First, Middle Initial) WENDY LABATE				Date of					
	Mailing Address 36 MACDONALD DRIVE				11		06	J L	2015	
	City	State NH	Zip Code					SA11AI		
	NASHUA FEC ID number of contributing federal political committee.	С	03062		Amount	t of	Each R	eceipt th	his Period 100.00	0
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	GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼		SIDENT-CLINICAL SVS Year-to-Date ▼ 2100.00]						
3.	Full Name (Last, First, Middle Initial) WENDY LABATE				Date of	Re	ceipt			
	Mailing Address 36 MACDONALD DRIVE				M = M	/	20	/ Y	_2015 _	7
	City	State	Zip Code			actio		SA11AI.		_
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	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 2200.00]						
-	Full Name (Last, First, Middle Initial) WENDY LABATE				Date of	Re	ceipt			
	Mailing Address 36 MACDONALD DRIVE				M M	/	04	/ Y	2015	Y
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MANE OF COMMITTEE (in Full)		Statements may not be sold or used by any pers ne name and address of any political committee to	
Full Name (Last, First, Middle Initial) WENDY LABATE Mailing Address 36 MACDONALD DRIVE City NSHUA NS	NAME OF COMMITTEE (In Full)		
Melling Address 36 MACDONALD DRIVE City NASHUA NH 03062 Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼ PEC ID number of contributing federal political committee. City Name (Last, First, Middle Initial) Name (Last, First, Middle Initial) Marry Jo Ladish Maling Address P.O. BOX 343 City Primary General Other (specify) ▼ State Zip Code NH 03062 Date of Receipt Date of Receipt 100.00 Memo item Memo item Date of Receipt 12 18 2015 Transaction ID: SA11Al.78290 Appropriate Year-to-Date ▼ Date of Receipt Date of Receipt Memo item Date of Receipt 100.00 Memo item Date of Receipt Date of Receipt Date of Receipt 100.00 Memo item Date of Receipt 100.00 Date of Receipt 100.00 Memo item Date of Receipt 100.00 Memo item Memo item Date of Receipt 100.00 Memo item Memo item Date of Receipt 100.00 Memo item 100.00 Date of Receipt 100.00 Memo item 100.00 Date of Receipt 100.00 Date			
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) Mary Jo Ladish Date of Receipt Mailing Address P.O. BOX 343 20 2015 11 City Zip Code State Transaction ID: SA11AI.79002 WV **HOMETOWN** 25109 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION DIRECTOR-SR HUMAN RESOURCES Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mary Jo Ladish Date of Receipt Mailing Address P.O. BOX 343 12 04 2015 City State Zip Code Transaction ID: SA11AI.79003 **HOMETOWN** WV 25109 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **DIRECTOR-SR HUMAN RESOURCES** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 230.00 Full Name (Last, First, Middle Initial) **c.** Mary Jo Ladish Date of Receipt Mailing Address P.O. BOX 343 M M / 12 18 2015 City Zip Code State Transaction ID: SA11AI.79004 WV **HOMETOWN** 25109 Amount of Each Receipt this Period FEC ID number of contributing С 10.00 federal political committee. Memo Item Name of Employer Occupation **DIRECTOR-SR HUMAN RESOURCES** GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) 30.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

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Full Name (Last, First, Middle Initial) Mary Langford		Date of Receipt
Mailing Address 8317 HIGH SCHOOL RD		12 18 2015
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Mailing Address 100 CRAM ROAD		11 06 2015
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Mailing Address 3807 BAKER AVENUE				M = M	/		06	/ Y		15	Y					
City ABINGDON	State MD	Zip Code 21009					ID:SA									
FEC ID number of contributing federal political committee.	С			7.4.	_	7		7	_	15.0	0					
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation DIRECTOR	n R-CLINICAL PRACTICE] L	Me	mo I	item	n									
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 315.00]													
Full Name (Last, First, Middle Initial) C. TONI LEGGORE	<u> </u>			ate of	f Re	ecei	pt									
Mailing Address 3807 BAKER AVENUE] [м - м 11	_ ′		20	/ Y)15	Y					
City ABINGDON	State MD	Zip Code 21009	A				ID:S									
FEC ID number of contributing federal political committee.	С					7		7		15.0	0					
Name of Employer	Occupation		7 [Mei	mo l	Item	n									
GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)		R-CLINICAL PRACTICE Year-to-Date ▼ 330.00	1													
SUBTOTAL of Receipts This Page (optional)		<u> </u>	-	-				_	50.00						
TOTAL This Period (last page this line numb		<u> </u>	ī			7		7								

FOR LINE NUMBER: PAGE 172 OF 375 Use separate schedule(s) for each category of the (check only one) X 11a 11b 11c 12

	Detailed Summary Page	13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the		on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) A. TONI LEGGORE		Date of Receipt
Mailing Address 3807 BAKER AVENUE		12 04 2015
City	State Zip Code	Transaction ID : SA11AI.78061
ABINGDON	MD 21009	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION Receipt For:	DIRECTOR-CLINICAL PRACTICE	
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	345.00	
Full Name (Last, First, Middle Initial) TONI LEGGORE		Date of Receipt
Mailing Address 3807 BAKER AVENUE		12 18 2015
City	State Zip Code MD 21009	Transaction ID : SA11AI.78062
ABINGDON		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation	Memo Item
Receipt For:	DIRECTOR-CLINICAL PRACTICE	
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	360.00	
Full Name (Last, First, Middle Initial) C. TONI LEGGORE		Date of Receipt
Mailing Address 3807 BAKER AVENUE		12 31 2015
City ABINGDON	State Zip Code MD 21009	Transaction ID : SA11AI.78063 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	DIRECTOR-CLINICAL PRACTICE	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	375.00	
SUBTOTAL of Receipts This Page (optional)		45.00
TOTAL This Period (last page this line number of	only)	

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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: PAGE 173 OF 375 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the $$			
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC			
Full Name (Last, First, Middle Initial) DONNA LESLIE Mailing Address 118 DEER VALLEY City	State	Zip Code	Date of Receipt 11 06 2015 Transaction ID: SA11AL78175
HURRICANE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	1	25526 -CLINICAL REIMBURSEMENT Year-to-Date ▼ 262.50	Amount of Each Receipt this Period 12.50 Memo Item
Full Name (Last, First, Middle Initial)			

Mailing Address 118 DEER VALLEY		Date of Receipt 11 20 2015
City	State Zip Code	Transaction ID : SA11AI.78176
HURRICANE	WV 25526	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	12.50
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	MANAGER-CLINICAL REIMBURSEMENT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	
Full Name (Last, First, Middle Initial) DONNA LESLIE Mailing Address 118 DEER VALLEY		Date of Receipt 12 04 2015
City	State Zip Code	Transaction ID : SA11AI.78177
HURRICANE	WV 25526	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	12.50
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	MANAGER-CLINICAL REIMBURSEMENT	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 287.50	

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

FOR LINE NUMBER: PAGE 174 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16

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 Inc PAC Full Name (Last, First, Middle Initial) DONNA LESLIE Date of Receipt Mailing Address 118 DEER VALLEY 2015 12 18 City Zip Code State Transaction ID: SA11AI.78178 WV HURRICANE 25526 Amount of Each Receipt this Period FEC ID number of contributing 12.50 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION MANAGER-CLINICAL REIMBURSEMENT Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** DONNA LESLIE Date of Receipt Mailing Address 118 DEER VALLEY 12 31 2015 City State Zip Code Transaction ID: SA11AI.78179 HURRICANE WV 25526 Amount of Each Receipt this Period FEC ID number of contributing 12.50 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION MANAGER-CLINICAL REIMBURSEMENT Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 312,50 Full Name (Last, First, Middle Initial) c. BRUCE R LEVIN Date of Receipt Mailing Address 9440 GULLEY'S COVE LANE M M / 11 27 2015 City State Zip Code Transaction ID: SA11AI.77776 MD **EASTON** 21601 Amount of Each Receipt this Period FEC ID number of contributing С 10.00 federal political committee. Memo Item Name of Employer Occupation ADMINISTRATOR-SR GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) 35.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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ITEMIZED RECEIPTS

SCHEDULE A (FEC Form 3X) FOR LINE NUMBER: PAGE 175 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16 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 Inc PAC Full Name (Last, First, Middle Initial) BRUCE R LEVIN Date of Receipt Mailing Address 9440 GULLEY'S COVE LANE 2015 12 City Zip Code State Transaction ID: SA11AI.77777 MD **EASTON** 21601 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION ADMINISTRATOR-SR Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) Full Name (Last, First, Middle Initial) B. BRUCE R LEVIN Date of Receipt Mailing Address 9440 GULLEY'S COVE LANE 12 24 2015 City State Zip Code Transaction ID: SA11AI.77778 **EASTON** MD 21601 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION ADMINISTRATOR-SR Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 230,00 Full Name (Last, First, Middle Initial) c. Susan Lin Date of Receipt Mailing Address 14 WESTMONT RD M M / 11 06 2015 State Zip Code Transaction ID: SA11AI.78907 CT WETHERSFIELD 06109 Amount of Each Receipt this Period FEC ID number of contributing С 10.00 federal political committee. Memo Item Name of Employer Occupation DIRECTOR-AREA GRS II NON-CLIN GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify)

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

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

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		FOR LINE NUMBER: PAGE 176 OF											
Use separate schedule(s) for each category of the	(0	(check only one)											
Detailed Summary Page	X	11a		11b		11c		12					
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			,		13	1	4	15	16	17
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and a	ny not be sold or ddress of any pol	used by any pe itical committee	rson for	or the p	ourpo	se of so	oliciting m such	contribut	ions ee.
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC										
Full Name (Last, First, Middle Initial) 4. Susan Lin					Date of	Rece	eipt			•
Mailing Address 14 WESTMONT RD					M = M	/	20	/ Y	2015	Y
City WETHERSFIELD	State CT	Zip Code 06109					n ID : Sa ach Red		8908 S Period	
FEC ID number of contributing federal political committee.	С							,	10.0	00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation	-AREA GRS II NC	IN-CLIN		Mem	no Ite	m			
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼	220.00							
Full Name (Last, First, Middle Initial) 3. Susan Lin					Date of	Rece	eipt			
Mailing Address 14 WESTMONT RD					M M M	/	04	/ Y	2015	Y
City WETHERSFIELD	State CT	Zip Code 06109					n ID : SA ach Red		8909 S Period	
FEC ID number of contributing federal political committee.	С				Men	no Ite	m	,	10.0	00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation DIRECTOR	-AREA GRS II NO	N-CLIN		Men	no ne	1111			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	230.00							
Full Name (Last, First, Middle Initial) C. Susan Lin					Date of	Rece	eipt			
Mailing Address 14 WESTMONT RD					M = M 12		18	/ Y	2015	Y
City WETHERSFIELD	State CT	Zip Code 06109			Transa		n ID : S			
FEC ID number of contributing federal political committee.	С							,	10.0	00
Name of Employer	Occupation			- [Men	no Ite	m			
GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)		-AREA GRS II NC Year-to-Date ▼	240.00							
SUBTOTAL of Receipts This Page (optional)			>						30.0	00
TOTAL This Period (last page this line number	only)			Ī		-,		,		

FOR LINE NUMBER: PAGE 177 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16 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 Inc PAC Full Name (Last, First, Middle Initial) Susan Lin Date of Receipt Mailing Address 14 WESTMONT RD 2015 12 31 City State Zip Code Transaction ID: SA11AI.78911 CT WETHERSFIELD 06109 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION DIRECTOR-AREA GRS II NON-CLIN Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. JOHN F LOOME Date of Receipt Mailing Address 3523 RUNNYMEDE PLACE,NW 11 06 2015 City State Zip Code Transaction ID: SA11AI.78560 WASHINGTON DC 20015 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP-SENIOR MEDICAL AFFAIRS Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1050.00 Full Name (Last, First, Middle Initial) c. JOHN F LOOME Date of Receipt Mailing Address 3523 RUNNYMEDE PLACE,NW M M / 11 20 2015 City State Zip Code Transaction ID: SA11AI.78561 DC WASHINGTON 20015 Amount of Each Receipt this Period FEC ID number of contributing С 50.00 federal political committee. Memo Item Name of Employer Occupation VP-SENIOR MEDICAL AFFAIRS GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify)

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		(che	R LINE eck only				PAGE	178 OF	375							
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	y information copied from such Reports and s for commercial purposes, other than using th NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC																
/	Genesis Healthcare Inc PAC																
<u>.</u> А.	Full Name (Last, First, Middle Initial) JOHN F LOOME				Date of	f Re	ceipt										
	Mailing Address 3523 RUNNYMEDE PLACE,	NW		12 04 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y													
	City	State	Zip Code		Trans	acti	on ID	: SA1									
	WASHINGTON	DC	20015		Amount	t of	Each	Recei	pt this	Period							
	FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 50.00													
	Name of Employer	Occupation			Mei	mo l	tem										
	GENESIS HEALTHCARE CORPORATION	· ·	R MEDICAL AFFAIRS														
	Receipt For:																
	Primary General	Aggregate	Year-to-Date ▼														
	Other (specify) ▼		1150.00														
В.	Full Name (Last, First, Middle Initial) JOHN F LOOME				Date of	f Re	ceipt										
	Mailing Address 3523 RUNNYMEDE PLACE,	NW			M = M	/	18			2015							
	City	State	Zip Code		Trans	acti	on ID	: SA1	1AI.78	563							
	WASHINGTON	DC	20015		Amount	t of	Each	Recei	pt this	Period							
	FEC ID number of contributing federal political committee.	С					7		7	50.00)						
	Name of Employer	Occupation			Me	mo l	tem										
	GENESIS HEALTHCARE CORPORATION	VP-SENIOF	R MEDICAL AFFAIRS														
	Receipt For:	Aggregate	Year-to-Date ▼														
	Primary General	33 13 111		- 1													
	Other (specify) ▼	L	1200.00	4													
С.	Full Name (Last, First, Middle Initial) JOHN F LOOME				Date of	f Re	ceipt										
	Mailing Address 3523 RUNNYMEDE PLACE,	NW			M M M	/	3	D /		2015							
	City	State	Zip Code		Trans	acti	on ID	: SA1	1AI.78	3564							
	WASHINGTON	DC	20015		Amount	t of	Each	Recei	pt this	Period							
	FEC ID number of contributing federal political committee.	С					7		7	50.00)						
	Name of Employer	Occupation	<u> </u>		Me	mo l	tem										
	GENESIS HEALTHCARE CORPORATION	VP-SENIOI	R MEDICAL AFFAIRS														
	Receipt For: Primary General		Year-to-Date ▼	-													
	Other (specify) ▼		1250.00														

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

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Receipt For:

Primary

Other (specify)

General

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

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s)								<u> </u>	179 O	F	375				
	ly information copied from such Reports and for commercial purposes, other than using the																
	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC																
Α.	Full Name (Last, First, Middle Initial) DONALEE A LOUX			D	ate of	Re	ceipt										
	Mailing Address 118 SCOTTS GLEN ROAD	State	Zip Code	11 06 2015 Transaction ID : SA11AL 77936													
	City LINCOLN UNIVERSITY	Transaction ID : SA11AI.77936 Amount of Each Receipt this Period															
	FEC ID number of contributing federal political committee.	С		50.00													
	Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For:	1	SS APPL RPTG SOLUTION Year-to-Date ▼	Memo Item													
	Primary	Aggregate	1050.00														
В.	Full Name (Last, First, Middle Initial) DONALEE A LOUX Mailing Address 118 SCOTTS GLEN ROAD			_	ate of												
	City	State	Zip Code	11 20 2015													
	LINCOLN UNIVERSITY	PA	19352-1225					on ID : SA11AI.77937 Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			-		7		7	Ξ	50.0)0					
	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VP-BUSINE	SS APPL RPTG SOLUTION		Me	mo I	tem										
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00]													
С .	Full Name (Last, First, Middle Initial) DONALEE A LOUX			D	ate of	Re	ceipt										
	Mailing Address 118 SCOTTS GLEN ROAD City	State	Zip Code	_ [M = M 12		04	i.	L	20	015	Y					
	LINCOLN UNIVERSITY	PA	19352-1225				ion ID Each										
	FEC ID number of contributing federal political committee.	С			Mo	mo l	tom		,	_	50.0)0					
	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VP-BUSINE	ESS APPL RPTG SOLUTION		_ IVIE	11101	cent										

Aggregate Year-to-Date ▼

1150.00

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9

NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial)

DONALEE A LOUX

LINCOLN UNIVERSITY

federal political committee.

Other (specify)

Full Name (Last, First, Middle Initial)

Mailing Address 118 SCOTTS GLEN ROAD

GENESIS HEALTHCARE CORPORATION

General

Name of Employer

Primary

B. DONALEE A LOUX

LINCOLN UNIVERSITY

FEC ID number of contributing

federal political committee.

Name of Employer

Primary

Receipt For:

Receipt For:

City

FEC ID number of contributing

City

Genesis Healthcare Inc PAC

Mailing Address 118 SCOTTS GLEN ROAD

GENESIS HEALTHCARE CORPORATION

General

FOR LINE NUMBER: PAGE 180 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 13 14 15 16 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. Date of Receipt 2015 12 18 Zip Code State Transaction ID: SA11AI.77939 PΑ 19352-1225 Amount of Each Receipt this Period 50.00 Memo Item Occupation VP-BUSINESS APPL RPTG SOLUTION Aggregate Year-to-Date ▼ 1200.00 Date of Receipt 12 31 2015 State Zip Code Transaction ID: SA11AI.77940 PA 19352-1225 Amount of Each Receipt this Period 50.00 Memo Item Occupation VP-BUSINESS APPL RPTG SOLUTION Aggregate Year-to-Date ▼ 1250.00 Date of Receipt M M / 11 06 2015 Zip Code Transaction ID: SA11AI.78098 17601

Full Name (Last, First, Middle Initial) c. MAUREEN G MALEY

Other (specify)

Other (specify)

Mailing Address 271 BROOK FARMS ROAD City State PΑ LANCASTER Amount of Each Receipt this Period FEC ID number of contributing С 40.00 federal political committee. Memo Item Name of Employer Occupation ASSOCIATE COUNSEL GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General

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	r information copied from such Reports and Stator commercial purposes, other than using the r			
\	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC			
	Full Name (Last, First, Middle Initial) MAUREEN G MALEY			Date of Receipt
_	Mailing Address 271 BROOK FARMS ROAD			11 20 / Y = Y = Y = Y
	City LANCASTER	State PA	Zip Code 17601	Transaction ID : SA11AI.78099
-	FEC ID number of contributing dederal political committee.	С		Amount of Each Receipt this Period 40.00

Full Name (Last, First, Middle Initial) MAUREEN G MALEY		Date of Receipt
Mailing Address 271 BROOK FARMS ROAD		11 20 _ 2015 _
City	State Zip Code	Transaction ID : SA11AI.78099
LANCASTER	PA 17601	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation ASSOCIATE COUNSEL	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	
Full Name (Last, First, Middle Initial) 3. MAUREEN G MALEY		Date of Receipt
Mailing Address 271 BROOK FARMS ROAD		12 04 2015
City	State Zip Code	Transaction ID : SA11AI.78100
LANCASTER	PA 17601	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation ASSOCIATE COUNSEL	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 840.00	
Full Name (Last, First, Middle Initial) MAUREEN G MALEY		Date of Receipt
Mailing Address 271 BROOK FARMS ROAD		12 18 2015
City	State Zip Code	Transaction ID : SA11AI.78101
LANCASTER	PA 17601	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	ASSOCIATE COUNSEL	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	880.00	
SUBTOTAL of Receipts This Page (optional)		120.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 182 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16

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 Inc PAC Full Name (Last, First, Middle Initial) MAUREEN G MALEY Date of Receipt Mailing Address 271 BROOK FARMS ROAD 2015 12 31 City Zip Code State Transaction ID: SA11AI.78102 PΑ LANCASTER 17601 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION ASSOCIATE COUNSEL Receipt For: Aggregate Year-to-Date ▼ Primary General 920.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** GREGORY MARKS Date of Receipt Mailing Address 700 ELWOOD ROAD 11 06 2015 City State Zip Code Transaction ID: SA11AI.78436 **ELWOOD** NJ 08217 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **ADMINISTRATOR** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 420,00 Full Name (Last, First, Middle Initial) c. GREGORY MARKS Date of Receipt Mailing Address 700 ELWOOD ROAD M M / 20 11 2015 City Zip Code State Transaction ID: SA11AI.78437 NJ **ELWOOD** 08217 Amount of Each Receipt this Period FEC ID number of contributing С 20.00 federal political committee. Memo Item Name of Employer Occupation **ADMINISTRATOR** GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 440.00 Other (specify) 80.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

			LINE			:	PAGE	: 1	83 OF	375
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Any information copied from such Reports and or for commercial purposes, other than using the	Statements mane name and a	ay not be sold o	or used by any political committe	person f	or the plicit con	purpos	e of so	liciting c	ontributi committe	ons e.
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC										
Full Name (Last, First, Middle Initial) GREGORY MARKS				[Date of	Recei	pt			
Mailing Address 700 ELWOOD ROAD					M = M	/ [04		2015	Y
City ELWOOD	State NJ	Zip Code 08217						11AI.78 eipt this		
FEC ID number of contributing federal political committee.	С					7		7	20.0	0
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation			٦ I	Men	no Item	1			
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼	460.00]						
Full Name (Last, First, Middle Initial) 3. GREGORY MARKS	'				Date of	Recei	pt			
Mailing Address 700 ELWOOD ROAD					M M	/ [18		2015	Y
City ELWOOD	State NJ	Zip Code 08217						11AI.78 eipt this		_
FEC ID number of contributing federal political committee.	С				Mer	mo Item		7	20.0	0
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation ADMINISTF				Mici	no iten				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	480.00							
Full Name (Last, First, Middle Initial) C. GREGORY MARKS	•				Date of	Recei	pt			
Mailing Address 700 ELWOOD ROAD					м = м 12	_	31		2015	Y
City ELWOOD	State NJ	Zip Code 08217						11AI.78		
FEC ID number of contributing federal political committee.	С					-		1	20.0	0
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation			٦ ·	Mer	mo Item	1			
Receipt For: Primary General Other (specify) ▼	T -	Year-to-Date ▼	500.00]						
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SCHEDULE A (FEC Form 3X)

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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) JOSEPH MASON Mailing Address 667 MOUNTAIN VIEW DRIVE City OAKLAND FEC ID number of contributing federal political committee.	State Zip Code MD 21550	Date of Receipt 11 06 2015 Transaction ID: SA11AI.77886 Amount of Each Receipt this Period
GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	Occupation VICE PRESIDENT-CENTERS GROUP Aggregate Year-to-Date ▼ 3150.00	Memo Item
GENESIS HEALTHCARE CORPORATION	State Zip Code MD 21550 C C C C C C C C C C C C C	Date of Receipt 11 20 2015 Transaction ID: SA11AI.77887 Amount of Each Receipt this Period 150.00 Memo Item
GENESIS HEALTHCARE CORPORATION	State Zip Code MD 21550 C C C C C C C C C C C C C	Date of Receipt 12
SUBTOTAL of Receipts This Page (optional)		450.00
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dress of any political committee	fror	n such	СО	mmitte	e.					

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) JOSEPH MASON Date of Receipt Mailing Address 667 MOUNTAIN VIEW DRIVE 2015 12 18 City Zip Code State Transaction ID: SA11AI.77889 MD OAKLAND 21550 Amount of Each Receipt this Period FEC ID number of contributing 150.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VICE PRESIDENT-CENTERS GROUP Receipt For: Aggregate Year-to-Date ▼ Primary General 3600.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** JOSEPH MASON Date of Receipt Mailing Address 667 MOUNTAIN VIEW DRIVE 12 31 2015 City State Zip Code Transaction ID: SA11AI.77890 **OAKLAND** MD 21550 Amount of Each Receipt this Period FEC ID number of contributing 150.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VICE PRESIDENT-CENTERS GROUP Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 3750.00 Full Name (Last, First, Middle Initial) c. Elena Masse Date of Receipt Mailing Address 10319 SANDY RIDGE RD SW 06 11 2015 City State Zip Code Transaction ID: SA11AI.79061 NM **ALBUQUERQUE** 87121 Amount of Each Receipt this Period FEC ID number of contributing С 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION ANALYST-LABOR Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) 310.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 9

FOR LINE NUMBER: PAGE 186 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16

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 Inc PAC Full Name (Last, First, Middle Initial) Elena Masse Date of Receipt Mailing Address 10319 SANDY RIDGE RD SW 20 2015 11 City Zip Code State Transaction ID: SA11AI.79062 NM **ALBUQUERQUE** 87121 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION ANALYST-LABOR Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) Full Name (Last, First, Middle Initial) B. Elena Masse Date of Receipt Mailing Address 10319 SANDY RIDGE RD SW 12 04 2015 City State Zip Code Transaction ID: SA11AI.79063 **ALBUQUERQUE** NM 87121 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION ANALYST-LABOR Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 230,00 Full Name (Last, First, Middle Initial) c. Elena Masse Date of Receipt Mailing Address 10319 SANDY RIDGE RD SW M M / 12 18 2015 State Zip Code Transaction ID: SA11AI.79064 NM **ALBUQUERQUE** 87121 Amount of Each Receipt this Period FEC ID number of contributing С 10.00 federal political committee. Memo Item Name of Employer Occupation ANALYST-LABOR GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) 30.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

SCHEDULE A (FEC Form 3X)

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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) A. Elena Masse Mailing Address 10319 SANDY RIDGE RD SV City ALBUQUERQUE	V State Zip Code NM 87121	Date of Receipt 12 31 2015 Transaction ID: SA11AI.79065
FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	Occupation ANALYST-LABOR Aggregate Year-to-Date ▼ 250.00	Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) Kay Matheson Mailing Address 14560 W KENSINGTON CT City BOISE FEC ID number of contributing	State Zip Code ID 83713	Date of Receipt 11 06 2015 Transaction ID: SA11Al.79041 Amount of Each Receipt this Period 50.00
federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	Occupation DIRECTOR-REGIONAL SALES-MKTG Aggregate Year-to-Date ▼ 1050.00	Memo Item
Full Name (Last, First, Middle Initial) C. Kay Matheson Mailing Address 14560 W KENSINGTON CT City	State Zip Code	Date of Receipt 11 20 2015 Transaction ID : SA11AI.79042
BOISE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: □ Primary □ General Other (specify) ▼	Occupation DIRECTOR-REGIONAL SALES-MKTG Aggregate Year-to-Date ▼ 1100.00	Amount of Each Receipt this Period 50.00 Memo Item
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Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) A. Kay Matheson Date of Receipt Mailing Address 14560 W KENSINGTON CT 04 2015 12 City State Zip Code Transaction ID: SA11AI.79043 ID **BOISE** 83713 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION DIRECTOR-REGIONAL SALES-MKTG Receipt For: Aggregate Year-to-Date ▼ Primary General 1150.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kay Matheson Date of Receipt Mailing Address 14560 W KENSINGTON CT 12 18 2015 City State Zip Code Transaction ID: SA11AI.79044 **BOISE** ID 83713 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **DIRECTOR-REGIONAL SALES-MKTG** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1200.00 Full Name (Last, First, Middle Initial) c. Kay Matheson Date of Receipt Mailing Address 14560 W KENSINGTON CT M M / 12 31 2015 City State Zip Code Transaction ID: SA11AI.79045 ID **BOISE** 83713 Amount of Each Receipt this Period FEC ID number of contributing С 50.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION DIRECTOR-REGIONAL SALES-MKTG Receipt For: Aggregate Year-to-Date ▼ Primary General 1250.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		, , , , , , , , , , , , , , , , , , ,							
Α.	Full Name (Last, First, Middle Initial) LOIS MCCASKEY				Date of	f Re	eceipt			
	Mailing Address 602 S. CONCORD ROAD				м = м 1_1	/	06		2015	Y
	City WEST CHESTER	State PA	Zip Code 19382	-				SA11AI.		<u> </u>
	FEC ID number of contributing federal political committee.	С			_	_	,	- 7		.00
	Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For:		-SR LABOR MGMT		Mei	mo I	tem			
	Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1050.00]						
В.	Full Name (Last, First, Middle Initial) LOIS MCCASKEY				Date of	f Re	eceipt			
	Mailing Address 602 S. CONCORD ROAD				M M	1	20		2015	Y
	City WEST CHESTER	State PA	Zip Code 19382					SA11AI. Receipt th		<u> </u>
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	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1100.00]						
С.	Full Name (Last, First, Middle Initial) LOIS MCCASKEY				Date of	f Re	eceipt			
	Mailing Address 602 S. CONCORD ROAD				M - M	/	04		2015	Y
	City WEST CHESTER	State PA	Zip Code 19382					: SA11AI. Receipt th		<u> </u>
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	GENESIS HEALTHCARE CORPORATION	DIRECTOR	R-SR LABOR MGMT							
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City WEST CHESTER		State PA	Zip Code 19382			Transa Amount			A11AI.7 ceipt this		
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Mailing Address 602 S. C	CONCORD ROAD					M = M	/	31	/ Y	2015	Y
City WEST CHESTER		State PA	Zip Code 19382					ı ID : SA	A11AI.7	7803	
FEC ID number of contri federal political committee	•	С				Mon	mo Itei	m	,	50.0	00
Name of Employer GENESIS HEALTHCARE	CORPORATION	Occupation DIRECTOR-	SR LABOR MG	BMT		Men	no itei	111			
Receipt For: Primary Other (specify) ▼	General	Aggregate	Year-to-Date ▼	1250.00]						
Full Name (Last, First, MC. Angela McCord	liddle Initial)					Date of	Rece	eipt			
Mailing Address 1616 Q	UAIL MEADOWS DRIV	/Ε				M = M	_	06	/ Y	2015	Y
City LANCASTER		State OH	Zip Code 43130			Transa Amount			A11AI.7 ceipt this	8986	
FEC ID number of contri federal political committee	•	С							,	40.0	00
Name of Employer	CORRORATION	Occupation	TIONIO			Mem	no Itei	m			
GENESIS HEALTHCARE Receipt For: Primary Other (specify)	General	VP OPERA	Year-to-Date ▼	840.00]						
SUBTOTAL of Receipts Th	nis Page (optional)						_	-		140.0	00
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Mailing Address 1616 QUAIL MEADOWS DRIVE

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Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial)							
Angela McCord Mailing Address 1616 QUAIL MEADOWS DRIVE City	State Zip 0	`ode	Date of Receipt 11 20 2015				
LANCASTER	OH 4313		Transaction ID : SA11AI.78987 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		40.00 Memo Item				
GENESIS HEALTHCARE CORPORATION	Occupation VP OPERATIONS						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-D	ate ▼ 880.00					
Full Name (Last, First, Middle Initial) B. Angela McCord			Date of Receipt				
Mailing Address 1616 OLIAIL MEADOWS DRIVE			M M / P P / V V V				

City LANCASTER	State Zip Code OH 43130	Transaction ID : SA11AI.78988 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	40.00
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	Occupation VP OPERATIONS Aggregate Year-to-Date ▼ 920.00	Memo Item
Full Name (Last, First, Middle Initial) Angela McCord Mailing Address 1616 QUAIL MEADOWS DRI	VE	Date of Receipt 12 18 2015
City LANCASTER	State Zip Code OH 43130	Transaction ID : SA11AI.78989 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Occupation	40.00 Memo Item
Name of Employer GENESIS HEALTHCARE CORPORATION	VP OPERATIONS	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 960.00	
SURTOTAL of Receipts This Page (optional)		120.00

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SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 192 OF 375 (check only one) X 11a
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC			
Full Name (Last, First, Middle Initial) A. Angela McCord			Date of Receipt
Mailing Address 1616 QUAIL MEADOWS DR	IVE		12 31 2015
City LANCASTER	State OH	Zip Code 43130	Transaction ID : SA11AI.78990 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		40.00
Name of Employer	Occupation		Memo Item
GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	VP OPERA Aggregate	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) LAURA T MCGINTY Mailing Address 327 SOUTH VILLAGE LANE			Date of Receipt
City CHADDS FORD	State PA	Zip Code 19317	11 06 2015 Transaction ID : SA11AI.77941
FEC ID number of contributing federal political committee.	C	19317	Amount of Each Receipt this Period 35.00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation	SIDENT-PROFESSIONAL SV	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 735.00	
Full Name (Last, First, Middle Initial) C. LAURA T MCGINTY			Date of Receipt
Mailing Address 327 SOUTH VILLAGE LANE			11 20 2015
City CHADDS FORD	State PA	Zip Code 19317	Transaction ID : SA11AI.77942 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		35.00
Name of Employer	Occupation		Memo Item
GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼		SIDENT-PROFESSIONAL SV Year-to-Date ▼ 770.00	

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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC			
Full Name (Last, First, Middle Initial) LAURA T MCGINTY Mailing Address 327 SOUTH VILLAGE LANE City CHADDS FORD FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	State PA C Occupation VICE PRES	Zip Code 19317 SIDENT-PROFESSIONAL SV Year-to-Date ▼	Date of Receipt 12 04 2015 Transaction ID: SA11AI.77943 Amount of Each Receipt this Period 35.00 Memo Item
Full Name (Last, First, Middle Initial) LAURA T MCGINTY Mailing Address 327 SOUTH VILLAGE LANE City CHADDS FORD FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General		Zip Code 19317 SIDENT-PROFESSIONAL SV Year-to-Date ▼	Date of Receipt 12 18 2015 Transaction ID : SA11AI.77944 Amount of Each Receipt this Period 35.00 Memo Item

Full Name (Last, First, Middle Initial) C. LAURA T MCGINTY			Date of Receipt	
Mailing Address 327 SOUTH VILLAGE	LANE		12 31	/
City CHADDS FORD	State PA	Zip Code 19317	Transaction ID : S	
FEC. ID number of contributing	FA.	19317	Amount of Each Rec	eipt

2015 AI.77945 this Period C 35.00 federal political committee. Memo Item Name of Employer Occupation VICE PRESIDENT-PROFESSIONAL SV GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼

Other (specify) ▼	875.00		
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) John McKenna Date of Receipt Mailing Address 1008 STANSELL DR 2015 11 06 City Zip Code State Transaction ID: SA11AI.79016 OK MIDWEST CITY 73110 Amount of Each Receipt this Period FEC ID number of contributing 38.50 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION MANAGER-INFORMATION SVS II Receipt For: Aggregate Year-to-Date ▼ Primary General 808.50 Other (specify) Full Name (Last, First, Middle Initial) B. John McKenna Date of Receipt Mailing Address 1008 STANSELL DR 20 11 2015 City State Zip Code Transaction ID: SA11AI.79017 MIDWEST CITY OK 73110 Amount of Each Receipt this Period FEC ID number of contributing 38.50 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION MANAGER-INFORMATION SVS II Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 847.00 Full Name (Last, First, Middle Initial) c. John McKenna Date of Receipt Mailing Address 1008 STANSELL DR M = M 12 04 2015 City State Zip Code Transaction ID: SA11AI.79018 OK MIDWEST CITY 73110 Amount of Each Receipt this Period FEC ID number of contributing С 38.50 federal political committee. Memo Item Name of Employer Occupation MANAGER-INFORMATION SVS II GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 885.50 Other (specify) 115.50 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) John McKenna Date of Receipt Mailing Address 1008 STANSELL DR 2015 12 18 City State Zip Code Transaction ID: SA11AI.79019 OK MIDWEST CITY 73110 Amount of Each Receipt this Period FEC ID number of contributing C 38.50 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION MANAGER-INFORMATION SVS II Receipt For: Aggregate Year-to-Date ▼ Primary General 924.00 Other (specify) Full Name (Last, First, Middle Initial) B. John McKenna Date of Receipt Mailing Address 1008 STANSELL DR 12 31 2015 City State Zip Code Transaction ID: SA11AI.79020 MIDWEST CITY OK 73110 Amount of Each Receipt this Period FEC ID number of contributing 38.50 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION MANAGER-INFORMATION SVS II Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 962,50 Full Name (Last, First, Middle Initial) c. Alicia McQuain Date of Receipt Mailing Address 7703B OAKHILL RD M M / 11 13 2015 City State Zip Code Transaction ID: SA11AI.79096 ОН NORTH ROYALTON 44133 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION DIRECTOR-AREA GRS II PT Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 97.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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SCHEDULE A (FEC Form 3X)

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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) Alicia McQuain Mailing Address 7703B OAKHILL RD City NORTH ROYALTON FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code OH 44133 C Occupation DIRECTOR-AREA GRS II PT Aggregate Year-to-Date ▼ 420.00	Date of Receipt 11 27 2015 Transaction ID: SA11AI.79097 Amount of Each Receipt this Period 20.00 Memo Item
Full Name (Last, First, Middle Initial) Alicia McQuain Mailing Address 7703B OAKHILL RD City NORTH ROYALTON FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code OH 44133 C Occupation DIRECTOR-AREA GRS II PT Aggregate Year-to-Date ▼ 440.00	Date of Receipt 12 11 2015 Transaction ID: SA11AI.79098 Amount of Each Receipt this Period 20.00 Memo Item
Full Name (Last, First, Middle Initial) Alicia McQuain Mailing Address 7703B OAKHILL RD City NORTH ROYALTON FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code OH 44133 C Occupation DIRECTOR-AREA GRS II PT Aggregate Year-to-Date ▼ 460.00	Date of Receipt 12 24 2015 Transaction ID: SA11AI.79099 Amount of Each Receipt this Period 20.00 Memo Item
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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: PAGE 197 OF 375 (check only one) X 11a
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial)		Data of Bassist

Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) WILLIAM T MERRILL		Date of Receipt
Mailing Address 225 TUDOR DRIVE		11 06 2015
City NORTH WALES	State Zip Code PA 19454	Transaction ID : SA11AI.77843 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	DIRECTOR-HUMAN RESOURCES REGNL	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	
Full Name (Last, First, Middle Initial) WILLIAM T MERRILL	•	Date of Receipt
Mailing Address 225 TUDOR DRIVE		11 20 2015
City	State Zip Code	Transaction ID : SA11AI.77844
NORTH WALES	PA 19454	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation DIRECTOR-HUMAN RESOURCES REGNL	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	
Full Name (Last, First, Middle Initial) WILLIAM T MERRILL		Date of Receipt
Mailing Address 225 TUDOR DRIVE		12 04 2015
City NORTH WALES	State Zip Code PA 19454	Transaction ID : SA11AI.77845 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	DIRECTOR-HUMAN RESOURCES REGNL	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	460.00	
		60.00

Other (specify)

Full Name (Last, First, Middle Initial)

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

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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not be sold or used by any person for the purpose of soliciting contributions										

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 Inc PAC Full Name (Last, First, Middle Initial) WILLIAM T MERRILL Date of Receipt Mailing Address 225 TUDOR DRIVE 2015 12 18 City State Zip Code Transaction ID: SA11AI.77846 PΑ **NORTH WALES** 19454 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION DIRECTOR-HUMAN RESOURCES REGNL Receipt For: Aggregate Year-to-Date ▼ Primary General 480.00 Other (specify) Full Name (Last, First, Middle Initial) B. WILLIAM T MERRILL Date of Receipt Mailing Address 225 TUDOR DRIVE 12 31 2015 City State Zip Code Transaction ID: SA11AI.77847 **NORTH WALES** PA 19454 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION DIRECTOR-HUMAN RESOURCES REGNL Receipt For: Aggregate Year-to-Date ▼ Primary General

. Michael Meyer		Date of Receipt
Mailing Address 4041 VIA MARISOL APT 102 City LOS ANGELES	State Zip Code CA 90042	11 02 2015 Transaction ID : SA11AI.78817
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 46.15 Memo Item
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General	Occupation EXECUTIVE DIRECTOR Aggregate Year-to-Date ▼	- Memoriem
Other (specify) ▼	1038.56	

500.00

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NAME OF COMMITTEE (In Full)	and the second of the second o	
Genesis Healthcare Inc PAC		
/		
Full Name (Last, First, Middle Initial) A. Michael Meyer		Date of Receipt
Mailing Address 4041 VIA MARISOL		M = M / D = D / Y = Y = Y
APT 102	State Zin Code	11 16 2015
City LOS ANGELES	State Zip Code CA 90042	Transaction ID : SA11AI.78818
	0007Z	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	46.15
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	EXECUTIVE DIRECTOR	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	1084.71	
Full Name (Last, First, Middle Initial) Michael Meyer		Date of Receipt
Mailing Address 4041 VIA MARISOL		M = M / D = D / Y = Y = Y
APT 102	State 7'- 0 '	11 30 2015
City	State Zip Code CA 90042	Transaction ID : SA11AI.78819
LOS ANGELES	CA 90042	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	74.72
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	EXECUTIVE DIRECTOR	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	1159.43	
Full Name (Last, First, Middle Initial) C. Michael Meyer		Date of Receipt
Mailing Address 4041 VIA MARISOL		M = M / D = D / Y = Y = Y
APT 102		12 14 2015
City	State Zip Code	Transaction ID : SA11AI.78820
LOS ANGELES	CA 90042	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	67.13
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	EXECUTIVE DIRECTOR	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	1226.56	
SUBTOTAL of Receipts This Page (optional)		188.00
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ITEMIZED RECEIPTS

SCHEDULE A (FEC Form 3X) FOR LINE NUMBER: PAGE 200 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16 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 Inc PAC Full Name (Last, First, Middle Initial) Michael Meyer Date of Receipt Mailing Address 4041 VIA MARISOL **APT 102** 2015 12 28 City State Zip Code Transaction ID: SA11AI.78821 CA LOS ANGELES 90042 Amount of Each Receipt this Period FEC ID number of contributing 46.15 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **EXECUTIVE DIRECTOR** Receipt For: Aggregate Year-to-Date ▼ Primary General 1272.71 Other (specify) Full Name (Last, First, Middle Initial) **B.** Peter Middlemass Date of Receipt Mailing Address 4 GOLDEN BROOK ROAD P.O. BOX 955 11 06 2015 City State Zip Code Transaction ID: SA11AI.78795 **WINDHAM** NH 03087 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP-BUSINESS DEVELOPMENT Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 840.00 Full Name (Last, First, Middle Initial) c. Peter Middlemass Date of Receipt Mailing Address 4 GOLDEN BROOK ROAD M M / 20 P.O. BOX 955 11 2015 City Zip Code State Transaction ID: SA11AI.78796 NH WINDHAM 03087 Amount of Each Receipt this Period FEC ID number of contributing С 40.00 federal political committee. Memo Item Name of Employer Occupation VP-BUSINESS DEVELOPMENT GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 880.00 Other (specify)

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Any information copied from such Reports and Statements may 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 Inc PAC Full Name (Last, First, Middle Initial) Peter Middlemass Date of Receipt Mailing Address 4 GOLDEN BROOK ROAD P.O. BOX 955 04 2015 12 City State Zip Code Transaction ID: SA11AI.78797 NH 03087 WINDHAM Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP-BUSINESS DEVELOPMENT Receipt For: Aggregate Year-to-Date ▼ Primary General 920.00 Other (specify) Full Name (Last, First, Middle Initial) B. Peter Middlemass Date of Receipt Mailing Address 4 GOLDEN BROOK ROAD P.O. BOX 955 12 18 2015 City State Zip Code Transaction ID: SA11AI.78798 **WINDHAM** NH 03087 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP-BUSINESS DEVELOPMENT Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 960.00 Full Name (Last, First, Middle Initial)

c. Peter Middlemass Date of Receipt Mailing Address 4 GOLDEN BROOK ROAD P.O. BOX 955 12 31 2015 City Zip Code State Transaction ID: SA11AI.78799 NH WINDHAM 03087 Amount of Each Receipt this Period FEC ID number of contributing С 40.00 federal political committee. Memo Item Name of Employer Occupation VP-BUSINESS DEVELOPMENT GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify)

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GENESIS HEALTHCARE CORPORATION

General

Occupation

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ADMINISTRATOR

Aggregate Year-to-Date ▼

Name of Employer

Primary

Receipt For:

SCHEDULE A (FEC ITEMIZED RECEIPTS

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SCHEDULE A (FEC Form 3 TEMIZED RECEIPTS	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 202 OF 375 (check only one)
	Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	and Statements may not be sold or used by any page the name and address of any political committee	
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAG	2	
Full Name (Last, First, Middle Initial) A. Rebecca Mills		Date of Receipt
Mailing Address 7001 LEGEND OAKS L	N	11 06 2015
City	State Zip Code TN 37918	Transaction ID : SA11AI.78846
KNOXVILLE	111 37916	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATIO	N ADMINISTRATOR	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	
Full Name (Last, First, Middle Initial) Rebecca Mills		Date of Receipt
Mailing Address 7001 LEGEND OAKS LI	N	11 20 _2015 _
City	State Zip Code	Transaction ID : SA11AI.78847
KNOXVILLE	TN 37918	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	20.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATIO	N ADMINISTRATOR	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	1
Full Name (Last, First, Middle Initial) Rebecca Mills		Date of Receipt
Mailing Address 7001 LEGEND OAKS L	N	12 04 2015
City KNOXVILLE	State Zip Code TN 37918	Transaction ID : SA11AI.78848
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 20.00

460.00

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60.00

Memo Item

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Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) Rebecca Mills Date of Receipt Mailing Address 7001 LEGEND OAKS LN 2015 12 18 City State Zip Code Transaction ID: SA11AI.78849 TN **KNOXVILLE** 37918 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **ADMINISTRATOR** Receipt For: Aggregate Year-to-Date ▼ Primary General 480.00 Other (specify) Full Name (Last, First, Middle Initial) B. Rebecca Mills Date of Receipt Mailing Address 7001 LEGEND OAKS LN 12 31 2015 City State Zip Code Transaction ID: SA11AI.78850 KNOXVILLE TN 37918 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **ADMINISTRATOR** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 Full Name (Last, First, Middle Initial) c. Michael Milne Date of Receipt Mailing Address 11633 HEAVYTREE CT 06 11 2015 Zip Code City State Transaction ID: SA11AI.78926 CA **GOLD RIVER** 95670 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION DIRECTOR-AREA GRS II PT Receipt For: Aggregate Year-to-Date ▼ Primary General

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420.00

Other (specify)

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Any information copied from such Reports and Statements may 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 Inc PAC Full Name (Last, First, Middle Initial) Michael Milne Date of Receipt Mailing Address 11633 HEAVYTREE CT 20 2015 11 City State Zip Code Transaction ID: SA11AI.78927 CA **GOLD RIVER** 95670 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION DIRECTOR-AREA GRS II PT Receipt For: Aggregate Year-to-Date ▼ Primary General 440.00 Other (specify) Full Name (Last, First, Middle Initial) B. Michael Milne Date of Receipt Mailing Address 11633 HEAVYTREE CT 12 04 2015 City State Zip Code Transaction ID: SA11AI.78928 **GOLD RIVER** CA 95670 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION DIRECTOR-AREA GRS II PT Receipt For: Aggregate Year-to-Date ▼ Primary General 460.00 Other (specify) Full Name (Last, First, Middle Initial) c. Michael Milne Date of Receipt Mailing Address 11633 HEAVYTREE CT M M / 12 18 2015 City State Zip Code Transaction ID: SA11AI.78929 CA **GOLD RIVER** 95670 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION DIRECTOR-AREA GRS II PT Receipt For: Aggregate Year-to-Date ▼ Primary General 480.00 Other (specify)

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Any information copied from such Reports and Statements may 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 Inc PAC Full Name (Last, First, Middle Initial) Michael Milne Date of Receipt Mailing Address 11633 HEAVYTREE CT 31 2015 12 City State Zip Code Transaction ID: SA11AI.78930 CA **GOLD RIVER** 95670 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION DIRECTOR-AREA GRS II PT Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Cassie Mistretta Date of Receipt Mailing Address 8405 NUGGET DR 11 06 2015 City State Zip Code Transaction ID: SA11AI.79026 **MOBILE** ΑL 36695 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **VP OPERATIONS** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 525.00 Full Name (Last, First, Middle Initial) c. Cassie Mistretta Date of Receipt Mailing Address 8405 NUGGET DR 20 2015 11 Zip Code City State Transaction ID: SA11AI.79027

federal political committee.		23.00
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	Occupation VP OPERATIONS Aggregate Year-to-Date ▼ 550.00	Memo Item
SUBTOTAL of Receipts This Page (optional)		70.00

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FEC ID number of contributing

25.00

Amount of Each Receipt this Period

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 206 OF 375

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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) Cassie Mistretta Mailing Address 8405 NUGGET DR		Date of Receipt
		12 04 2015
City MOBILE	State Zip Code AL 36695	Transaction ID : SA11AI.79028 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION Receipt For:	VP OPERATIONS	_
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 575.00	
Full Name (Last, First, Middle Initial) B. Cassie Mistretta		Date of Receipt
Mailing Address 8405 NUGGET DR		12 18 _ 2015 _
City	State Zip Code	Transaction ID : SA11AI.79029
MOBILE FEC ID number of contributing	AL 36695	Amount of Each Receipt this Period
federal political committee.	C	25.00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VP OPERATIONS	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	600.00	
Full Name (Last, First, Middle Initial) C. Cassie Mistretta		Date of Receipt
Mailing Address 8405 NUGGET DR		12 31 _ 2015 _
City MOBILE	State Zip Code AL 36695	Transaction ID : SA11AI.79030 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION Receipt For:	VP OPERATIONS	_
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	
SUBTOTAL of Receipts This Page (optional)		75.00
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tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Date of Receipt
	11 27 2015
State Zip Code	Transaction ID : SA11AI.78600
KY 41169	Amount of Each Receipt this Period
C	10.00
Occupation	Memo Item
ADMINISTRATOR	
Aggregate Year-to-Date ▼	
210.00	
	Date of Receipt
	12 11 2015
State Zip Code	Transaction ID : SA11AI.78601
KY 41169	Amount of Each Receipt this Period
C	10.00
Occupation	Memo Item
ADMINISTRATOR	
Aggregate Year-to-Date ▼	
220.00	
	Date of Receipt
	12 24 _ 2015 _
State Zip Code	Transaction ID : SA11AI.78602
KY 41169	Amount of Each Receipt this Period
C	10.00
Occupation	Memo Item
ADMINISTRATOR	
Aggregate Year-to-Date ▼	
230.00	
>	30.00
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	C Occupation ADMINISTRATOR Aggregate Year-to-Date ▼ 210.00 State Zip Code KY 41169 C Occupation ADMINISTRATOR Aggregate Year-to-Date ▼ 220.00 State Zip Code KY 41169 C Occupation ADMINISTRATOR Aggregate Year-to-Date ▼ Occupation ADMINISTRATOR Aggregate Year-to-Date ▼ Occupation ADMINISTRATOR Aggregate Year-to-Date ▼

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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 208 OF 375
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NAME OF COMMITTEE (In Full)			
Genesis Healthcare Inc PAC			
Full Name (Last, First, Middle Initial) 1. JOSEPH MONTGOMERY			Date of Receipt
Mailing Address 2701 BALD EAGLE CIRCLE			11 06 2015
City	State	Zip Code	Transaction ID : SA11AI.78594
AUDUBON	PA	19403	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer	Occupation		Memo Item
GENESIS HEALTHCARE CORPORATION		-INFORMATION SYSTEMS 2	_
Receipt For:		Year-to-Date ▼	
Primary General	Aggregate	 	1
Other (specify) ▼		1050.00	
Full Name (Last, First, Middle Initial) 3. JOSEPH MONTGOMERY			Date of Receipt
Mailing Address 2701 BALD EAGLE CIRCLE			M M / D D / Y Y Y Y
			11 20 2015
City	State	Zip Code	Transaction ID : SA11AI.78595
AUDUBON	PA	19403	Amount of Each Receipt this Period
FEC ID number of contributing	С		50.00
federal political committee.			
Name of Employer	Occupation		Memo Item
GENESIS HEALTHCARE CORPORATION	DIRECTOR	-INFORMATION SYSTEMS 2	
Receipt For: Primary General	Aggregate	Year-to-Date ▼	
Other (specify)		1100.00	
Full Name (Last, First, Middle Initial) C. JOSEPH MONTGOMERY			Date of Receipt
Mailing Address 2701 BALD EAGLE CIRCLE			12 04 _ 2015 _
City	State	Zip Code	Transaction ID : SA11AI.78596
AUDUBON	PA	19403	Amount of Each Receipt this Period
FEC ID number of contributing	С		50.00
federal political committee.			
Name of Employer	Occupation		Memo Item
GENESIS HEALTHCARE CORPORATION	DIRECTOR	-INFORMATION SYSTEMS 2	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General		1150.00	1
Other (specify) ▼		1 130.00	

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Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) A. JOSEPH MONTGOMERY Mailing Address 2704 PALP FACE CIPCLE		Date of Receipt
Mailing Address 2701 BALD EAGLE CIRCLE City State Zip	Code	12 18 2015 Transaction ID : SA11Al.78597
AUDUBON PA 19	403	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		50.00
Name of Employer Occupation		Memo Item
	MATION SYSTEMS 2	
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-	1200.00	
Full Name (Last, First, Middle Initial) 3. JOSEPH MONTGOMERY		Date of Receipt
Mailing Address 2701 BALD EAGLE CIRCLE		12 31 2015
	Code 403	Transaction ID : SA11AI.78598
10202011	+03	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		50.00
	MATION SYSTEMS 2	Memo Item
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-	Date ▼ 1250.00	
Full Name (Last, First, Middle Initial) JEFFREY A MOORE		Date of Receipt
Mailing Address 7958 CHURCH ROAD		11 06 2015
	Code 322	Transaction ID : SA11AI.78636 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		10.00
Name of Employer Occupation		Memo Item
GENESIS HEALTHCARE CORPORATION DIRECTOR-CREAT	TIVE SERVICES	
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-	Date ▼ 210.00	

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City

FELTON

Name of Employer

Primary

Other (specify)

Receipt For:

City

FELTON

Name of Employer

Primary

Other (specify)

Receipt For:

City

FELTON

Name of Employer

Primary

Other (specify)

Receipt For:

GENESIS HEALTHCARE CORPORATION

General

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 210 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16 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 Inc PAC Full Name (Last, First, Middle Initial) JEFFREY A MOORE Date of Receipt Mailing Address 7958 CHURCH ROAD 20 2015 11 Zip Code State Transaction ID: SA11AI.78637 PΑ 17322 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Occupation GENESIS HEALTHCARE CORPORATION DIRECTOR-CREATIVE SERVICES Aggregate Year-to-Date ▼ General 220.00 Full Name (Last, First, Middle Initial) **B.** JEFFREY A MOORE Date of Receipt Mailing Address 7958 CHURCH ROAD 12 04 2015 State Zip Code Transaction ID: SA11AI.78638 PA 17322 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Occupation GENESIS HEALTHCARE CORPORATION **DIRECTOR-CREATIVE SERVICES** Aggregate Year-to-Date ▼ General 230.00 Full Name (Last, First, Middle Initial) c. JEFFREY A MOORE Date of Receipt Mailing Address 7958 CHURCH ROAD M M / 12 18 2015 State Zip Code Transaction ID: SA11AI.78639 PΑ 17322 Amount of Each Receipt this Period FEC ID number of contributing С 10.00 federal political committee. Memo Item Occupation

DIRECTOR-CREATIVE SERVICES

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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC			
Possint For:	Zip Code 17322 10 R-CREATIVE SERVICES 12 Year-to-Date ▼ 250.00	Date of Receipt 12 31 Transaction ID: SA11A Amount of Each Receipt Memo Item	this Period
Full Name (Last, First, Middle Initial) B. Diane Morris Mailing Address 2025 Kater Street	7:n Code	Date of Receipt 11 06	2015

В.	Diane Morris		Date of Receipt
	Mailing Address 2025 Kater Street		11 06 2015
	City	State Zip Code	Transaction ID : SA11AI.77789
	Philadelphia	PA 19146	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	10.00
	Name of Employer	Occupation	Memo Item
	GENESIS HEALTHCARE CORPORATION	DIRECTOR-REGIONAL REIMBURSEMNT	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
C.	Full Name (Last, First, Middle Initial) Diane Morris		Date of Receipt
	Mailing Address 2025 Kater Street		M = M / D = D / Y = Y = Y = Y = 1
	City	State Zip Code	Transaction ID : SA11AI.77790
	Philadelphia	PA 19146	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10.00
	Name of Employer	Occupation	Memo Item
	GENESIS HEALTHCARE CORPORATION	DIRECTOR-REGIONAL REIMBURSEMNT	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	
S	SUBTOTAL of Receipts This Page (optional)		30.00

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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) Diane Morris Mailing Address 2025 Kater Street		Date of Receipt 12 04 2015
City Philadelphia FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code PA 19146 C Occupation DIRECTOR-REGIONAL REIMBURSEMNT Aggregate Year-to-Date ▼ 230.00	Transaction ID : SA11AI.77791 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) 3. Diane Morris Mailing Address 2025 Kater Street City Philadelphia	State Zip Code PA 19146	Date of Receipt 12 18 2015 Transaction ID: SA11AI.77792 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	Occupation DIRECTOR-REGIONAL REIMBURSEMNT Aggregate Year-to-Date 240.00	10.00 Memo Item
Full Name (Last, First, Middle Initial) Diane Morris Mailing Address 2025 Kater Street City Philadelphia FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code PA 19146 C Occupation DIRECTOR-REGIONAL REIMBURSEMNT Aggregate Year-to-Date ▼ 250.00	Date of Receipt 12 31 2015 Transaction ID: SA11AI.77793 Amount of Each Receipt this Period 10.00 Memo Item
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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: PAGE 213 OF 375 (check only one) X 11a
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial)		

or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
۹.	Full Name (Last, First, Middle Initial) Michael Morris Mailing Address 3843 PROVIDENCE ROAD		Date of Receipt
	City NEWTOWN SQUARE	State Zip Code PA 19073	11 06 2015 Transaction ID : SA11AI.78724 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10.00 Memo Item
	Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For:	Occupation MGR-BUSINESS PLNG STRATEGY DEV Aggregate Year-to-Date ▼	The first term
	Primary General Other (specify) ▼	210.00	
3.	Full Name (Last, First, Middle Initial) Michael Morris Mailing Address 3843 PROVIDENCE ROAD		Date of Receipt
	City NEWTOWN SQUARE	State Zip Code PA 19073	11 20 2015 Transaction ID : SA11AI.78725 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10.00
	Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For:	Occupation MGR-BUSINESS PLNG STRATEGY DEV	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	
С.	Full Name (Last, First, Middle Initial) Michael Morris		Date of Receipt
	Mailing Address 3843 PROVIDENCE ROAD City	State Zip Code	12 04 2015
	NEWTOWN SQUARE	PA 19073	Transaction ID : SA11AI.78726 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10.00
	Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For:	Occupation MGR-BUSINESS PLNG STRATEGY DEV	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	
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SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 214 OF 375 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC			
Full Name (Last, First, Middle Initial) A. Michael Morris			Date of Receipt
Mailing Address 3843 PROVIDENCE ROAD		7: 0.1	12 18 2015
City NEWTOWN SQUARE	State PA	Zip Code 19073	Transaction ID : SA11AI.78727 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		10.00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation MGR-BUSI	NESS PLNG STRATEGY DEV	- Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) 3. Michael Morris			Date of Receipt
Mailing Address 3843 PROVIDENCE ROAD			12 31 2015
City NEWTOWN SQUARE	State PA	Zip Code	Transaction ID : SA11AI.78728
FEC ID number of contributing federal political committee.	C	19073	Amount of Each Receipt this Period
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation MGR-BUSI	NESS PLNG STRATEGY DEV	- Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) C. NANCY A MORRISON			Date of Receipt
Mailing Address 4 CONCORD WAY			11 06 2015
City CHADDS FORD	State PA	Zip Code 19317	Transaction ID : SA11AI.78054 Amount of Each Receipt this Period

c. NANCY A MORRISON Mailing Address 4 CONCORD WAY

General

S City CHADDS FORD

FEC ID number of contributing C federal political committee. Name of Employer Occupation

GENESIS HEALTHCARE CORPORATION VP-QUALITY IMPROVEMENT Aggregate Year-to-Date ▼

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SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 215 OF 375

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) NANCY A MORRISON Mailing Address 4 CONCORD WAY City CHADDS FORD FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	State Zip Code PA 19317 C Occupation VP-QUALITY IMPROVEMENT Aggregate Year-to-Date ▼	Date of Receipt 11 20 2015 Transaction ID : SA11AI.78055 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) NANCY A MORRISON Mailing Address 4 CONCORD WAY		Date of Receipt
City CHADDS FORD FEC ID number of contributing federal political committee.	State Zip Code PA 19317	12 04 2015 Transaction ID : SA11AI.78056 Amount of Each Receipt this Period 10.00
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	Occupation VP-QUALITY IMPROVEMENT Aggregate Year-to-Date ▼ 230.00	Memo Item
Full Name (Last, First, Middle Initial) NANCY A MORRISON Mailing Address 4 CONCORD WAY		Date of Receipt
City CHADDS FORD FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	State Zip Code PA 19317 C Occupation VP-QUALITY IMPROVEMENT Aggregate Year-to-Date ▼ 240.00	Transaction ID : SA11AI.78057 Amount of Each Receipt this Period 10.00 Memo Item
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Any information copied from such Reports and Statements may 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 Inc PAC Full Name (Last, First, Middle Initial) NANCY A MORRISON Date of Receipt Mailing Address 4 CONCORD WAY 2015 12 31 City State Zip Code Transaction ID: SA11AI.78058 PΑ **CHADDS FORD** 19317 Amount of Each Receipt this Period FEC ID number of contributing C 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP-QUALITY IMPROVEMENT Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kevin Mulford Date of Receipt Mailing Address 2454 ROSEHAVEN DRIVE 11 06 2015 City State Zip Code Transaction ID: SA11AI.78996 WESLEY CHAPEL FL 33544 Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VICE PRESIDENT Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1475.00 Full Name (Last, First, Middle Initial)

c. Kevin Mulford Date of Receipt Mailing Address 2454 ROSEHAVEN DRIVE 20 11 2015 City State Zip Code Transaction ID: SA11AI.78997 FL WESLEY CHAPEL 33544 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VICE PRESIDENT Receipt For: Aggregate Year-to-Date ▼ Primary General 1550.00 Other (specify)

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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC													
Full Name (Last, First, Middle Initial) A. Kevin Mulford				Date of Receipt									
Mailing Address 2454 ROSEHAVEN DRIVE			12 04 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y										
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Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VICE PRES		7 -	ıvler	mo l	iten	11						
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Primary General Other (specify) ▼		1625.00]										
Full Name (Last, First, Middle Initial) 3. Kevin Mulford			С	ate of	Re	ecei	ipt						
Mailing Address 2454 ROSEHAVEN DRIVE				12 18 2015									
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Full Name (Last, First, Middle Initial) C. Kevin Mulford				ate of	Re	ecei	ipt						
Mailing Address 2454 ROSEHAVEN DRIVE				M - M			31	/ Y	2015	Y			
City WESLEY CHAPEL	State FL	Zip Code 33544						SA11AI. eceipt th	. 79000 nis Perio	d			
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		tatements may not be sold or used by any personame and address of any political committee to	
$\left. \right\rangle$	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Α.	Full Name (Last, First, Middle Initial) Jeffrey Mullins Mailing Address 116 SUMMIT RIDGE RD City	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	WHITE HALL FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	Occupation DIRECTOR-RISK MGMT PROGRAMS Aggregate Year-to-Date ▼ 420.00	Amount of Each Receipt this Period 20.00 Memo Item
В.	Full Name (Last, First, Middle Initial) Jeffrey Mullins Mailing Address 116 SUMMIT RIDGE RD City WHITE HALL FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code WV 26554 C Occupation DIRECTOR-RISK MGMT PROGRAMS Aggregate Year-to-Date ▼ 440.00	Date of Receipt 11 20 2015 Transaction ID: SA11AI.78627 Amount of Each Receipt this Period 20.00 Memo Item
C.	Full Name (Last, First, Middle Initial) Jeffrey Mullins Mailing Address 116 SUMMIT RIDGE RD City WHITE HALL FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code WV 26554 C Occupation DIRECTOR-RISK MGMT PROGRAMS Aggregate Year-to-Date ▼ 460.00	Date of Receipt 12 04 2015 Transaction ID: SA11AI.78628 Amount of Each Receipt this Period 20.00 Memo Item
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SCHEDULE A (FEC Form 3X)

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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) Jeffrey Mullins Mailing Address 116 SUMMIT RIDGE RD City WHITE HALL FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify) General	State Zip Code WV 26554 C Occupation DIRECTOR-RISK MGMT PROGRAMS Aggregate Year-to-Date ▼ 480.00	Date of Receipt 12 18 2015 Transaction ID: SA11AI.78629 Amount of Each Receipt this Period 20.00 Memo Item
Full Name (Last, First, Middle Initial) Jeffrey Mullins Mailing Address 116 SUMMIT RIDGE RD City WHITE HALL FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	State Zip Code WV 26554 C Occupation DIRECTOR-RISK MGMT PROGRAMS Aggregate Year-to-Date ▼ 500.00	Date of Receipt 12 31 2015 Transaction ID: SA11AI.78630 Amount of Each Receipt this Period 20.00 Memo Item
Full Name (Last, First, Middle Initial) Daniel Murray Mailing Address 3609 13TH AVE SW City OLYMPIA FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code WA 98512 C Occupation VP OPERATIONS Aggregate Year-to-Date ▼ 630.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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FOR LINE NUMBER: PAGE 220 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

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 Inc PAC Full Name (Last, First, Middle Initial) Daniel Murray Date of Receipt Mailing Address 3609 13TH AVE SW 20 2015 11 City Zip Code State Transaction ID: SA11AI.79057 WA **OLYMPIA** 98512 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **VP OPERATIONS** Receipt For: Aggregate Year-to-Date ▼ Primary General 660.00 Other (specify) Full Name (Last, First, Middle Initial) B. Daniel Murray Date of Receipt Mailing Address 3609 13TH AVE SW 12 04 2015 City State Zip Code Transaction ID: SA11AI.79058 **OLYMPIA** WA 98512 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **VP OPERATIONS** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 690,00 Full Name (Last, First, Middle Initial) c. Daniel Murray Date of Receipt Mailing Address 3609 13TH AVE SW M M / 12 18 2015 City Zip Code State Transaction ID: SA11AI.79059 WA **OLYMPIA** 98512 Amount of Each Receipt this Period FEC ID number of contributing С 30.00 federal political committee. Memo Item Name of Employer Occupation **VP OPERATIONS** GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 720.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 9

ITEMIZED RECEIPTS

SCHEDULE A (FEC Form 3X) FOR LINE NUMBER: PAGE 221 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16 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 Inc PAC Full Name (Last, First, Middle Initial) Daniel Murray Date of Receipt Mailing Address 3609 13TH AVE SW 2015 12 31 City Zip Code State Transaction ID: SA11AI.79060 WA **OLYMPIA** 98512 Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **VP OPERATIONS** Receipt For: Aggregate Year-to-Date ▼ Primary General 750.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** LAUREN F MURRAY Date of Receipt Mailing Address 440 MAIN STREET 11 06 2015 City State Zip Code Transaction ID: SA11AI.78360 **AMESBURY** MA 01913 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **VP OPERATIONS** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1050.00 Full Name (Last, First, Middle Initial) c. LAUREN F MURRAY Date of Receipt Mailing Address 440 MAIN STREET M M / 11 20 2015 City State Zip Code Transaction ID: SA11AI.78361 MA **AMESBURY** 01913 Amount of Each Receipt this Period FEC ID number of contributing С 50.00 federal political committee. Memo Item Name of Employer Occupation **VP OPERATIONS** GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify)

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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) LAUREN F MURRAY Mailing Address 440 MAIN STREET City AMESBURY FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code MA 01913 C Occupation VP OPERATIONS Aggregate Year-to-Date ▼ 1150.00	Date of Receipt 12 04 2015 Transaction ID: SA11AI.78362 Amount of Each Receipt this Period 50.00 Memo Item
Full Name (Last, First, Middle Initial) LAUREN F MURRAY Mailing Address 440 MAIN STREET City AMESBURY FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify) Full Name (Last, First, Middle Initial)	State Zip Code MA 01913 C Occupation VP OPERATIONS Aggregate Year-to-Date ▼ 1200.00	Date of Receipt 12 18 2015 Transaction ID : SA11AI.78363 Amount of Each Receipt this Period 50.00 Memo Item
Full Name (Last, First, Middle Initial) LAUREN F MURRAY Mailing Address 440 MAIN STREET City AMESBURY FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	State Zip Code MA 01913 C Occupation VP OPERATIONS Aggregate Year-to-Date ▼ 1250.00	Date of Receipt 12 31 2015 Transaction ID: SA11AI.78364 Amount of Each Receipt this Period 50.00 Memo Item
SUBTOTAL of Receipts This Page (optional)		150.00
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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 223 OF 375 (check only one) X 11a
	ny information copied from such Reports and State for commercial purposes, other than using the r			
\rangle	Genesis Healthcare Inc PAC			
Α.	Full Name (Last, First, Middle Initial) Cynthia Myers Mailing Address 3588 CAVE CREEK MANOR			Date of Receipt
	City LAS CRUCES	State NM	Zip Code 88011	11 06 2015 Transaction ID : SA11AI.79046 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		39.00
	Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General	Occupation VP OPERA Aggregate	Year-to-Date ▼	— Memo Item
 R	Other (specify) ▼ Full Name (Last, First, Middle Initial) Cynthia Myers		819.00	Date of Receipt

Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) Cynthia Myers Mailing Address 3588 CAVE CREEK MANOR		Date of Receipt
City	State Zip Code	11 06 2015 Transaction ID : SA11Al.79046
LAS CRUCES	NM 88011	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	39.00 Memo Item
Name of Employer	Occupation	Memortem
GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (cpecify) —	VP OPERATIONS Aggregate Year-to-Date ▼ 819.00	
Other (specify) ▼ Full Name (Last, First, Middle Initial) Cynthia Myers	Date of Receipt	
Mailing Address 3588 CAVE CREEK MANOR	State Zip Code	11 20 2015
City LAS CRUCES	NM 88011	Transaction ID : SA11AI.79047 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	39.00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VP OPERATIONS	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 858.00	
Full Name (Last, First, Middle Initial) Cynthia Myers		Date of Receipt
Mailing Address 3588 CAVE CREEK MANO		12 04 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City LAS CRUCES	State Zip Code NM 88011	Transaction ID : SA11AI.79048 Amount of Each Receipt this Period
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Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VP OPERATIONS	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 897.00	
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В.	Full Name (Last, First, Middle Initial) Cynthia Myers				Date of	Re	eceipt										
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	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 975.00]													
<u> </u>	Full Name (Last, First, Middle Initial) Margaret Najera				Date of	Re	eceipt										
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	City ELKTON	State MD	Zip Code 21921					: SA11AI. Receipt th									
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	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC									
Α.	Full Name (Last, First, Middle Initial) Margaret Najera			Date of Receipt						
	Mailing Address 28 BROOKVIEW LOOP City ELKTON	State MD	Zip Code 21921	11 27 2015 Transaction ID : SA11AI.78133						
	FEC ID number of contributing federal political committee.	C	21921	Amount of Each Receipt this Period 20.00						
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В.	Full Name (Last, First, Middle Initial) Margaret Najera Mailing Address 28 BROOKVIEW LOOP			Date of Receipt						
	City ELKTON	State MD	Zip Code 21921	Transaction ID : SA11AI.78134 Amount of Each Receipt this Period						
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	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation ADMINISTF		Memo Item						
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 460.00							
c.	Full Name (Last, First, Middle Initial) KEITH NAUSE			Date of Receipt						
	Mailing Address 5 COOPERSTOWN COURT		7: 0 !	11 06 2015						
	City PHOENIX	State MD	Zip Code 21131	Transaction ID : SA11AI.78253 Amount of Each Receipt this Period						
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ITEMIZED RECEIPTS

SCHEDULE A (FEC Form 3X) FOR LINE NUMBER: PAGE 226 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16 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 Inc PAC Full Name (Last, First, Middle Initial) KEITH NAUSE Date of Receipt Mailing Address 5 COOPERSTOWN COURT 20 2015 11 City Zip Code State Transaction ID: SA11AI.78254 MD **PHOENIX** 21131 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP & REGIONAL CONTROLLER Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify) Full Name (Last, First, Middle Initial) B. KEITH NAUSE Date of Receipt Mailing Address 5 COOPERSTOWN COURT 12 04 2015 City State Zip Code Transaction ID: SA11AI.78255 **PHOENIX** MD 21131 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP & REGIONAL CONTROLLER Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1150.00 Full Name (Last, First, Middle Initial) c. KEITH NAUSE Date of Receipt Mailing Address 5 COOPERSTOWN COURT M M / 12 18 2015 City Zip Code State Transaction ID: SA11AI.78256 MD **PHOENIX** 21131 Amount of Each Receipt this Period FEC ID number of contributing С 50.00 federal political committee. Memo Item Name of Employer Occupation VP & REGIONAL CONTROLLER GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial)				Detailed Summ	nary Page	-	11a 13	110	15	_	16	17				
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) Carol Nichols Date of Receipt Mailing Address 339 E CAMBRIDGE DR 2015 11 06 City State Zip Code Transaction ID: SA11AI.79066 **TUCSON** ΑZ 85704 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VICE PRESIDENT Receipt For: Aggregate Year-to-Date ▼ Primary General 525.00 Other (specify) Full Name (Last, First, Middle Initial) B. Carol Nichols Date of Receipt Mailing Address 339 E CAMBRIDGE DR 20 11 2015 City State Zip Code Transaction ID: SA11AI.79067 **TUCSON** ΑZ 85704 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VICE PRESIDENT Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 550,00 Full Name (Last, First, Middle Initial) c. Carol Nichols Date of Receipt Mailing Address 339 E CAMBRIDGE DR M M / 12 04 2015 City State Zip Code Transaction ID: SA11AI.79068 ΑZ **TUCSON** 85704 Amount of Each Receipt this Period FEC ID number of contributing С 25.00 federal political committee. Memo Item Name of Employer Occupation VICE PRESIDENT GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 575.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) Carol Nichols Mailing Address 339 E CAMBRIDGE DR		Date of Receipt 12 18 2015
City TUCSON FEC ID number of contributing federal political committee.	State Zip Code AZ 85704	Transaction ID : SA11AI.79069 Amount of Each Receipt this Period 25.00
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	Occupation VICE PRESIDENT Aggregate Year-to-Date ▼ 600.00	- Memo Item
Full Name (Last, First, Middle Initial) Carol Nichols Mailing Address 339 E CAMBRIDGE DR		Date of Receipt 12 31 2015
City TUCSON	State Zip Code AZ 85704	Transaction ID : SA11AI.79070 Amount of Each Receipt this Period
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Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For:	Occupation VICE PRESIDENT	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	
Full Name (Last, First, Middle Initial) ARTHUR L O'LEARY Mailing Address To BROAD STREET		Date of Receipt
Mailing Address 79 BROAD STREET City HOLLIS	State Zip Code NH 03049	11 06 2015 Transaction ID : SA11AI.78243 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For:	Occupation VP OPERATIONS	Memo Item
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 840.00	
SUBTOTAL of Receipts This Page (optional).	<u> </u>	90.00
TOTAL This Period (last page this line number	er only)	

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Genesis Healthcare Inc PAC															
Full Name (Last, First, Middle Initial) ARTHUR L O'LEARY			D	ate of	Re	ecei	ipt								
Mailing Address 79 BROAD STREET				M - M	/		20	/ Y	2015	Y					
City HOLLIS	State NH	Zip Code 03049						A11AI.							
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period 40.00 Memo Item												
Name of Employer GENESIS HEALTHCARE CORPORATION	Memo Item														
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 880.00													
Full Name (Last, First, Middle Initial) ARTHUR L O'LEARY			D	ate of	Re	ecei	ipt								
Mailing Address 79 BROAD STREET			_ [M M	′		04	/ Y	2015	Y					
City HOLLIS	State NH	Zip Code 03049	Transaction ID : SA11AI.78245 Amount of Each Receipt this Period												
FEC ID number of contributing federal political committee.	С		40.00 Memo Item												
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VP OPERA			iviei	mo i	item	n								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 920.00]												
Full Name (Last, First, Middle Initial) C. ARTHUR L O'LEARY			D	ate of	Re	ecei	ipt								
Mailing Address 79 BROAD STREET				M M		L	18	L	2015	Y					
City HOLLIS	State NH	Zip Code 03049						A11AL.	78246 nis Period						
FEC ID number of contributing federal political committee.	С					7		,	40.0	00					
Name of Employer	Occupation	1	- [Mer	mo l	ltem	n								
GENESIS HEALTHCARE CORPORATION Receipt For:	VP OPERA		\dashv												
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 960.00													
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ITEMIZED RECEIPTS

SCHEDULE A (FEC Form 3X) FOR LINE NUMBER: PAGE 232 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16 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 Inc PAC Full Name (Last, First, Middle Initial) ARTHUR L O'LEARY Date of Receipt Mailing Address 79 BROAD STREET 2015 12 31 City Zip Code State Transaction ID: SA11AI.78247 NH **HOLLIS** 03049 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **VP OPERATIONS** Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** KATHLEEN VERSHINSKI OBERTO Date of Receipt Mailing Address 23 BIRCHWOOD DRIVE 11 06 2015 City State Zip Code Transaction ID: SA11AI.78704 **EVESHAM** NJ 08053 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION DIRECTOR-RECRUITING REHAB Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 210.00 Full Name (Last, First, Middle Initial) c. KATHLEEN VERSHINSKI OBERTO Date of Receipt Mailing Address 23 BIRCHWOOD DRIVE 20 11 2015 City State Zip Code Transaction ID: SA11AI.78705 NJ **EVESHAM** 08053 Amount of Each Receipt this Period FEC ID number of contributing С 10.00 federal political committee. Memo Item Name of Employer Occupation DIRECTOR-RECRUITING REHAB GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify)

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SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 233 OF 375

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and or for commercial purposes, other than using the		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) KATHLEEN VERSHINSKI OBERTO Mailing Address 23 BIRCHWOOD DRIVE City EVESHAM FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify) EMPLOYED TO BERTON	State Zip Code NJ 08053 C Occupation DIRECTOR-RECRUITING REHAB Aggregate Year-to-Date ▼ 230.00	Date of Receipt 12 04 2015 Transaction ID : SA11AI.78706 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) KATHLEEN VERSHINSKI OBERT Mailing Address 23 BIRCHWOOD DRIVE City EVESHAM FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	O State Zip Code NJ 08053 C Occupation DIRECTOR-RECRUITING REHAB Aggregate Year-to-Date ▼ 240.00	Date of Receipt 12 18 2015 Transaction ID: SA11AI.78707 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) KATHLEEN VERSHINSKI OBEF Mailing Address 23 BIRCHWOOD DRIVE City EVESHAM FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify) Other (specify)	State Zip Code NJ 08053 C Occupation DIRECTOR-RECRUITING REHAB Aggregate Year-to-Date 250.00	Date of Receipt 12 31 2015 Transaction ID : SA11AI.78708 Amount of Each Receipt this Period 10.00 Memo Item
SUBTOTAL of Receipts This Page (optional)	>	30.00
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) Susan Overton Date of Receipt Mailing Address 434 MONTERAY LANE 06 2015 11 City State Zip Code Transaction ID: SA11AI.78776 PΑ WEST CHESTER 19380 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION COUNSEL-DEPUTY GNRL RISK LITGN Receipt For: Aggregate Year-to-Date ▼ Primary General 420.00 Other (specify) Full Name (Last, First, Middle Initial) B. Susan Overton Date of Receipt Mailing Address 434 MONTERAY LANE 20 11 2015 City State Zip Code Transaction ID: SA11AI.78777 WEST CHESTER PA 19380 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION COUNSEL-DEPUTY GNRL RISK LITGN Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 440.00 Full Name (Last, First, Middle Initial) c. Susan Overton Date of Receipt

Mailing Address 434 MONTERAY LANE 12 04 2015 City State Zip Code Transaction ID: SA11AI.78778 PΑ WEST CHESTER 19380 Amount of Each Receipt this Period FEC ID number of contributing С 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION COUNSEL-DEPUTY GNRL RISK LITGN Receipt For: Aggregate Year-to-Date ▼ Primary General 460.00 Other (specify)

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	Detailed Summary Page	13 14 15 16 17
	Statements may not be sold or used by any pers e name and address of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) A. Susan Overton		Date of Receipt
Mailing Address 434 MONTERAY LANE		12 18 2015
City	State Zip Code	Transaction ID : SA11AI.78779
WEST CHESTER	PA 19380	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	COUNSEL-DEPUTY GNRL RISK LITGN	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	480.00	
Full Name (Last, First, Middle Initial) 3. Susan Overton		Date of Receipt
Mailing Address 434 MONTERAY LANE		12 31 2015
City	State Zip Code	Transaction ID : SA11AI.78780
WEST CHESTER	PA 19380	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	COUNSEL-DEPUTY GNRL RISK LITGN	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
care (eposity) 🗸		
Full Name (Last, First, Middle Initial) C. Deborah Pence		Date of Receipt
Mailing Address 9520 MAY DAY ST		11 06 2015
City	State Zip Code	Transaction ID : SA11AI.78971
LA PLATA	MD 20646	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	DIRECTOR-COMPLIANCE	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	525.00	
SUBTOTAL of Receipts This Page (optional)		65.00
TOTAL This Period (last page this line number	only)	7

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 236 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) Deborah Pence Mailing Address 9520 MAY DAY ST City LA PLATA FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code MD 20646 C Occupation DIRECTOR-COMPLIANCE Aggregate Year-to-Date ▼	Date of Receipt 11 20 2015 Transaction ID: SA11AI.78972 Amount of Each Receipt this Period 25.00 Memo Item
Full Name (Last, First, Middle Initial) Deborah Pence Mailing Address 9520 MAY DAY ST City LA PLATA FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) Other (specify)	State Zip Code MD 20646 C Occupation DIRECTOR-COMPLIANCE Aggregate Year-to-Date ▼ 575.00	Date of Receipt 12 04 2015 Transaction ID: SA11AI.78973 Amount of Each Receipt this Period 25.00 Memo Item
Full Name (Last, First, Middle Initial) Deborah Pence Mailing Address 9520 MAY DAY ST City LA PLATA FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code MD 20646 C Occupation DIRECTOR-COMPLIANCE Aggregate Year-to-Date ▼ 600.00	Date of Receipt 12
SUBTOTAL of Receipts This Page (optional)		75.00
TOTAL This Period (last page this line numbe	er only)	

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Any information copied from such Reports and Statements may 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 Inc PAC Full Name (Last, First, Middle Initial) Deborah Pence Date of Receipt Mailing Address 9520 MAY DAY ST 2015 12 31 City State Zip Code Transaction ID: SA11AI.78975 MD LA PLATA 20646 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **DIRECTOR-COMPLIANCE** Receipt For: Aggregate Year-to-Date ▼ Primary General 625.00 Other (specify) Full Name (Last, First, Middle Initial) B. Lori Pendleton Date of Receipt Mailing Address 144 KEACH DAM ROAD 11 13 2015 City State Zip Code Transaction ID: SA11AI.78384 CHEPACHET RΙ 02814 Amount of Each Receipt this Period FEC ID number of contributing 5.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **ADMINISTRATOR** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 205.00 Full Name (Last, First, Middle Initial) c. Lori Pendleton Date of Receipt Mailing Address 144 KEACH DAM ROAD 20 11 2015 City State Zip Code Transaction ID: SA11AI.78385 RΙ CHEPACHET 02814 Amount of Each Receipt this Period FEC ID number of contributing С 5.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **ADMINISTRATOR** Receipt For: Aggregate Year-to-Date ▼

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Other (specify)

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Any information copied from such Reports and S or for commercial purposes, other than using the								
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC								
Full Name (Last, First, Middle Initial) Lori Pendleton Mailing Address 144 KEACH DAM ROAD		Date of Receipt						
City CHEPACHET FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION	State Zip Code RI 02814 C Occupation ADMINISTRATOR	Transaction ID : SA11AI.78386 Amount of Each Receipt this Period 5.00 Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00							
Full Name (Last, First, Middle Initial) Lori Pendleton Mailing Address 144 KEACH DAM ROAD		Date of Receipt 12 042015						
City CHEPACHET								
FEC ID number of contributing federal political committee.	С	5.00						
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation ADMINISTRATOR	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00							
Full Name (Last, First, Middle Initial) C. Lori Pendleton		Date of Receipt						
Mailing Address 144 KEACH DAM ROAD	7. 0. 1	12						
City CHEPACHET	State Zip Code RI 02814	Transaction ID : SA11AI.78388 Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	C	5.00						
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation ADMINISTRATOR	Memo Item						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00							
SUBTOTAL of Receipts This Page (optional)		15.00						
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not be sold or used by any person for the purpose of soliciting contributions										

Any information copied from such Reports and Statements may

or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
۹.	Full Name (Last, First, Middle Initial) Lori Pendleton Mailing Address 144 KEACH DAM ROAD		Date of Receipt
	City CHEPACHET FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code RI 02814 C Occupation ADMINISTRATOR Aggregate Year-to-Date ▼ 230.00	Transaction ID: SA11AI.78389 Amount of Each Receipt this Period 5.00 Memo Item
	Full Name (Last, First, Middle Initial) Lori Pendleton Mailing Address 144 KEACH DAM ROAD City CHEPACHET FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code RI 02814 C Occupation ADMINISTRATOR Aggregate Year-to-Date ▼ 235.00	Date of Receipt 12 24 2015 Transaction ID: SA11AI.78390 Amount of Each Receipt this Period 5.00 Memo Item
) .	Full Name (Last, First, Middle Initial) Lori Pendleton Mailing Address 144 KEACH DAM ROAD City CHEPACHET FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code RI 02814 C Occupation ADMINISTRATOR Aggregate Year-to-Date ▼ 240.00	Date of Receipt 12 31 2015 Transaction ID : SA11AI.78391 Amount of Each Receipt this Period 5.00 Memo Item
S	UBTOTAL of Receipts This Page (optional)	>	15.00
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Any information copied from such F or for commercial purposes, other to												
NAME OF COMMITTEE (In Full) Genesis Healthcare In												
Full Name (Last, First, Middle Ini	tial)			Date of	Receipt							
Mailing Address 5787 OHIO RIVI	ER RD.			M = M	06		2015 _	7				
City HUNTINGTON	State WV	Zip Code 25702			action ID : S	SA11AI.78	370					
FEC ID number of contributing federal political committee.	С			Amount of Each Receipt this Period								
Name of Employer GENESIS HEALTHCARE CORPO	Occupation VP OPERA	TIONS REHAB SER	VICES	- Mer	no Item							
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼	210.00									
Full Name (Last, First, Middle Ini B. AMY S PERRY TIPTON	tial)			Date of	Receipt							
Mailing Address 5787 OHIO RIVE	ER RD.			M M M	20		2015 _	1				
City HUNTINGTON	State WV	Zip Code 25702			action ID : Soft Each Re	SA11AI.78	371					
FEC ID number of contributing federal political committee.	С			Mer	10.00							
Name of Employer GENESIS HEALTHCARE CORPO	Occupation VP OPERA	TIONS REHAB SER	VICES	IVIEI	no item							
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	220.00									
Full Name (Last, First, Middle Ini				Date of	Receipt							
Mailing Address 5787 OHIO RIV				M M M 12			20 <u>1</u> 5	1				
City HUNTINGTON	State WV	Zip Code 25702		Trans	action ID : S	SA11AI.78	372					
FEC ID number of contributing federal political committee.	C				-		10.00					
Name of Employer	Occupation		\#0F0	- Mer	mo Item							
GENESIS HEALTHCARE CORPO		TIONS REHAB SER Year-to-Date ▼	230.00									
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SCHEDULE A (FEC Form 3X)

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I	EMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	for commercial purposes, other than using the		person for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Δ.	Full Name (Last, First, Middle Initial) AMY S PERRY TIPTON Mailing Address 5787 OHIO RIVER RD. City HUNTINGTON	State Zip Code WV 25702	Date of Receipt 12 18 2015 Transaction ID: SA11AI.78373 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	Occupation VP OPERATIONS REHAB SERVICES Aggregate Year-to-Date ▼ 240.00	Memo Item
3.	Full Name (Last, First, Middle Initial) AMY S PERRY TIPTON Mailing Address 5787 OHIO RIVER RD. City HUNTINGTON FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code WV 25702 C Occupation VP OPERATIONS REHAB SERVICES Aggregate Year-to-Date ▼	Date of Receipt 12 31 2015 Transaction ID: SA11AI.78374 Amount of Each Receipt this Period 10.00 Memo Item
C.	Full Name (Last, First, Middle Initial) Linda Peterson Mailing Address 104 FRENCHTOWN RD City ARGYLE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code TX 76226 C Occupation MANAGER-RGNL REV CYC MGMT QA Aggregate Year-to-Date ▼ 210.00	Date of Receipt 11 06 2015 Transaction ID: SA11AI.78966 Amount of Each Receipt this Period 10.00 Memo Item
s	UBTOTAL of Receipts This Page (optional)		30.00
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FOR LINE NUMBER: PAGE 242 OF 375 Use separate schedule(s) for each category of the (check only one) **X** 11a 11b 11c 12 Detailed Summary Page 14

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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) Linda Peterson Mailing Address 104 FRENCHTOWN RD City	State Zip Code	Date of Receipt 11 20 2015 Transaction ID: SA11AI.78967
ARGYLE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	TX 76226 C Occupation MANAGER-RGNL REV CYC MGMT QA Aggregate Year-to-Date ▼ 220.00	Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) Linda Peterson Mailing Address 104 FRENCHTOWN RD City ARGYLE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code TX 76226 C Occupation MANAGER-RGNL REV CYC MGMT QA Aggregate Year-to-Date ▼ 230.00	Date of Receipt 12 04 2015 Transaction ID : SA11AI.78968 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) Linda Peterson Mailing Address 104 FRENCHTOWN RD City ARGYLE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code TX 76226 C Occupation MANAGER-RGNL REV CYC MGMT QA Aggregate Year-to-Date ▼ 240.00	Date of Receipt 12 18 2015 Transaction ID: SA11AI.78969 Amount of Each Receipt this Period 10.00 Memo Item
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			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17							
				erson for the purpose of soliciting contributions to solicit contributions from such committee.							
	NAME OF COMMITTEE (In Full)										
	Genesis Healthcare Inc PAC										
A.	Full Name (Last, First, Middle Initial) Linda Peterson			Date of Receipt							
	Mailing Address 104 FRENCHTOWN RD			12 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
	City	State TX	Zip Code 76226	Transaction ID : SA11AI.78970							
	ARGYLE	17	76226	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		10.00							
	Name of Employer	Occupation	1	Memo Item							
	GENESIS HEALTHCARE CORPORATION	MANAGER	-RGNL REV CYC MGMT QA								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		250.00	1							
	Carlot (openity) 🔻			1							
В.	Full Name (Last, First, Middle Initial) GARRY PEZZANO			Date of Receipt							
	Mailing Address 1 CAVESSON TRL			11 06 2015							
	City	State	Zip Code	Transaction ID : SA11AI.77956							
	SEWELL	NJ	08080	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		10.00							
	Name of Employer	Occupation	1	Memo Item							
	GENESIS HEALTHCARE CORPORATION	VICE PRES	SIDENT CLINICAL PRACT								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General		240.00	1							
	Other (specify) ▼		210.00								
C.	Full Name (Last, First, Middle Initial) GARRY PEZZANO			Date of Receipt							
	Mailing Address 1 CAVESSON TRL			11 20 / Y Y Y Y Y Y							
	City	State	Zip Code	Transaction ID : SA11AI.77957							
	SEWELL	NJ	08080	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	С		10.00							
	Name of Employer	Occupation	1	Memo Item							
	GENESIS HEALTHCARE CORPORATION	VICE PRES	SIDENT CLINICAL PRACT								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		220.00]							
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) GARRY PEZZANO Mailing Address 1 CAVESSON TRL		Date of Receipt 12 04 2015
City SEWELL FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code NJ 08080 C Occupation VICE PRESIDENT CLINICAL PRACT Aggregate Year-to-Date ▼ 230.00	Transaction ID : SA11AI.77958 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) GARRY PEZZANO Mailing Address 1 CAVESSON TRL City SEWELL FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code NJ 08080 C Occupation VICE PRESIDENT CLINICAL PRACT Aggregate Year-to-Date ▼ 240.00	Date of Receipt 12 18 2015 Transaction ID: SA11AI.77959 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) GARRY PEZZANO Mailing Address 1 CAVESSON TRL City SEWELL FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code NJ 08080 C Occupation VICE PRESIDENT CLINICAL PRACT Aggregate Year-to-Date ▼ 250.00	Date of Receipt 12 31 2015 Transaction ID: SA11AI.77960 Amount of Each Receipt this Period 10.00 Memo Item
SUBTOTAL of Receipts This Page (optional)	>	30.00
TOTAL This Period (last page this line number	only)	

ITEMIZED RECEIPTS

SCHEDULE A (FEC Form 3X) FOR LINE NUMBER: PAGE 245 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16 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 Inc PAC Full Name (Last, First, Middle Initial) JEANNE PHILLIPS Date of Receipt Mailing Address 1816 LENAPE -UNIONVILLE RD 2015 11 06 City Zip Code State Transaction ID: SA11AI.78616 PΑ WEST CHESTER 19382 Amount of Each Receipt this Period FEC ID number of contributing 175.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VICE PRESIDENT-RISK MANAGEMENT Receipt For: Aggregate Year-to-Date ▼ Primary General 3675.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** JEANNE PHILLIPS Date of Receipt Mailing Address 1816 LENAPE -UNIONVILLE RD 11 20 2015 City State Zip Code Transaction ID: SA11AI.78617 WEST CHESTER PA 19382 Amount of Each Receipt this Period FEC ID number of contributing 175.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VICE PRESIDENT-RISK MANAGEMENT Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 3850.00 Full Name (Last, First, Middle Initial) c. JEANNE PHILLIPS Date of Receipt Mailing Address 1816 LENAPE -UNIONVILLE RD M = M 12 04 2015 City State Zip Code Transaction ID: SA11AI.78618 PΑ WEST CHESTER 19382 Amount of Each Receipt this Period FEC ID number of contributing С 175.00 federal political committee. Memo Item Name of Employer Occupation VICE PRESIDENT-RISK MANAGEMENT GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 4025.00 Other (specify)

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			Use separate schedule(s) for each category of the Detailed Summary Page	(che	FOR LINE NUMBER: PAGE 246 OF 375 (check only one) X 11a					
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$\overline{\ \ }$	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC									
Α.	Full Name (Last, First, Middle Initial) JEANNE PHILLIPS Mailing Address 1816 LENAPE -UNIONVILLE F	RD			Date of		D D	/ Y	Y	Y
	City WEST CHESTER	State PA	Zip Code 19382				18 on ID : Sa Each Red			
	FEC ID number of contributing federal political committee.	С				_	,	cipt till	175.0	0
	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VICE PRES	IDENT-RISK MANAGEMENT	L	Mer	no It	em			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 4200.00							
В.	Full Name (Last, First, Middle Initial) JEANNE PHILLIPS				ate of	Red	ceipt			
	Mailing Address 1816 LENAPE -UNIONVILLE F	RD		7	M = M	/	31	/ Y	2015	Y
	City	State	Zip Code			actio	on ID : S/	411AI.7		

Amount of Each Receipt this Period

	FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	Occupation VICE PRESIDENT-RISK MANAGEMENT Aggregate Year-to-Date ▼ 4375.00	Memo Item
C.	Full Name (Last, First, Middle Initial) JENNIFER PYNE Mailing Address 235 OLD MILL RD City	State Zip Code	Date of Receipt 11 06 2015 Transaction ID : SA11AI.78491
	MACUNGIE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: □ Primary □ General Other (specify) ▼	PA 18062 C Occupation MANAGER-CLINICAL OPERATIONS Aggregate Year-to-Date ▼ 315.00	Amount of Each Receipt this Period 15.00 Memo Item
5	SUBTOTAL of Receipts This Page (optional)		365.00

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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) JENNIFER PYNE Mailing Address 235 OLD MILL RD	Date of Receipt	
City MACUNGIE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General	State Zip Code PA 18062 C Occupation MANAGER-CLINICAL OPERATIONS Aggregate Year-to-Date ▼	11 20 2015 Transaction ID : SA11AI.78492 Amount of Each Receipt this Period 15.00 Memo Item
Other (specify) ▼ Full Name (Last, First, Middle Initial) JENNIFER PYNE Mailing Address 235 OLD MILL RD	330.00	Date of Receipt
City MACUNGIE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For:	State Zip Code PA 18062 C Occupation MANAGER-CLINICAL OPERATIONS	Transaction ID : SA11AI.78493 Amount of Each Receipt this Period 15.00 Memo Item
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 345.00	
Full Name (Last, First, Middle Initial) JENNIFER PYNE Mailing Address 235 OLD MILL RD City MACUNGIE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	State Zip Code PA 18062 C Occupation MANAGER-CLINICAL OPERATIONS Aggregate Year-to-Date ▼ 360.00	Date of Receipt 12 18 2015 Transaction ID: SA11AI.78494 Amount of Each Receipt this Period 15.00 Memo Item
SUBTOTAL of Receipts This Page (optional)	• • • • • • • • • • • • • • • • • • •	45.00
TOTAL This Period (last page this line number	only)	

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NAME OF COMMITTEE (In Full)

Genesis Healthcare Inc PAC

Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) JENNIFER PYNE		Date of Receipt
Mailing Address 235 OLD MILL RD		12 31 2015
City	State Zip Code	Transaction ID : SA11AI.78495
MACUNGIE	PA 18062	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	MANAGER-CLINICAL OPERATIONS	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	375.00	
Full Name (Last, First, Middle Initial) 3. JOHN C RALEY		Date of Receipt
Mailing Address 3810 DONERIN WAY		11 06 2015
City	State Zip Code	Transaction ID : SA11AI.78392
PHOENIX	MD 21131	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	VP-AREA HUMAN RESOURCES	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1050.00	
Full Name (Last, First, Middle Initial) C. JOHN C RALEY		Date of Receipt
Mailing Address 3810 DONERIN WAY		11 20 2015
City	State Zip Code	Transaction ID : SA11AI.78393
PHOENIX	MD 21131	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	VP-AREA HUMAN RESOURCES	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1100.00	
SUBTOTAL of Receipts This Page (optional)	>	115.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 249 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16

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 Inc PAC Full Name (Last, First, Middle Initial) JOHN C RALEY Date of Receipt Mailing Address 3810 DONERIN WAY 04 2015 12 City Zip Code State Transaction ID: SA11AI.78394 MD **PHOENIX** 21131 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP-AREA HUMAN RESOURCES Receipt For: Aggregate Year-to-Date ▼ Primary General 1150.00 Other (specify) Full Name (Last, First, Middle Initial) B. JOHN C RALEY Date of Receipt Mailing Address 3810 DONERIN WAY 12 18 2015 City State Zip Code Transaction ID: SA11AI.78395 **PHOENIX** MD 21131 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP-AREA HUMAN RESOURCES Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1200.00 Full Name (Last, First, Middle Initial) c. JOHN C RALEY Date of Receipt Mailing Address 3810 DONERIN WAY M M / 12 31 2015 City Zip Code State Transaction ID: SA11AI.78396 MD **PHOENIX** 21131 Amount of Each Receipt this Period FEC ID number of contributing С 50.00 federal political committee. Memo Item Name of Employer Occupation VP-AREA HUMAN RESOURCES GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 1250.00 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	nd Statements may not be sold or used by any person the name and address of any political committee the	
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) RICHARD JAY RASKIN Mailing Address 156 REVERKNOLLS City AVON FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	State Zip Code CT 06001 C Occupation VP-REGIONAL MEDICAL DIRECTOR Aggregate Year-to-Date ▼ 1050.00	Date of Receipt 11 06 2015 Transaction ID: SA11AI.78719 Amount of Each Receipt this Period 50.00 Memo Item
Full Name (Last, First, Middle Initial) RICHARD JAY RASKIN Mailing Address 156 REVERKNOLLS City AVON FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) This is a serior of the serior	State Zip Code CT 06001 C Occupation VP-REGIONAL MEDICAL DIRECTOR Aggregate Year-to-Date ▼ 1100.00	Date of Receipt 11 20 2015 Transaction ID: SA11AI.78720 Amount of Each Receipt this Period 50.00 Memo Item
Full Name (Last, First, Middle Initial) RICHARD JAY RASKIN Mailing Address 156 REVERKNOLLS City AVON FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	State Zip Code CT 06001 C Occupation VP-REGIONAL MEDICAL DIRECTOR Aggregate Year-to-Date ▼ 1150.00	Date of Receipt 12 04 2015 Transaction ID : SA11AI.78721 Amount of Each Receipt this Period 50.00 Memo Item
SUBTOTAL of Receipts This Page (optional	l) >	150.00
TOTAL This Period (last page this line num	ber only)	

FOR LINE NUMBER: PAGE 251 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

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SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 252 OF

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) KILJOY C RAY Mailing Address 1003 HOTCHKISS COURT City FREDERICKSBURG FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	State Zip Code VA 22401 C Occupation DIRECTOR-NURSING Aggregate Year-to-Date ▼	Date of Receipt 12 03 2015 Transaction ID: SA11AI.78091 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) KILJOY C RAY Mailing Address 1003 HOTCHKISS COURT City FREDERICKSBURG FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code VA 22401 C Occupation DIRECTOR-NURSING Aggregate Year-to-Date ▼ 230.00	Date of Receipt 12 17 2015 Transaction ID: SA11AI.78092 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) KILJOY C RAY Mailing Address 1003 HOTCHKISS COURT City FREDERICKSBURG FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code VA 22401 C Occupation DIRECTOR-NURSING Aggregate Year-to-Date ▼ 240.00	Date of Receipt 12 31 2015 Transaction ID : SA11AI.78093 Amount of Each Receipt this Period 10.00 Memo Item
SUBTOTAL of Receipts This Page (optional)		30.00
TOTAL This Period (last page this line number	er only)	·

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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC				
Full Name (Last, First, Middle Initial) Joseph Reese Mailing Address 7597 S OLD FARM LANE City MERIDIAN FEC ID number of contributing federal political committee.	eph Reese g Address 7597 S OLD FARM LANE State Zip Code IDIAN ID 83642 D number of contributing			
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	Occupation VP OPERATIONS Aggregate Year-to-Date ▼ 840.00	Memo Item		
Full Name (Last, First, Middle Initial) B. Joseph Reese Mailing Address 7597 S OLD FARM LANE City MERIDIAN FEC ID number of contributing federal political committee.	State Zip Code ID 83642	Date of Receipt 11 20 2015 Transaction ID : SA11AI.79052 Amount of Each Receipt this Period 40.00		
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	Occupation VP OPERATIONS Aggregate Year-to-Date ▼ 880.00	Memo Item		
Full Name (Last, First, Middle Initial) Joseph Reese Mailing Address 7597 S OLD FARM LANE City MERIDIAN FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION	State Zip Code ID 83642 C Occupation VP OPERATIONS	Date of Receipt 12 04 2015 Transaction ID : SA11AI.79053 Amount of Each Receipt this Period 40.00 Memo Item		
Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		120.00		

SCHEDULE A (FEC Form 3X)

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TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) Joseph Reese Mailing Address 7597 S OLD FARM LANE City MERIDIAN FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code ID 83642 C Occupation VP OPERATIONS Aggregate Year-to-Date 960.00	Date of Receipt 12
Full Name (Last, First, Middle Initial) Joseph Reese Mailing Address 7597 S OLD FARM LANE City MERIDIAN FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code ID 83642 C Occupation VP OPERATIONS Aggregate Year-to-Date ▼ 1000.00	Date of Receipt 12 31 2015 Transaction ID: SA11Al.79055 Amount of Each Receipt this Period 40.00 Memo Item
Full Name (Last, First, Middle Initial) JoAnne Reifsnyder Mailing Address 119 LONDON CIRCLE SOUTH City REHOBOTH BEACH FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code DE 19971 C Occupation SR VP-CLINICAL OPS CNO Aggregate Year-to-Date 3150.00	Date of Receipt 11 06 2015 Transaction ID: SA11AI.78781 Amount of Each Receipt this Period 150.00 Memo Item
SUBTOTAL of Receipts This Page (optional)	>	230.00
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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: PAGE 255 OF 375 (check only one) X 11a
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
REHOBOTH BEACH FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION SERVICE STATES OF THE PROPERTY O	State Zip Code DE 19971 Cupation R VP-CLINICAL OPS CNO ggregate Year-to-Date 3300.00	Date of Receipt 11 20 2015 Transaction ID: SA11AI.78782 Amount of Each Receipt this Period 150.00 Memo Item
Full Name (Last, First, Middle Initial) B. JoAnne Reifsnyder Mailing Address 119 LONDON CIRCLE SOUTH	Ctata Zin Coda	Date of Receipt 12 04 2015

City REHOBOTH BEACH FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For:	State Zip Code DE 19971 C Occupation SR VP-CLINICAL OPS CNO Aggregate Year-to-Date ▼	Transaction ID : SA11AI.78783 Amount of Each Receipt this Period 150.00 Memo Item
Primary General Other (specify) ▼	3450.00	
C. JoAnne Reifsnyder Mailing Address 119 LONDON CIRCLE SOUT	'H	Date of Receipt 12 18 2015
City REHOBOTH BEACH	State Zip Code DE 19971	Transaction ID : SA11AI.78784
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	- Memo Item
GENESIS HEALTHCARE CORPORATION	SR VP-CLINICAL OPS CNO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3600.00	
SUBTOTAL of Receipts This Page (optional)	•	450.00

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NAME OF COMMITTEE (In Full)	* *	
Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) 1. JoAnne Reifsnyder		Date of Receipt
Mailing Address 119 LONDON CIRCLE SOUTI	1	12 31 2015
City	State Zip Code	Transaction ID : SA11AI.78785
REHOBOTH BEACH	DE 19971	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	150.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	SR VP-CLINICAL OPS CNO	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	3750.00	
Full Name (Last, First, Middle Initial) 3. ROBERT A REITZ		Date of Receipt
Mailing Address 13005 JEROME JAY DRIVE	1.1 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State Zip Code	Transaction ID : SA11AI.77765
COCKEYSVILLE	MD 21030	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.31
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	EXECUTIVE VP AND COO	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	4038.51	
Full Name (Last, First, Middle Initial) C. ROBERT A REITZ		Date of Receipt
Mailing Address 13005 JEROME JAY DRIVE		11 20 2015
City	State Zip Code	Transaction ID : SA11AI.77766
COCKEYSVILLE	MD 21030	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.31
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	EXECUTIVE VP AND COO	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	4230.82	
SUBTOTAL of Receipts This Page (optional)		534.62
TOTAL This Period (last page this line number of	<u></u>	

FOR LINE NUMBER: PAGE 257 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16

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 Inc PAC Full Name (Last, First, Middle Initial) ROBERT A REITZ Date of Receipt Mailing Address 13005 JEROME JAY DRIVE 04 2015 12 City Zip Code State Transaction ID: SA11AI.77767 MD COCKEYSVILLE 21030 Amount of Each Receipt this Period FEC ID number of contributing 192.31 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION EXECUTIVE VP AND COO Receipt For: Aggregate Year-to-Date ▼ Primary General 4423.13 Other (specify) Full Name (Last, First, Middle Initial) **B.** ROBERT A REITZ Date of Receipt Mailing Address 13005 JEROME JAY DRIVE 12 18 2015 City State Zip Code Transaction ID: SA11AI.77768 COCKEYSVILLE MD 21030 Amount of Each Receipt this Period FEC ID number of contributing 192.31 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **EXECUTIVE VP AND COO** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 4615,44 Full Name (Last, First, Middle Initial) c. ROBERT A REITZ Date of Receipt Mailing Address 13005 JEROME JAY DRIVE M M / 12 31 2015 City Zip Code State Transaction ID: SA11AI.77769 MD COCKEYSVILLE 21030 Amount of Each Receipt this Period FEC ID number of contributing С 192.31 federal political committee. Memo Item Name of Employer Occupation **EXECUTIVE VP AND COO** GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 4807.75 Other (specify) 576.93 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

SCHEDULE A (FEC Form 3X)			FOR LINE NUMBER DAGE 250 OF 275
TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 258 OF 375 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using t			erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC			
Full Name (Last, First, Middle Initial) PAUL RICKERSHAUSER Mailing Address 5 SUNSET COURT City	State	Zip Code	Date of Receipt 11 06 2015 Transaction ID: SA11AI.78714
MEDFORD FEC ID number of contributing federal political committee.	NJ	08055	Amount of Each Receipt this Period 20.00
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼		R-HUMAN RESOURCES REGNL Year-to-Date ▼ 420.00	Memo Item
Full Name (Last, First, Middle Initial) PAUL RICKERSHAUSER Mailing Address 5 SUNSET COURT			Date of Receipt 11 20 2015
City MEDFORD FEC ID number of contributing federal political committee.	State NJ	Zip Code 08055	Transaction ID : SA11AI.78715 Amount of Each Receipt this Period 20.00
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For:		R-HUMAN RESOURCES REGNL	Memo Item
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 440.00	
Full Name (Last, First, Middle Initial) PAUL RICKERSHAUSER Mailing Address 5 SUNSET COURT			Date of Receipt 12 04 2015
City MEDFORD	State NJ	Zip Code 08055	Transaction ID : SA11AI.78716 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		20.00 Memo Item
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼		R-HUMAN RESOURCES REGNL Year-to-Date ▼ 460.00	Memoritem

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FOR LINE NUMBER: PAGE 259 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16 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 Inc PAC Full Name (Last, First, Middle Initial) PAUL RICKERSHAUSER Date of Receipt Mailing Address 5 SUNSET COURT 2015 12 18 City Zip Code State Transaction ID: SA11AI.78717 **MEDFORD** NJ 08055 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION DIRECTOR-HUMAN RESOURCES REGNL Receipt For: Aggregate Year-to-Date ▼ Primary General 480.00 Other (specify) Full Name (Last, First, Middle Initial) B. PAUL RICKERSHAUSER Date of Receipt Mailing Address 5 SUNSET COURT 12 31 2015 City State Zip Code Transaction ID: SA11AI.78718 **MEDFORD** NJ 08055 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION DIRECTOR-HUMAN RESOURCES REGNL Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500,00 Full Name (Last, First, Middle Initial) c. CAROL ROHRBAUGH Date of Receipt Mailing Address 1749 PRESCOTT ROAD 11 06 2015 City State Zip Code Transaction ID: SA11AI.78690 PΑ YORK 17403 Amount of Each Receipt this Period FEC ID number of contributing С 63.46 federal political committee. Memo Item Name of Employer Occupation VP-AREA SALES & MARKETING GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 1332.66 Other (specify)

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Genesis Healthcare Inc PAC							
Full Name (Last, First, Middle Initial) A. CAROL ROHRBAUGH			Date of	Receipt			
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Name of Employer	Occupation		Mem	no Item			
GENESIS HEALTHCARE CORPORATION		ALES & MARKETING					
Receipt For:		Year-to-Date ▼					
Primary General	Aggregate	Teal-to-Date ▼					
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City	State	Zip Code	Transa	ction ID : S	A11AI.7869) 2	
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rederal political committee.				14	,		
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GENESIS HEALTHCARE CORPORATION	VP-AREA S	ALES & MARKETING					
Receipt For: Primary General	Aggregate	Year-to-Date ▼					
Other (specify)		1459.58					
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Full Name (Last, First, Middle Initial) CAROL ROHRBAUGH			Date of	Receipt			
Mailing Address 1749 PRESCOTT ROAD			M M M	/ D D D)15]
City	State	Zip Code	Transa	action ID : S	A11AI.786	93	
YORK	PA	17403	Amount	of Each Re	ceipt this F	eriod	
FEC ID number of contributing federal political committee.	С				-	63.46	
Name of Employer	Occupation		- Men	no Item			
GENESIS HEALTHCARE CORPORATION	VP-AREA S	ALES & MARKETING					
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Primary General	33 0		1				
Other (specify) ▼		1523.04					

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$\overline{\ \ }$	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC										
Α.	Full Name (Last, First, Middle Initial) CAROL ROHRBAUGH Mailing Address 1749 PRESCOTT ROAD City YORK FEC ID number of contributing federal political committee. Name of Employer	State PA C	Zip Code 17403		Amount	/ actio	31 on ID : S		.7 86		6 T
	GENESIS HEALTHCARE CORPORATION Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		SALES & MARKETING Year-to-Date ▼ 1586.50								
В.	Full Name (Last, First, Middle Initial) David Ross Mailing Address 781 BRENT ST				Date of	Red	ceipt	/ Y		015	Y
	City MANCHESTER	State NH	Zip Code 03103		Transa		on ID : S Each Re		.788	09	
	FEC ID number of contributing federal political committee. Name of Employer	C			Mer	no lt	tem	- 1	-	30.0	0
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С.	Full Name (Last, First, Middle Initial) David Ross Mailing Address 781 BRENT ST				Date of	Red	D D	/ Y		04 <i>5</i>	Y
	City MANCHESTER	State NH	Zip Code 03103				25 on ID : S Each Re		.788		
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	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation ADMINISTE	RATOR		Mer	no It	em				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 630.00								
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) David Ross Mailing Address 781 BRENT ST City MANCHESTER FEC ID number of contributing federal political committee.	State Zip Code NH 03103	Date of Receipt 12 10 2015 Transaction ID: SA11AI.78811 Amount of Each Receipt this Period 30.00
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	Occupation ADMINISTRATOR Aggregate Year-to-Date ▼ 660.00	Memo Item
Full Name (Last, First, Middle Initial) 3. David Ross Mailing Address 781 BRENT ST		Date of Receipt 12 24 2015
City MANCHESTER FEC ID number of contributing federal political committee.	State Zip Code NH 03103	Transaction ID : SA11AI.78812 Amount of Each Receipt this Period 30.00
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General	Occupation ADMINISTRATOR Aggregate Year-to-Date ▼	Memo Item
Other (specify) ▼ Full Name (Last, First, Middle Initial) STEVEN ROTHWELL Mailing Address 8 GOUCHER WOODS COUR City	State Zip Code	Date of Receipt 11 06 2015 Transaction ID: SA11AI.78064
TOWSON FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	MD 21286 C Occupation VICE PRESIDENT-CENTERS GROUP Aggregate Year-to-Date ▼ 2164.14	Amount of Each Receipt this Period 98.52 Memo Item
SUBTOTAL of Receipts This Page (optional)	•	158.52
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A.	Full Name (Last, First, Middle Initial) STEVEN ROTHWELL			Date of Receipt						
	Mailing Address 8 GOUCHER WOODS COUF			11 20 / Y Y Y Y Y						
	City TOWSON	State MD	Zip Code 21286	Transaction ID : SA11AI.78065						
		IVID	21200	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		124.17						
	Name of Employer	Occupation	1	Memo Item						
	GENESIS HEALTHCARE CORPORATION	VICE PRES	SIDENT-CENTERS GROUP							
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	Primary General Other (specify) ▼		2288.31	1						
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	Full Name (Last, First, Middle Initial) STEVEN ROTHWELL			Date of Receipt						
	Mailing Address 8 GOUCHER WOODS COUR	RT		M = M / D = D / Y = Y = Y						
				12 04 2015						
	City	State	Zip Code	Transaction ID : SA11AI.78066						
	TOWSON	MD	21286	Amount of Each Receipt this Period						
	FEC ID number of contributing federal political committee.	С		97.60						
	Name of Employer	Occupation	1	Memo Item						
	GENESIS HEALTHCARE CORPORATION	VICE PRES	SIDENT-CENTERS GROUP							
	Receipt For:	Aggregate	Year-to-Date ▼							
	Primary General		2205.01	1						
	Other (specify) ▼		2385.91							
	Full Name (Last, First, Middle Initial) STEVEN ROTHWELL			Date of Receipt						
	Mailing Address 8 GOUCHER WOODS COUR	RT		12 18 2015						
	City	State	Zip Code	Transaction ID : SA11AI.78067						
	TOWSON	MD	21286	Amount of Each Receipt this Period						
	FEC ID number of contributing	С		110.43						
	federal political committee.									
	Name of Employer	Occupation	1	Memo Item						
	GENESIS HEALTHCARE CORPORATION	VICE PRES	SIDENT-CENTERS GROUP							
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	Primary General		2496.34	1						
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC								
Full Name (Last, First, Middle Initial)								

or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
$\left. \right\rangle$	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Α.	Full Name (Last, First, Middle Initial) STEVEN ROTHWELL Mailing Address 8 GOUCHER WOODS COUR	т	Date of Receipt
	City	State Zip Code	12 31 2015 Transaction ID : SA11AI.78068
	TOWSON FEC ID number of contributing federal political committee.	MD 21286	Amount of Each Receipt this Period 97.60
	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VICE PRESIDENT-CENTERS GROUP	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2593.94	
В.	Full Name (Last, First, Middle Initial) DEBORAH ROWE Mailing Address 1501 RAYVILLE RD		Date of Receipt
	City PARKTON	State Zip Code MD 21120	11 06 2015 Transaction ID : SA11AI.78331 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	30.00
	Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For:	Occupation DIRECTOR ELDER CARE STAFFG SRV	Memo Item
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 630.00	
C.	Full Name (Last, First, Middle Initial) DEBORAH ROWE		Date of Receipt
	Mailing Address 1501 RAYVILLE RD	7.04	11 20 2015
	PARKTON	State Zip Code MD 21120	Transaction ID : SA11AI.78332 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	30.00
	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation DIRECTOR ELDER CARE STAFFG SRV	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 660.00	
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC	, , , , , , , , , , , , , , , , , ,	
Full Name (Last, First, Middle Initial) DEBORAH ROWE Mailing Address 1501 RAYVILLE RD		Date of Receipt
City	State Zip Code	12 04 2015 Transaction ID : SA11AI.78333
PARKTON FEC ID number of contributing federal political committee.	MD 21120	Amount of Each Receipt this Period 30.00
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	Occupation DIRECTOR ELDER CARE STAFFG SRV Aggregate Year-to-Date ▼ 690.00	Memo Item
Full Name (Last, First, Middle Initial) B. DEBORAH ROWE Mailing Address 1501 RAYVILLE RD		Date of Receipt
City PARKTON FEC ID number of contributing federal political committee.	State Zip Code MD 21120	Transaction ID : SA11AI.78334 Amount of Each Receipt this Period 30.00
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation DIRECTOR ELDER CARE STAFFG SRV Aggregate Year-to-Date ▼ 720.00	Memo Item
Full Name (Last, First, Middle Initial) DEBORAH ROWE Mailing Address 1501 RAYVILLE RD		Date of Receipt
City PARKTON	State Zip Code MD 21120	12 31 2015 Transaction ID : SA11AI.78335 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	Occupation DIRECTOR ELDER CARE STAFFG SRV Aggregate Year-to-Date ▼ 750.00	Memo Item
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FOR LINE NUMBER: PAGE 266 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

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 Inc PAC Full Name (Last, First, Middle Initial) Joseph Rudd Date of Receipt Mailing Address 1756 S MAGIC MILL PL 2015 11 16 City State Zip Code Transaction ID: SA11AI.78877 ID **BOISE** 83709 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **ADMINISTRATOR** Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) Full Name (Last, First, Middle Initial) B. Joseph Rudd Date of Receipt Mailing Address 1756 S MAGIC MILL PL 11 30 2015 City State Zip Code Transaction ID: SA11AI.78878 **BOISE** ID 83709 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **ADMINISTRATOR** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 220,00 Full Name (Last, First, Middle Initial) c. Joseph Rudd Date of Receipt Mailing Address 1756 S MAGIC MILL PL M M / 12 14 2015 City Zip Code State Transaction ID: SA11AI.78879 ID **BOISE** 83709 Amount of Each Receipt this Period FEC ID number of contributing С 10.00 federal political committee. Memo Item Name of Employer Occupation **ADMINISTRATOR** GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 230.00 Other (specify) 30.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

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SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 267 OF 375 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) Joseph Rudd Mailing Address 1756 S MAGIC MILL PL City BOISE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code ID 83709 C Occupation ADMINISTRATOR Aggregate Year-to-Date ▼ 240.00	Date of Receipt 12 28 2015 Transaction ID : SA11Al.78880 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) Teresa Salamon Mailing Address 50 ALLYSSA DRIVE City MEDIA FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code PA 19063 C Occupation COUNSEL-DEPUTY GNRL HLTHCR REG Aggregate Year-to-Date ▼ 840.00	Date of Receipt 11 06 2015 Transaction ID: SA11AI.78756 Amount of Each Receipt this Period 40.00 Memo Item
Full Name (Last, First, Middle Initial) Teresa Salamon Mailing Address 50 ALLYSSA DRIVE City	State Zip Code	Date of Receipt 11 20 2015 Transaction ID: SA11AI.78757

Full Name (Last, First, Middle Initial) Joseph Rudd Mailing Address 1756 S MAGIC MILL PL City State ID **BOISE** FEC ID number of contributing federal political committee. Name of Employer Occup GENESIS HEALTHCARE CORPORATION **ADMIN** Receipt For: Aggreg Primary General Other (specify) Full Name (Last, First, Middle Initial) B. Teresa Salamon Mailing Address 50 ALLYSSA DRIVE City State **MEDIA** PΑ FEC ID number of contributing federal political committee. Name of Employer Occup GENESIS HEALTHCARE CORPORATION COUNS Receipt For: Aggreg Primary General Other (specify) Full Name (Last, First, Middle Initial) c. Teresa Salamon Mailing Address 50 ALLYSSA DRIVE City State PΑ **MEDIA** 19063 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION COUNSEL-DEPUTY GNRL HLTHCR REG Receipt For: Aggregate Year-to-Date ▼ Primary General 880.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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Δ.	MEDIA FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	State Zip Code PA 19063 Coupation DUNSEL-DEPUTY GNRL HLTHCR R ggregate Year-to-Date 920.00	-
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not be sold or used by any person for the purpose of soliciting contributions											

Any information copied from such Reports and Statements may not be sold or used b 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 Inc PAC Full Name (Last, First, Middle Initial) Elizabeth Salvo Date of Receipt Mailing Address 2927 SUNSET HILLS 06 2015 11 City State Zip Code Transaction ID: SA11AI.78897 CA **ESCONDIDO** 92025 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION DIRECTOR-AREA GRS PT Receipt For: Aggregate Year-to-Date ▼ Primary General 525.00 Other (specify) Full Name (Last, First, Middle Initial) B. Elizabeth Salvo Date of Receipt Mailing Address 2927 SUNSET HILLS 20 11 2015 City State Zip Code Transaction ID: SA11AI.78898 **ESCONDIDO** CA 92025 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **DIRECTOR-AREA GRS PT** Receipt For: Aggregate Year-to-Date ▼ Primary General

c. Elizabeth Salvo Date of Receipt Mailing Address 2927 SUNSET HILLS M M / 04 12 2015 City State Zip Code Transaction ID: SA11AI.78899 CA **ESCONDIDO** 92025 Amount of Each Receipt this Period FEC ID number of contributing С 25.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **DIRECTOR-AREA GRS PT** Receipt For: Aggregate Year-to-Date ▼ Primary General 575.00 Other (specify)

550,00

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FE6AN026

Other (specify)

Full Name (Last, First, Middle Initial)

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

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		tatements may not be sold or used by any personame and address of any political committee to	
\setminus	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Α.	Full Name (Last, First, Middle Initial) Elizabeth Salvo Mailing Address 2927 SUNSET HILLS		Date of Receipt
	City	State Zip Code	12 18 2015 Transaction ID : SA11AI.78900
	ESCONDIDO	CA 92025	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer	Occupation	Memo Item
	GENESIS HEALTHCARE CORPORATION	DIRECTOR-AREA GRS PT	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
В.	Full Name (Last, First, Middle Initial) Elizabeth Salvo		Date of Receipt
	Mailing Address 2927 SUNSET HILLS		12 312015
	City	State Zip Code	Transaction ID : SA11AI.78901
	ESCONDIDO	CA 92025	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	25.00
	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation DIRECTOR-AREA GRS PT	Memo Item
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	625.00	
<u> </u>	Full Name (Last, First, Middle Initial) Cindy Sammons		Date of Receipt
	Mailing Address 423 SAND PIT RD		M M / D D / Y Y Y Y Y Y Y 1 Y 1 1 06 _ 2015 _
	City	State Zip Code	Transaction ID : SA11AI.78822
	ALAMO	GA 30411	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10.00
	Name of Employer	Occupation	Memo Item
	GENESIS HEALTHCARE CORPORATION	ADMINISTRATOR	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	210.00	
s	UBTOTAL of Receipts This Page (optional)		60.00
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SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 271 OF 375

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and St or for commercial purposes, other than using the		rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) Cindy Sammons Mailing Address 423 SAND PIT RD City ALAMO FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code GA 30411 C Occupation ADMINISTRATOR Aggregate Year-to-Date ▼ 220.00	Date of Receipt 11 20 2015 Transaction ID: SA11AI.78823 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) Cindy Sammons Mailing Address 423 SAND PIT RD City ALAMO FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code GA 30411 C Occupation ADMINISTRATOR Aggregate Year-to-Date ▼ 230.00	Date of Receipt 12 04 2015 Transaction ID: SA11Al.78824 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) Cindy Sammons Mailing Address 423 SAND PIT RD City ALAMO FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code GA 30411 C Occupation ADMINISTRATOR Aggregate Year-to-Date ▼	Date of Receipt 12 18 2015 Transaction ID: SA11AI.78825 Amount of Each Receipt this Period 10.00 Memo Item
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC											
Full Name (Last, First, Middle Initial) 1. Cindy Sammons				Date of	f Red	ceipt					
Mailing Address 423 SAND PIT RD				M = M	1	31		2015	Y		
City	State	Zip Code			actio			AI.78826			
ALAMO	GA	30411		Amount	t of E	Each F	Receipt	this Period			
FEC ID number of contributing federal political committee.	С				_	,	. ,	10.0)0		
Name of Employer	Occupation			Mei	mo It	em					
GENESIS HEALTHCARE CORPORATION	ADMINIST										
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General	199.194.11	-									
Other (specify) ▼		250.00	_								
Full Name (Last, First, Middle Initial) 3. Greg Sanchez				Date of	f Red	ceipt					
Mailing Address 9124 BERRYESSA RD. NE				1,1 06 2015							
City	State	Zip Code		Trans	actic	n ID :	SA11/	AI.79086			
ALBUQUERQUE	NM	87122		Amount	t of E	Each F	Receipt	this Period			
FEC ID number of contributing federal political committee.	С				_	,	,	30.0)0		
Name of Employer	Occupation			Me	mo lt	em					
GENESIS HEALTHCARE CORPORATION	VP AND AF	REA CONTROLLER									
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General		020.00	7								
Other (specify) ▼		630.00	_								
Full Name (Last, First, Middle Initial) Creg Sanchez				Date of	f Red	ceipt					
Mailing Address 9124 BERRYESSA RD. NE				м м 11	/	20		2015	Y		
City	State	Zip Code		Trans	actio	on ID	: SA11	AI.79087			
ALBUQUERQUE	NM	87122		Amount	t of E	Each F	Receipt	this Period			
FEC ID number of contributing federal political committee.	С					,	,	30.0	00		
Name of Employer	Occupation			Mei	mo It	em					
GENESIS HEALTHCARE CORPORATION	VP AND AF	REA CONTROLLER									
Receipt For:	Aggregate	Year-to-Date ▼									
Primary General		660.00	\neg								
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	F	OR	LINE	NU	MBER	PAGE 273 OF 375					
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\rangle	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC																	
۹.	Full Name (Last, First, Middle Initial) Greg Sanchez Mailing Address 9124 BERRYESSA RD. NE								Date of Receipt 12 04 2015									
	City ALBUQUERQUE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	State NM C Occupation VP AND AR Aggregate		TROLLER	690.00		Trans: Amount		on ID : S		79088 is Period	.00						
	Full Name (Last, First, Middle Initial) Greg Sanchez Mailing Address 9124 BERRYESSA RD. NE City ALBUQUERQUE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State NM C Occupation VP AND AR Aggregate		TROLLER	720.00		Amount	actic	18 on ID : S.	A11AI.7	is Period							
	Full Name (Last, First, Middle Initial) Greg Sanchez Mailing Address 9124 BERRYESSA RD. NE City ALBUQUERQUE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State NM C Occupation VP AND AR Aggregate		TROLLER	750.00		Amount	actio	31 on ID : S Each Rec	A11AI.	is Period							
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SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 274 OF 375

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any pe	
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC	e name and address of any political committee	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) KRISTEN SANTANGELO Mailing Address 108 KNITTLE ROAD City KUTZTOWN FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	State Zip Code PA 19530 C Occupation VP OPERATIONS Aggregate Year-to-Date ▼ 735.00	Date of Receipt 11 06 2015 Transaction ID: SA11AI.78446 Amount of Each Receipt this Period 35.00 Memo Item
Full Name (Last, First, Middle Initial) KRISTEN SANTANGELO Mailing Address 108 KNITTLE ROAD City KUTZTOWN FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	State Zip Code PA 19530 C Occupation VP OPERATIONS Aggregate Year-to-Date ▼ 770.00	Date of Receipt 11 20 2015 Transaction ID: SA11AI.78447 Amount of Each Receipt this Period 35.00 Memo Item
Full Name (Last, First, Middle Initial) KRISTEN SANTANGELO Mailing Address 108 KNITTLE ROAD City KUTZTOWN FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code PA 19530 C Occupation VP OPERATIONS Aggregate Year-to-Date ▼	Date of Receipt 12 04 2015 Transaction ID: SA11AI.78448 Amount of Each Receipt this Period 35.00 Memo Item
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TOTAL This Period (last page this line number	only)	

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CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 275 OF 375 (check only one) X 11a					
	Statements may not be sold or used by any pole name and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.					
Full Name (Last, First, Middle Initial) KRISTEN SANTANGELO		Date of Receipt					
Mailing Address 108 KNITTLE ROAD		12 18 2015					
City KUTZTOWN	State Zip Code PA 19530	Transaction ID : SA11AI.78449 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	35.00					
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For:	Occupation VP OPERATIONS Aggregate Year-to-Date ▼	Memo Item					
Primary	840.00						
Full Name (Last, First, Middle Initial) KRISTEN SANTANGELO Mailing Address 108 KNITTLE ROAD		Date of Receipt					
City KUTZTOWN	State Zip Code PA 19530	12 31 2015 Transaction ID : SA11AI.78450 Amount of Each Receipt this Period 35.00					
FEC ID number of contributing federal political committee.	C						
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VP OPERATIONS	Memo Item					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 875.00						
Full Name (Last, First, Middle Initial) JOHN V SAVO		Date of Receipt					
Mailing Address 535 UPPER WEADLEY ROA		11 06 2015					
STRAFFORD	State Zip Code PA 19087	Transaction ID : SA11AI.78514 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	37.00					
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VP-CONTROLLER SHARED ACCT SVCS	Memo Item					
Receipt For: Primary General	Aggregate Year-to-Date ▼						

777.00

Other (specify)

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

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

В.

C.

JOHN V SAVO

STRAFFORD

Name of Employer

Primary

B. JOHN V SAVO

STRAFFORD

Name of Employer

Primary

Receipt For:

City

STRAFFORD

Name of Employer

Primary

Other (specify)

Receipt For:

GENESIS HEALTHCARE CORPORATION

General

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City

Receipt For:

City

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 276 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16 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 Inc PAC Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address 535 UPPER WEADLEY ROAD 2015 11 20 Zip Code State Transaction ID: SA11AI.78515 PΑ 19087 Amount of Each Receipt this Period FEC ID number of contributing 37.00 federal political committee. Memo Item Occupation GENESIS HEALTHCARE CORPORATION VP-CONTROLLER SHARED ACCT SVCS Aggregate Year-to-Date ▼ General 814.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address 535 UPPER WEADLEY ROAD 12 04 2015 State Zip Code Transaction ID: SA11AI.78516 PA 19087 Amount of Each Receipt this Period FEC ID number of contributing 37.00 federal political committee. Memo Item Occupation GENESIS HEALTHCARE CORPORATION VP-CONTROLLER SHARED ACCT SVCS Aggregate Year-to-Date ▼ General Other (specify) 851,00 Full Name (Last, First, Middle Initial) c. JOHN V SAVO Date of Receipt Mailing Address 535 UPPER WEADLEY ROAD M M / 12 18 2015 State Zip Code Transaction ID: SA11AI.78517 PΑ 19087 Amount of Each Receipt this Period FEC ID number of contributing С 37.00 federal political committee. Memo Item Occupation

VP-CONTROLLER SHARED ACCT SVCS

888.00

Aggregate Year-to-Date ▼

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	for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial)	State PA C Occupation VP-CONTR	Zip Code 19087	erson for the purpose of soliciting contributions						
—	Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) IRA M SCHOENBERGER Mailing Address 33 WOODSIDE CIRCLE	55 15 11	925.00	Date of Receipt 11 06 2015						
	City STURBRIDGE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) Other (specify)		Zip Code 01566 -ELDERCARE CENTERS REG Year-to-Date ▼ 1000.00	Transaction ID : SA11AI.78268 Amount of Each Receipt this Period 25.00 Memo Item						
C.	Full Name (Last, First, Middle Initial) IRA M SCHOENBERGER Mailing Address 33 WOODSIDE CIRCLE City STURBRIDGE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For:		Zip Code 01566	Date of Receipt 11 13 2015 Transaction ID: SA11AI.78269 Amount of Each Receipt this Period 25.00 Memo Item						
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1025.00

Primary

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General

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	Statements may not be sold or used by any pe e name and address of any political committee	rson for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) IRA M SCHOENBERGER Mailing Address 33 WOODSIDE CIRCLE		Date of Receipt
City STURBRIDGE	State Zip Code MA 01566	11 20 2015 Transaction ID : SA11AI.78270 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer	Occupation	25.00 Memo Item
GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	DIRECTOR-ELDERCARE CENTERS REG Aggregate Year-to-Date ▼ 1050.00	
Full Name (Last, First, Middle Initial) IRA M SCHOENBERGER Mailing Address 33 WOODSIDE CIRCLE City STURBRIDGE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial)	State Zip Code MA 01566 C Occupation DIRECTOR-ELDERCARE CENTERS REG Aggregate Year-to-Date ▼ 1075.00	Date of Receipt 11 27 2015 Transaction ID: SA11AI.78271 Amount of Each Receipt this Period 25.00 Memo Item
IRA M SCHOENBERGER Mailing Address 33 WOODSIDE CIRCLE City STURBRIDGE FEC ID number of contributing federal political committee.	State Zip Code MA 01566	Date of Receipt 12
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: General	Occupation DIRECTOR-ELDERCARE CENTERS REG Aggregate Year-to-Date ▼	Memo Item

1100.00

Other (specify)

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ITEMIZED RECEIPTS

SCHEDULE A (FEC Form 3X) FOR LINE NUMBER: PAGE 279 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16 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 Inc PAC Full Name (Last, First, Middle Initial) IRA M SCHOENBERGER Date of Receipt Mailing Address 33 WOODSIDE CIRCLE 2015 12 City Zip Code State Transaction ID: SA11AI.78273 **STURBRIDGE** MA 01566 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION DIRECTOR-ELDERCARE CENTERS REG Receipt For: Aggregate Year-to-Date ▼ Primary General 1125.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** IRA M SCHOENBERGER Date of Receipt Mailing Address 33 WOODSIDE CIRCLE 12 18 2015 City State Zip Code Transaction ID: SA11AI.78274 **STURBRIDGE** MA 01566 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION DIRECTOR-ELDERCARE CENTERS REG Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1150.00 Full Name (Last, First, Middle Initial) c. IRA M SCHOENBERGER Date of Receipt Mailing Address 33 WOODSIDE CIRCLE 12 24 2015 City Zip Code State Transaction ID: SA11AI.78275 MA **STURBRIDGE** 01566 Amount of Each Receipt this Period FEC ID number of contributing С 25.00 federal political committee. Memo Item Name of Employer Occupation DIRECTOR-ELDERCARE CENTERS REG GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 1175.00 Other (specify)

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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: PAGE 280 OF 375 (check only one) X 11a
Any information copied from such Reports and Statement or for commercial purposes, other than using the name a		
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) A. IRA M SCHOENBERGER		Date of Receipt
Mailing Address 33 WOODSIDE CIRCLE		12 31 2015

<i>V</i>			
Α.	Full Name (Last, First, Middle Initial) IRA M SCHOENBERGER		Date of Receipt
	Mailing Address 33 WOODSIDE CIRCLE		12 31 2015
	City STURBRIDGE	State Zip Code MA 01566	Transaction ID : SA11AI.78276
		WIA 01300	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	25.00
	Name of Employer	Occupation	Memo Item
	GENESIS HEALTHCARE CORPORATION	DIRECTOR-ELDERCARE CENTERS REG	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1200.00	
В.	Full Name (Last, First, Middle Initial) Norman Schueftan		Date of Receipt
	Mailing Address 380 Radford Court	11 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State Zip Code	Transaction ID : SA11AI.78570
	Glen Mills	PA 19342	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer	Occupation	Memo Item
	Genesis HealthCare	VP	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1050.00	
<u> </u>	Full Name (Last, First, Middle Initial) Norman Schueftan		Date of Receipt
	Mailing Address 380 Radford Court		11 20 2015
	City Glen Mills	State Zip Code PA 19342	Transaction ID : SA11AI.78571 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	50.00
	Name of Employer	Occupation	Memo Item
	Genesis HealthCare	VP	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1100.00	
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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: PAGE 281 OF 375 (check only one) X 11a						
	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.								
\rangle	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC								
Α.	Full Name (Last, First, Middle Initial) Norman Schueftan		Date of Receipt						
	Mailing Address 380 Radford Court City State	Zip Code	12 04 2015 Transaction ID : SA11Al.78572						
	•	•							

١.	Full Name (Last, First, Middle Initial) Norman Schueftan		Date of Receipt
	Mailing Address 380 Radford Court		12 04 _ 2015 _
	City	State Zip Code	Transaction ID : SA11AI.78572
	Glen Mills	PA 19342	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	50.00	
	Name of Employer	Occupation	Memo Item
	Genesis HealthCare	VP	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1150.00	
	Full Name (Last, First, Middle Initial) Norman Schueftan		Date of Receipt
٠.	Mailing Address 380 Radford Court		12 18 _2015 _
	City	State Zip Code	Transaction ID : SA11AI.78573
	Glen Mills	PA 19342	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer Genesis HealthCare	Occupation VP	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	
).	Full Name (Last, First, Middle Initial) Norman Schueftan		Date of Receipt
	Mailing Address 380 Radford Court		12 31 2015
	City	State Zip Code	Transaction ID : SA11AI.78574
	Glen Mills	PA 19342	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer	Occupation	Memo Item
	Genesis HealthCare	VP	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1250.00	
	SUBTOTAL of Receipts This Page (optional)		150.00
Т	OTAL This Period (last page this line number o	nly)	

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not be sold or used by any person for the purpose of soliciting contribution dress of any political committee to solicit contributions from such committee.											
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Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) Linda Semler Date of Receipt Mailing Address 2572 VALLEY DRIVE 2015 11 27 City State Zip Code Transaction ID: SA11AI.77878 PΑ LANCASTER 17603 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **DIRECTOR-NURSING** Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) Full Name (Last, First, Middle Initial) B. Linda Semler Date of Receipt Mailing Address 2572 VALLEY DRIVE 12 11 2015 City State Zip Code Transaction ID: SA11AI.77879 LANCASTER PA 17603 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **DIRECTOR-NURSING** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 220,00 Full Name (Last, First, Middle Initial) c. Linda Semler Date of Receipt Mailing Address 2572 VALLEY DRIVE M M / 12 24 2015 City State Zip Code Transaction ID: SA11AI.77880 PΑ LANCASTER 17603 Amount of Each Receipt this Period FEC ID number of contributing C 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **DIRECTOR-NURSING** Receipt For: Aggregate Year-to-Date ▼ Primary General 230.00 Other (specify) 30.00 SUBTOTAL of Receipts This Page (optional).....

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

9

FEC ID number of contributing federal political committee.

Other (specify)

GENESIS HEALTH VENTURES, INC.

Name of Employer

Primary

Receipt For:

General

Occupation

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

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

DIRECTOR-REGIONAL SALES&MKTG

345.00

Aggregate Year-to-Date ▼

SCHEDULE A (FEC Fo ITEMIZED RECEIPTS

Image# 201603089009663696 SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	Use separate schedule(s)	FOR LINE NUMBER: PAGE 283 OF 375 (check only one)
TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
	nd Statements may not be sold or used by any p the name and address of any political committe	
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 1641 BOW TREE DRIVE	1,1 06 2015	
City	State Zip Code	Transaction ID : SA11AI.78135
WEST CHESTER	PA 19380	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTH VENTURES, INC.	DIRECTOR-REGIONAL SALES&MKTG	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 1641 BOW TREE DRIVE		11 202015
City	State Zip Code	Transaction ID : SA11AI.78136
WEST CHESTER	PA 19380	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTH VENTURES, INC.	DIRECTOR-REGIONAL SALES&MKTG	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00]
Full Name (Last, First, Middle Initial) C. KAREN SHAMBERG	-	Date of Receipt
Mailing Address 1641 BOW TREE DRIVE		12 04 2015
City WEST CHESTER	State Zip Code PA 19380	Transaction ID : SA11AI.78137 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00

FE6AN026

9

45.00

Memo Item

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 284 OF 375

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17							
Any information copied from such Reports and State or for commercial purposes, other than using the na		erson for the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC									
Name of Employer O GENESIS HEALTH VENTURES, INC. D	State Zip Code PA 19380 C Cccupation IRECTOR-REGIONAL SALES&MKTG aggregate Year-to-Date ▼ 360.00	Date of Receipt 12 18 2015 Transaction ID : SA11AI.78138 Amount of Each Receipt this Period 15.00 Memo Item							
Name of Employer GENESIS HEALTH VENTURES, INC.	State Zip Code PA 19380 C Cccupation IRECTOR-REGIONAL SALES&MKTG aggregate Year-to-Date 375,00	Date of Receipt 12 31 2015 Transaction ID: SA11AI.78139 Amount of Each Receipt this Period 15.00 Memo Item							
Name of Employer GENESIS HEALTHCARE CORPORATION S Property For:	State Zip Code PA 19002 C C C C CCUpation R VP-GENERAL COUNSEL Aggregate Year-to-Date ▼ 4038.30	Date of Receipt 11 06 2015 Transaction ID : SA11AI.78661 Amount of Each Receipt this Period 192.30 Memo Item							
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only		222.30							

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 285 OF 375

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) MICHAEL S. SHERMAN Mailing Address 1379 BRYANT COURT City AMBLER FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code PA 19002 C Occupation SR VP-GENERAL COUNSEL Aggregate Year-to-Date ▼ 4230.60	Date of Receipt 11 20 2015 Transaction ID: SA11AI.78662 Amount of Each Receipt this Period 192.30 Memo Item
Full Name (Last, First, Middle Initial) MICHAEL S. SHERMAN Mailing Address 1379 BRYANT COURT City AMBLER FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code PA 19002 C Occupation SR VP-GENERAL COUNSEL Aggregate Year-to-Date ▼ 4422.90	Date of Receipt 12 04 2015 Transaction ID: SA11AI.78663 Amount of Each Receipt this Period 192.30 Memo Item
Full Name (Last, First, Middle Initial) MICHAEL S. SHERMAN Mailing Address 1379 BRYANT COURT City AMBLER FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code PA 19002 C Occupation SR VP-GENERAL COUNSEL Aggregate Year-to-Date ▼ 4615.20	Date of Receipt 12 18 2015 Transaction ID : SA11AI.78664 Amount of Each Receipt this Period 192.30 Memo Item
SUBTOTAL of Receipts This Page (optional)	>	576.90
TOTAL This Period (last page this line number	only)	

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	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC						
Α.	Full Name (Last, First, Middle Initial) MICHAEL S. SHERMAN Mailing Address 1379 BRYANT COURT	Date of Receipt					
	City	State Zip Code	12 31 2015 Transaction ID : SA11AI.78665				
	AMBLER	PA 19002	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C	192.30				
	Name of Employer	Occupation	Memo Item				
	GENESIS HEALTHCARE CORPORATION	SR VP-GENERAL COUNSEL					
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 4807.50					
В.	Full Name (Last, First, Middle Initial) LISA K SHERWOOD	Date of Receipt					
	Mailing Address 100 PAU NEL DRIVE	11 06 2015					
	City	State Zip Code	Transaction ID : SA11AI.78579				
	LANDENBERG	PA 19350	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С	10.00				
	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation DIRECTOR-SR PROVIDER RELATIONS	Memo Item				
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00					
- С.	Full Name (Last, First, Middle Initial) LISA K SHERWOOD		Date of Receipt				
	Mailing Address 100 PAU NEL DRIVE		11 20 _ 2015 _				
	City	State Zip Code	Transaction ID : SA11AI.78580				
	LANDENBERG	PA 19350	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С	10.00				
	Name of Employer	Memo Item					
	GENESIS HEALTHCARE CORPORATION						
	Receipt For: Primary General	Aggregate Year-to-Date ▼					
	Other (specify)	220.00					
S	SUBTOTAL of Receipts This Page (optional)		212.30				
Т	OTAL This Period (last page this line number	only)					

	FOR LINE NUMBER:	PAGE 287 OF 375						
Use separate schedule(s)	(check only one)							
for each category of the Detailed Summary Page	X 11a 11b	11c 12						
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		atements may not be sold or used by any perso name and address of any political committee to						
\setminus	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC							
Α.	Full Name (Last, First, Middle Initial) LISA K SHERWOOD Mailing Address 100 PAU NEL DRIVE		Date of Receipt 12 04 2015					
	City LANDENBERG FEC ID number of contributing federal political committee. Name of Employer	State Zip Code PA 19350 C Occupation	Transaction ID : SA11AI.78581 Amount of Each Receipt this Period 10.00 Memo Item					
	GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	DIRECTOR-SR PROVIDER RELATIONS Aggregate Year-to-Date ▼ 230.00						
В.	Full Name (Last, First, Middle Initial) LISA K SHERWOOD Mailing Address 100 PAU NEL DRIVE City LANDENBERG FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code PA 19350 C Occupation DIRECTOR-SR PROVIDER RELATIONS Aggregate Year-to-Date ▼ 240.00	Date of Receipt 12 18 2015 Transaction ID: SA11AI.78582 Amount of Each Receipt this Period 10.00 Memo Item					
C.	Full Name (Last, First, Middle Initial) LISA K SHERWOOD Mailing Address 100 PAU NEL DRIVE City LANDENBERG FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code PA 19350 C Occupation DIRECTOR-SR PROVIDER RELATIONS Aggregate Year-to-Date ▼ 250.00	Date of Receipt 12 31 2015 Transaction ID: SA11AI.78583 Amount of Each Receipt this Period 10.00 Memo Item					
Н	UBTOTAL of Receipts This Page (optional) OTAL This Period (last page this line number of		30.00					
L.	CIAL THIS I CHOO (1831 page this line number t	7. ny /						

	FOR LINE NUMBER:					PAGE	2	88 OF	=	375	
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for each category of the Detailed Summary Page	[X	11a		11b		11c		12		_
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not be sold or used by any person for the purpose of soliciting contributions											

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and address of any political committee to solicit contributions from NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) JENNIFER C SIDELINKER Date of Receipt Mailing Address 547 MAPLE AVE. 06 2015 11 City State Zip Code Transaction ID: SA11AI.78122 PΑ **DOYLESTOWN** 18901 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION MANAGER-CLINICAL GRS Receipt For: Aggregate Year-to-Date ▼ Primary General 420.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** JENNIFER C SIDELINKER Date of Receipt Mailing Address 547 MAPLE AVE. 20 11 2015 City State Zip Code Transaction ID: SA11AI.78123 **DOYLESTOWN** PA 18901 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION MANAGER-CLINICAL GRS Receipt For: Aggregate Year-to-Date ▼ Primary General 440.00 Other (specify) Full Name (Last, First, Middle Initial) c. JENNIFER C SIDELINKER Date of Receipt Mailing Address 547 MAPLE AVE. M M / 04 12 2015 City State Zip Code Transaction ID: SA11AI.78124 PΑ **DOYLESTOWN** 18901 Amount of Each Receipt this Period FEC ID number of contributing С 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION MANAGER-CLINICAL GRS Receipt For: Aggregate Year-to-Date ▼ Primary General 460.00 Other (specify)

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

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

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FOR LINE NUMBER: PAGE 289 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Possint For:	Zip Code 18901 ation SER-CLINICAL GRS ate Year-to-Date ▼	Date of Receipt 12 18 2015 Transaction ID: SA11AI.78125 Amount of Each Receipt this Period 20.00 Memo Item
Possint For:	Zip Code 18901 Ition BER-CLINICAL GRS ate Year-to-Date ▼	Date of Receipt 12 31 2015 Transaction ID: SA11AI.78126 Amount of Each Receipt this Period 20.00 Memo Item
Possint For:	Zip Code 81504 stion ISTRATOR ate Year-to-Date ▼	Date of Receipt 11 02 2015 Transaction ID: SA11AI.78866 Amount of Each Receipt this Period 25.00 Memo Item
SUBTOTAL of Receipts This Page (optional)		65.00
TOTAL This Period (last page this line number only)		

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule for each category of the Detailed Summary Page 1	he Star Star Star
		any person for the purpose of soliciting contributions mmittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) Rebecca Siemers		Date of Receipt
Mailing Address 620 STAN DR	Chala 7in Cada	11 16 2015
City GRAND JUNCTION	State Zip Code CO 81504	Transaction ID : SA11AI.78867 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	ADMINISTRATOR	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 425.	00

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١.	Full Name (Last, First, Middle Initial) Rebecca Siemers		Date of Receipt
	Mailing Address 620 STAN DR		11 16 2015
	City	State Zip Code	Transaction ID : SA11Al.78867
	GRAND JUNCTION	CO 81504	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	25.00
	Name of Employer	Occupation	Memo Item
	GENESIS HEALTHCARE CORPORATION	ADMINISTRATOR	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	425.00	
3.	Full Name (Last, First, Middle Initial) Rebecca Siemers		Date of Receipt
	Mailing Address 620 STAN DR		11 30 2015
	City	State Zip Code	Transaction ID : SA11AI.78868
	GRAND JUNCTION	CO 81504	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	25.00
	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation ADMINISTRATOR	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
).	Full Name (Last, First, Middle Initial) Rebecca Siemers		Date of Receipt
	Mailing Address 620 STAN DR		12 14 2015
	City	State Zip Code	Transaction ID : SA11AI.78869
	GRAND JUNCTION	CO 81504	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	25.00
	Name of Employer	Occupation	Memo Item
	GENESIS HEALTHCARE CORPORATION	ADMINISTRATOR	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify) ▼	475.00	
s	UBTOTAL of Receipts This Page (optional)	>	75.00
T	OTAL This Period (last page this line number o	only)	

		FOR LINE NUMBER: PAGE 291 OF 375									375
Use separate schedule(s) for each category of the		(check only one)									
Detailed Summary Page		X	11a		11b		11c		12		
., .,			13		14		15		16		17
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	Detailed Summary Page	13 14 15 16 17
	d Statements may not be sold or used by any per- the name and address of any political committee t	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC	the name and address of any political committee of	S SOLICIT CONTINUES.
Full Name (Last, First, Middle Initial) A. Rebecca Siemers		Date of Receipt
Mailing Address 620 STAN DR		12 28 2015
City	State Zip Code	Transaction ID : SA11AI.78870
GRAND JUNCTION	CO 81504	_ Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	ADMINISTRATOR	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General	500.00	
Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) B. KEN SILVERWOOD		Date of Receipt
Mailing Address 1520 GENERALS WAY		11 06 2015
City	State Zip Code	Transaction ID : SA11AI.78631
WEST CHESTER	PA 19380	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	VP-INTERNAL OPERATIONS	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General		
Other (specify) ▼	1050.00	
Full Name (Last, First, Middle Initial) C. KEN SILVERWOOD		Date of Receipt
Mailing Address 1520 GENERALS WAY		11 20 _2015 _
City WEST CHESTER	State Zip Code PA 19380	Transaction ID : SA11AI.78632
-		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	- Memo Item
GENESIS HEALTHCARE CORPORATION	VP-INTERNAL OPERATIONS	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1100.00	
SUBTOTAL of Receipts This Page (optional)	>	125.00
TOTAL This Period (last page this line numb	per only)	

FOR LINE NUMBER: (check only one) PAGE 292 OF Use separate schedule(s)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and State or for commercial purposes, other than using the na		
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	State Zip Code PA 19380 C Decupation /P-INTERNAL OPERATIONS Aggregate Year-to-Date ▼ 1150.00	Date of Receipt 12 04 2015 Transaction ID: SA11AI.78633 Amount of Each Receipt this Period 50.00 Memo Item
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For:	State Zip Code PA 19380 C C Cccupation /P-INTERNAL OPERATIONS Aggregate Year-to-Date ▼ 1200.00	Date of Receipt 12 18 2015 Transaction ID: SA11AI.78634 Amount of Each Receipt this Period 50.00 Memo Item
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For:	State Zip Code PA 19380 C Decupation /P-INTERNAL OPERATIONS Aggregate Year-to-Date ▼ 1250.00	Date of Receipt 12 31 2015 Transaction ID : SA11AI.78635 Amount of Each Receipt this Period 50.00 Memo Item
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only	<u> </u>	150.00

FOR LINE NUMBER: PAGE 293 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16

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 Inc PAC Full Name (Last, First, Middle Initial) MARY SMITH Date of Receipt Mailing Address 2321 RECKFORD RD 2015 11 06 City Zip Code State Transaction ID: SA11AI.78417 MD **JOPPA** 21085 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION MANAGER-CLINICAL SVS CENTERS Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) Full Name (Last, First, Middle Initial) B. MARY SMITH Date of Receipt Mailing Address 2321 RECKFORD RD 20 11 2015 City State Zip Code Transaction ID: SA11AI.78418 **JOPPA** MD 21085 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION MANAGER-CLINICAL SVS CENTERS Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 220.00 Full Name (Last, First, Middle Initial) c. MARY SMITH Date of Receipt Mailing Address 2321 RECKFORD RD M = M 12 04 2015 City Zip Code State Transaction ID: SA11AI.78419 MD **JOPPA** 21085 Amount of Each Receipt this Period FEC ID number of contributing С 10.00 federal political committee. Memo Item Name of Employer Occupation MANAGER-CLINICAL SVS CENTERS GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 230.00 Other (specify) 30.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 294 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16

ITEMIZED RECEIPTS 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 Inc PAC Full Name (Last, First, Middle Initial) MARY SMITH Date of Receipt Mailing Address 2321 RECKFORD RD 2015 12 18 City Zip Code State Transaction ID: SA11AI.78420 MD **JOPPA** 21085 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION MANAGER-CLINICAL SVS CENTERS Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) B. MARY SMITH Date of Receipt Mailing Address 2321 RECKFORD RD 12 31 2015 City State Zip Code Transaction ID: SA11AI.78421 **JOPPA** MD 21085 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION MANAGER-CLINICAL SVS CENTERS Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250,00 Full Name (Last, First, Middle Initial) **c.** Sue Smith Date of Receipt Mailing Address 5900 MIMOSA PLACE NE M M / 11 06 2015 City Zip Code State Transaction ID: SA11AI.79036 NM **ALBUQUERQUE** 87111 Amount of Each Receipt this Period FEC ID number of contributing С 25.00 federal political committee. Memo Item Name of Employer Occupation **DIRECTOR-COMPLIANCE** GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 525.00 Other (specify) 45.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

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for each category of the Detailed Summary Page	X	11a		11b		11c		12		
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	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) Sue Smith Mailing Address 5900 MIMOSA PLACE NE	Date of Receipt	
City ALBUQUERQUE	State Zip Code NM 87111	11 20 2015 Transaction ID : SA11AI.79037 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00 Memo Item
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	Occupation DIRECTOR-COMPLIANCE Aggregate Year-to-Date ▼ 550.00	, interno item
Full Name (Last, First, Middle Initial) 3. Sue Smith Mailing Address 5900 MIMOSA PLACE NE		Date of Receipt 12 04 2015
City ALBUQUERQUE	State Zip Code NM 87111	Transaction ID : SA11AI.79038 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00 Memo Item
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For:	Occupation DIRECTOR-COMPLIANCE	. Mello telli
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 575.00	
Full Name (Last, First, Middle Initial) Sue Smith		Date of Receipt
Mailing Address 5900 MIMOSA PLACE NE City	State Zip Code	12 18 2015
ALBUQUERQUE	NM 87111	Transaction ID : SA11AI.79039 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation DIRECTOR-COMPLIANCE	- Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optional)	>	75.00
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FOR LINE NUMBER: PAGE 296 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16

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 Inc PAC Full Name (Last, First, Middle Initial) Sue Smith Date of Receipt Mailing Address 5900 MIMOSA PLACE NE 2015 12 31 City Zip Code State Transaction ID: SA11AI.79040 NM **ALBUQUERQUE** 87111 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **DIRECTOR-COMPLIANCE** Receipt For: Aggregate Year-to-Date ▼ Primary General 625.00 Other (specify) Full Name (Last, First, Middle Initial) B. Wendell Smith Date of Receipt Mailing Address 201 BON HARBOR HLS 11 05 2015 City State Zip Code Transaction ID: SA11AI.78851 **OWENSBORO** KY 42301 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **ADMINISTRATOR** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300,00 Full Name (Last, First, Middle Initial) c. Wendell Smith Date of Receipt Mailing Address 201 BON HARBOR HLS M M / 11 19 2015 City Zip Code State Transaction ID: SA11AI.78852 KY **OWENSBORO** 42301 Amount of Each Receipt this Period FEC ID number of contributing С 15.00 federal political committee. Memo Item Name of Employer Occupation **ADMINISTRATOR** GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 315.00 Other (specify) 55.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC								
۹.	Full Name (Last, First, Middle Initial) Wendell Smith				Date of	Receipt			
	Mailing Address 201 BON HARBOR HLS City	State	Zip Code		12	03	20	15	
	OWENSBORO	KY	42301			action ID : SA of Each Red			
	FEC ID number of contributing federal political committee.	С					7	15.00	
	Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General	Occupation ADMINISTF Aggregate	RATOR Year-to-Date ▼		Men	no Item			
	Other (specify) ▼		7	330.00					
3.	Full Name (Last, First, Middle Initial) Wendell Smith Mailing Address 201 BON HARBOR HLS				Date of	Receipt	/	Y Y Y	
	City OWENSBORO	State KY	Zip Code 42301		Transa Amount	4			
1	FEC ID number of contributing federal political committee.	С			15.00 Memo Item				
(Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation ADMINISTR	ATOR		L Mei	no item			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	345.00					
Э.	Full Name (Last, First, Middle Initial) Wendell Smith				Date of	Receipt			
	Mailing Address 201 BON HARBOR HLS				M M M	31	/ Y Y 20	15	
-	City OWENSBORO	State KY	Zip Code 42301			of Each Red			
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NAME OF COMMITTEE (In Full)

Genesis Healthcare Inc PAC

Full Name (Last, First, Middle Initial)

A. Lou Ann Soika

Mailing Address GE DEER BATH BOAD

Full Name (Last, First, Middle Initial) Lou Ann Soika		Date of Receipt
Mailing Address 65 DEER PATH ROAD		11 06 2015
City	State Zip Code	Transaction ID : SA11AI.78466
KENNETT SQUARE	PA 19348	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	SVP-CUSTOMER RLTN STRATEGICDEV	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3150.00	
Full Name (Last, First, Middle Initial) 3. Lou Ann Soika		Date of Receipt
Mailing Address 65 DEER PATH ROAD		11 20 2015
City KENNETT SQUARE	State Zip Code PA 19348	Transaction ID : SA11AI.78467
	177	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	SVP-CUSTOMER RLTN STRATEGICDEV	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	3300.00	
Full Name (Last, First, Middle Initial) C. Lou Ann Soika		Date of Receipt
Mailing Address 65 DEER PATH ROAD		12 04 2015
City	State Zip Code	Transaction ID : SA11AI.78468
KENNETT SQUARE	PA 19348	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	150.00
Name of Employer	Occupation	- Memo Item
GENESIS HEALTHCARE CORPORATION	SVP-CUSTOMER RLTN STRATEGICDEV	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	3450.00	
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) Lou Ann Soika Mailing Address 65 DEER PATH ROAD		Date of Receipt 12 18 2015
City KENNETT SQUARE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code PA 19348 C Occupation SVP-CUSTOMER RLTN STRATEGICDEV Aggregate Year-to-Date ▼ 3600.00	Amount of Each Receipt this Period 150.00 Memo Item
Full Name (Last, First, Middle Initial) Lou Ann Soika Mailing Address 65 DEER PATH ROAD City KENNETT SQUARE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code PA 19348 C Occupation SVP-CUSTOMER RLTN STRATEGICDEV Aggregate Year-to-Date ▼ 3750.00	Date of Receipt 12 31 2015 Transaction ID: SA11AI.78470 Amount of Each Receipt this Period 150.00 Memo Item
Full Name (Last, First, Middle Initial) JEFFREY S SOLARZ Mailing Address 130 ORTHODOX DRIVE City RICHBORO FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	State Zip Code PA 18954 C Occupation ADMINISTRATOR-EXECUTIVE Aggregate Year-to-Date ▼ 210.00	Date of Receipt 11 06 2015 Transaction ID: SA11AI.78742 Amount of Each Receipt this Period 10.00 Memo Item
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NAME OF COMMITTEE (In Ful Genesis Healthcare In	- l)											
Full Name (Last, First, Middle II	nitial)			Г	Date of	Rec	eipt					
Mailing Address 130 ORTHODO	DX DRIVE				M = M 11		20	/ Y	2015	Y		
City RICHBORO	State PA	Zip Code 18954			Transa		on ID : So Each Red		8743			
FEC ID number of contributing federal political committee.	С				ount	JI		Joseph Wille	10.0	0		
Name of Employer GENESIS HEALTHCARE CORP Receipt For: Primary General Other (specify) ▼		n RATOR-EXECUTIN e Year-to-Date ▼	/E 220.00	- [Mem	no Ite	em					
Full Name (Last, First, Middle II JEFFREY S SOLARZ Mailing Address 130 ORTHODO	,				Date of	Rec	D D	/ Y	Y Y	Y		
City RICHBORO	State PA	Zip Code 18954		12 04 2015 Transaction ID : SA11AI.78744 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C			10.00								
Name of Employer GENESIS HEALTHCARE CORP	ORATION Occupation	n RATOR-EXECUTIV	/E		Men	no Ite	em					
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼	230.00									
Full Name (Last, First, Middle Inc. JEFFREY S SOLARZ	nitial)				Date of	Rec	eipt					
Mailing Address 130 ORTHODO	OX DRIVE				12	/	18	/ Y	2015	Y		
City RICHBORO	State PA	Zip Code 18954					on ID : Sa Each Red					
FEC ID number of contributing federal political committee.	C					,		7	10.0	0		
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) JEFFREY S SOLARZ Mailing Address 130 ORTHODOX DRIVE City RICHBORO FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify) Contributing federal political committee.	State Zip Code PA 18954 C Occupation ADMINISTRATOR-EXECUTIVE Aggregate Year-to-Date ▼ 250.00	Date of Receipt 12 31 2015 Transaction ID: SA11AI.78746 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) Julie Stafford Mailing Address 137 BOB'S WAY PO BOX 17 City ARARAT FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code NC 27007 C Occupation ADMINISTRATOR Aggregate Year-to-Date ▼ 210.00	Date of Receipt 11 06 2015 Transaction ID: SA11AI.78827 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) Julie Stafford Mailing Address 137 BOB'S WAY PO BOX 17 City ARARAT FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code NC 27007 C Occupation ADMINISTRATOR Aggregate Year-to-Date ▼	Date of Receipt 11 20 2015 Transaction ID: SA11AI.78828 Amount of Each Receipt this Period 10.00 Memo Item
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\rangle	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC			
Α.	Full Name (Last, First, Middle Initial) Brenda Steinauer Mailing Address 3022 DEL PRADO City ALAMOGORDO FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General		Zip Code 88310 -CLINICAL OPERATIONS Year-to-Date ▼	Date of Receipt 11 06 2015 Transaction ID : SA11AI.78981 Amount of Each Receipt this Period 15.00 Memo Item
В.	Full Name (Last, First, Middle Initial) Brenda Steinauer Mailing Address 3022 DEL PRADO City ALAMOGORDO FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼		Zip Code 88310 -CLINICAL OPERATIONS Year-to-Date ▼	Date of Receipt 11 20 2015 Transaction ID : SA11Al.78982 Amount of Each Receipt this Period 15.00 Memo Item
C.	Full Name (Last, First, Middle Initial) Brenda Steinauer Mailing Address 3022 DEL PRADO City ALAMOGORDO FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)		Zip Code 88310 -CLINICAL OPERATIONS Year-to-Date ▼	Date of Receipt 12 04 2015 Transaction ID: SA11AI.78983 Amount of Each Receipt this Period 15.00 Memo Item
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) Brenda Steinauer Date of Receipt Mailing Address 3022 DEL PRADO 2015 12 18 City Zip Code State Transaction ID: SA11AI.78984 NM 88310 **ALAMOGORDO** Amount of Each Receipt this Period FEC ID number of contributing C 15.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION MANAGER-CLINICAL OPERATIONS Receipt For: Aggregate Year-to-Date ▼ Primary General 360.00 Other (specify) Full Name (Last, First, Middle Initial) B. Brenda Steinauer Date of Receipt Mailing Address 3022 DEL PRADO 12 31 2015 City State Zip Code Transaction ID: SA11AI.78985 **ALAMOGORDO** NM 88310 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION MANAGER-CLINICAL OPERATIONS Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 375.00 Full Name (Last, First, Middle Initial) c. Sean Stevenson Date of Receipt Mailing Address 49 ESSEX RD 06 11 2015 City Zip Code State Transaction ID: SA11AI.78946 NH **BEDFORD** 03110 Amount of Each Receipt this Period FEC ID number of contributing С 25.00 federal political committee. Memo Item Name of Employer Occupation **VP OPERATIONS** GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 525.00 Other (specify)

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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) Sean Stevenson Mailing Address 49 ESSEX RD City BEDFORD FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	State Zip Code NH 03110 C Occupation VP OPERATIONS Aggregate Year-to-Date ▼ 625.00	Date of Receipt 12 31 2015 Transaction ID: SA11AI.78950 Amount of Each Receipt this Period 25.00 Memo Item
Full Name (Last, First, Middle Initial) B. WILLIAM E STURGIS Mailing Address 204 HARVARD AVENUE BOX 656 City MOUNT GRETNA FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code PA 17064 C Occupation DIRECTOR-FINANCIAL ANALYSIS Aggregate Year-to-Date ▼ 784.35	Date of Receipt 11 06 2015 Transaction ID : SA11Al.77961 Amount of Each Receipt this Period 37.35 Memo Item
Full Name (Last, First, Middle Initial) C. WILLIAM E STURGIS Mailing Address 204 HARVARD AVENUE BOX 656 City MOUNT GRETNA FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	State Zip Code PA 17064 C Occupation DIRECTOR-FINANCIAL ANALYSIS Aggregate Year-to-Date ▼ 821.70	Date of Receipt 11 20 2015 Transaction ID : SA11AI.77962 Amount of Each Receipt this Period 37.35 Memo Item
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B. WILLIAM E STURGIS

federal political committee.

Other (specify)

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MOUNT GRETNA

Name of Employer

Primary

MOUNT GRETNA

Name of Employer

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federal political committee.

Other (specify)

Receipt For:

City

Receipt For:

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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BOX 656

BOX 656

GENESIS HEALTHCARE CORPORATION

General

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FOR LINE NUMBER: PAGE 307 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16 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 Inc PAC Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address 204 HARVARD AVENUE 04 2015 12 Zip Code State Transaction ID: SA11AI.77963 PΑ 17064 Amount of Each Receipt this Period FEC ID number of contributing 37.35 Memo Item Occupation GENESIS HEALTHCARE CORPORATION **DIRECTOR-FINANCIAL ANALYSIS** Aggregate Year-to-Date ▼ General 859.05 Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address 204 HARVARD AVENUE 12 18 2015 State Zip Code Transaction ID: SA11AI.77964 PA 17064 Amount of Each Receipt this Period FEC ID number of contributing 37.35 Memo Item Occupation GENESIS HEALTHCARE CORPORATION **DIRECTOR-FINANCIAL ANALYSIS** Aggregate Year-to-Date ▼ General 896.40 Full Name (Last, First, Middle Initial) c. WILLIAM E STURGIS Date of Receipt Mailing Address 204 HARVARD AVENUE M M / 12 31 2015 State Zip Code Transaction ID: SA11AI.77965 PΑ 17064 Amount of Each Receipt this Period FEC ID number of contributing С 37.35 Memo Item Occupation

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ITEMIZED RECEIPTS Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) A. LINDA M SULLIVAN Date of Receipt Mailing Address 550 CROSSWINDS DRIVE 11 2015 27 City State Zip Code Transaction ID: SA11AI.78318 PΑ LITIZ 17543 Amount of Each Receipt this Period FEC ID number of contributing C 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **ADMINISTRATOR** Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) Full Name (Last, First, Middle Initial) B. LINDA M SULLIVAN Date of Receipt Mailing Address 550 CROSSWINDS DRIVE 12 11 2015 City State Zip Code Transaction ID: SA11AI.78319 PA LITIZ 17543 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **ADMINISTRATOR** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 220,00 Full Name (Last, First, Middle Initial) c. LINDA M SULLIVAN Date of Receipt Mailing Address 550 CROSSWINDS DRIVE 12 24 2015 City State Zip Code Transaction ID: SA11AI.78320 PΑ LITIZ 17543 Amount of Each Receipt this Period FEC ID number of contributing C 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **ADMINISTRATOR** Receipt For: Aggregate Year-to-Date ▼ Primary General 230.00 Other (specify) 30.00 SUBTOTAL of Receipts This Page (optional).....

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	ly information copied from such Reports and State for commercial purposes, other than using the r									
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC									
A.	Mailing Address 105 MARLBROOKE WAY City KENNETT SQUARE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	State PA C Occupation SR VP ADMIN Aggregate Yea	Zip Code 19348 AND GOVT AFFAIRS ar-to-Date ▼ 3150.00		Amour	sactio	06 on ID : S Each Rec	A11AI.7		_
В.	Full Name (Last, First, Middle Initial) James Tabak				Date of	of Red	ceipt			
	Mailing Address 105 MARLBROOKE WAY				M = N	/	D I D	/ Y	YYY	

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D	Full Name (Last, First, Middle Initial) James Tabak		Data of Receipt
В.			Date of Receipt
	Mailing Address 105 MARLBROOKE WAY		M = M / D = D / Y = Y = Y
	O:h.	Otata Zin Oada	11 20 2015
	City	State Zip Code	Transaction ID : SA11AI.78021
	KENNETT SQUARE	PA 19348	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	150.00
	Name of Employer	Occupation	Memo Item
	GENESIS HEALTHCARE CORPORATION	SR VP ADMIN AND GOVT AFFAIRS	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	Aggregate real to bate v	
	Other (specify) ▼	3300.00	
		, , , , , , , , , , , , , , , , , , , ,	
	Full Name (Last, First, Middle Initial)		
C.	James Tabak		Date of Receipt
	Mailing Address 105 MARLBROOKE WAY		12 04 2015
	City	State Zip Code	Transaction ID : SA11AI.78022
	KENNETT SQUARE	PA 19348	Amount of Each Receipt this Period
	FEC ID number of contributing		150.00
	federal political committee.	C	130.00
	Name of Employer	Occupation	Memo Item
	GENESIS HEALTHCARE CORPORATION	SR VP ADMIN AND GOVT AFFAIRS	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	Aggregate rear-to-bate ¥	
	Other (specify)	3450.00	
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5	SUBTOTAL of Receipts This Page (optional)		450.00
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Any information copied from such Reports and St or for commercial purposes, other than using the						
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC						
Full Name (Last, First, Middle Initial) James Tabak Mailing Address 105 MARLBROOKE WAY City	State	Zip Code	Date of	/ 18	2015 AA11AI.78023	Y
KENNETT SQUARE		19348			ceipt this Period	
FEC ID number of contributing federal political committee. Name of Employer	Occupation		Mem	no Item	150.0	0
GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	SR VP ADMIN A Aggregate Year	3600.00				

	Other (specify)	3500.00	
В.	Full Name (Last, First, Middle Initial) Michelle Taylor		Date of Receipt
	Mailing Address 8800 NEW HAMPTON RD N	E	11 06 2015
	City	State Zip Code	Transaction ID : SA11AI.79076
	ALBUQUERQUE	NM 87111	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer	Occupation	Memo Item
	GENESIS HEALTHCARE CORPORATION	DIRECTOR-ACCOUNTING	_
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	Aggregate real-to-bate ¥	
	Other (specify) ▼	525.00	
<u>с</u> .	Full Name (Last, First, Middle Initial) Michelle Taylor		Date of Receipt
	Mailing Address 8800 NEW HAMPTON RD N	E	11 20 2015
	City	State Zip Code	Transaction ID : SA11AI.79077
	ALBUQUERQUE	NM 87111	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer	Occupation	Memo Item
	GENESIS HEALTHCARE CORPORATION	DIRECTOR-ACCOUNTING	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	Aggregate real to bate v	
	Other (specify) ▼	550.00	
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FOR LINE NUMBER: PAGE 311 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

ITEMIZED RECEIPTS 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 Inc PAC Full Name (Last, First, Middle Initial) Michelle Taylor Date of Receipt Mailing Address 8800 NEW HAMPTON RD NE 04 2015 12 City Zip Code State Transaction ID: SA11AI.79078 NM **ALBUQUERQUE** 87111 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION DIRECTOR-ACCOUNTING Receipt For: Aggregate Year-to-Date ▼ Primary General 575.00 Other (specify) Full Name (Last, First, Middle Initial) B. Michelle Taylor Date of Receipt Mailing Address 8800 NEW HAMPTON RD NE 12 18 2015 City State Zip Code Transaction ID: SA11AI.79079 **ALBUQUERQUE** NM 87111 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **DIRECTOR-ACCOUNTING** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 600,00 Full Name (Last, First, Middle Initial) **c.** Michelle Taylor Date of Receipt Mailing Address 8800 NEW HAMPTON RD NE M = M 12 31 2015 City State Zip Code Transaction ID: SA11AI.79080 NM **ALBUQUERQUE** 87111 Amount of Each Receipt this Period FEC ID number of contributing С 25.00 federal political committee. Memo Item Name of Employer Occupation **DIRECTOR-ACCOUNTING** GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 625.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

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SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s for each category of the Detailed Summary Page	s)	(che	LINE ck only	_		b	PAG	E 3	12 OF 12 16	375
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) Raymond Thivierge Mailing Address 9 HERITAGE HILL ROAD City WINDHAM FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify) Other (specify)	State NH C Occupation EXECUTIV	Zip Code 03087	mittee to	o sol	Date of 11 Trans	Rec	ceip on Eac	ons from	y Y	20 7835	nmitted	Э.
Full Name (Last, First, Middle Initial) Raymond Thivierge Mailing Address 9 HERITAGE HILL ROAD City WINDHAM FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify) General Other (specify)	1	Zip Code 03087 E VICE PRESIDENT Year-to-Date ▼ 3300.00			Date of 11 Trans. Amount	actio	on l	20 ID : SA		20 783 5	1	
Full Name (Last, First, Middle Initial) Raymond Thivierge Mailing Address 9 HERITAGE HILL ROAD					Date of			ot	/ Y	= Y	Y	7

	Full	Name	(Last,	First,	Middle	Initial)
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Other (specify)

Raymond Thivierge Mailing Address 9 HERITAGE HILL ROAD 12 04 2015 Zip Code City State Transaction ID: SA11AI.78352 NH 03087 WINDHAM Amount of Each Receipt this Period FEC ID number of contributing 150.00 С federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **EXECUTIVE VICE PRESIDENT** Receipt For: Aggregate Year-to-Date ▼ Primary General

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

3450.00

FOR LINE NUMBER: PAGE 313 OF 375 Use separate schedule(s) for each category of the (check only one)

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Any information copied from such Reports and or for commercial purposes, other than using the						pos	e of s			
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC										
Full Name (Last, First, Middle Initial) A. Raymond Thivierge				Date of	Re	ecei	pt			
Mailing Address 9 HERITAGE HILL ROAD				м = м 12	/	I	18	/ Y	2015	Y
City	State	Zip Code						SA11AI.		
WINDHAM	NH	03087	A	mount	of	Ea	ch Re	ceipt th	is Period	d
FEC ID number of contributing federal political committee.	С			NA s	ms '	J Itom		- 7	150	.00
Name of Employer	Occupation	I	7 L	Mei	mo I	item	1			
GENESIS HEALTHCARE CORPORATION	EXECUTIV	E VICE PRESIDENT								
Receipt For: Primary General	Aggregate	Year-to-Date ▼								
Other (specify) ▼		3600.00								
Full Name (Last, First, Middle Initial) Raymond Thivierge				Date of	Re	ecei	pt			
Mailing Address 9 HERITAGE HILL ROAD				M = M	/		31	/ Y	2015	Y
City	State	Zip Code						A11AI.		
WINDHAM	NH	03087	A	mount	of	Ea	ch Re	ceipt th	is Period	d
FEC ID number of contributing federal political committee.	С					7		-1	150	.00
Name of Employer	Occupation	1	┦ L	Me	mo l	lten	n			
GENESIS HEALTHCARE CORPORATION	EXECUTIV	E VICE PRESIDENT								
Receipt For:	Aggregate	Year-to-Date ▼								
Primary General Other (specify) ▼		3750.00								
Full Name (Last, First, Middle Initial) C. NICOLE THOMPSON	I			Date of	Re	ecei	pt			
Mailing Address 27 PEARSON CIRCLE] [м = м 11	/		06	/ Y	2015	Y
City SPRINGFIELD	State PA	Zip Code 19064						SA11AI.		1
-		10007	⊢ ^	mount	of	Ea	ch Re	ceipt th	is Period	1
FEC ID number of contributing federal political committee.	С			Ma	mo l	Itor		-	20	.00
Name of Employer	Occupation	l	7 L	ivie	iiiO l	nem	1			
GENESIS HEALTHCARE CORPORATION	SPECIALIS	ST-REG SAFETY PREVENT								
Receipt For: Primary General	Aggregate	Year-to-Date ▼								
Other (specify) ▼		420.00								
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FOR LINE NUMBER: PAGE 314 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16 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 Inc PAC Full Name (Last, First, Middle Initial) NICOLE THOMPSON Date of Receipt Mailing Address 27 PEARSON CIRCLE 2015 11 20 City Zip Code State Transaction ID: SA11AI.78590 PΑ **SPRINGFIELD** 19064 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION SPECIALIST-REG SAFETY PREVENT Receipt For: Aggregate Year-to-Date ▼ Primary General 440.00 Other (specify) Full Name (Last, First, Middle Initial) **B. NICOLE THOMPSON** Date of Receipt Mailing Address 27 PEARSON CIRCLE 12 04 2015 City State Zip Code Transaction ID: SA11AI.78591 **SPRINGFIELD** PA 19064 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION SPECIALIST-REG SAFETY PREVENT Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 460,00 Full Name (Last, First, Middle Initial) c. NICOLE THOMPSON Date of Receipt Mailing Address 27 PEARSON CIRCLE M M / 12 18 2015 City State Zip Code Transaction ID: SA11AI.78592 PΑ **SPRINGFIELD** 19064 Amount of Each Receipt this Period FEC ID number of contributing С 20.00 federal political committee. Memo Item Name of Employer Occupation SPECIALIST-REG SAFETY PREVENT GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼

480.00

Primary

Other (specify)

General

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

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60.00

Receipt For:

Name of Employer

Primary

Other (specify)

GENESIS HEALTHCARE CORPORATION

General

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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: PAGE 315 OF 375 (check only one) X 11a
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Full Name (Last, First, Middle Initial) Mailing Address 6807 REAL PRINCESS LAN City BALTIMORE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify) ▼	State MD C Occupation DIRECTOR	Zip Code 21207 R-SR AREA FOOD AND NUTR Year-to-Date ▼ 840.00	Date of Receipt 11 06 2015 Transaction ID: SA11AI.78709 Amount of Each Receipt this Period 40.00 Memo Item
Full Name (Last, First, Middle Initial) C. WILLIAM JOSEPH TIAN Mailing Address 6807 REAL PRINCESS LAI City BALTIMORE FEC ID number of contributing federal political committee.	State MD	Zip Code 21207	Date of Receipt 11 20 2015 Transaction ID: SA11Al.78710 Amount of Each Receipt this Period 40.00 Memo Item

Occupation

DIRECTOR-SR AREA FOOD AND NUTR

880.00

Aggregate Year-to-Date ▼

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FOR LINE NUMBER: PAGE 316 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16

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 Inc PAC Full Name (Last, First, Middle Initial) WILLIAM JOSEPH TIAN Date of Receipt Mailing Address 6807 REAL PRINCESS LANE 04 2015 12 City Zip Code State Transaction ID: SA11AI.78711 MD **BALTIMORE** 21207 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION DIRECTOR-SR AREA FOOD AND NUTR Receipt For: Aggregate Year-to-Date ▼ Primary General 920.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** WILLIAM JOSEPH TIAN Date of Receipt Mailing Address 6807 REAL PRINCESS LANE 12 18 2015 City State Zip Code Transaction ID: SA11AI.78712 **BALTIMORE** MD 21207 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION DIRECTOR-SR AREA FOOD AND NUTR Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 960.00 Full Name (Last, First, Middle Initial) c. WILLIAM JOSEPH TIAN Date of Receipt Mailing Address 6807 REAL PRINCESS LANE M = M 12 31 2015 City Zip Code State Transaction ID: SA11AI.78713 MD **BALTIMORE** 21207 Amount of Each Receipt this Period FEC ID number of contributing С 40.00 federal political committee. Memo Item Name of Employer Occupation DIRECTOR-SR AREA FOOD AND NUTR GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 120.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 9

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Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) William Timm Date of Receipt Mailing Address 1059 MAHLON DRIVE 06 2015 11 City State Zip Code Transaction ID: SA11AI.78307 PΑ **LEESPORT** 19533 Amount of Each Receipt this Period FEC ID number of contributing C 35.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **VP OPERATIONS** Receipt For: Aggregate Year-to-Date ▼ Primary General 735.00 Other (specify) Full Name (Last, First, Middle Initial) B. William Timm Date of Receipt Mailing Address 1059 MAHLON DRIVE 20 11 2015 City State Zip Code Transaction ID: SA11AI.78308 **LEESPORT** PA 19533 Amount of Each Receipt this Period FEC ID number of contributing 35.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **VP OPERATIONS** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 770.00 Full Name (Last, First, Middle Initial) c. William Timm Date of Receipt Mailing Address 1059 MAHLON DRIVE 04 12 2015 City State Zip Code Transaction ID: SA11AI.78309 PΑ **LEESPORT** 19533 Amount of Each Receipt this Period FEC ID number of contributing C 35.00 federal political committee. Memo Item Name of Employer Occupation **VP OPERATIONS** GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 805.00 Other (specify) 105.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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Any information copied from such Reports and Statements may

or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
۹.	Full Name (Last, First, Middle Initial) William Timm Mailing Address 1059 MAHLON DRIVE		Date of Receipt
	City LEESPORT FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code PA 19533 C Occupation VP OPERATIONS Aggregate Year-to-Date ▼ 840.00	Transaction ID: SA11AI.78310 Amount of Each Receipt this Period 35.00 Memo Item
3.	Full Name (Last, First, Middle Initial) William Timm Mailing Address 1059 MAHLON DRIVE City LEESPORT FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	State Zip Code PA 19533 C Occupation VP OPERATIONS Aggregate Year-to-Date ▼ 875.00	Date of Receipt 12 31 2015 Transaction ID: SA11AI.78311 Amount of Each Receipt this Period 35.00 Memo Item
Э.	Full Name (Last, First, Middle Initial) Alina Torregosa Mailing Address 5 BLUEGRASS RD City CLEMENTON FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code NJ 08021 C Occupation DIRECTOR-NURSING Aggregate Year-to-Date ▼ 210.00	Date of Receipt 11 06 2015 Transaction ID: SA11AI.78456 Amount of Each Receipt this Period 10.00 Memo Item
s	UBTOTAL of Receipts This Page (optional)	<u> </u>	80.00
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FOR LINE NUMBER: PAGE 319 OF 375 Use separate schedule(s) for each category of the (check only one)

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\rangle	Genesis Healthcare Inc PAC										
۹.	Full Name (Last, First, Middle Initial) Alina Torregosa				Date of	Re	ceipt				
	Mailing Address 5 BLUEGRASS RD				M = M	/	20	/ Y		015	Y
	City	State NJ	Zip Code		Trans	acti	on ID :	SA11AI	.7845	57	
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	Name of Employer	Occupation			Mer	no It	tem				
	GENESIS HEALTHCARE CORPORATION	DIRECTOR	-NURSING								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify) ▼		220.00								
3.	Full Name (Last, First, Middle Initial) Alina Torregosa				Date of	Re	ceipt				
	Mailing Address 5 BLUEGRASS RD				M M	′	04	/ Y	_ 20 ⁻	15	Y
	City	State	Zip Code					SA11AI			
	CLEMENTON	NJ	08021	\dashv	Amount	of	Each R	eceipt t	his P	eriod	
	FEC ID number of contributing federal political committee.	С					,	7		10.0	0
	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation DIRECTOR			Mei	mo l	tem				
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.00								
	Full Name (Last, First, Middle Initial) Alina Torregosa				Date of	Re	ceipt				
	Mailing Address 5 BLUEGRASS RD				M M 12	′	18	/ Y	20	15	Y
	CIEMENTON	State NJ	Zip Code 08021					SA11Al eceipt t			
	FEC ID number of contributing federal political committee.	С			Ľ.		7	- 5	_	10.0	0
	Name of Employer	Occupation			Mer	mo l	tem				
	GENESIS HEALTHCARE CORPORATION	DIRECTOR	-NURSING								
	Receipt For: Primary General	Aggregate	Year-to-Date ▼								
	Other (specify) ▼		240.00								
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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: PAGE 320 OF 375 (check only one) X 11a
Any information copied from such Reports and S	tatements may not be sold or used by any	
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC	name and address of any political committee	ee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Alina Torregosa Mailing Address 5 BLUEGRASS RD City CLEMENTON FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code NJ 08021 C Occupation DIRECTOR-NURSING Aggregate Year-to-Date ▼ 250.00	Date of Receipt 12 31 2015 Transaction ID: SA11AI.78460 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) Amy Trautman Mailing Address 122 DEN ROAD City LINCOLN UNIVERSITY FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	State Zip Code PA 19352 C Occupation MANAGER-RECRUITMENT Aggregate Year-to-Date ▼ 210.00	Date of Receipt 11 06 2015 Transaction ID: SA11AI.78695 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) Amy Trautman Mailing Address 122 DEN ROAD City LINCOLN UNIVERSITY FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code PA 19352 C Occupation MANAGER-RECRUITMENT Aggregate Year-to-Date ▼ 220.00	Date of Receipt 11 20 2015 Transaction ID : SA11AI.78696 Amount of Each Receipt this Period 10.00 Memo Item
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number of		

FOR LINE NUMBER: PAGE 321 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

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 Inc PAC Full Name (Last, First, Middle Initial) Amy Trautman Date of Receipt Mailing Address 122 DEN ROAD 04 2015 12 City Zip Code State Transaction ID: SA11AI.78697 PΑ LINCOLN UNIVERSITY 19352 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION MANAGER-RECRUITMENT Receipt For: Aggregate Year-to-Date ▼ Primary General 230.00 Other (specify) Full Name (Last, First, Middle Initial) B. Amy Trautman Date of Receipt Mailing Address 122 DEN ROAD 12 18 2015 City State Zip Code Transaction ID: SA11AI.78698 LINCOLN UNIVERSITY PA 19352 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION MANAGER-RECRUITMENT Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 240,00 Full Name (Last, First, Middle Initial) **c.** Amy Trautman Date of Receipt Mailing Address 122 DEN ROAD M M / 12 31 2015 City State Zip Code Transaction ID: SA11AI.78699 PΑ LINCOLN UNIVERSITY 19352 Amount of Each Receipt this Period FEC ID number of contributing С 10.00 federal political committee. Memo Item Name of Employer Occupation MANAGER-RECRUITMENT GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 30.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... -9

FOR LINE NUMBER: PAGE 322 OF 375 Use separate schedule(s) (check only one)

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) LISA TRAUTMAN Mailing Address 4 VIOLET LANE City WEST GROVE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	State Zip Code PA 19390 C Occupation DIRECTOR REGIONAL EC LINE Aggregate Year-to-Date ▼	Date of Receipt 11 06 2015 Transaction ID: SA11AI.78005 Amount of Each Receipt this Period 20.00 Memo Item
Full Name (Last, First, Middle Initial) B. LISA TRAUTMAN Mailing Address 4 VIOLET LANE		Date of Receipt 11 20 2015
City WEST GROVE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION	State Zip Code PA 19390 C Occupation DIRECTOR REGIONAL EC LINE	Transaction ID : SA11AI.78006 Amount of Each Receipt this Period 20.00 Memo Item
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	Aggregate Year-to-Date ▼ 440.00	
C. LISA TRAUTMAN Mailing Address 4 VIOLET LANE City	State Zip Code	Date of Receipt 12 04 2015
WEST GROVE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	PA 19390 C Occupation DIRECTOR REGIONAL EC LINE Aggregate Year-to-Date ▼ 460.00	Transaction ID : SA11AI.78007 Amount of Each Receipt this Period 20.00 Memo Item
SUBTOTAL of Receipts This Page (optional)		60.00
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FOR LINE NUMBER: PAGE 323 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16

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 Inc PAC Full Name (Last, First, Middle Initial) LISA TRAUTMAN Date of Receipt Mailing Address 4 VIOLET LANE 2015 12 18 City Zip Code State Transaction ID: SA11AI.78008 PΑ **WEST GROVE** 19390 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION DIRECTOR REGIONAL EC LINE Receipt For: Aggregate Year-to-Date ▼ Primary General 480.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** LISA TRAUTMAN Date of Receipt Mailing Address 4 VIOLET LANE 12 31 2015 City State Zip Code Transaction ID: SA11AI.78009 WEST GROVE PA 19390 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION DIRECTOR REGIONAL EC LINE Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500,00 Full Name (Last, First, Middle Initial) c. JOSEPH J TRIANA Date of Receipt Mailing Address 102 INTIMADATOR LANE M M / 11 06 2015 City Zip Code State Transaction ID: SA11AI.78277 WV **GIVEN** 25245 Amount of Each Receipt this Period FEC ID number of contributing С 25.00 federal political committee. Memo Item Name of Employer Occupation ADMINISTRATOR-SR GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 525.00 Other (specify) 65.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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FOR LINE NUMBER: PAGE 324 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16

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 Inc PAC Full Name (Last, First, Middle Initial) JOSEPH J TRIANA Date of Receipt Mailing Address 102 INTIMADATOR LANE 2015 11 20 City Zip Code State Transaction ID: SA11AI.78278 WV **GIVEN** 25245 Amount of Each Receipt this Period FEC ID number of contributing C 25.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION ADMINISTRATOR-SR Receipt For: Aggregate Year-to-Date ▼ Primary General 550.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** JOSEPH J TRIANA Date of Receipt Mailing Address 102 INTIMADATOR LANE 12 04 2015 City State Zip Code Transaction ID: SA11AI.78279 **GIVEN** WV 25245 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION ADMINISTRATOR-SR Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 575.00 Full Name (Last, First, Middle Initial) c. JOSEPH J TRIANA Date of Receipt Mailing Address 102 INTIMADATOR LANE M M / 12 18 2015 City Zip Code State Transaction ID: SA11AI.78280 WV **GIVEN** 25245 Amount of Each Receipt this Period FEC ID number of contributing С 25.00 federal political committee. Memo Item Name of Employer Occupation ADMINISTRATOR-SR GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) 75.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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Full Name (Last, First, Middle Initial) A. JOSEPH J TRIANA				ate of	Re	ecei	ipt			
Mailing Address 102 INTIMADATOR LANE	0	7. 0.1	_ [12		L	31		2015	Y
City GIVEN	State WV	Zip Code 25245						A11AI.	78281 is Period	i
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Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation ADMINISTI		ַ 	Mer	mo l	iten	n			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 625.00								
Full Name (Last, First, Middle Initial) ANNMARIE P TRUVER				Date of	Re	ecei	ipt			
Mailing Address 281 WILDERNESS ROAD				M = M	/		06	/ Y	2015	Y
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Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 210.00								
Full Name (Last, First, Middle Initial) C. ANNMARIE P TRUVER				ate of	Re	ecei	ipt			
Mailing Address 281 WILDERNESS ROAD] [м = м 11		L	20		2015	Y
City SEVERNA PARK	State MD	Zip Code 21146						A11AI. ceipt th	78030 nis Period	i
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۹.	Full Name (Last, First, Middle Initial) ANNMARIE P TRUVER		Date of Receipt
	Mailing Address 281 WILDERNESS ROAD		12 04 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID : SA11AI.78031
	SEVERNA PARK	MD 21146	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10.00
	Name of Employer	Occupation	Memo Item
	GENESIS HEALTHCARE CORPORATION	MANAGER-CLINICAL REIMBURSEMENT	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	55 0	
_	Other (specify) ▼	230.00	
3.	Full Name (Last, First, Middle Initial) ANNMARIE P TRUVER		Date of Receipt
	Mailing Address 281 WILDERNESS ROAD		12 18 2015
	City	State Zip Code	Transaction ID : SA11AI.78032
	SEVERNA PARK	MD 21146	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10.00
	Name of Employer	Occupation	Memo Item
	GENESIS HEALTHCARE CORPORATION	MANAGER-CLINICAL REIMBURSEMENT	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General	00 0	
_	Other (specify) ▼	240.00	
—).	Full Name (Last, First, Middle Initial) ANNMARIE P TRUVER		Date of Receipt
	Mailing Address 281 WILDERNESS ROAD		12 31 _ 2015 _
	City	State Zip Code	Transaction ID : SA11AI.78033
	SEVERNA PARK	MD 21146	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10.00
	Name of Employer	Occupation	Memo Item
	GENESIS HEALTHCARE CORPORATION	MANAGER-CLINICAL REIMBURSEMENT	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General		
	Other (specify) ▼	250.00	
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	y information copied from such Reports and S for commercial purposes, other than using the					
\geq	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC					
A.	Full Name (Last, First, Middle Initial) Kathleen Usher Mailing Address 372915 PO BOX					te of Receipt
	City	State	Zip Cod	e	_ L	11 06 2015 aransaction ID : SA11AI.78956
	SATELLITE BEACH FEC ID number of contributing	FL	32937		Am	ount of Each Receipt this Period
	federal political committee.	С			1	30.00
	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VICE PRES				Memo Item
	Receipt For: Primary General Other (specify) ▼		Year-to-Date	▼ 630.00]	
В.	Full Name (Last, First, Middle Initial) Kathleen Usher				Dat	te of Receipt
	Mailing Address 372915 PO BOX					11 20 2015
	SATELLITE BEACH	State FL	Zip Cod 32937	e		ransaction ID : SA11AI.78957 rount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C				30.00
	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VICE PRES				Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date	660.00]	
<u> </u>	Full Name (Last, First, Middle Initial) Kathleen Usher				Dat	te of Receipt
•	Mailing Address 372915 PO BOX				M	12 04 _ 2015 _
	City SATELLITE BEACH	State FL	Zip Cod 32937	е	Т	ransaction ID : SA11AI.78958
	FEC ID number of contributing federal political committee.	С				30.00
	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VICE PRES				Memo Item
	Receipt For: Primary General Other (specify)		Year-to-Date	690.00]	
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Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) Kathleen Usher Date of Receipt Mailing Address 372915 PO BOX 2015 12 18 City State Zip Code Transaction ID: SA11AI.78959 FL SATELLITE BEACH 32937 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VICE PRESIDENT Receipt For: Aggregate Year-to-Date ▼ Primary General 720.00 Other (specify) Full Name (Last, First, Middle Initial) B. Kathleen Usher Date of Receipt Mailing Address 372915 PO BOX 12 31 2015 City State Zip Code Transaction ID: SA11AI.78960 SATELLITE BEACH FL 32937 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VICE PRESIDENT Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 750.00 Full Name (Last, First, Middle Initial) c. PERRY VALENTINE Date of Receipt Mailing Address 3675 MANDOLIN DRIVE 06 11 2015 City State Zip Code Transaction ID: SA11AI.77891 MD **HAMPSTEAD** 21074 Amount of Each Receipt this Period FEC ID number of contributing С 35.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTH VENTURES, INC. DIRECTOR-HOSPITALITY SERVICES Receipt For: Aggregate Year-to-Date ▼ Primary General 735.00 Other (specify) 95.00 SUBTOTAL of Receipts This Page (optional).....

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\	E OF COMMITTEE (In Full) nesis Healthcare Inc PAC		
	Name (Last, First, Middle Initial) RRY VALENTINE		Date of Receipt
Mailin	ng Address 3675 MANDOLIN DRIVE State	Zip Code	11 20 2015
Oity	State	Zip Code	Transaction ID : SA11AI.77892

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Α.	Full Name (Last, First, Middle Initial) PERRY VALENTINE		Date of Receipt
	Mailing Address 3675 MANDOLIN DRIVE		M = M / D = D / Y = Y = Y = Y = 11 20 _ 2015 _
	City	State Zip Code	Transaction ID : SA11AI.77892
	HAMPSTEAD	MD 21074	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	35.00
	Name of Employer	Occupation	Memo Item
	GENESIS HEALTH VENTURES, INC.	DIRECTOR-HOSPITALITY SERVICES	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 770.00	
— В.	Full Name (Last, First, Middle Initial) PERRY VALENTINE		Date of Receipt
	Mailing Address 3675 MANDOLIN DRIVE		12 04 <u>Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y</u>
	City	State Zip Code	Transaction ID : SA11AI.77893
	HAMPSTEAD	MD 21074	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	35.00
	Name of Employer GENESIS HEALTH VENTURES, INC.	Occupation DIRECTOR-HOSPITALITY SERVICES	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 805.00	
С .	Full Name (Last, First, Middle Initial) PERRY VALENTINE		Date of Receipt
	Mailing Address 3675 MANDOLIN DRIVE		12 18 2015
	City	State Zip Code	Transaction ID : SA11AI.77894
	HAMPSTEAD	MD 21074	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	35.00
	Name of Employer	Occupation	Memo Item
	GENESIS HEALTH VENTURES, INC.	DIRECTOR-HOSPITALITY SERVICES	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 840.00	
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or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
$\left. \right\rangle$	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Α.	Full Name (Last, First, Middle Initial) PERRY VALENTINE Mailing Address 3675 MANDOLIN DRIVE		Date of Receipt
	City HAMPSTEAD	State Zip Code MD 21074	12 31 2015 Transaction ID : SA11AI.77895 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	35.00
	Name of Employer GENESIS HEALTH VENTURES, INC. Receipt For:	Occupation DIRECTOR-HOSPITALITY SERVICES	Memo Item
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 875.00	
В.	Full Name (Last, First, Middle Initial) VICTORIA VALTON Mailing Address 112 EDGEWOOD RD		Date of Receipt
	City	State Zip Code MD 21286	11 06 2015 Transaction ID : SA11Al.78441
	TOWSON FEC ID number of contributing federal political committee.	MD 21286	Amount of Each Receipt this Period 20.00
	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation DIRECTOR-EXTERNAL COMMUN	Memo Item
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	
C.	Full Name (Last, First, Middle Initial) VICTORIA VALTON Mailing Address 112 EDGEWOOD RD		Date of Receipt
	City	State Zip Code MD 21286	11 20 2015 Transaction ID : SA11AI.78442 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20.00
	Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For:	Occupation DIRECTOR-EXTERNAL COMMUN	Memo Item
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC										
Full Name (Last, First, Middle Initial) A. VICTORIA VALTON				ate of	Re	eceip	ot			
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City	State	Zip Code		Trans	acti	ion	ID : S	A11AI.	78443	
TOWSON	MD	21286	A	mount	of	Eac	ch Re	ceipt th	is Period	d
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GENESIS HEALTHCARE CORPORATION	DIRECTOR	R-EXTERNAL COMMUN								
Receipt For: Primary General	Aggregate	Year-to-Date ▼								
Other (specify) ▼		460.00								
Full Name (Last, First, Middle Initial) 3. VICTORIA VALTON				ate of	Re	eceip	ot			
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City	State	Zip Code		Trans	acti	ion	ID : S	A11AI.	78444	
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GENESIS HEALTHCARE CORPORATION	DIRECTOR	-EXTERNAL COMMUN								
Receipt For: Primary General	Aggregate	Year-to-Date ▼								
Other (specify) ▼		, 480.00								
Full Name (Last, First, Middle Initial) C. VICTORIA VALTON			С	ate of	Re	eceip	ot			
Mailing Address 112 EDGEWOOD RD				M M	/	D	31	/ Y	2015	Y
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ITEMIZED RECEIPTS Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) Sunil Verma Date of Receipt Mailing Address 60 LINDSAY LANE 04 2015 12 City State Zip Code Transaction ID: SA11AI.78763 RΙ **CRANSTON** 02921 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP-REGIONAL MEDICAL AFFAIRS Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) B. Sunil Verma Date of Receipt Mailing Address 60 LINDSAY LANE 12 18 2015 City State Zip Code Transaction ID: SA11AI.78764 **CRANSTON** RΙ 02921 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP-REGIONAL MEDICAL AFFAIRS Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 280.00 Full Name (Last, First, Middle Initial) c. Sunil Verma Date of Receipt Mailing Address 60 LINDSAY LANE M M / 12 31 2015 Zip Code City State Transaction ID: SA11AI.78765 RΙ **CRANSTON** 02921 Amount of Each Receipt this Period FEC ID number of contributing С 40.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP-REGIONAL MEDICAL AFFAIRS Receipt For: Aggregate Year-to-Date ▼ Primary General 320.00 Other (specify) 120.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Genesis HealthCare Corporation Receipt For: Primary General Other (specify)	State Zip Code MD 21104 C Description Director Medical Supply Mgmt. Aggregate Year-to-Date ▼ 525.00	Date of Receipt 11 06 2015 Transaction ID: SA11AI.77916 Amount of Each Receipt this Period 25.00 Memo Item
Genesis HealthCare Corporation	State Zip Code MD 21104 C Description Director Medical Supply Mgmt. Aggregate Year-to-Date ▼ 550.00	Date of Receipt 11 20 2015 Transaction ID: SA11AI.77917 Amount of Each Receipt this Period 25.00 Memo Item
Genesis HealthCare Corporation	State Zip Code MD 21104 C Decupation Director Medical Supply Mgmt. Aggregate Year-to-Date ▼ 575.00	Date of Receipt 12
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only		75.00

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TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and Stator for commercial purposes, other than using the n		rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Genesis HealthCare Corporation Receipt For: Primary General Other (specify) ▼	State Zip Code MD 21104 C Occupation Director Medical Supply Mgmt. Aggregate Year-to-Date ▼	Date of Receipt 12 18 2015 Transaction ID: SA11AI.77919 Amount of Each Receipt this Period 25.00 Memo Item
Genesis HealthCare Corporation	State Zip Code MD 21104 C Occupation Director Medical Supply Mgmt. Aggregate Year-to-Date ▼ 625.00	Date of Receipt 12 31 2015 Transaction ID: SA11AI.77920 Amount of Each Receipt this Period 25.00 Memo Item
GENESIS HEALTHCARE CORPORATION	State Zip Code WV 26719 C Occupation ADMINISTRATOR Aggregate Year-to-Date ▼	Date of Receipt 11 06 2015 Transaction ID : SA11AI.77833 Amount of Each Receipt this Period 10.00 Memo Item
SUBTOTAL of Receipts This Page (optional)		60.00

	FOR LINE NU	FOR LINE NUMBER: PAGE 335 OF 37										
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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) CYNTHIA WAGONER Mailing Address P.O. BOX 32		Date of Receipt
City	State Zip Code	11 20 2015 Transaction ID : SA11AI.77834
FORT ASHBY FEC ID number of contributing federal political committee.	WV 26719	Amount of Each Receipt this Period 10.00
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General	Occupation ADMINISTRATOR Aggregate Year-to-Date ▼	Memo Item
Other (specify) ▼ Full Name (Last, First, Middle Initial) B. CYNTHIA WAGONER	220.00	Date of Receipt
Mailing Address P.O. BOX 32 City	State Zip Code	12 04 2015 Transaction ID : SA11AI.77835
FORT ASHBY FEC ID number of contributing federal political committee.	WV 26719	Amount of Each Receipt this Period
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation ADMINISTRATOR	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00	
Full Name (Last, First, Middle Initial) C. CYNTHIA WAGONER		Date of Receipt
Mailing Address P.O. BOX 32		12 18 2015
City FORT ASHBY	State Zip Code WV 26719	Transaction ID : SA11AI.77836 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	10.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼	ADMINISTRATOR Aggregate Year-to-Date ▼ 240.00	
SUBTOTAL of Receipts This Page (optional)	>	30.00
TOTAL This Period (last page this line number	only).	

FOR LINE NUMBER: PAGE 336 OF

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) CYNTHIA WAGONER Mailing Address P.O. BOX 32 City FORT ASHBY FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code WV 26719 C Occupation ADMINISTRATOR Aggregate Year-to-Date ▼ 250.00	Date of Receipt 12 31 2015 Transaction ID: SA11AI.77837 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) SHARON WAREING Mailing Address 134 EAST SIDE DRIVE City CONCORD FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code NH 03301 C Occupation DIRECTOR-NURSING Aggregate Year-to-Date ▼ 334.80	Date of Receipt 11 06 2015 Transaction ID: SA11AI.78528 Amount of Each Receipt this Period 16.74 Memo Item
Full Name (Last, First, Middle Initial) SHARON WAREING Mailing Address 134 EAST SIDE DRIVE City CONCORD FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code NH 03301 C Occupation DIRECTOR-NURSING Aggregate Year-to-Date ▼ 351.54	Date of Receipt 11 20 2015 Transaction ID : SA11AI.78529 Amount of Each Receipt this Period 16.74 Memo Item
SUBTOTAL of Receipts This Page (optional)	<u></u>	43.48

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SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 337 OF 375 (check only one) X 11a
Any information copied from such Reports and State or for commercial purposes, other than using the na NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		person for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) SHARON WAREING Mailing Address 134 EAST SIDE DRIVE	Chata Zin Coda	Date of Receipt 12 04 2015
City CONCORD FEC ID number of contributing federal political committee.	State Zip Code NH 03301	Transaction ID : SA11AI.78530 Amount of Each Receipt this Period 16.74
Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For:	Occupation DIRECTOR-NURSING Aggregate Year-to-Date ▼ 368.28	Memo Item
Full Name (Last, First, Middle Initial) 3. SHARON WAREING Mailing Address 134 EAST SIDE DRIVE		Date of Receipt
CENESIS HEAT THOADE CODDODATION	State Zip Code NH 03301 C Decupation DIRECTOR-NURSING	Transaction ID : SA11AI.78531 Amount of Each Receipt this Period 16.74 Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 385.02	
Full Name (Last, First, Middle Initial) SHARON WAREING Mailing Address 134 EAST SIDE DRIVE City	State Zip Code	Date of Receipt 12 31 2015 Transaction ID : SA11AI.78532
CONCORD FEC ID number of contributing	NH 03301	Amount of Each Receipt this Period 16.74

FEC ID number of contributing federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **DIRECTOR-NURSING** Receipt For: Aggregate Year-to-Date ▼ Primary General 401.76 Other (specify)

50.22

		FOR LINE NUMBER: PAGE 338 OF 3									
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Detailed Summary Page			13		14		15		16		17
not be sold or used by any person for the purpose of soliciting contributions dress of any political committee to solicit contributions from such committee.											

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) Sharon Warren Date of Receipt Mailing Address 3936 KEDRON ROAD 06 2015 11 City State Zip Code Transaction ID: SA11AI.78931 TN SPRING HILL 37174 Amount of Each Receipt this Period FEC ID number of contributing C 85.93 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP-SR CENTERS OPERATIONS Receipt For: Aggregate Year-to-Date ▼ Primary General 2070.39 Other (specify) Full Name (Last, First, Middle Initial) B. Sharon Warren Date of Receipt Mailing Address 3936 KEDRON ROAD 20 11 2015 City State Zip Code Transaction ID: SA11AI.78932 **SPRING HILL** TN 37174 Amount of Each Receipt this Period FEC ID number of contributing 90.97 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP-SR CENTERS OPERATIONS Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 2161,36 Full Name (Last, First, Middle Initial) c. Sharon Warren Date of Receipt Mailing Address 3936 KEDRON ROAD M M / 04 12 2015 City State Zip Code Transaction ID: SA11AI.78933 TN SPRING HILL 37174 Amount of Each Receipt this Period FEC ID number of contributing C 77.54 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP-SR CENTERS OPERATIONS Receipt For: Aggregate Year-to-Date ▼ Primary General 2238.90 Other (specify) 254.44 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9

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	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s)	FOR LINE NUMBER: PAGE 339 (check only one)							375
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\setminus	NAME OF COMMITTEE (In Full)										
	Genesis Healthcare Inc PAC										
Α.	Full Name (Last, First, Middle Initial) Sharon Warren				Date of	f Re	ceipt				
	Mailing Address 3936 KEDRON ROAD				M = M	1	18	_		2015	Y
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	Receipt For:										
	Primary General	Aggregate	Year-to-Date ▼	- 1							
	Other (specify) ▼	L	2322.56	Щ							
В.	Full Name (Last, First, Middle Initial) Sharon Warren				Date of	f Re	ceipt				
	Mailing Address 3936 KEDRON ROAD				M = M	/	31	_		2015	Y
	City	State	Zip Code		Trans	acti					
	SPRING HILL	TN	37174		Amoun	t of	Each I	Receip	ot this	Period	
	FEC ID number of contributing federal political committee.	C					7		,	95.1	4
	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation	TERS OPERATIONS		Me	mo l	tem				
	Receipt For:			\dashv							
	Primary General	Aggregate	Year-to-Date ▼	-							
	Other (specify) ▼	L	2417.70	Щ							
<u>с.</u>	Full Name (Last, First, Middle Initial) KAREN M WELLS				Date of	f Re	ceipt				
	Mailing Address 1679 W. DOE RUN ROAD P.O. BOX 487				M = M	/	06			y y y 2 2015	Y
	City	State	Zip Code		Trans	acti	ion ID	: SA1	1AI.77	7813	
	UNIONVILLE	PA	19375		Amoun	t of	Each I	Receip	ot this	Period	
	FEC ID number of contributing federal political committee.	С				_	7		,	20.0	0
	Name of Employer	Occupation	 		Me	mo l	tem				
	GENESIS HEALTHCARE CORPORATION	DIRECTOR	R-FIN CTRL - COMPLIANCE								
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General		 	7							
	Other (specify) ▼		420.00								

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

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CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 340 OF 375 (check only one) X 11a
		13 14 15 16 17
	Statements may not be sold or used by any pe e name and address of any political committee	
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) KAREN M WELLS		Date of Receipt
Mailing Address 1679 W. DOE RUN ROAD P.O. BOX 487		11 20 / Y Y Y Y Y
City	State Zip Code PA 19375	Transaction ID : SA11AI.77814
UNIONVILLE	FA 19375	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	DIRECTOR-FIN CTRL - COMPLIANCE	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	
Full Name (Last, First, Middle Initial) KAREN M WELLS		Date of Receipt
Mailing Address 1679 W. DOE RUN ROAD P.O. BOX 487		12 04 _ 2015 _
City	State Zip Code	Transaction ID : SA11AI.77815
UNIONVILLE	PA 19375	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	DIRECTOR-FIN CTRL - COMPLIANCE	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	
Full Name (Last, First, Middle Initial) KAREN M WELLS		Date of Receipt
Mailing Address 1679 W. DOE RUN ROAD P.O. BOX 487		12 18 2015
City UNIONVILLE	State Zip Code PA 19375	Transaction ID : SA11AI.77816 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	DIRECTOR-FIN CTRL - COMPLIANCE	
Receipt For:	Aggregate Year-to-Date ▼	

480.00

Primary

Other (specify) ▼

General

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

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B.

C.

60.00

		FOR LINE NUMBER: PAGE 341 OF 375									
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not be sold or used by any person for the purpose of soliciting contributions dress of any political committee to solicit contributions from such committee.											

	Statements may not be sold or used by any personal part of any political committee to	
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) KAREN M WELLS Mailing Address 1679 W. DOE RUN ROAD P.O. BOX 487 City UNIONVILLE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify) Full Name (Last, First, Middle Initial)	State Zip Code PA 19375 C Occupation DIRECTOR-FIN CTRL - COMPLIANCE Aggregate Year-to-Date ▼ 500.00	Date of Receipt 12 31 2015 Transaction ID: SA11AI.77817 Amount of Each Receipt this Period 20.00 Memo Item
B. Elizabeth Wetzel Mailing Address 3029 RIVER WOODS DR City PARRISH FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code FL 34219 C Occupation SPECIALIST-REGULATORY GRS Aggregate Year-to-Date ▼ 210.00	Date of Receipt 11 06 2015 Transaction ID : SA11AI.78921 Amount of Each Receipt this Period 10.00 Memo Item
Full Name (Last, First, Middle Initial) Elizabeth Wetzel Mailing Address 3029 RIVER WOODS DR City PARRISH FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	State Zip Code FL 34219 C Occupation SPECIALIST-REGULATORY GRS Aggregate Year-to-Date ▼ 220.00	Date of Receipt M M M / 20 2015 Transaction ID : SA11AI.78922 Amount of Each Receipt this Period 10.00 Memo Item
SUBTOTAL of Receipts This Page (optional)	•	40.00
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Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)															
Genesis Healthcare Inc PAC															
Full Name (Last, First, Middle Initial) Elizabeth Wetzel				ate of	Re	eceip	ipt								
Mailing Address 3029 RIVER WOODS DR			┙[M M	/		04	/ Y	2015	Y					
City PARRISH	State FL	Zip Code 34219						A11AL	78923 is Period						
FEC ID number of contributing federal political committee.	С					7		Jeipt III	10.						
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation SPECIALIS	n BT-REGULATORY GRS	7 [Mer	no l	ltem	n								
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.00]												
Full Name (Last, First, Middle Initial) B. Elizabeth Wetzel		ate of	Re	eceip	ipt										
Mailing Address 3029 RIVER WOODS DR	_ [M M	/	D	18	/ Y	2015	Y							
City PARRISH	State FL	Zip Code 34219						A11AI.7 ceipt th	78924 is Period						
FEC ID number of contributing federal political committee.		10.00 Memo Item													
GENESIS HEALTHCARE CORPORATION	Name of Employer GENESIS HEALTHCARE CORPORATION SPECIALIST-REGULATORY GRS									Wellio itelli					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 240.00]												
Full Name (Last, First, Middle Initial) C. Elizabeth Wetzel			С	ate of	Re	eceip	ipt								
Mailing Address 3029 RIVER WOODS DR			_ [M M	/	L	31		2015	Y					
City PARRISH	State FL	Zip Code 34219						A11AL. ceipt th	78925 is Period						
FEC ID number of contributing federal political committee.	С					7		-	10.	-					
Name of Employer	Occupation	1	- [Mer	mo l	ltem	n								
GENESIS HEALTHCARE CORPORATION Receipt For:		ST-REGULATORY GRS	\dashv												
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00													
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Receipt For:

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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not be sold or used by any person for the purpose of soliciting contributions											

Any information copied from such Reports and Statements may 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 Inc PAC Full Name (Last, First, Middle Initial) A. Barbara White Date of Receipt Mailing Address 361 DANDI VIEW RD 11 2015 City State Zip Code Transaction ID: SA11AI.78801 NH 03860 NORTH CONWAY Amount of Each Receipt this Period FEC ID number of contributing C 5.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **ADMINISTRATOR**

Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	
Full Name (Last, First, Middle Initial) Barbara White		Date of Receipt
Mailing Address 361 DANDI VIEW RD		11 20 2015
City	State Zip Code	Transaction ID : SA11AI.78802
NORTH CONWAY	NH 03860	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5.00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation ADMINISTRATOR	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial) Barbara White		Date of Receipt
Mailing Address 361 DANDI VIEW RD		11 27 2015
City	State Zip Code	Transaction ID : SA11AI.78803
NORTH CONWAY	NH 03860	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	ADMINISTRATOR	

Aggregate Year-to-Date ▼

215.00

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Receipt For:

Primary

Other (specify)

General

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

15.00

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not be sold or used by any person for the purpose of soliciting contributions										

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NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) A. Barbara White Mailing Address 361 DANDI VIEW RD City NORTH CONWAY	State Zip Code NH 03860	Date of Receipt 12 04 2015 Transaction ID: SA11AI.78804 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	Occupation ADMINISTRATOR Aggregate Year-to-Date ▼ 220.00	5.00 Memo Item
Full Name (Last, First, Middle Initial) Barbara White Mailing Address 361 DANDI VIEW RD City	State Zip Code	Date of Receipt 12 11 2015 Transaction ID: SA11AI.78805
NORTH CONWAY FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION	NH 03860 C Occupation ADMINISTRATOR	Amount of Each Receipt this Period 5.00 Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	
Full Name (Last, First, Middle Initial) Barbara White Mailing Address 361 DANDI VIEW RD City NORTH CONWAY FEC ID number of contributing federal political committee. Name of Employer	State Zip Code NH 03860 C Occupation	Date of Receipt 12 18 2015 Transaction ID: SA11AI.78806 Amount of Each Receipt this Period 5.00 Memo Item
GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	ADMINISTRATOR Aggregate Year-to-Date ▼ 230.00	
SUBTOTAL of Receipts This Page (optional)	<u></u>	15.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 345 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16

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 Inc PAC Full Name (Last, First, Middle Initial) Barbara White Date of Receipt Mailing Address 361 DANDI VIEW RD 2015 12 24 City Zip Code State Transaction ID: SA11AI.78807 NH **NORTH CONWAY** 03860 Amount of Each Receipt this Period FEC ID number of contributing 5.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **ADMINISTRATOR** Receipt For: Aggregate Year-to-Date ▼ Primary General 235.00 Other (specify) Full Name (Last, First, Middle Initial) B. Barbara White Date of Receipt Mailing Address 361 DANDI VIEW RD 12 31 2015 City State Zip Code Transaction ID: SA11AI.78808 **NORTH CONWAY** NH 03860 Amount of Each Receipt this Period FEC ID number of contributing 5.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **ADMINISTRATOR** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 240,00 Full Name (Last, First, Middle Initial) c. JOSEPH W WILKS Date of Receipt Mailing Address 101 KINSTON LN M M / 11 06 2015 City State Zip Code Transaction ID: SA11AI.78209 PΑ **DOWNINGTOWN** 19335 Amount of Each Receipt this Period FEC ID number of contributing С 75.00 federal political committee. Memo Item Name of Employer Occupation VP AND AREA CONTROLLER GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 1575.00 Other (specify) 85.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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GENESIS HEALTHCARE CORPORATION

General

Receipt For:

Primary

Other (specify)

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not be sold or used by any person for the purpose of soliciting contributions										

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 Inc PAC Full Name (Last, First, Middle Initial) JOSEPH W WILKS Date of Receipt Mailing Address 101 KINSTON LN 11 20 2015 City State Zip Code Transaction ID: SA11AI.78210 PΑ **DOWNINGTOWN** 19335 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Memo Item Name of Employer Occupation

1650.00

VP AND AREA CONTROLLER

Aggregate Year-to-Date ▼

В.	Full Name (Last, First, Middle Initial) JOSEPH W WILKS Mailing Address 101 KINSTON LN		Date of Receipt
			12 04 2015
	City	State Zip Code	Transaction ID : SA11AI.78211
	DOWNINGTOWN	PA 19335	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	75.00
	Name of Employer	Occupation	Memo Item
	GENESIS HEALTHCARE CORPORATION	VP AND AREA CONTROLLER	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1725.00	
C.	Full Name (Last, First, Middle Initial) JOSEPH W WILKS		Date of Receipt
	Mailing Address 101 KINSTON LN		12 18 2015
	City	State Zip Code	Transaction ID : SA11AI.78212
	DOWNINGTOWN	PA 19335	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	75.00 Memo Item
	Name of Employer	Occupation	Memo item
	GENESIS HEALTHCARE CORPORATION	VP AND AREA CONTROLLER	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1800.00	
s	UBTOTAL of Receipts This Page (optional)		225.00

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

FOR LINE NUMBER: PAGE 347 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16

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 Inc PAC Full Name (Last, First, Middle Initial) JOSEPH W WILKS Date of Receipt Mailing Address 101 KINSTON LN 2015 12 31 City Zip Code State Transaction ID: SA11AI.78213 PΑ **DOWNINGTOWN** 19335 Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP AND AREA CONTROLLER Receipt For: Aggregate Year-to-Date ▼ Primary General 1875.00 Other (specify) Full Name (Last, First, Middle Initial) B. Donald Wilson Date of Receipt Mailing Address 1082 VILLITA LOOP 11 02 2015 City State Zip Code Transaction ID: SA11AI.78885 LAS CRUCES NM 88007 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION **ADMINISTRATOR** Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 800.00 Full Name (Last, First, Middle Initial) **c.** Donald Wilson Date of Receipt Mailing Address 1082 VILLITA LOOP M M / 11 16 2015 City State Zip Code Transaction ID: SA11AI.78886 NM LAS CRUCES 88007 Amount of Each Receipt this Period FEC ID number of contributing С 40.00 federal political committee. Memo Item Name of Employer Occupation **ADMINISTRATOR** GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 840.00 Other (specify) 155.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 9

FOR LINE NUMBER: PAGE 348 OF 375

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and Sta or for commercial purposes, other than using the		rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) Donald Wilson Mailing Address 1082 VILLITA LOOP City LAS CRUCES FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) Call Name (Last, First, Middle Initial)	State Zip Code NM 88007 C Occupation ADMINISTRATOR Aggregate Year-to-Date ▼ 880.00	Date of Receipt 11 30 2015 Transaction ID: SA11AI.78887 Amount of Each Receipt this Period 40.00 Memo Item
Full Name (Last, First, Middle Initial) Donald Wilson Mailing Address 1082 VILLITA LOOP City LAS CRUCES FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify) Other (specify)	State Zip Code NM 88007 C Occupation ADMINISTRATOR Aggregate Year-to-Date ▼ 920.00	Date of Receipt 12 14 2015 Transaction ID: SA11AI.78888 Amount of Each Receipt this Period 40.00 Memo Item
Full Name (Last, First, Middle Initial) Donald Wilson Mailing Address 1082 VILLITA LOOP City LAS CRUCES FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary Other (specify)	State Zip Code NM 88007 C Occupation ADMINISTRATOR Aggregate Year-to-Date ▼ 960.00	Date of Receipt 12 28 2015 Transaction ID: SA11AI.78889 Amount of Each Receipt this Period 40.00 Memo Item
SUBTOTAL of Receipts This Page (optional)	·····	120.00
TOTAL This Period (last page this line number o	nly)	

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ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) IRVIN D WINEBRENNER Mailing Address 12177 WOODFORD DRIVE City MARRIOTTSVILLE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code MD 21104 C Occupation ADMINISTRATOR-SR Aggregate Year-to-Date ▼ 300.00	Date of Receipt 11 13 2015 Transaction ID: SA11AI.77986 Amount of Each Receipt this Period 15.00 Memo Item
Full Name (Last, First, Middle Initial) IRVIN D WINEBRENNER Mailing Address 12177 WOODFORD DRIVE City MARRIOTTSVILLE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code MD 21104 C Occupation ADMINISTRATOR-SR Aggregate Year-to-Date ▼ 315.00	Date of Receipt 11 27 2015 Transaction ID: SA11AI.77987 Amount of Each Receipt this Period 15.00 Memo Item
Full Name (Last, First, Middle Initial) C. IRVIN D WINEBRENNER Mailing Address 12177 WOODFORD DRIVE		Date of Receipt 12 11 2015
City MARRIOTTSVILLE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)	State Zip Code MD 21104 C Occupation ADMINISTRATOR-SR Aggregate Year-to-Date ▼ 330.00	Transaction ID : SA11AI.77988 Amount of Each Receipt this Period 15.00 Memo Item
SUBTOTAL of Receipts This Page (optional)	•	45.00
TOTAL This Period (last page this line number of	only)	

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS			FOR LINE NUMBER: PAGE 350 OF 375 (check only one) X 11a						
	ry information copied from such Reports and for commercial purposes, other than using the			erson for the purpose of soliciting contributions					
	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC								
Α.	Full Name (Last, First, Middle Initial) IRVIN D WINEBRENNER	Date of Receipt							
	Mailing Address 12177 WOODFORD DRIVE	12 24 2015							
	City MARRIOTTSVILLE	State MD	Zip Code 21104	Transaction ID : SA11AI.77989 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		15.00					
	Name of Employer	Occupation		Memo Item					
	GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) ▼		RATOR-SR Year-to-Date ▼ 345.00						
— В.	Full Name (Last, First, Middle Initial) JOANNE M WISELY			Date of Receipt					
	Mailing Address 118 DEEPDALE ROAD	11 06 2015							
	City WAYNE	State PA	Zip Code 19087	Transaction ID : SA11AI.78140 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		40.00					
	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VP-REGUL	ATORY ADM COMPL GRS RH	Memo Item					
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 840.00						
<u>с</u> .	Full Name (Last, First, Middle Initial) JOANNE M WISELY			Date of Receipt					
	Mailing Address 118 DEEPDALE ROAD			11 20 2015					
	City WAYNE	State PA	Zip Code 19087	Transaction ID : SA11AI.78141 Amount of Each Receipt this Period					
	FEC ID number of contributing federal political committee.	С		40.00 Memo Item					
	Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VP-REGIII	ATORY ADM COMPL GRS RH						
	Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 880.00	_ 					

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

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

95.00

Mailing Address 118 DEEPDALE ROAD

Image# 201603089009663764		
SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 351 OF 375 (check only one) X 11a
Any information copied from such Reports and Statements r or for commercial purposes, other than using the name and NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) JOANNE M WISELY Mailing Address 118 DEEPDALE ROAD City State	Zip Code	Date of Receipt 12 04 2015 Transaction ID : SA11AI.78142
Receipt For: Primary General Other (specify)	19087 DIN DILATORY ADM COMPL GRS RH e Year-to-Date ▼ 920.00	Amount of Each Receipt this Period 40.00 Memo Item
Full Name (Last, First, Middle Initial) B. JOANNE M WISELY Mailing Address 449 DEEDDALE BOAD		Date of Receipt

City	State Zip Code	Transaction ID : SA11AI.78143
WAYNE	PA 19087	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VP-REGULATORY ADM COMPL GRS RH	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 960.00	
Full Name (Last, First, Middle Initial) C. JOANNE M WISELY		Date of Receipt
Mailing Address 118 DEEPDALE ROAD		12 31 2015
City	State Zip Code	Transaction ID : SA11AI.78144
WAYNE	PA 19087	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer	Occupation	- Memo Item
GENESIS HEALTHCARE CORPORATION	VP-REGULATORY ADM COMPL GRS RH	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)		120.00

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

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	FOR	FOR LINE NUMBER: PAGE 352 OF								
Use separate schedule(s)	(check only one)									
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		17
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	Detailed Summary Page	13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the		on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC	,	
Full Name (Last, First, Middle Initial) A. DONNA WIXTED		Date of Receipt
Mailing Address 1108 KENT LANE		1.1 06 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI.77770
PHILADELPHIA	PA 19115	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION Receipt For:	VP -FOOD AND NUTRIONAL SVS	
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1050.00	
Full Name (Last, First, Middle Initial) 3. DONNA WIXTED		Date of Receipt
Mailing Address 1108 KENT LANE		11 20 2015
City	State Zip Code	Transaction ID : SA11AI.77771
PHILADELPHIA	PA 19115	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation	Memo Item
Receipt For:	VP -FOOD AND NUTRIONAL SVS	
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1100,00	
Full Name (Last, First, Middle Initial) C. DONNA WIXTED		Date of Receipt
Mailing Address 1108 KENT LANE		12 04 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City PHILADELPHIA	State Zip Code PA 19115	Transaction ID : SA11AI.77772 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	VP -FOOD AND NUTRIONAL SVS	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1150.00	
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number of		

General

Name of Employer

Primary

Receipt For:

Genesis HealthCare Corporation

Other (specify)

mage# 201603089009663766											
SCHEDULE A (FEC Form 3)	K)	Use separate schedule(s)	_	R LINE	_		₹:	PAG	E 3	353 OF	375
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X	11a 13		11b 14		11c 15		12 16	17
Any information copied from such Reports a or for commercial purposes, other than using											
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC	,										
Full Name (Last, First, Middle Initial) A. DONNA WIXTED				Date of	Re	ceipt					
Mailing Address 1108 KENT LANE				M = M	/	1	8	/ Y		015	
City PHILADELPHIA	State PA	Zip Code 19115		Trans:				A11AI.			
FEC ID number of contributing federal political committee.	C					7		,	_	50.00)
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VP -FOOD	AND NUTRIONAL SVS	I	Mer	no It	tem					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1200.00]								
Full Name (Last, First, Middle Initial) 3. DONNA WIXTED				Date of	Re	ceipt					
Mailing Address 1108 KENT LANE				M = M	/	3	D 1	/ Y	20	015 _	7
City PHILADELPHIA	State PA	Zip Code 19115		Transa Amount				A11AI.			
FEC ID number of contributing federal political committee.	С					,		-1	Ξ	50.00)
Name of Employer GENESIS HEALTHCARE CORPORATION	Occupation VP -FOOD	AND NUTRIONAL SVS		Mer	no It	tem					
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1250.00]								
Full Name (Last, First, Middle Initial) C. Patricia Worhunsky-Quinn	'			Date of	Re	ceipt					
Mailing Addross 45 December 010001											

c. Patricia Worhunsky-Quinn Mailing Address 45 Prospect Street

City Zip Code State CT Terryville 06786 FEC ID number of contributing C federal political committee.

Occupation Regional VP Operations Aggregate Year-to-Date ▼

06 2015 Transaction ID: SA11AI.78049 Amount of Each Receipt this Period

40.00

Memo Item

SUBTOTAL of Receipts This Page (optional)		•		7		7	140	.00	
TOTAL This Period (last page this line number	r only)								

840.00

	F	FOR LINE NUMBER: PAGE 354 OF 3									
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SUBTOTAL of Receipts This Page (optional).....

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

		FOR LINE NUMBER: PAGE 355 OF 37									
Use separate schedule(s) for each category of the	(check only one)										
Detailed Summary Page		×	11a		11b		11c		12		
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Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) Patricia Worhunsky-Quinn Date of Receipt Mailing Address 45 Prospect Street 31 2015 12 City State Zip Code Transaction ID: SA11AI.78053 CT Terryville 06786 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Memo Item Name of Employer Occupation Regional VP Operations Genesis HealthCare Corporation Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. JUDSON WORTH Date of Receipt Mailing Address PO BOX 339 11 06 2015 City State Zip Code Transaction ID: SA11AI.78431 **MARLINTON** WV 24954 Amount of Each Receipt this Period FEC ID number of contributing 15.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION ADMINISTRATOR-SR Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 315.00 Full Name (Last, First, Middle Initial) c. JUDSON WORTH Date of Receipt Mailing Address PO BOX 339 20 11 2015 Zip Code City State Transaction ID: SA11AI.78432 WV **MARLINTON** 24954 Amount of Each Receipt this Period FEC ID number of contributing С 15.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION ADMINISTRATOR-SR Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) 70.00 SUBTOTAL of Receipts This Page (optional).....

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

FOR LINE NUMBER: PAGE 356 OF 375 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page 14 13 15 16

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) MARY WRINN Date of Receipt Mailing Address 43 THOMAS STREET 2015 11 06 City Zip Code State Transaction ID: SA11AI.77911 CT WINDSOR LOCKS 06096 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP OPERATIONS REHAB SERVICES Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** MARY WRINN Date of Receipt Mailing Address 43 THOMAS STREET 20 11 2015 City State Zip Code Transaction ID: SA11AI.77912 WINDSOR LOCKS CT 06096 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP OPERATIONS REHAB SERVICES Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 220.00 Full Name (Last, First, Middle Initial) c. MARY WRINN Date of Receipt Mailing Address 43 THOMAS STREET M M / 12 04 2015 State Zip Code Transaction ID: SA11AI.77913 CT WINDSOR LOCKS 06096 Amount of Each Receipt this Period FEC ID number of contributing С 10.00 federal political committee. Memo Item Name of Employer Occupation VP OPERATIONS REHAB SERVICES GENESIS HEALTHCARE CORPORATION Receipt For: Aggregate Year-to-Date ▼ Primary General 230.00 Other (specify) 30.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

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			13		14		15		16		17
not be sold or used by any pedress of any political committee											

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) MARY WRINN Date of Receipt Mailing Address 43 THOMAS STREET 2015 12 18 City State Zip Code Transaction ID: SA11AI.77914 CT 06096 WINDSOR LOCKS Amount of Each Receipt this Period FEC ID number of contributing C 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP OPERATIONS REHAB SERVICES Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** MARY WRINN Date of Receipt Mailing Address 43 THOMAS STREET 12 31 2015 City State Zip Code Transaction ID: SA11AI.77915 WINDSOR LOCKS CT 06096 Amount of Each Receipt this Period FEC ID number of contributing 10.00 federal political committee. Memo Item Name of Employer Occupation GENESIS HEALTHCARE CORPORATION VP OPERATIONS REHAB SERVICES Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250.00 C.

Full Name (Last, First, Middle Initial) STEPHEN S YOUNG		Date of Receipt
Mailing Address 807 MERRIMAC LANE PO BOX 766		11 06 2015
City	State Zip Code	Transaction ID : SA11AI.78103
UNIONVILLE	PA 19375	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	Memo Item
GENESIS HEALTHCARE CORPORATION	VP-ASSISTANT CONTROLLER	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1050.00	

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

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

70.00

		FOR LINE NUMBER: PAGE 359 OF 375									
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Detailed Summary Page		X	11a		11b		11c		12		
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	y information copied from such Reports and Sta for commercial purposes, other than using the r									
\rangle	NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC									
Δ.	Full Name (Last, First, Middle Initial) STEPHEN S YOUNG Mailing Address 807 MERRIMAC LANE PO BOX 766 City	State	Zip Code		Date of	/	eipt 20	L	2015 28104	Y
	UNIONVILLE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)		19375 ANT CONTROLI Year-to-Date ▼	LER 1100.00	Amount		ach Red			00
	Full Name (Last, First, Middle Initial) STEPHEN S YOUNG Mailing Address 807 MERRIMAC LANE PO BOX 766 City UNIONVILLE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify) Other (specify)		Zip Code 19375 ANT CONTROLL Year-to-Date ▼	LER 1150,00	Amount	/ actio	04 n ID : SA	A11Al.7		_
	Full Name (Last, First, Middle Initial) STEPHEN S YOUNG Mailing Address 807 MERRIMAC LANE PO BOX 766 City UNIONVILLE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)		Zip Code 19375 ANT CONTROLI Year-to-Date ▼	LER 1200.00	Amount	/ actio	18 on ID : S.	A11AI.7		<u>_</u>
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TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions eto solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC			
Full Name (Last, First, Middle Initial) STEPHEN S YOUNG Mailing Address 807 MERRIMAC LANE PO BOX 766 City UNIONVILLE FEC ID number of contributing federal political committee. Name of Employer GENESIS HEALTHCARE CORPORATION Receipt For: Primary General Other (specify)		Zip Code 19375 ANT CONTROLLER Year-to-Date ▼ 1250.00	Date of Receipt 12 31 2015 Transaction ID: SA11AI.78107 Amount of Each Receipt this Period 50.00 Memo Item
Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State C Occupation Aggregate	Zip Code Year-to-Date ▼	Date of Receipt Amount of Each Receipt this Period Memo Item
Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State C Occupation Aggregate	Zip Code Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Amount of Each Receipt this Period Memo Item
SUBTOTAL of Receipts This Page (optional)			50.00
TOTAL This Period (last page this line number only)			40572.80

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 361 OF 375 (check only one) 11a 11b 11c 12 13 14 15 X 16 17
Any information copied from such Reports and Stror for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) BOEHNER FOR SPEAKER Mailing Address 320 FIRST ST., SE City WASHINGTON FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2016 Primary General Other (specify)	State Zip Code DC 20003 C C00478354 Occupation Aggregate Year-to-Date ▼	Date of Receipt 10 28 2015 Transaction ID : SA16.79186 Amount of Each Receipt this Period 2000.00 Memo Item
Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) Other (specify)	State Zip Code C Occupation Aggregate Year-to-Date ▼	Amount of Each Receipt this Period Memo Item
Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code C Occupation Aggregate Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Amount of Each Receipt this Period Memo Item
SUBTOTAL of Receipts This Page (optional)	·	2000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s		
	for each category of the Detailed Summary Page		22 23 24 25 26 28a 28b 28c 29 30
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC			
Full Name (Last, First, Middle Initial)			
Wells Fargo Bank			Date of Disbursement
Mailing Address 400 Scarlett Road			10 30 2015
Kennett Square	State Zip Code PA 19348		Transaction ID: SB21B.79104
Purpose of Disbursement		001	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	90.00
	nent For: Primary General Other (specify)		Memo Item
State: District:	·		
Full Name (Last, First, Middle Initial) B. Wells Fargo Bank			Date of Disbursement
Mailing Address 400 Scarlett Road			11 30 2015
Kennett Square	State Zip Code PA 19348		Transaction ID : SB21B.79105
Purpose of Disbursement		001	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	45.00
President	nent For: Primary General Other (specify)		Memo Item
State: District: Full Name (Last, First, Middle Initial)			
C. Wells Fargo Bank			Date of Disbursement
Mailing Address 400 Scarlett Road			12 31 2015
Kennett Square	State Zip Code PA 19348		Transaction ID: SB21B.79106
Purpose of Disbursement		001	Amount of Each Disbursement this Period
		Category/ Type	45.00
Candidate Name			
Office Sought: House Disbursem	nent For: Primary General Other (specify) ▼		Memo Item
Office Sought: House Disbursem Senate President	Primary General Other (specify) ▼		Memo Item

SCHEDULE B (FEC Form 3X)	Llea concrete achadula(=)	FOR LINE	
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one) 22 💢 23 24 25 26
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)			
Genesis Healthcare Inc PAC			
Full Name (Last, First, Middle Initial)			B
BENNET COLORADO VICTORY			Date of Disbursement
Mailing Address 1776 PLATTE ST	Note 7:- Onde		12 04 2015
,	State Zip Code CO 80202		Transaction ID : SB23.79142
Purpose of Disbursement	00202		
Over Pileto News		011	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	2500.00
X Senate	nent For: 2016 Primary General	туре	Memo Item
State: CO District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
3. CHRIS COONS FOR DELAWARE			Date of Disbursement
Mailing Address PO BOX 9900			10 12 2015
NEWARK	State Zip Code DE 19714		Transaction ID : SB23.79120
Purpose of Disbursement		011	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	1000.00
X Senate	nent For: 2020 Primary General Other (specify)		Memo Item
State: DE District: 00			
Full Name (Last, First, Middle Initial) COURTNEY FOR CONGRESS			Date of Disbursement
Mailing Address PO BOX 1372		10 12 2015	
,	State Zip Code		Transaction ID : SB23.79118
	CT 06066		Transaction ib . 3D23.79110
Purpose of Disbursement		011	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	1000.00
Senate	nent For: 2016 Primary General Other (specify) ▼	Турс	Memo Item
State: CT District: 02			
SUBTOTAL of Disbursements This Page (optional)			4500.00
TOTAL This Period (last nage this line number only)			

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only 21b 27	
Any information copied from such Reports and Stater or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC	nents may not be sold or used ne and address of any political	l by any perso	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) A. DCCC Mailing Address 430 S. Capitol Street, S.E.			Date of Disbursement 12 22 2015
	State Zip Code DC 20003		Transaction ID : SB23.79144
Candidate Name Office Sought: House Disburser Senate President		011 Category/ Type	Amount of Each Disbursement this Period 2500.00 Memo Item
State: District: Full Name (Last, First, Middle Initial) 3. Dirigo PAC Mailing Address PO Box 1355	, , - 2// ¥		Date of Disbursement M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
	State Zip Code VA 22313	011 Category/ Type	Transaction ID : SB23.79128 Amount of Each Disbursement this Period 2500.00
Office Sought: House Senate President State: District:	nent For: Primary General Other (specify)	1,750	Memo Item
Full Name (Last, First, Middle Initial) - HOEVEN FOR SENATE			Date of Disbursement
BISMARCK Purpose of Disbursement Candidate Name	State Zip Code ND 58502 nent For: 2016 Primary General Other (specify)	011 Category/ Type	Transaction ID : SB23.79126 Amount of Each Disbursement this Period 2500.00 Memo Item
SUBTOTAL of Disbursements This Page (optional)		·····•	7500.00
TOTAL This Period (last page this line number only)		·····•	

SCHEDULE B (FEC Form 3X)	Han announts of the Co.	FOR LINE	NUMBER: PAGE 365 OF 375
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	21b	22 X 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Reports and Statem	nents may not be sold or use		
or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)			
Genesis Healthcare Inc PAC			
Full Name (Last, First, Middle Initial)			
A. JIM RENACCI FOR CONGRESS			Date of Disbursement
Mailing Address 150 SMOKERISE DRIVE	7: 0 1		11 02 2015
,	State Zip Code OH 44281		Transaction ID: SB23.79137
Purpose of Disbursement	44201		
·		011	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	1500.00
Office Sought:	nent For: 2016	туре	Memo Item
Senate	Primary General		Mello telli
President State: OH District: 16	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
JOE KENNEDY FOR CONGRESS	}		Date of Disbursement
			M = M / D = D / Y = Y = Y
Mailing Address PO BOX 590464		10 09	10 09 2015
•	State Zip Code MA 02459		Transaction ID : SB23.79116
Purpose of Disbursement	02700		
		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2000.00
Office Sought: House Disbursen	nent For: 2016	Туре	Memo Item
	Primary General		meno item
	Other (specify) ▼		
State: MA District: 04			
Full Name (Last, First, Middle Initial) KEVIN MCCARTHY FOR CONGRI	ESS		Date of Disbursement
	LUU		M M / D D / Y Y Y Y
Mailing Address PO BOX 12667			11 04 2015
City	State Zip Code		Transaction ID : SB23.79139
BAKERSFIELD Purpose of Disbursement	CA 93389		Transastion 12 1 0220110100
Fulpose of Dispulsement		011	Amount of Each Disbursement this Period
Candidate Name		Category/	Amount of Each Disbursement this Period
		Type	2500.00
	nent For: 2016		Memo Item
Senate President	Primary General Other (specify) ▼		_
State: CA District: 22	Curo (Specify)		
SUBTOTAL of Disbursements This Page (optional)			6000.00
TOTAL THE BURNEY OF THE STATE O			
TOTAL This Period (last page this line number only)		▶	· ·

SCHEDULE B (FEC Form 3X)	Has somewhat at 1 1 1 1 1	FOR LINE	NUMBER: PAGE 366 OF 375
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	21b	22 X 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Reports and Staten	I nents may not be sold or use		
or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)			
Genesis Healthcare Inc PAC			
Full Name (Last, First, Middle Initial)			2
LANCE FOR CONGRESS			Date of Disbursement
Mailing Address PO BOX 5154			11 02 2015
,	State Zip Code		Transaction ID : SB23.79132
CLINTON Purpose of Disbursement	NJ 08809		
·		011	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	1500.00
Office Sought: House Disbursen	nent For: 2016		Memo Item
	Primary General		_
State: NJ District: 07	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
3. MARCO RUBIO FOR PRESIDENT	-		Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address PO BOX 558701			10 15 2015
City S	State Zip Code FL 33255		Transaction ID : SB23.79121
Purpose of Disbursement	33233		
		011	Amount of Each Disbursement this Period
Candidate Name		Category/	1500.00
Office County		Type	
	nent For: 2016 Primary General		Memo Item
	Other (specify)		
State: District:	(-1 y) ∀		
Full Name (Last, First, Middle Initial)			
C. Mike Kelly for Congress			Date of Disbursement
Mailing Address PO Box 476			10 16 2015 _
	7. 0.		
,	State Zip Code PA 16045		Transaction ID : SB23.79124
Purpose of Disbursement	10040		
·		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
000		Type	1500.00
	nent For: 2016		Memo Item
President	Primary General Other (specify) ▼		
State: PA District: 03	(-p)/ ₩		
15			
SUBTOTAL of Disbursements This Page (optional)		·····•	4500.00
TOTAL This Period (last nage this line number only)			
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TEMIZED DISBURSEMENTS	Llos concrete cohodulo(s)	R LINE NUMBER: PAGE 367 OF 375 eck only one) 21b 22 X 23 24 25 26
Any information popied from such Departs and Older	, ,	27 28a 28b 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name		
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		
Full Name (Last, First, Middle Initial) A. NRSC		Date of Disbursement
NRSC		M M / D D / Y Y Y Y
Mailing Address 425 Second Street NE		12 22 2015
,	itate Zip Code DC 20002	Transaction ID : SB23.79146
Washington Purpose of Disbursement	20002	
Candidate Name	01	1 Amount of Each Disbursement this Period
Candidate Name	Categ Typ	
Office Sought: House Disbursen		Memo Item
	Primary ☐ General Other (specify) ▼	
State: District:		
Full Name (Last, First, Middle Initial) 3. ORRINPAC		Date of Disbursement
ORRINFAC		M = M / D = D / Y = Y = Y
Mailing Address PO BOX 900427		10 16 2015
City S SANDY	state Zip Code UT 84090	Transaction ID : SB23.79125
Purpose of Disbursement		
Candidate Name	O1	
	Categ Typ	
	Primary General	Memo Item
	Other (specify) ▼	
State: District:	Other (specify)	
	Other (specify)	Date of Disbursement
State: District: Full Name (Last, First, Middle Initial)	Other (specify)	Date of Disbursement 10 16 2015
State: District: Full Name (Last, First, Middle Initial) C. PALLONE FOR CONGRESS Mailing Address PO BOX 3176 City	state Zip Code	M M / D D / Y Y Y
State: District: Full Name (Last, First, Middle Initial) C- PALLONE FOR CONGRESS Mailing Address PO BOX 3176		10 16 / 2015
State: District: Full Name (Last, First, Middle Initial) C. PALLONE FOR CONGRESS Mailing Address PO BOX 3176 City LONG BRANCH Purpose of Disbursement	state Zip Code	10 16 2015 Transaction ID : SB23.79123
State: District: Full Name (Last, First, Middle Initial) C. PALLONE FOR CONGRESS Mailing Address PO BOX 3176 City LONG BRANCH	State Zip Code NJ 07740 01 Categ	Transaction ID : SB23.79123 Amount of Each Disbursement this Period
State: District: Full Name (Last, First, Middle Initial) C. PALLONE FOR CONGRESS Mailing Address PO BOX 3176 City LONG BRANCH Purpose of Disbursement Candidate Name Office Sought: House Senate President President	state Zip Code NJ 07740	Transaction ID : SB23.79123 Amount of Each Disbursement this Period
State: District: Full Name (Last, First, Middle Initial) C. PALLONE FOR CONGRESS Mailing Address PO BOX 3176 City LONG BRANCH Purpose of Disbursement Candidate Name Office Sought: House Senate	State Zip Code NJ 07740 01 Category nent For: 2016 Primary General	Transaction ID : SB23.79123 Amount of Each Disbursement this Period 1000.00
State: District: Full Name (Last, First, Middle Initial) C. PALLONE FOR CONGRESS Mailing Address PO BOX 3176 City LONG BRANCH Purpose of Disbursement Candidate Name Office Sought: House Senate President President	State Zip Code NJ 07740 01 Category Type Tent For: 2016 Primary General Other (specify) ▼	Transaction ID : SB23.79123 Amount of Each Disbursement this Period 1000.00 Memo Item

	EMIZED DISBURSEMENTS	Use separate schedule(s for each category of the Detailed Summary Page) FOR LINE (check only 21b 27	
or	ny information copied from such Reports and Statem for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC			
۹.	Full Name (Last, First, Middle Initial) PARTNERSHIP FOR AMERICA Mailing Address PO BOX 77472			Date of Disbursement 11 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	•	State Zip Code DC 20013	011	Transaction ID : SB23.79135 Amount of Each Disbursement this Period
	Office Sought: House Disbursem	nent For: Primary General Other (specify) ▼	Category/ Type	1000.00 Memo Item
3.	Full Name (Last, First, Middle Initial) PATRIOTS FOR PERRY Mailing Address PO BOX 147			Date of Disbursement 11 02 2015
	RED LION	State Zip Code PA 17356		Transaction ID : SB23.79130
		nent For: 2016 Primary General	011 Category/ Type	Amount of Each Disbursement this Period 2000.00 Memo Item
	Candidate Name Office Sought: House Senate Disbursem		Category/	2000.00
	Candidate Name Office Sought: House Senate President State: PA District: 04 Full Name (Last, First, Middle Initial) PROSPERITY PAC Mailing Address 1006 Pendleton Street City SAlexandria Purpose of Disbursement Candidate Name Office Sought: House Senate Disbursement	Primary General Other (specify) ▼ State Zip Code VA 22314	Category/	2000.00 Memo Item
C.	Candidate Name Office Sought: House Senate President State: PA District: 04 Full Name (Last, First, Middle Initial) PROSPERITY PAC Mailing Address 1006 Pendleton Street City SAlexandria Purpose of Disbursement Candidate Name Office Sought: House Senate President	Primary General Other (specify) State Zip Code VA 22314 Thent For: Primary General Other (specify) Other (specify)	Category/ Type 011 Category/ Type	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

SCHEDULE B (FEC Form 3X)	Hoo consists astrodule()	FOR LINE I	
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	27	22 X 23 24 25 26 28a 28b 28c 29 30l
Any information copied from such Reports and Statem	nents may not be sold or us		
or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)			
Genesis Healthcare Inc PAC			
Full Name (Last, First, Middle Initial)			
A. REPUBLICAN PARTY OF KENTU	CKY 		Date of Disbursement
Mailing Address PO BOX 1068			11 17 2015
•	State Zip Code		Transaction ID : SB23.79140
FRANKFORT Purpose of Disbursement	KY 40602		
i dipose oi Dispuisement		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
		Type	5000.00
Office Sought: House Disbursem			Memo Item
	Primary General		
State: District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
B. RICHARD BURR COMMITTEE			Date of Disbursement
		_	M = M / D = D / Y = Y = Y
Mailing Address POST OFFICE BOX 5928			10 08 2015
•	State Zip Code		Transaction ID : SB23.79113
WINSTON-SALEM Purpose of Disbursement	NC 27113		
psss 6. 2.053100110110		011	Amount of Each Disbursement this Period
Candidate Name		Category/	
		Type	2500.00
	nent For: 2016		Memo Item
	Primary General		
President State: NC District: 00	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
C. RYAN COSTELLO FOR CONGRE	SS		Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address PO BOX 3154			11 02 2015
City	State Zin Cada		
•	State Zip Code PA 19381		Transaction ID: SB23.79131
Purpose of Disbursement	10001		
		011	Amount of Each Disbursement this Period
Candidate Name		Category/	4500.00
Office Occupied		Type	1500.00
	nent For: 2016		Memo Item
	Primary General Other (specify) ▼		
State: PA District: 06	Canon (opcomy)		
50			
SUBTOTAL of Disbursements This Page (optional)			9000.00
TOTAL This Period (last page this line number only)			

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE I (check only 21b 27	· · · · · · · · · · · · · · · · · · ·		
Any information copied from such Reports and State or for commercial purposes, other than using the nar	I ments may not be sold or used me and address of any politica	d by any perso	on for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC					
Full Name (Last, First, Middle Initial) TOM MACARTHUR FOR CONGR Mailing Address PO BOX 225	ESS INC.		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
,	State Zip Code		Transaction ID : SB23.79133		
COLONIA Purpose of Disbursement	NJ 07067	011	Amount of Each Disbursement this Period		
Candidate Name		Category/ Type	1000.00		
Office Sought: House Disburse	ment For: 2016 Primary General Other (specify) ▼		Memo Item		
Full Name (Last, First, Middle Initial) 3.			Date of Disbursement		
Mailing Address					
•	State Zip Code				
Purpose of Disbursement Candidate Name		Category/ Type	Amount of Each Disbursement this Period		
Office Sought: House Disburse	ment For: Primary General Other (specify)	71.	Memo Item		
Full Name (Last, First, Middle Initial)			Date of Disbursement		
Mailing Address					
•	State Zip Code				
		Category/ Type	Amount of Each Disbursement this Period		
Office Sought: House Senate President State: Disburse	ment For: Primary General Other (specify)		Memo Item		
SUBTOTAL of Disbursements This Page (optional)			1000.00		
	FOTAL This Period (last page this line number only)				

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE 1 (check only 21b 27	
Any information copied from such Reports and Statement or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC	ents may not be sold or used and address of any political	l by any perso	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) A. Committee to Re-elect Jimmie C. H Mailing Address 13008 Gray Hills Road, N.E. City Si Albuquerque N Purpose of Disbursement NON-FEDERAL Candidate Name Office Sought: House Senate President	tate Zip Code NM 87111	011 Category/ Type	Date of Disbursement 11 24 2015 Transaction ID: SB29.79161 Amount of Each Disbursement this Period 500.00 Memo Item
Deming Purpose of Disbursement NON-FEDERAL Candidate Name Office Sought: House Disbursem Senate F	tate Zip Code NM 88031	011 Category/ Type	Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Albuquerque Purpose of Disbursement NON-FEDERAL Candidate Name Office Sought: House Disbursem Senate	tate Zip Code NM 87109	011 Category/ Type	Date of Disbursement M M M / 24 / 2015 Transaction ID: SB29.79163 Amount of Each Disbursement this Period 500.00 Memo Item
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)			1500.00

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c × 29 30
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam-			
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC			
Full Name (Last, First, Middle Initial)			Date of Dishuransast
A. Committee to Re-elect Lucky Varel	a		Date of Disbursement
Mailing Address 1709 Callejon Zenaida			11 24 2015
	tate Zip Code		Transaction ID : SB29.79169
Santa Fe Purpose of Disbursement	NM 87501		
NON-FEDERAL		011	Amount of Each Disbursement this Period
Candidate Name		Category/	500.00
	nent For: Primary General	Туре	Memo Item
	Other (specify) ▼		
State: District: Full Name (Last, First, Middle Initial)			
3. Committee to Re-elect Mary Kay Pa	apen		Date of Disbursement
Mailing Address 904 Conway Avenue			12 17 2015
Las Cruces	State Zip Code NM 88005		Transaction ID: SB29.79176
Purpose of Disbursement NON-FEDERAL		011	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	500.00
President	nent For: Primary General Other (specify) ▼	71.	Memo Item
State: District: Full Name (Last, First, Middle Initial)			
Committee to Re-elect Patricia Lun	dstrom		Date of Disbursement
Mailing Address 3406 Bluehill Avenue			11 24 2015
Gallup	tate Zip Code NM 87301		Transaction ID : SB29.79167
Purpose of Disbursement NON-FEDERAL		011	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	500.00
	nent For: Primary General Other (specify) ▼		Memo Item
SUBTOTAL of Disbursements This Page (optional)			1500.00

	sed by any person	22 23 24 25 26 28a 28b 28c X 29 30 on for the purpose of soliciting contributions solicit contributions from such committee.	
		The state of the s	
_			
ndy		Date of Disbursement	
Mailing Address 388 County road 2900			
State Zip Code		Transaction ID : SB29.79159	
NM 87410			
	011	Amount of Each Disbursement this Period	
	Category/	500.00	
aont For	Type		
Primary General Other (specify) ▼		Memo Item	
		Date of Disbursement	
		10 15 / 2015	
State Zip Code NM 87801		Transaction ID : SB29.79152	
	011	Amount of Each Disbursement this Period	
	Category/ Type	1000.00	
nent For: Primary General Other (specify)		Memo Item	
		Date of Disbursement	
		10 15 2015	
State Zip Code KY 40237		Transaction ID: SB29.79150	
	011	Amount of Each Disbursement this Period	
	Category/ Type	Amount of Each Disbursement this Period	
nent For: Primary General Other (specify)		Memo Item	
	I		
	NM 87410 Thent For: Primary	NM 87410 O11 Category/ Type Type Type Type Category/ Type	

EMIZED DISBURSEMENTS	Use separate schedule(s)		FOR LINE NUMBER: PAGE 374 OF 379 (check only one)	
		for each category of the Detailed Summary Page		22 23 24 25 26 28c X 29 30
ny information copied from such Reports and Stater r for commercial purposes, other than using the nar				
NAME OF COMMITTEE (In Full) Genesis Healthcare Inc PAC		71		
Full Name (Last, First, Middle Initial)				Data of Bishamanana
A. DePasquale for Pennsylvania			Date of Disbursement	
Mailing Address PO Box 391				12 01 2015
City Harrisburg		p Code 7108		Transaction ID : SB29.79172
Purpose of Disbursement NON-FEDERAL			011	Amount of Each Disbursement this Period
Candidate Name			Category/	500.00
Office Sought: House Disbursel	ment For: Primary Other (specify)	General	Туре	Memo Item
Full Name (Last, First, Middle Initial) HOUSE MAJORITY PAC Mailing Address 700 13TH STREET, NW				Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,		p Code		Transaction ID : SB29.79180
WASHINGTON Purpose of Disbursement	DC 2	0005		
NON-FEDERAL Candidate Name			011	Amount of Each Disbursement this Period
Candidate Ivalile			Category/ Type	1500.00
Office Sought: House Disbursel Senate President State: District:	ment For: Primary Other (specify)	General ▼		Memo Item
Full Name (Last, First, Middle Initial) C. NEW JERSEY REPUBLICAN STATE COMMITTEE				Date of Disbursement
Mailing Address 150 WEST STATE STREET SUI	TE 230			10 19 2015
TRENTON		p Code 8608		Transaction ID : SB29.79155
Purpose of Disbursement NON-FEDERAL 011			011	Amount of Each Disbursement this Period
Candidate Name			Category/ Type	2500.00
Senate	ment For: Primary Other (specify)	General ▼		Memo Item
State: President District:	(, , , , , , , , , , , , , , , , , , ,			

210 22 23 24 25 25 27 28 28 28 28 28 28 28	SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s)		FOR LINE NUMBER: PAGE 375 OF 375 (check only one)	
NAME OF COMMITTEE (in Full) Genesis Healthcare Inc PAC Full Name (Last, First, Middle Initial) Representative Four Price Mailing Address PO Box 1749 City State President Prisident President Non-FEDERAL Candidate Name City State District Cardidate Name City State District Transaction ID: S829.79157 Amount of Each Disbursement Non-FEDERAL Candidate Name City State District Transaction ID: S829.79157 Amount of Each Disbursement Non-FEDERAL Candidate Name City State District District Senate President Other (specify) Transaction ID: S829.79157 Amount of Each Disbursement this Period Amount of Each Disbursement Non-FEDERAL Candidate Name Category Soo.00 Memo Item Transaction ID: S829.79154 Amount of Each Disbursement District Transaction ID: S829.79154 Amount of Each Disbursement District District Transaction ID: S829.79154 Amount of Each Disbursement Transaction ID: S829.79154 Amount of Each Disbursement District Transaction ID: S829.79154 Amount of Each Disbursement Transaction ID: S829.79154 Amount of Each Disbursement Transaction ID: S829.79154 Amount of Each Disbursement District Transaction ID: S829.79154 Amount of Each Disbursement Transaction ID: S829.79154 Amount of Each Disbursement Transaction ID: S829.79154 Amount of Each Disbursement District District Transaction ID: S829.79154 Amount of Each Disbursement District Transaction ID: S829.79154 Amou					
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