

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

American Health Care Association Political Action Committee

ADDRESS (number and street)

1201 L Street, NW

Check if different than previously reported. (ACC)

Washington

DC

20005

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00006090

3. IS THIS REPORT

NEW (N) OR

X

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Quarterly Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3)

X

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the State of

(d) 30-Day Post-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

05

01

2003

through

05

31

2003

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Anna Lee

Signature of Treasurer

Electronically Filed by Anna Lee

Date

08

17

2004

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

Office Use Only

FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American Health Care Association Political Action Committee

Report Covering the Period: From: ^M05 ^D01 ^Y2003 To: ^M05 ^D31 ^Y2003

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^Y 2003 ^Y		82924.00
(b) Cash on Hand at Beginning of Reporting Period	211042.27	
(c) Total Receipts (from Line 19)	35474.41	201608.45
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	246516.68	284532.45
<hr/>		
7. Total Disbursements (from Line 31)	23103.54	61119.31
<hr/>		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	223413.14	223413.14
<hr/>		
9. Debts and Obligations owed TO the committee (itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (itemize all on Schedule C and/or Schedule D)	0.00	

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. 02/2003)

Page 3

Write or Type Committee Name

American Health Care Association Political Action Committee

Report Covering the Period: From: ^M05 ^D01 ^Y2003 To: ^M05 ^D31 ^Y2003

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	32559.60	
(ii) Unitemized	2906.42	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	35466.02	201563.89
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	35466.02	201563.89
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	6.39	44.56
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b))	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	35474.41	201608.45
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	35474.41	201608.45

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	420.20
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	420.20
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	22500.00	58580.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	1000.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	1000.00
29. Other Disbursements.....	603.54	3139.11
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election ActMty (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	23103.54	61119.31
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 31).....	23103.54	61119.31

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	35466.02	201563.89
34. Total Contribution Refunds (from Line 28(d))	0.00	1000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	35466.02	200563.89
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	420.20
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	420.20

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

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

FOR LINE NUMBER: PAGE 6 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. Barton D. Weisman		Date of Receipt M / D / Y 05 / 01 / 2003
Mailing Address 531 D NW 33rd Ave #211		Transaction ID: 14824751
City Ft Lauderdale	State FL	Zip Code 33309
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer HBA Corporation	Occupation President	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr Timothy J Boyle		Date of Receipt M / D / Y 05 / 01 / 2003
Mailing Address 4412 Applewood		Transaction ID: 14824751
City Sioux City	State IA	Zip Code 51106-3602
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Care Center Mgmt Co	Occupation Chief Operating Officer	Aggregate Year-to-Date ▼ 2500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr Mark Wheat		Date of Receipt M / D / Y 05 / 01 / 2003
Mailing Address 703 17th St NW		Transaction ID: 14824753
City Aliceville	State AL	Zip Code 35442
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Aliceville Manor Nursing Home	Occupation President	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 30

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr Edward L Kuntz		Date of Receipt M / D / Y 05 / 01 / 2003
Mailing Address 880 South Fourth St		Transaction ID: 14893414
City Louisville	State KY	Zip Code 40202-2412
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Kindrad Healthcare	Occupation Chairman, CEO & President	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr Roch Carter		Date of Receipt M / D / Y 05 / 01 / 2003
Mailing Address 111 W Michigan St		Transaction ID: 14893415
City Milwaukee	State WI	Zip Code 53203-2903
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer Unicare Health Facilities	Occupation General Counsel	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr Stan Jones		Date of Receipt M / D / Y 05 / 01 / 2003
Mailing Address 3107 Washhill Dr		Transaction ID: 14824747
City Wausau	State WI	Zip Code 54401
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer Wausau Manor	Occupation Administrator	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 30

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr Robert Murtha		Date of Receipt M / D / Y 05 / 01 / 2003
Mailing Address 580 North Fourth St #620		Transaction ID: 14824714
City Columbus	State OH	Zip Code 43215
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer The MacIntosh Company	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Ms Cheryl Rapp		Date of Receipt M / D / Y 05 / 01 / 2003
Mailing Address 4001 Ponds Court		Transaction ID: 14824713
City Pleasanton	State CA	Zip Code 94566-7523
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1250.00
Name of Employer CARREI	Occupation President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) C. Mr Mike Hogan		Date of Receipt M / D / Y 05 / 01 / 2003
Mailing Address 484B 24th Street, North		Transaction ID: 14893814
City Arlington	State VA	Zip Code 22207-3511
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 78.92
Name of Employer AHCA	Occupation Lobbyist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 615.38	

SUBTOTAL of Receipts This Page (optional)	1828.92
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 30

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. John Schaeffler		Date of Receipt M / D / Y 05 / 01 / 2003
Mailing Address 3135 Juniper Lane PAYROLL DEDUCTION		Transaction ID: 14893618
City Falls Church	State VA	Zip Code 22044-1813
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer AHCA	Occupation Lobbyist	Aggregate Year-to-Date ▼ 615.36
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. S. Leing Hinson		Date of Receipt M / D / Y 05 / 01 / 2003
Mailing Address 8101 Hinson Farm Road, #315		Transaction ID: 14824749
City Alexandria	State VA	Zip Code 22306
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer S.L. Hinson & Assoc	Occupation	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. J. Michael Bibb		Date of Receipt M / D / Y 05 / 01 / 2003
Mailing Address 239 S. Cherry St		Transaction ID: 14824710
City Galesburg	State IL	Zip Code 61401-4511
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1250.00
Name of Employer RFMS Inc.	Occupation	Aggregate Year-to-Date ▼ 2500.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	1826.92
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 30

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. Al Braswell		Date of Receipt M / D / Y 05 / 01 / 2003
Mailing Address 3874 Pacific Ave.		Transaction ID: 14824711
City Riverside	State CA	Zip Code 92509
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1250.00
Name of Employer Vista Pacifica Enterprises	Occupation Owner	Aggregate Year-to-Date ▼ 2500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Gary Altman		Date of Receipt M / D / Y 05 / 01 / 2003
Mailing Address 8028 Ritchie Hwy. #118		Transaction ID: 14824754
City Pasadena	State MD	Zip Code 21122-1069
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1250.00
Name of Employer FutureCare Health & Mgmt.	Occupation	Aggregate Year-to-Date ▼ 2500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Chip Roadman		Date of Receipt M / D / Y 05 / 01 / 2003
Mailing Address 6856 Avigon Blvd. Payroll Deduction		Transaction ID: 14893817
City Falls Church	State VA	Zip Code 22043-1752
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.30
Name of Employer AHCA	Occupation President & CEO	Aggregate Year-to-Date ▼ 1538.40
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	2692.30
TOTAL This Period (last page this line number only)	▶	

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

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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. John Der		Date of Receipt M / D / Y 05 / 01 / 2003
Mailing Address 1320 North Veitch Street Apt B20 PAYROLL DEDUCTION		Transaction ID: 14893613
City Arlington	State VA	Zip Code 22201-6214
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 46.16
Name of Employer AHCA	Occupation Director, Strat. Action Group	Aggregate Year-to-Date ▼ 369.28
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Kathleen Collins Pagels		Date of Receipt M / D / Y 05 / 01 / 2003
Mailing Address 5020 N. 8th Place, Suite A		Transaction ID: 14824716
City Phoenix	State AZ	Zip Code 85014-3265
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Arizona Health Care Association	Occupation Executive Director	Aggregate Year-to-Date ▼ 600.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Linda Black-Kurek		Date of Receipt M / D / Y 05 / 01 / 2003
Mailing Address 7445 Liberty Woods Lane		Transaction ID: 14824755
City Dayton	State OH	Zip Code 45459-3511
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Liberty Health Care Corp	Occupation President	Aggregate Year-to-Date ▼ 1000.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	1146.16
TOTAL This Period (last page this line number only)	

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

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FOR LINE NUMBER: PAGE 12 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr Kennon S Shea		Date of Receipt M / D / Y 05 / 05 / 2003
Mailing Address 75 Court St PO Box U		Transaction ID: 14893417
City Quincy	State CA	Zip Code 95071
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1250.00
Name of Employer California Convalescent Hosp	Occupation Administrator	Aggregate Year-to-Date ▼ 2500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr R. Peter Madel, Jr.		Date of Receipt M / D / Y 05 / 05 / 2003
Mailing Address 108 8th St NW		Transaction ID: 14893421
City Waseca	State MN	Zip Code 56093-1912
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer Lake Shore Inn Nursing Home	Occupation CEO	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Steve Boymal		Date of Receipt M / D / Y 05 / 05 / 2003
Mailing Address 12100 Read Hartman Highway		Transaction ID: 14893420
City Cincinnati	State OH	Zip Code 45241-6038
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Brookwood Retirement Comm.	Occupation Owner/Administrator	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	1875.00
TOTAL This Period (last page this line number only)	

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

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FOR LINE NUMBER: PAGE 13 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. Tom Juckette		Date of Receipt M / D / Y Y Y Y 05 / 05 / 2003
Mailing Address 151 D NW 88th St.		Transaction ID: 14893419
City Clive	State IA	Zip Code 50325-1093
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Juckette Management Svcs.	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Mr. Jim Bircham		Date of Receipt M / D / Y Y Y Y 05 / 05 / 2003
Mailing Address 1633 Delton Ave.		Transaction ID: 14893418
City Bemidji	State MN	Zip Code 56601-2537
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Eldercare of Bemidji	Occupation President/CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Mr. Steve Akeron		Date of Receipt M / D / Y Y Y Y 05 / 07 / 2003
Mailing Address 6750 Westown Parkway #100		Transaction ID: 14894069
City West Des Moines	State IA	Zip Code 50266-7728
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Iowa Health Care Assn.	Occupation Executive Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	7000.00
TOTAL This Period (last page this line number only)	

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

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FOR LINE NUMBER: PAGE 14 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr H David Hennis		Date of Receipt M / D / Y 05 / 07 / 2003
Mailing Address 1720 Cross St		Transaction ID: 14894077
City Dover	State OH	Zip Code 44622-1043
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Hennis Care Centre	Occupation Asst Administrator	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Mr David Kyle		Date of Receipt M / D / Y 05 / 07 / 2003
Mailing Address 4821 28th Road South PAYROLL DEDUCTION		Transaction ID: 14893674
City Arlington	State VA	Zip Code 22206-1143
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 225.00
Name of Employer AHCA	Occupation Director, Assisted Living	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) C. Mr J Robert Wilson		Date of Receipt M / D / Y 05 / 07 / 2003
Mailing Address 947 Worthington Circle		Transaction ID: 14893689
City Fort Collins	State CO	Zip Code 80528-1841
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3750.00
Name of Employer Columbine Health Systems	Occupation Owner	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	4775.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 15 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr Mike Hagan		Date of Receipt M / D / Y Y Y Y 05 / 07 / 2003
Mailing Address 464B 24th Street, North		Transaction ID: 14893673
City	State	Zip Code
Arlington	VA	22207-3511
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer AHCA	Occupation Lobbyist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 692.28	

Full Name (Last, First, Middle Initial) B. Mr John Schaeffler		Date of Receipt M / D / Y Y Y Y 05 / 07 / 2003
Mailing Address 3135 Juniper Lane PAYROLL DEDUCTION		Transaction ID: 14893677
City	State	Zip Code
Falls Church	VA	22044-1813
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 76.92
Name of Employer AHCA	Occupation Lobbyist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 692.28	

Full Name (Last, First, Middle Initial) C. Mr Chip Roadman		Date of Receipt M / D / Y Y Y Y 05 / 07 / 2003
Mailing Address 6856 Avigon Blvd. Payroll Deduction		Transaction ID: 14893678
City	State	Zip Code
Falls Church	VA	22043-1752
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 192.30
Name of Employer AHCA	Occupation President & CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1730.70	

SUBTOTAL of Receipts This Page (optional)	▶	346.14
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 16 / 30

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. John Der		Date of Receipt M / D / Y 05 / 07 / 2003
Mailing Address 1320 North Veitch Street Apt B20 PAYROLL DEDUCTION		Transaction ID: 14893672
City Arlington	State VA	Zip Code 22201-6214
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 46.16
Name of Employer AHCA	Occupation Director, Strat. Action Group	Aggregate Year-to-Date ▼ 415.44
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr Stephen Reisman		Date of Receipt M / D / Y 05 / 09 / 2003
Mailing Address 5120 Goldleaf Circle Suite 400		Transaction ID: 14893424
City Los Angeles	State CA	Zip Code 90056-1297
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Country Villa Health Services	Occupation President/CEO	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr Floyd Schlossberg		Date of Receipt M / D / Y 05 / 09 / 2003
Mailing Address 4200 W. Peterson #140		Transaction ID: 14893428
City Chicago	State IL	Zip Code 60648-6812
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1250.00
Name of Employer Alden Management Inc	Occupation President	Aggregate Year-to-Date ▼ 2500.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	1546.16
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 17 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Ms Adele Wilbeck		Date of Receipt M / D / Y 05 / 09 / 2003
Mailing Address 7080 Oakland Mills Road Suite M		Transaction ID: 14893425
City Columbia	State MD	Zip Code 21046-1694
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Health Facilities Assn of MD	Occupation	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms Dana Holmway		Date of Receipt M / D / Y 05 / 09 / 2003
Mailing Address 1475 N. Cole Rd.		Transaction ID: 14893426
City Boise	State ID	Zip Code 83704-8537
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Western Health Care Corp.	Occupation Consultant RN	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms Mary Ousley		Date of Receipt M / D / Y 05 / 14 / 2003
Mailing Address 101 Sun Avenue NE		Transaction ID: 14894458
City Albuquerque	State NM	Zip Code 87109-4373
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1250.00
Name of Employer Sunbridge Healthcare Corporation	Occupation VP	Aggregate Year-to-Date ▼ 2500.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	1750.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 18 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. Jay Moskowitz		Date of Receipt M / D / Y Y Y Y 05 / 14 / 2003
Mailing Address 2932 Fenton Street		Transaction ID: 14894454
City Wheat Ridge	State CO	Zip Code 80214-8116
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Quality Life Management	Occupation Administrator	Aggregate Year-to-Date ▼ 1000.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Leonard Russ		Date of Receipt M / D / Y Y Y Y 05 / 14 / 2003
Mailing Address 40 Keogh Lane		Transaction ID: 14896389
City New Rochelle	State NY	Zip Code 10805-1397
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer Bayberry Nursing Home	Occupation Administrator	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Dion Gene		Date of Receipt M / D / Y Y Y Y 05 / 14 / 2003
Mailing Address 1301 NE 104th Street		Transaction ID: 14894455
City Miami Shores	State FL	Zip Code 33138-2661
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Alachua Health Consultants Inc.	Occupation Owner	Aggregate Year-to-Date ▼ 500.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	1375.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 10 / 30

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Ms. Terri Byers		Date of Receipt M / D / Y 05 / 14 / 2003	
Mailing Address 1548 Akake Place		Transaction ID: 14894457	
City Kailua	State HI	Zip Code 96734-4209	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Healthcare Association of Hawaii	Occupation VP	Aggregate Year-to-Date ▼ 500.00	
Receipt For: Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) B. Mr A D Buffington		Date of Receipt M / D / Y 05 / 15 / 2003	
Mailing Address 2508 Lakeland Dr Suite 102		Transaction ID: 14923806	
City Flowood	State MS	Zip Code 39232-7640	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer Hillcrest Health Center	Occupation Chairman	Aggregate Year-to-Date ▼ 300.00	
Receipt For: Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) C. Mr Don Wessel		Date of Receipt M / D / Y 05 / 19 / 2003	
Mailing Address 417 S Main St		Transaction ID: 14957844	
City Oberlin	State OH	Zip Code 44074	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Welcome Nursing Home Inc	Occupation President	Aggregate Year-to-Date ▼ 250.00	
Receipt For: Primary General Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶ **900.00**

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

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

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

FOR LINE NUMBER: PAGE 20 / 30

(check only one)

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

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr William Dunn		Date of Receipt M / D / Y 05 / 21 / 2003
Mailing Address 195 Executive Dr		Transaction ID: 14957846
City Marion	State OH	Zip Code 43302-6391
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Marion Manor Nursing Hm Inc	Occupation Administrator	Aggregate Year-to-Date ▼ 1200.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr Michael McBride		Date of Receipt M / D / Y 05 / 30 / 2003
Mailing Address 101 Grace Drive		Transaction ID: 14986318
City Easley	State SC	Zip Code 29540-9088
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1250.00
Name of Employer Health Management Resources	Occupation President	Aggregate Year-to-Date ▼ 1250.00
Receipt For: Primary General Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Leona Tinkey		Date of Receipt M / D / Y 05 / 30 / 2003
Mailing Address 803 Cherry Drive		Transaction ID: 14986319
City Hershey	State PA	Zip Code 17033-2008
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Country Meadows	Occupation VP, Operations	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	32559.60

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. Lewis for Congress Committee

Mailing Address 1150 Brookside Ave.

City Redlands State CA Zip Code 92373

Purpose of Disbursement

Candidate Name
Mr. Jerry Lewis

Office Sought: House
Senate
President
State: CA District: 40

Disbursement For: 2004
 Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 14831413
Date of Disbursement

05 / 07 / 2003

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)
B. Lewis for Congress Committee

Mailing Address 1150 Brookside Ave.

City Redlands State CA Zip Code 92373

Purpose of Disbursement

Void - Lewis for Congress Committee

Candidate Name
Mr. Jerry Lewis

Office Sought: House
Senate
President
State: CA District: 40

Disbursement For: 2004
 Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 14835177
Date of Disbursement

05 / 07 / 2003

Amount of Each Disbursement this Period

-1000.00

Void - Lewis for Congress
Committee

Full Name (Last, First, Middle Initial)
C. Lewis for Congress Committee

Mailing Address 1150 Brookside Ave.

City Redlands State CA Zip Code 92373

Purpose of Disbursement

Candidate Name
Mr. Jerry Lewis

Office Sought: House
Senate
President
State: CA District: 40

Disbursement For: 2004
 Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 14835384
Date of Disbursement

05 / 07 / 2003

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. Tom Allen for Congress

Mailing Address PO Box 17766

City Portland State ME Zip Code 04112

Purpose of Disbursement

Candidate Name Mr. Tom Allen

Office Sought: House Senate President
State: ME District 1

Disbursement For: 2004
 Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 14831371
Date of Disbursement
05 / 07 / 2003

Amount of Each Disbursement this Period
500.00

Full Name (Last, First, Middle Initial)
B. Tom Allen for Congress

Mailing Address PO Box 17766

City Portland State ME Zip Code 04112

Purpose of Disbursement
Void -

Candidate Name Mr. Tom Allen

Office Sought: House Senate President
State: ME District 1

Disbursement For: 2004
 Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 14835171
Date of Disbursement
05 / 07 / 2003

Amount of Each Disbursement this Period
-500.00

Void -

Full Name (Last, First, Middle Initial)
C. Tom Allen for Congress

Mailing Address PO Box 17766

City Portland State ME Zip Code 04112

Purpose of Disbursement

Candidate Name Mr. Tom Allen

Office Sought: House Senate President
State: ME District 1

Disbursement For: 2004
 Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 14835455
Date of Disbursement
05 / 07 / 2003

Amount of Each Disbursement this Period
500.00

SUBTOTAL of Disbursements This Page (optional) ▶ **500.00**

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 23 / 30

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

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. Grassley Committee Inc.

Mailing Address 5327 Holmes Run Parkway

City Alexandria State VA Zip Code 22304

Purpose of Disbursement

Candidate Name
Senator Charles Grassley

Office Sought: House Disbursement For: 2004
 Senate Primary General
 President
 State: IA District 1 Other (specify) ▼

Transaction ID: 14831200
Date of Disbursement
05 / 07 / 2003

Amount of Each Disbursement this Period
4000.00

011
Category/
Type

Full Name (Last, First, Middle Initial)
B. Grassley Committee Inc.

Mailing Address 5327 Holmes Run Parkway

City Alexandria State VA Zip Code 22304

Purpose of Disbursement
Void - Grassley Committee Inc.

Candidate Name
Senator Charles Grassley

Office Sought: House Disbursement For: 2004
 Senate Primary General
 President
 State: IA District 1 Other (specify) ▼

Transaction ID: 14835157
Date of Disbursement
05 / 07 / 2003

Amount of Each Disbursement this Period
-4000.00

011
Category/
Type

Void - Grassley Committee Inc.

Full Name (Last, First, Middle Initial)
C. Grassley Committee Inc.

Mailing Address 5327 Holmes Run Parkway

City Alexandria State VA Zip Code 22304

Purpose of Disbursement

Candidate Name
Senator Charles Grassley

Office Sought: House Disbursement For: 2004
 Senate Primary General
 President
 State: IA District 1 Other (specify) ▼

Transaction ID: 14835289
Date of Disbursement
05 / 07 / 2003

Amount of Each Disbursement this Period
4000.00

011
Category/
Type

SUBTOTAL of Disbursements This Page (optional) ▶ 4000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. Grassley Committee Inc.

Mailing Address 5327 Holmes Run Parkway

City Alexandria State VA Zip Code 22904

Purpose of Disbursement

Candidate Name
Senator Charles Grassley

Office Sought: House Disbursement For: 2004
 Senate Primary General
 President
 State: IA District 1 Other (specify) ▼

Transaction ID: 14835312
Date of Disbursement
05 / 07 / 2003

Amount of Each Disbursement this Period
5000.00

011
Category/
Type

Full Name (Last, First, Middle Initial)
B. LEGPAC

Mailing Address 38 Ivy St. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Ben Cardin's leadership PAC

Candidate Name

Office Sought: House Disbursement For:
 Senate Primary General
 President
 State: District D Other (specify) ▼

Transaction ID: 14831086
Date of Disbursement
05 / 07 / 2003

Amount of Each Disbursement this Period
1000.00

011
Category/
Type

Ben Cardin's leadership
PAC

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

Mailing Address 38 Ivy St. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Void - LEGPAC

Candidate Name

Office Sought: House Disbursement For:
 Senate Primary General
 President
 State: District D Other (specify) ▼

Transaction ID: 14835146
Date of Disbursement
05 / 07 / 2003

Amount of Each Disbursement this Period
-1000.00

011
Category/
Type

Void - LEGPAC

SUBTOTAL of Disbursements This Page (optional) ▶ 5000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. LEGPAC

Mailing Address 38 Ivy St. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Ben Cardin's leadership PAC

Candidate Name

Office Sought: House Senate President
State: District D

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Transaction ID: 14835235

Date of Disbursement

05 / 07 / 2003

Amount of Each Disbursement this Period

1000.00

Ben Cardin's leadership
PAC

Full Name (Last, First, Middle Initial)

B. Whitfield for Congress

Mailing Address PO Box 391

City Hopkinsville State KY Zip Code 42241

Purpose of Disbursement

Candidate Name
Mr. Ed Whitfield

Office Sought: House Senate President
State: KY District 1

Disbursement For: 2004
 Primary General Other (specify) ▼

011
Category/
Type

Transaction ID: 14848384

Date of Disbursement

05 / 09 / 2003

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

C. Friends of Blanche Lincoln

Mailing Address P.O. Box 3197

City Little Rock State AR Zip Code 72203

Purpose of Disbursement

Candidate Name
Ms Blanche Lincoln

Office Sought: House Senate President
State: AR District 0

Disbursement For: 2004
Primary General Other (specify) ▼

011
Category/
Type

Transaction ID: 14855377

Date of Disbursement

05 / 09 / 2003

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Team Emerson

Mailing Address PO Box 822

City Cape Girardeau State MO Zip Code 63702

Purpose of Disbursement

Candidate Name
Ms. JoAnn Emerson

Office Sought: House
Senate
President

State: MO District: D

Disbursement For: 2004
 Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 14898848

Date of Disbursement

05 / 16 / 2003

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Democratic Senate Majority Fund

Mailing Address 607 14th St. NW
Ste. 800

City Washington State DC Zip Code 20005

Purpose of Disbursement

Candidate Name

Office Sought: House
Senate
President

State: District: D

Disbursement For:
Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 14923761

Date of Disbursement

05 / 20 / 2003

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Democratic Senate Majority Fund

Mailing Address 607 14th St. NW
Ste. 800

City Washington State DC Zip Code 20005

Purpose of Disbursement

Void - Democratic Senate Majority Fund

Candidate Name

Office Sought: House
Senate
President

State: District: D

Disbursement For:
Primary General
Other (specify) ▼

011
Category/
Type

Transaction ID: 14923762

Date of Disbursement

05 / 20 / 2003

Amount of Each Disbursement this Period

-2500.00

Void - Democratic Senate
Majority Fund

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b
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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. Democratic Senate Majority Fund

Mailing Address 607 14th St. NW
Ste. 800

City Washington State DC Zip Code 20005

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President State: District D

Disbursement For: Primary General Other (specify) ▼

011
Category/
Type

Transaction ID: 14923763
Date of Disbursement
05 / 20 / 2003

Amount of Each Disbursement this Period
2500.00

Full Name (Last, First, Middle Initial)
B. Neil Abercrombie

Mailing Address Prince Kuhio Fed. Bldg.
300 Ala Moana Blvd., Rm. 4-104

City Honolulu State HI Zip Code 06850

Purpose of Disbursement

Candidate Name
Mr. Neil Abercrombie

Office Sought: House Senate President State: HI District 1

Disbursement For: 2004
 Primary General Other (specify) ▼

011
Category/
Type

Transaction ID: 14924558
Date of Disbursement
05 / 21 / 2003

Amount of Each Disbursement this Period
1000.00

Full Name (Last, First, Middle Initial)
C. Friends of Don Sherwood

Mailing Address B1 Warren Street

City Tunkhannock State PA Zip Code 18657

Purpose of Disbursement

Candidate Name
Mr. Don Sherwood

Office Sought: House Senate President State: PA District 10

Disbursement For: 2004
 Primary General Other (specify) ▼

011
Category/
Type

Transaction ID: 14958681
Date of Disbursement
05 / 27 / 2003

Amount of Each Disbursement this Period
1000.00

SUBTOTAL of Disbursements This Page (optional) ▶ **4500.00**

TOTAL This Period (last page this line number only) ▶ **22500.00**

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)
A. American Health Care Association

Mailing Address 1201 L St NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
Breakfast for M. Doyle

Candidate Name

Office Sought: House Senate President
State: District D
Disbursement For: Primary General Other (specify) ▼

003
Category/
Type

Transaction ID: 14831277
Date of Disbursement

05 / 07 / 2003

Amount of Each Disbursement this Period

152.48

Breakfast for M. Doyle

Full Name (Last, First, Middle Initial)
B. American Health Care Association

Mailing Address 1201 L St NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
Void - American Health Care Association

Candidate Name

Office Sought: House Senate President
State: District D
Disbursement For: Primary General Other (specify) ▼

003
Category/
Type

Transaction ID: 14835164
Date of Disbursement

05 / 07 / 2003

Amount of Each Disbursement this Period

-152.48

Void - American Health Care Association

Full Name (Last, First, Middle Initial)
C. Bank of America

Mailing Address 730 15th Street N.W.
2 nd Floor

City Washington State DC Zip Code 20005

Purpose of Disbursement
Bank fee

Candidate Name

Office Sought: House Senate President
State: District D
Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Transaction ID: 15220939
Date of Disbursement

05 / 31 / 2003

Amount of Each Disbursement this Period

273.18

Bank fee

SUBTOTAL of Disbursements This Page (optional) ▶

273.19

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Health Care Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bank of America- Credit

Mailing Address 730 15th Street N.W.
2 nd Floor

City Washington State DC Zip Code 20005

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District D

001
Category/
Type

Transaction ID: 15220843

Date of Disbursement

05 / 31 / 2003

Amount of Each Disbursement this Period

15.44

Bank Fee

Full Name (Last, First, Middle Initial)

B. First Virginia Cash

Mailing Address

City State Zip Code

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District D

001
Category/
Type

Transaction ID: 15220862

Date of Disbursement

05 / 31 / 2003

Amount of Each Disbursement this Period

150.45

Bank Fee

SUBTOTAL of Disbursements This Page (optional) ▶

165.89

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

439.08

