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**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

Centennial Healthcare Corporation Employee Political Action Committee

ADDRESS (number and street) 400 Perimeter Center Terrace, Suite 850

Check if different than previously reported. (ACC)

Atlanta GA 30348

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C 00376830

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

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER)

(b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only) Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (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 01 04 through 06 30 2004

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 Brian Grazzini

Signature of Treasurer Date

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5497g.

Office Use Only FEC FORM 3X (Rev. 02/2003)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

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Page 2

Write or Type Committee Name

Centennial Healthcare Corporation Employee Political Action Committee

Report Covering the Period:

From:

04 / 01 / 2004

To:

06 / 30 / 2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2004		13,824.58
(b) Cash on Hand at Beginning of Reporting Period	13,477.50	
(c) Total Receipts (from Line 19)	663.66	1,348.10
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	14,141.16	15,172.68
7. Total Disbursements (from Line 31)	2,250.00	3,281.50
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	11,891.16	11,891.16
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  
988 E Street, NW  
Washington, DC 20483

Toll Free 800-424-9630  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Report Covering the Period:

From:

04 / 01 / 2004

To:

06 / 30 / 2004

1. 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) .....	220.00	
(ii) Unitemized .....	412.16	
(ii) TOTAL (add Lines 11(a)(i) and (ii)) .....	632.16	1,316.60
(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)(ii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	632.16	1,316.60
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) .....	31.50	31.50
16. Refunds of Contributions Made to Federal Candidate and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b)) .....	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	663.66	1,348.10
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	663.66	1,348.10

**DETAILED SUMMARY PAGE**  
of Disbursements

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B. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share .....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	31.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	31.50
22. Transfers to Affiliated/Other Party Committees .....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	2,250.00	3,250.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441(d)) (use Schedule F) .....	0.00	0.00
26. Loan Repayments Made .....	0.00	0.00
27. Loans Made .....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(2))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2,250.00	3,281.50
32. Total Federal Disbursements (subtract Line 21(a)(i) and Line 30(a)(i) from Line 31) .....	2,250.00	3,281.50

**DETAILED SUMMARY PAGE**  
of Disbursements

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R7. 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) .....	632.16	1,316.60
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	632.16	1,316.60
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	31.50
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	31.50	31.50
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	-31.50	0.00

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

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

FORM LINE NUMBER: (check only one)		PAGE 1 OF 1	
<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

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)  
Centennial Healthcare Corporation Employee Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Burr, Douglas G.</b>		Date of Receipt [ ] / [ ] / [ ]
Mailing Address 1185 Wide Run Court		Amount of Each Receipt this Period <b>120.00</b>
City Roswell	State Zip Code GA 30075	
FEC ID number of contributing federal political committee. <b>C</b>		(Four \$30 payroll deductions)
Name of Employer Centennial Healthcare Corporation	Occupation Senior VP of Reimbursement	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>240.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Mayo, Wayne H.</b>		Date of Receipt [ ] / [ ] / [ ]
Mailing Address 1160 Grace Hadaway Lane		Amount of Each Receipt this Period <b>100.00</b>
City Lawrenceville	State Zip Code GA 30043	
FEC ID number of contributing federal political committee. <b>C</b>		(Four \$25 payroll deductions)
Name of Employer Centennial Healthcare Corporation	Occupation Senior Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ [ ]	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt [ ] / [ ] / [ ]
Mailing Address		Amount of Each Receipt this Period [ ]
City	State Zip Code	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ [ ]	

SUBTOTAL of Receipts This Page (optional)	[ ]
TOTAL This Period (last page this line number only)	<b>220.00</b>

**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 1 OF 1	
<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)  
Centennial Healthcare Corporation Employee Political Action Committee

Full Name (Last, First, Middle Initial)  
A. A Lot of People Supporting Tom Daschle

Date of Disbursement  
04 / 05 / 2004

Mailing Address  
P.O. Box 1656

City: Sioux Falls State: SD Zip Code: 57101-1656

Purpose of Disbursement: Political Contribution  
Candidate Name: Thomas A. Daschle  
Category/Type: 011

Amount of Each Disbursement this Period: 1,000.00

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

State: SD District:

Full Name (Last, First, Middle Initial)  
B. Friends of Blanche Lincoln

Date of Disbursement  
05 / 10 / 2004

Mailing Address  
P.O. Box 3197

City: Little Rock State: AR Zip Code: 72203

Purpose of Disbursement: Political Contribution  
Candidate Name: Blanche L. Lincoln  
Category/Type: 011

Amount of Each Disbursement this Period: 1,250.00

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

State: AR District:

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

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

Amount of Each Disbursement this Period

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

State: District:

SUBTOTAL of Disbursements This Page (optional) \_\_\_\_\_

TOTAL This Period (last page this line number only) \_\_\_\_\_

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE  
 FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked  
Delivery Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *FED EX* Shipping Date  
*7-14-04*

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

*AA*  
 PREPARER  
 (5/2004)

*7-15-04*  
 DATE PREPARED