

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

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

FOR LINE NUMBER: PAGE 8 OF 18  
(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)  
**GGNSC Holdings LLC/Golden Horizons Care PAC**

**A. BRANDON RIBAR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2215 Cedar Springs  
 City Dallas State TX Zip Code 75201-1812  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Golden Horizons Occupation SVP Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 08 / 31 / 2015  
**Transaction ID : PR2089913242374**  
 Amount of Each Receipt this Period 30.00  
 P/R Deduction (\$15.00 Bi-Weekly)

**B. KELLI LUNEBORG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 305 South Custer Road #1407  
 City McKinney State TX Zip Code 75070  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Golden Living Occupation Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 31 / 2015  
**Transaction ID : PR2193778742374**  
 Amount of Each Receipt this Period 15.00  
 P/R Deduction (\$15.00 Bi-Weekly)

**C. JOHN WILLIAMS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10504 TWEED LANE  
 City FORT SMITH State AR Zip Code 72908-0941  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Golden Living Center Occupation SVP Facility Finance  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 08 / 31 / 2015  
**Transaction ID : PR2194795142374**  
 Amount of Each Receipt this Period 30.00  
 P/R Deduction (\$15.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 75.00  
**TOTAL** This Period (last page this line number only)..... ▶