

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
Beverly Enterprises, Inc. Political Action Committee

ADDRESS (number and street) 1250 H Street, NW
Suite 555
 Check if different than previously reported. (ACC)
Washington DC 20005

2. **FEC IDENTIFICATION NUMBER** C00346346
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 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) 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 (12G)
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 09 01 2006 through 09 30 2006

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 Jack MacDonald

Signature of Treasurer Electronically Filed by Jack MacDonald Date 10 19 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Beverly Enterprises, Inc. Political Action Committee

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		227754.14
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	254033.33									
(c) Total Receipts (from Line 19)	14833.93	160800.12								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	268867.26	388554.26								
7. Total Disbursements (from Line 31)	57375.00	177062.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	211492.26	211492.26								
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**

Write or Type Committee Name
Beverly Enterprises, Inc. Political Action Committee

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	14672.31	119811.19
(i) Itemized (use Schedule A)		
(ii) Unitemized	161.62	40988.93
(iii) TOTAL (add Lines 11(a)(i) and (ii)	14833.93	160800.12
(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)	14833.93	160800.12
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.)	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 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))	14833.93	160800.12
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	14833.93	160800.12

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	125.00	757.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	125.00	757.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	54500.00	171000.00
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	450.00
(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	450.00
29. Other Disbursements.....	2750.00	4855.00
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 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))..	57375.00	177062.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	57375.00	177062.00

DETAILED SUMMARY PAGE
of Disbursements

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)	14833.93	160800.12
34. Total Contribution Refunds (from Line 28(d))	0.00	450.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	14833.93	160350.12
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	125.00	757.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	125.00	757.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 73

(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

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)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
RANDALL L CHURCHEY

Mailing Address 1250 H Street NW
Suite 555

City Washington State DC Zip Code 20005-3952

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises Inc. Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1950.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR126956798581

Amount of Each Receipt this Period
300.00

P/R Deduction (\$150.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Mrs. ANTOINETTE C LAMBERT

Mailing Address # 67 Cr 332

City Taylor State MS Zip Code 38606

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Healthcare Occupation Executive Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76870578581

Amount of Each Receipt this Period
30.00

P/R Deduction (\$15.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Mrs. JOAN D BINKLEY

Mailing Address 240 Empire Ave

City Dyersburg State TN Zip Code 38024-5267

FEC ID number of contributing federal political committee. **C**

Name of Employer Union City Health Care Ce-
nter Occupation Executive Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76870638581

Amount of Each Receipt this Period
30.00

P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **360.00**

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: (check only one)	PAGE 7 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. WENDELL A SMITH		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 509 College View Dr		Transaction ID: PR76870678581	
City Elizabethtown	State KY	Zip Code 42701-3077	Amount of Each Receipt this Period _____ 30.00
FEC ID number of contributing federal political committee. C			
Name of Employer Beverly Health and Rehabilitation Serv	Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00		
		P/R Deduction (\$15.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) B. Mrs. MELISSA S BENTLEY		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address P.O. Box 276		Transaction ID: PR76870688581	
City Garrison	State KY	Zip Code 41141-0276	Amount of Each Receipt this Period _____ 75.00
FEC ID number of contributing federal political committee. C			
Name of Employer Vanceburg Health Care Center	Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 750.00		
		P/R Deduction (\$37.50 Bi-Weekly)	

Full Name (Last, First, Middle Initial) C. Mrs. ROBIN GREEN		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 505 Redstone Drive		Transaction ID: PR76870728581	
City Gallatin	State TN	Zip Code 37066-4628	Amount of Each Receipt this Period _____ 30.00
FEC ID number of contributing federal political committee. C			
Name of Employer Beverly Healthcare	Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 285.00		
		P/R Deduction (\$15.00 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 135.00
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: (check only one)	PAGE 8 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Mrs. LIANE M MINIER		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 5892 N Ashford Dr		Transaction ID: PR76870748581	
City State Zip Code Columbia City IN 46725-7755	Amount of Each Receipt this Period _____ 30.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer Beverly Rehab & Specialty Center	Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00		P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. Mr. SEAN A FOSTER		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 8035 Meadow Bend Ln		Transaction ID: PR76870798581	
City State Zip Code Indianapolis IN 46259-6775	Amount of Each Receipt this Period _____ 30.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer Brookview Rehab & Specialty Center	Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00		P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. Mrs. LINDA T WILKINSON		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 8473 Deborah Ct		Transaction ID: PR76870808581	
City State Zip Code Brownsburg IN 46112-8431	Amount of Each Receipt this Period _____ 15.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer Oak Ridge Rehab & Specialty Center	Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 285.00		P/R Deduction (\$15.00 Bi-Weekly)

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Ms. VICI A LITRELL Mailing Address 37722 Hwy 5 City Glasgow State MO Zip Code 65254-2033 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76870938581 Amount of Each Receipt this Period 30.00
Name of Employer Colonial Manor of Glasgow Occupation Executive Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$15.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial) Mr. GEORGE L MIU Mailing Address 618 Carly Lane City Sidney State OH Zip Code 45365-1874 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76871128581 Amount of Each Receipt this Period 30.00
Name of Employer Valley Nursing & Rehab Center Occupation Executive Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$15.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial) Ms. LUANN K PONTIUS Mailing Address 58657 Palace Lane City Elkhart State IN Zip Code 46517-9587 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76871278581 Amount of Each Receipt this Period 30.00
Name of Employer Beverly Healthcare Occupation Executive Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	90.00
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: (check only one)	PAGE 10 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. Donald S Jones		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 2522 North 159th St		Transaction ID: PR76871288581
City State Zip Code Omaha NE 68116-2032	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Beverly Enterprises, Inc.	Occupation Dir Operations	P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

Full Name (Last, First, Middle Initial) B. Mrs. STACI R CARDENAS		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 2772 40th Ave		Transaction ID: PR76871698581
City State Zip Code Columbus NE 68601-2137	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Beverly Healthcare	Occupation Executive Director	P/R Deduction (\$15.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Ms. JOYCE E CANTRELL		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 32 Kuester Lake		Transaction ID: PR76871718581
City State Zip Code Grand Island NE 68801-8609	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Franklin Nursing Center	Occupation Executive Director	P/R Deduction (\$15.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	160.00
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: (check only one)	PAGE 11 / 73
	<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)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. JAMES P ZOESCH		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76871768581	
Mailing Address 14901 White Bluff Rd		Amount of Each Receipt this Period 75.00	
City State Zip Code Fort Smith AR 72916-8328	FEC ID number of contributing federal political committee. C		P/R Deduction (\$37.50 Bi-Weekly)
Name of Employer Beverly Enterprises, Inc.	Occupation Dir Loss Control		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 712.50		

Full Name (Last, First, Middle Initial) B. Mrs. ROBERTA G WILLIAMS		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76871788581	
Mailing Address 3408 Meandering Ct		Amount of Each Receipt this Period 75.00	
City State Zip Code Fort Smith AR 72903-5863	FEC ID number of contributing federal political committee. C		P/R Deduction (\$37.50 Bi-Weekly)
Name of Employer Beverly Enterprises, Inc.	Occupation Dir Reimbursement		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 712.50		

Full Name (Last, First, Middle Initial) C. Mrs. TINA C CHAVIS		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76871808581	
Mailing Address 2701 S. 96th Street		Amount of Each Receipt this Period 75.00	
City State Zip Code Fort Smith AR 72903-5317	FEC ID number of contributing federal political committee. C		P/R Deduction (\$37.50 Bi-Weekly)
Name of Employer Beverly Enterprises, Inc.	Occupation Dir Sr Financial Ser		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 712.50		

SUBTOTAL of Receipts This Page (optional) ▶	225.00
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: (check only one)	PAGE 12 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Mrs. PAMELA H ORSINI		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 160 Pinewood Rd		Transaction ID: PR76871818581	
City Virginia Beach	State VA	Zip Code 23451-3958	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Beverly Enterprises, Inc.	Occupation Dir Medicaid Appeals		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 950.00		
		P/R Deduction (\$50.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) B. Mrs. JANE E BENGSTON-WESSEL		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 701 E Grant		Transaction ID: PR76871958581	
City Wausa	State NE	Zip Code 68786-2044	Amount of Each Receipt this Period _____ 30.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Wausa Health Care Center	Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00		
		P/R Deduction (\$15.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) C. Mrs. DIXIE L WILDE		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2805 S Theodore Ave		Transaction ID: PR76871978581	
City Sioux Falls	State SD	Zip Code 57106-3862	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Beverly Enterprises, Inc.	Occupation Dir Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 900.00		
		P/R Deduction (\$50.00 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 230.00
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: (check only one)	PAGE 13 / 73
<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)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Ms. DIANE K FORGEY Mailing Address 1020 East 2nd St. City State Zip Code Redfield SD 57469-1133 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76872248581 Amount of Each Receipt this Period 30.00 P/R Deduction (\$15.00 Bi-Weekly)
Name of Employer: Beverly Healthcare Occupation: Executive Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		

B. Full Name (Last, First, Middle Initial) Ms. JEANINE A BRAATEN Mailing Address 39 West Ferry Drive City State Zip Code Atlanta GA 30319-4310 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76872638581 Amount of Each Receipt this Period 30.00 P/R Deduction (\$15.00 Bi-Weekly)
Name of Employer: Beverly Healthcare Occupation: Executive Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 285.00		

C. Full Name (Last, First, Middle Initial) Ms. KIMBERLY A LYON Mailing Address 3020 Kentucky Ave City State Zip Code St Louis Park MN 55426-3445 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76872708581 Amount of Each Receipt this Period 30.00 P/R Deduction (\$15.00 Bi-Weekly)
Name of Employer: Hopkins Care Center Occupation: Executive Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional)	90.00
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: (check only one)	PAGE 14 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. HERSCHEL B SEDORIS

Mailing Address 7500 Turner Ridge Rd

City State Zip Code
Crestwood KY 40014-8951

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76872868581

Amount of Each Receipt this Period
30.00

P/R Deduction (\$15.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Mr. ANTHONY JOHNSON

Mailing Address 1158 Silverwood Bay

City State Zip Code
Woodbury MN 55125-8612

FEC ID number of contributing federal political committee. **C**

Name of Employer St Louis Park Plaza Healthcare Ctr Occupation Ed Sr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76872898581

Amount of Each Receipt this Period
30.00

P/R Deduction (\$15.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Mr. DRU W FISCHGRABE

Mailing Address P. O. Box 622

City State Zip Code
Hector MN 55342-0622

FEC ID number of contributing federal political committee. **C**

Name of Employer Wabasso Healthcare Center Occupation Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76872928581

Amount of Each Receipt this Period
30.00

P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	▶	90.00
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: (check only one)	PAGE 15 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mrs. DENISE M BECKER

Mailing Address 813 Irene Ave Se

City Willmar State MN Zip Code 56201-4669

FEC ID number of contributing federal political committee. **C**

Name of Employer Olivia Health Care Center Occupation Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76872978581

Amount of Each Receipt this Period
30.00

P/R Deduction (\$15.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Mrs. CYNDI A SEIWERT

Mailing Address 13968 Mallard Trail

City Rogers State MN Zip Code 55374-8763

FEC ID number of contributing federal political committee. **C**

Name of Employer Twin Rivers Care Center Occupation Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76873018581

Amount of Each Receipt this Period
30.00

P/R Deduction (\$15.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Mrs. JULIE A SAMPSON

Mailing Address 307 Hopkins Drive

City Arlington State SD Zip Code 57212-2120

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Healthcare Occupation Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76873148581

Amount of Each Receipt this Period
30.00

P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	▶	90.00
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: (check only one)	PAGE 16 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Mr. BRIAN P MUELLER Mailing Address 6710 Brook Bend Way City State Zip Code Louisville KY 40229-5302 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76873188581 Amount of Each Receipt this Period 30.00 P/R Deduction (\$15.00 Bi-Weekly)
Name of Employer Occupation St Matthews Manor Executive Director Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 300.00		

B. Full Name (Last, First, Middle Initial) Mrs. PATRICIA A CRANSTON Mailing Address 20076 East 1100 Road City State Zip Code Pleasanton KS 66075-8281 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76873458581 Amount of Each Receipt this Period 75.00 P/R Deduction (\$37.50 Bi-Weekly)
Name of Employer Occupation Beverly Healthcare Executive Director Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 750.00		

C. Full Name (Last, First, Middle Initial) Ms. SHERRIE L CUNNINGHAM Mailing Address 1308 N 7th City State Zip Code Neodesha KS 66757-1254 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76873478581 Amount of Each Receipt this Period 30.00 P/R Deduction (\$15.00 Bi-Weekly)
Name of Employer Occupation Beverly Healthcare Executive Director Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 300.00		

SUBTOTAL of Receipts This Page (optional)	135.00
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 17 / 73
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Ms. DEBRA A SALYERS		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 306 W. Concord Po Box 186		Transaction ID: PR76873488581	
City Holyrood	State KS	Zip Code 67450-9616	Amount of Each Receipt this Period _____ 30.00
FEC ID number of contributing federal political committee. C			
Name of Employer Beverly Healthcare	Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 285.00		
		P/R Deduction (\$15.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) B. Mr. JOHN F OEHLER		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 9156 N. Bak Acres Dr		Transaction ID: PR76873548581	
City Brazil	State IN	Zip Code 47834-8302	Amount of Each Receipt this Period _____ 30.00
FEC ID number of contributing federal political committee. C			
Name of Employer Beverly Healthcare	Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00		
		P/R Deduction (\$15.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) C. Mr. JOHN B KANE		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 7511 Taylor Cir		Transaction ID: PR76873718581	
City Evansville	State IN	Zip Code 47715-5273	Amount of Each Receipt this Period _____ 30.00
FEC ID number of contributing federal political committee. C			
Name of Employer Woodbridge Nursing Care Center	Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00		
		P/R Deduction (\$15.00 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 90.00
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 / 73
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Mr. DAVID E WILLIAMSON Mailing Address 1103 E. Bismark City State Zip Code Grand Island NE 68801-8127 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76873758581 Amount of Each Receipt this Period 30.00 P/R Deduction (\$15.00 Bi-Weekly)
Name of Employer Occupation Lakeview Nursing Center Executive Director Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 300.00		

B. Full Name (Last, First, Middle Initial) Ms. GWENDOLYN F KOINZAN Mailing Address 717 South 13 Ave City State Zip Code Broken Bow NE 68822-2338 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76873778581 Amount of Each Receipt this Period 30.00 P/R Deduction (\$15.00 Bi-Weekly)
Name of Employer Occupation Sandhills Manor Executive Director Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 300.00		

C. Full Name (Last, First, Middle Initial) Mrs. FRANCES A KEEARNS Mailing Address 3201 Sw 35th Terrace City State Zip Code Topeka KS 66614-3590 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76873968581 Amount of Each Receipt this Period 30.00 P/R Deduction (\$15.00 Bi-Weekly)
Name of Employer Occupation Beverly Healthcare Executive Director Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 300.00		

SUBTOTAL of Receipts This Page (optional)	▶	90.00
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: (check only one)	PAGE 19 / 73
	<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)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Ms. JULIE A PENNINGTON		Date of Receipt
Mailing Address 675 S Sled Run		<input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code Santa Claus IN 47579-6217	Transaction ID: PR76874038581	
FEC ID number of contributing federal political committee. <input type="text"/> C		Amount of Each Receipt this Period <input type="text"/> 30.00
Name of Employer Beverly Healthcare	Occupation Executive Director	P/R Deduction (\$15.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 300.00	

B. Full Name (Last, First, Middle Initial) Mr. MICHAEL J MARCHANT		Date of Receipt
Mailing Address 356 Board Rd.		<input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code Mahtomedi MN 55115-1490	Transaction ID: PR76874078581	
FEC ID number of contributing federal political committee. <input type="text"/> C		Amount of Each Receipt this Period <input type="text"/> 30.00
Name of Employer Lake Ridge Health Care Center	Occupation Ed Sr	P/R Deduction (\$15.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 300.00	

C. Full Name (Last, First, Middle Initial) Mr. DONALD L CRIGER		Date of Receipt
Mailing Address 772 W Farm Road 68		<input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code Springfield MO 65803-8219	Transaction ID: PR76874098581	
FEC ID number of contributing federal political committee. <input type="text"/> C		Amount of Each Receipt this Period <input type="text"/> 30.00
Name of Employer Beverly Healthcare	Occupation Ed Sr	P/R Deduction (\$15.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 285.00	

SUBTOTAL of Receipts This Page (optional) ▶	<input type="text"/> 90.00
TOTAL This Period (last page this line number only) ▶	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 20 / 73
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Mrs. CHARLENE R HALE		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2810 Twin Valley Rd		Transaction ID: PR76874138581	
City State Zip Code Troy MO 63379-4937	Amount of Each Receipt this Period _____ 30.00		
FEC ID number of contributing federal political committee. C		P/R Deduction (\$15.00 Bi-Weekly)	
Name of Employer Gamma Road Lodge	Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00		

Full Name (Last, First, Middle Initial) B. Mrs. CANDACE J PARKER		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 10062 Highway Nn		Transaction ID: PR76874178581	
City State Zip Code Mexico MO 65265-5754	Amount of Each Receipt this Period _____ 30.00		
FEC ID number of contributing federal political committee. C		P/R Deduction (\$15.00 Bi-Weekly)	
Name of Employer Pin Oaks Nursing Center	Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00		

Full Name (Last, First, Middle Initial) C. Mr. JAMES O STROM		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2326 Ansley Park Ln		Transaction ID: PR76874288581	
City State Zip Code Southaven MS 38671-8396	Amount of Each Receipt this Period _____ 30.00		
FEC ID number of contributing federal political committee. C		P/R Deduction (\$15.00 Bi-Weekly)	
Name of Employer Southaven Health Care Center	Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 285.00		

SUBTOTAL of Receipts This Page (optional) ▶	_____ 90.00
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: (check only one)	PAGE 21 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Ms. JOHN KUKLA		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 107 Stanley Dr		Transaction ID: PR76874308581	
City State Zip Code Galax VA 24333-2214	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer BLUE RIDGE HEALTH & REHAB	Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 775.00		
		P/R Deduction (\$50.00 Bi-Weekly)	

B. Full Name (Last, First, Middle Initial) Mrs. KATHLEEN A ZACARIAS		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 1417 Eisner Ave. # 1h		Transaction ID: PR76874378581	
City State Zip Code Sheboygan WI 53083-2960	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Greendale Health & Rehab Center	Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
		P/R Deduction (\$15.00 Bi-Weekly)	

C. Full Name (Last, First, Middle Initial) Mr. MICHAEL S EWING		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 2828 Fernor Street Apt 307		Transaction ID: PR76874398581	
City State Zip Code Allentown PA 18103-7114	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Beverly Enterprises, Inc.	Occupation Dir Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00		
		P/R Deduction (\$50.00 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional) ▶	230.00
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: (check only one)	PAGE 22 / 73
	<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)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Mrs. PATRICIA A POWELL		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 937 Mays Branch Rd		Transaction ID: PR76874408581	
City State Zip Code Van Buren AR 72956-8477	Amount of Each Receipt this Period _____ 100.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer Beverly Enterprises, Inc. Occupation Dir Hr	Aggregate Year-to-Date ▼ _____ 810.00		P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Ms. MELISSA J KARRON		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 9401 Darlington Cir.		Transaction ID: PR76874448581	
City State Zip Code Fort Smith AR 72908-9284	Amount of Each Receipt this Period _____ 75.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer Beverly Enterprises, Inc. Occupation Dir Real Estate Serv	Aggregate Year-to-Date ▼ _____ 712.50		P/R Deduction (\$37.50 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mr. JOHN R GROBMYER		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 916 South 26th		Transaction ID: PR76874488581	
City State Zip Code Fort Smith AR 72901-4116	Amount of Each Receipt this Period _____ 200.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer Beverly Enterprises, Inc. Occupation VP Construction Serv	Aggregate Year-to-Date ▼ _____ 1900.00		P/R Deduction (\$100.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	_____ 375.00
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: (check only one)	PAGE 23 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. THOMAS R MARSH		Date of Receipt M M / D D / Y Y Y Y Y		
Mailing Address 8812 Copper Oaks		Transaction ID: PR76874498581		
City State Zip Code Fort Smith AR 72903-4337	Amount of Each Receipt this Period 100.00		P/R Deduction (\$50.00 Bi-Weekly)	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 950.00		
Name of Employer Beverly Enterprises, Inc.	Occupation Sr Dir Intern Audit			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				

Full Name (Last, First, Middle Initial) B. Mr. DWIGHT C KOURI		Date of Receipt M M / D D / Y Y Y Y Y		
Mailing Address 10600 Inverness St		Transaction ID: PR76874508581		
City State Zip Code Fort Smith AR 72908-0703	Amount of Each Receipt this Period 200.00		P/R Deduction (\$100.00 Bi-Weekly)	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1900.00		
Name of Employer Beverly Enterprises, Inc.	Occupation VP Corp Development			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				

Full Name (Last, First, Middle Initial) C. Mr. KEITH R JEWELL		Date of Receipt M M / D D / Y Y Y Y Y		
Mailing Address 2704 South 97th Cir		Transaction ID: PR76874518581		
City State Zip Code Fort Smith AR 72903-5361	Amount of Each Receipt this Period 100.00		P/R Deduction (\$50.00 Bi-Weekly)	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 950.00		
Name of Employer Beverly Enterprises, Inc.	Occupation Counsel Gen Labor&em			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				

SUBTOTAL of Receipts This Page (optional) ▶	400.00
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: (check only one)	PAGE 24 / 73
	<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)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Ms. DEBRA J PIERCE

Mailing Address 6510 Fieldcrest Dr

City State Zip Code
Fort Smith AR 72916-8980

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation Attorney Sr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 712.50

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76874558581

Amount of Each Receipt this Period
75.00

P/R Deduction (\$37.50 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Mrs. CARLA F PRICE

Mailing Address P.O. Box 5543

City State Zip Code
Fort Smith AR 72913-5543

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation Dir Financial Contro

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1162.50

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76874608581

Amount of Each Receipt this Period
75.00

P/R Deduction (\$37.50 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Mr. JOHN G ARENA

Mailing Address 6305 Hilltop

City State Zip Code
Van Buren AR 72956-7606

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation Counsel Gen-Corp Law

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76874618581

Amount of Each Receipt this Period
100.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶ **250.00**

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 25 / 73
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. RICHARD D SKELLY		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 200 Freeferry Ldng		Transaction ID: PR76874648581		
City State Zip Code Fort Smith AR 72903-2248	Amount of Each Receipt this Period _____ 300.00		P/R Deduction (\$150.00 Bi-Weekly)	
FEC ID number of contributing federal political committee. C _____		Aggregate Year-to-Date ▼ _____ 2850.00		
Name of Employer Beverly Enterprises, Inc.	Occupation Svp Treasurer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				

Full Name (Last, First, Middle Initial) B. Mr. LARRY N JOSEPH		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 7200 Highland Park Drive		Transaction ID: PR76874678581		
City State Zip Code Fort Smith AR 72916-9355	Amount of Each Receipt this Period _____ 200.00		P/R Deduction (\$100.00 Bi-Weekly)	
FEC ID number of contributing federal political committee. C _____		Aggregate Year-to-Date ▼ _____ 1800.00		
Name of Employer Beverly Enterprises, Inc.	Occupation VP Risk Mgmt			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				

Full Name (Last, First, Middle Initial) C. Mr. NORMAN M MORTON		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 2912 Cedar Valley Dr		Transaction ID: PR76874688581		
City State Zip Code Greenwood AR 72936-6256	Amount of Each Receipt this Period _____ 200.00		P/R Deduction (\$100.00 Bi-Weekly)	
FEC ID number of contributing federal political committee. C _____		Aggregate Year-to-Date ▼ _____ 1900.00		
Name of Employer Beverly Enterprises, Inc.	Occupation VP Financial Plan &			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				

SUBTOTAL of Receipts This Page (optional) ▶	_____ 700.00
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: (check only one)	PAGE 26 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. STACEY P ROGERS		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76874708581
Mailing Address 5205 Rosewood Cir		Amount of Each Receipt this Period 75.00
City State Zip Code Fort Smith AR 72903-0775	FEC ID number of contributing federal political committee. C	P/R Deduction (\$37.50 Bi-Weekly)
Name of Employer Beverly Enterprises, Inc. Occupation Dir Financial Planni	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 712.50		

Full Name (Last, First, Middle Initial) B. Mr. HAROLD A PRICE		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76874728581
Mailing Address 8 Eagle View Court		Amount of Each Receipt this Period 300.00
City State Zip Code Park City UT 84060-6864	FEC ID number of contributing federal political committee. C	P/R Deduction (\$150.00 Bi-Weekly)
Name of Employer Beverly Enterprises, Inc. Occupation Svp Sales	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 2400.00		

Full Name (Last, First, Middle Initial) C. Mrs. LINDA S KELLEY		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76874758581
Mailing Address 6107 Industrial Park Road		Amount of Each Receipt this Period 100.00
City State Zip Code Van Buren AR 72956-8484	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer Beverly Enterprises, Inc. Occupation Dir Qm Hotline	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 950.00		

SUBTOTAL of Receipts This Page (optional)	475.00
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 27 / 73
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Ms. PATRICE K ACOSTA		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 1701 Crestview Lane		Transaction ID: PR76874788581		
City State Zip Code Fort Smith AR 72903-2867	Amount of Each Receipt this Period _____ 300.00		P/R Deduction (\$150.00 Bi-Weekly)	
FEC ID number of contributing federal political committee. C _____		Aggregate Year-to-Date ▼ _____ 2850.00		
Name of Employer Beverly Enterprises, Inc.	Occupation Svp Quality of Life			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				

Full Name (Last, First, Middle Initial) B. Mr. DEBRA GOUX		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 1812 Hillsboro Lane		Transaction ID: PR76874838581		
City State Zip Code Fort Smith AR 72908-0990	Amount of Each Receipt this Period _____ 100.00		P/R Deduction (\$50.00 Bi-Weekly)	
FEC ID number of contributing federal political committee. C _____		Aggregate Year-to-Date ▼ _____ 887.50		
Name of Employer Beverly Enterprises, Inc.	Occupation Dir It Cust Service			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				

Full Name (Last, First, Middle Initial) C. Mr. JOHN M BOYD		Date of Receipt M M / D D / Y Y Y Y Y _____		
Mailing Address 7005 Red Pine		Transaction ID: PR76874858581		
City State Zip Code Fort Smith AR 72916-8814	Amount of Each Receipt this Period _____ 75.00		P/R Deduction (\$37.50 Bi-Weekly)	
FEC ID number of contributing federal political committee. C _____		Aggregate Year-to-Date ▼ _____ 712.50		
Name of Employer Beverly Enterprises, Inc.	Occupation Dir Finance			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				

SUBTOTAL of Receipts This Page (optional) ▶	_____ 475.00
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: (check only one)	PAGE 28 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. PAUL W GOSS

Mailing Address 35 Divizis Drive

City State Zip Code
Bella Vista AR 72714-3820

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation VP Government Relati

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2850.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76874868581

Amount of Each Receipt this Period
300.00

P/R Deduction (\$150.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Mr. JACK A MACDONALD

Mailing Address 9644 Georgetown Pike

City State Zip Code
Great Falls VA 22066-2638

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation Svp Government Relat

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2850.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76874878581

Amount of Each Receipt this Period
300.00

P/R Deduction (\$150.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Mr. ALEXANDER GRIMA

Mailing Address 6807 Highland Park Dr

City State Zip Code
Fort Smith AR 72919-0001

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation VP Hr Services Busin

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76874898581

Amount of Each Receipt this Period
100.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	700.00
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: (check only one)	PAGE 29 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. WILLIAM J MEENAN

Mailing Address 1877 Bair Road

City Punxsutawney State PA Zip Code 15767-3268

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation VP Operations Reg

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 675.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76874968581

Amount of Each Receipt this Period
75.00

P/R Deduction (\$37.50 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Mr. DAVID M MILLS

Mailing Address 7424 Inland Lane N.

City Maple Grove State MN Zip Code 55311-3955

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation VP Operations Reg

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76875048581

Amount of Each Receipt this Period
200.00

P/R Deduction (\$100.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Mr. KEVIN M ROBERTS

Mailing Address 2304 Dundee Drive

City Fort Smith State AR Zip Code 72908-0935

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation VP Finance Operation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2850.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76875068581

Amount of Each Receipt this Period
300.00

P/R Deduction (\$150.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	575.00
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: (check only one)	PAGE 30 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mrs. LAURIE G HOOKS

Mailing Address 10401 Queensbury Way

City State Zip Code
Fort Smith AR 72908-9186

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation Dir Sr Clinical Info

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76875098581

Amount of Each Receipt this Period
100.00

P/R Deduction (\$50.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Mrs. REBECCA B BODIE

Mailing Address 7055 Weybridge Dr

City State Zip Code
Cumming GA 30040-7654

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation Dir Sr Clinical Reim

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76875128581

Amount of Each Receipt this Period
100.00

P/R Deduction (\$50.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Mrs. KIMBERLY A DAVENPORT

Mailing Address 1620 Hill Top Drive

City State Zip Code
Greenwood AR 72936-6720

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation Spec Regional Clinic

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76875138581

Amount of Each Receipt this Period
30.00

P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	230.00
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: (check only one)	PAGE 31 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Ms. MICHELE L SELF		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 5945 Evanston Ave		Transaction ID: PR76875158581	
City Indianapolis	State IN	Zip Code 46220-2441	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Beverly Enterprises, Inc.	Occupation Dir Sr Reg Clinical		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 950.00		
		P/R Deduction (\$50.00 Bi-Weekly)	

B. Full Name (Last, First, Middle Initial) Ms. MARY BETH C NEWELL		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1734 No Fuller Ave #201		Transaction ID: PR76875188581	
City Los Angeles	State CA	Zip Code 90046-3036	Amount of Each Receipt this Period _____ 75.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Beverly Enterprises, Inc.	Occupation Spec Regional Clinic		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 712.50		
		P/R Deduction (\$37.50 Bi-Weekly)	

C. Full Name (Last, First, Middle Initial) Mrs. LORNA J ELLIS		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 19 Dyer Street		Transaction ID: PR76875218581	
City Fort Bragg	State NC	Zip Code 28307-2037	Amount of Each Receipt this Period _____ 30.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Beverly Enterprises, Inc.	Occupation Dir, Sold Facility a		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 255.00		
		P/R Deduction (\$15.00 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 205.00
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: (check only one)	PAGE 32 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. BRETT A ANTHONY

Mailing Address 110 Millbrook Road

City Hendersonville State TN Zip Code 37075-5513

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation Dir Application Serv

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76875248581

Amount of Each Receipt this Period
30.00

P/R Deduction (\$15.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Mr. DAVID A VALCIK

Mailing Address 3803 Webb Way

City Fort Smith State AR Zip Code 72916-8076

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation VP Tech Serv

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2850.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76875268581

Amount of Each Receipt this Period
300.00

P/R Deduction (\$150.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Mr. EDWIN T MCCOWAN

Mailing Address 3509 Coventry Lane

City Fort Smith State AR Zip Code 72908-0730

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation Dir It Administratio

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 712.50

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76875278581

Amount of Each Receipt this Period
75.00

P/R Deduction (\$37.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	405.00
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 33 / 73
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Mrs. VERONA F DRENCKPOHL Mailing Address 1101 Sunny Hill Pl City Hackett State AR Zip Code 72937-4435 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76875288581 Amount of Each Receipt this Period 100.00
Name of Employer Beverly Enterprises, Inc. Occupation Dir Application Serv Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00	P/R Deduction (\$50.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial) Mr. MICHAEL L CROWDER Mailing Address 10212 Meandering Way City Fort Smith State AR Zip Code 72903-5740 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76875298581 Amount of Each Receipt this Period 100.00
Name of Employer Beverly Enterprises, Inc. Occupation Architect Chief Appl Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00	P/R Deduction (\$50.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial) Diane L Griffin Mailing Address 4 Haven Hill Circle City Fort Smith State AR Zip Code 72901-6840 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76875308581 Amount of Each Receipt this Period 75.00
Name of Employer Beverly Enterprises, Inc. Occupation Dir It Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 775.00	P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	275.00
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: (check only one)	PAGE 34 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. JOHN B BARNETT

Mailing Address 10504 Inverness St

City State Zip Code
Fort Smith AR 72908-0701

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation Dir Network Systems

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76875318581

Amount of Each Receipt this Period
100.00

P/R Deduction (\$50.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Mr. JOSEPH R ASHLEY

Mailing Address 3220 S. 56 Street

City State Zip Code
Fort Smith AR 72903-4718

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation Dir It Data Security

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 712.50

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76875328581

Amount of Each Receipt this Period
75.00

P/R Deduction (\$37.50 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Mr. FRED J MEYERRIECKS

Mailing Address 8900 Royal Ridge Dr

City State Zip Code
Fort Smith AR 72903-7036

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation Dir It Controls & Co

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76875338581

Amount of Each Receipt this Period
100.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	275.00
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 35 / 73 (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)
 Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Ms. CHARLES E GOUX Mailing Address 1812 Hillsboro Ln City State Zip Code Fort Smith AR 72908-0990 FEC ID number of contributing federal political committee. C Name of Employer: Beverly Enterprises, Inc. Occupation: Dir It Controls & Co Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 775.00	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table> Transaction ID: PR76875358581 Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>75.00</td> </tr> </table> P/R Deduction (\$37.50 Bi-Weekly)	M	M	/	D	D	/	Y	Y	Y	Y		75.00
M	M	/	D	D	/	Y	Y	Y	Y				
	75.00												

B. Full Name (Last, First, Middle Initial) Ms. KATHERINE PONDER Mailing Address 965 Ridgeway Road City State Zip Code Altoona AL 35952-6151 FEC ID number of contributing federal political committee. C Name of Employer: Oneonta Healthcare & Rehab Center Occupation: Executive Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 285.00	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table> Transaction ID: PR76875368581 Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>30.00</td> </tr> </table> P/R Deduction (\$15.00 Bi-Weekly)	M	M	/	D	D	/	Y	Y	Y	Y		30.00
M	M	/	D	D	/	Y	Y	Y	Y				
	30.00												

C. Full Name (Last, First, Middle Initial) Mrs. RACHEL A MOLT Mailing Address 4353 E Lincoln Ave City State Zip Code Newburgh IN 47630-9463 FEC ID number of contributing federal political committee. C Name of Employer: Brentwood Nursing & Rehab Center Occupation: Executive Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table> Transaction ID: PR76875438581 Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td style="width: 80%;"></td> <td>30.00</td> </tr> </table> P/R Deduction (\$15.00 Bi-Weekly)	M	M	/	D	D	/	Y	Y	Y	Y		30.00
M	M	/	D	D	/	Y	Y	Y	Y				
	30.00												

SUBTOTAL of Receipts This Page (optional) ▶	<table border="1" style="width: 100%;"> <tr> <td style="text-align: right;">135.00</td> </tr> </table>	135.00
135.00		
TOTAL This Period (last page this line number only) ▶	<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="text-align: right;"></td> </tr> </table>	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. DONALD R DILL		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address Po Box 222		Transaction ID: PR76875568581	
City Bethalto	State IL	Zip Code 62010-0222	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C			
Name of Employer Blue Fountain Manor	Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
		P/R Deduction (\$15.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) B. Mr. LEO J LACROIX		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address W 1267 N. Blue Sprg Lk Dr		Transaction ID: PR76876108581	
City Palmyra	State WI	Zip Code 53156	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer AEGIS THERAPIES	Occupation VP of Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00		
		P/R Deduction (\$50.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) C. Mr. JEFFREY P BOLING		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 8412 Danbridge Way		Transaction ID: PR76876118581	
City Westerville	State OH	Zip Code 43082-7974	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer ASERACARE HOSPICE	Occupation VP of Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00		
		P/R Deduction (\$50.00 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional) ▶	230.00
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: (check only one)	PAGE 37 / 73
	<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)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Mrs. CINDY H SUSIENKA		Date of Receipt
Mailing Address 1201 S.Waterville Rd		<input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code Oconomowoc WI 53066-9259		Transaction ID: PR76876138581
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px;">300.00</div>
Name of Employer Aegis/Homecare Services	Occupation President Rehabilita	P/R Deduction (\$150.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px;">3000.00</div>	

Full Name (Last, First, Middle Initial) B. Mrs. ELIZABETH A GRIMA		Date of Receipt
Mailing Address 5611 Whitney Cir		<input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code Fort Smith AR 72916-8917		Transaction ID: PR76876158581
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px;">100.00</div>
Name of Employer Beverly Enterprises, Inc.	Occupation VP It	P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px;">950.00</div>	

Full Name (Last, First, Middle Initial) C. Mr. Jason Harms		Date of Receipt
Mailing Address 1708 Woodwind Way		<input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code Van Buren AR 72956-2043		Transaction ID: PR76876168581
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px;">100.00</div>
Name of Employer Aegis/Homecare Services	Occupation VP Finance	P/R Deduction (\$50.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px;">950.00</div>	

SUBTOTAL of Receipts This Page (optional) ▶	<div style="border: 1px solid black; padding: 5px; text-align: right;">500.00</div>
TOTAL This Period (last page this line number only) ▶	<div style="border: 1px solid black; padding: 5px; text-align: right;"> </div>

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Mrs. SUSAN E ALMON MATANGOS		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 100 Windsor Dr		Transaction ID: PR76876208581	
City Ephrata	State PA	Zip Code 17522-2651	Amount of Each Receipt this Period _____ 75.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer AEGIS THERAPIES		Occupation Dir Clinical Service	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ _____ 712.50	
		P/R Deduction (\$37.50 Bi-Weekly)	

Full Name (Last, First, Middle Initial) B. Mr. WILLIAM P GOULDING		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 5901 South 76th St		Transaction ID: PR76876228581	
City Greendale	State WI	Zip Code 53129-2234	Amount of Each Receipt this Period _____ 75.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer AEGIS THERAPIES		Occupation Dir Denials Manageme	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ _____ 712.50	
		P/R Deduction (\$37.50 Bi-Weekly)	

Full Name (Last, First, Middle Initial) C. Mrs. ANDREA MCELROY		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 7244 Dover Hill Ct		Transaction ID: PR76876268581	
City Franklin	State WI	Zip Code 53132-9053	Amount of Each Receipt this Period _____ 30.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Beverly Enterprises, Inc.		Occupation Dir Sr Compliance Sy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ _____ 285.00	
		P/R Deduction (\$15.00 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 180.00
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: (check only one)	PAGE 39 / 73
	<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)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mrs. DONNA G DIEDRICH

Mailing Address 104 Marshall Street

City State Zip Code
Fort Mill SC 29715-1816

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AEGIS THERAPIES Dir Clinical Service

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 712.50

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76876288581

Amount of Each Receipt this Period
75.00

P/R Deduction (\$37.50 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Ms. SANDRA CLIFTON

Mailing Address 414 Castlestone Lane

City State Zip Code
Matthews NC 28104-7239

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Beverly Enterprises, Inc. VP Operations

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 950.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76876308581

Amount of Each Receipt this Period
100.00

P/R Deduction (\$50.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Mrs. Martha Schram

Mailing Address 613 Morningstar Lane

City State Zip Code
Madison WI 53704-2217

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Beverly Enterprises, Inc. President Aegis

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2850.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76876318581

Amount of Each Receipt this Period
300.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	475.00
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: (check only one)	PAGE 40 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Ms. JUDIC PRITCHARD

Mailing Address 236 Kensington Lane

City State Zip Code
Alabaster AL 35007-3904

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation Dir Area

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76876358581

Amount of Each Receipt this Period
100.00

P/R Deduction (\$50.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Mr. DONALD B BIGGS

Mailing Address 357 E Star

City State Zip Code
Seward NE 68434-3002

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation Dir Area

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76876368581

Amount of Each Receipt this Period
100.00

P/R Deduction (\$50.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Mr. JACK A DIVETA

Mailing Address 361 Radebaugh Dr

City State Zip Code
Longwood FL 32779-4526

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation VP Regional

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76876378581

Amount of Each Receipt this Period
100.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	300.00
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: (check only one)	PAGE 41 / 73
	<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)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Mrs. ALICIA A TAYLOR		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 6746 Northfield Dr		Transaction ID: PR76876448581	
City State Zip Code Evansville IN 47711-1679	Amount of Each Receipt this Period _____ 75.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer Beverly Enterprises, Inc.	Occupation District Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 750.00	P/R Deduction (\$37.50 Bi-Weekly)	

Full Name (Last, First, Middle Initial) B. Mrs. TAMERA PAULK		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1778 Satilla Road		Transaction ID: PR76876488581	
City State Zip Code Wray GA 31798-3611	Amount of Each Receipt this Period _____ 75.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer Beverly Enterprises, Inc.	Occupation District Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 712.50	P/R Deduction (\$37.50 Bi-Weekly)	

Full Name (Last, First, Middle Initial) C. Mrs. VERA J GILES		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 5705 Shropshire Ct		Transaction ID: PR76876778581	
City State Zip Code Alexandria VA 22315-4026	Amount of Each Receipt this Period _____ 75.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer Beverly Enterprises, Inc.	Occupation District Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 712.50	P/R Deduction (\$37.50 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 225.00
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: (check only one)	PAGE 42 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Ms. KENDALL L TROUTMAN

Mailing Address Harbor Landing Drive
227

City State Zip Code
Mooreville NC 28117-9444

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation Dir Area

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76876878581

Amount of Each Receipt this Period
75.00

P/R Deduction (\$37.50 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Mrs. DAWN M ANDRESEN

Mailing Address 4406 Horner Drive

City State Zip Code
Watertown SD 57201-5477

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation District Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
380.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76877068581

Amount of Each Receipt this Period
40.00

P/R Deduction (\$20.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Mr. JOHN D GIAMBER

Mailing Address 3183 St. Andrews Dr

City State Zip Code
Chambersburg PA 17201-7056

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation Dir Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
712.50

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76877228581

Amount of Each Receipt this Period
75.00

P/R Deduction (\$37.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **190.00**

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: (check only one)	PAGE 43 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. STEVEN E ROBISON

Mailing Address 3160 Periwinkle Way

City State Zip Code
New Albany IN 47150-9581

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation Dir Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 675.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76877268581

Amount of Each Receipt this Period
75.00

P/R Deduction (\$37.50 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Mrs. DENISE F CURRY

Mailing Address 503 Vilsack Rd

City State Zip Code
Glenshaw PA 15116-1939

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation Dir Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76877298581

Amount of Each Receipt this Period
100.00

P/R Deduction (\$50.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Mr. MARTY D DAVIS

Mailing Address 2202 Harney Drive

City State Zip Code
Rapid City SD 57702-5154

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation Dir Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 675.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76877328581

Amount of Each Receipt this Period
75.00

P/R Deduction (\$37.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	250.00
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: (check only one)	PAGE 44 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Mr. ADAM E WHITEHILL		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76877338581
Mailing Address 977 Bridle Creek		Amount of Each Receipt this Period 100.00
City State Zip Code Jordan MN 55352	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer Beverly Enterprises, Inc.	Occupation Dir Reg Financial Op	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00	

B. Full Name (Last, First, Middle Initial) Mr. TIMOTHY L GROSHANS		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76877358581
Mailing Address 806 S A Road		Amount of Each Receipt this Period 100.00
City State Zip Code Doniphan NE 68832-2114	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer Beverly Enterprises, Inc.	Occupation Dir Sr Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

C. Full Name (Last, First, Middle Initial) Mrs. LESLIE C CAMPBELL		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76877368581
Mailing Address 2670 Pine Ridge		Amount of Each Receipt this Period 100.00
City State Zip Code Red Wing MN 55066-3979	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer Beverly Enterprises, Inc.	Occupation Dir Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

SUBTOTAL of Receipts This Page (optional) ▶	300.00
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: (check only one)	PAGE 45 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Mr. PAXTON L WIFFLER		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76877378581
Mailing Address 8600 Carriage Hill R		Amount of Each Receipt this Period 100.00
City State Zip Code Savage MN 55378-2343	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer Occupation Beverly Enterprises, Inc. Dir Sr Operations	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 900.00	

B. Full Name (Last, First, Middle Initial) Mr. JOHNNA K KUKLA		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76877398581
Mailing Address 3625 W Windsor Court		Amount of Each Receipt this Period 30.00
City State Zip Code La Porte IN 46350-8447	FEC ID number of contributing federal political committee. C	P/R Deduction (\$15.00 Bi-Weekly)
Name of Employer Occupation Beverly Enterprises, Inc. Dir Operations	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 445.00	

C. Full Name (Last, First, Middle Initial) Mr. JAMES W THURSTON		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76877408581
Mailing Address 1627 Pheasant Run		Amount of Each Receipt this Period 100.00
City State Zip Code Richmond IN 47374-7925	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer Occupation Beverly Enterprises, Inc. Dir Sr Operations	Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 900.00	

SUBTOTAL of Receipts This Page (optional) ▶	230.00
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: (check only one)	PAGE 46 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. JEFFREY A SCHUELLER		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76877428581
Mailing Address 1200 W Jefferson St		Amount of Each Receipt this Period 100.00
City Marshfield	State WI	Zip Code 54449-1297
FEC ID number of contributing federal political committee. C		P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer Beverly Enterprises, Inc.	Occupation Dir Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00	

Full Name (Last, First, Middle Initial) B. Mrs. SHELLY K SONTAG		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76877438581
Mailing Address 2495 Parkwood Dr		Amount of Each Receipt this Period 100.00
City Green Bay	State WI	Zip Code 54304-1913
FEC ID number of contributing federal political committee. C		P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer Beverly Enterprises, Inc.	Occupation Dir Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

Full Name (Last, First, Middle Initial) C. Mr. MARK A LONGENECKER		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76877478581
Mailing Address 25620 Open Ridge Ln		Amount of Each Receipt this Period 100.00
City Lebanon	State MO	Zip Code 65536-5703
FEC ID number of contributing federal political committee. C		P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer Beverly Enterprises, Inc.	Occupation Dir Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

SUBTOTAL of Receipts This Page (optional) ▶	300.00
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: (check only one)	PAGE 47 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mrs. MAUREEN P ROBERTS

Mailing Address 5044 Big Canyon Lane

City State Zip Code
Fair Oaks CA 95628-4101

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation Dir Reg Financial Op

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76877538581

Amount of Each Receipt this Period
100.00

P/R Deduction (\$50.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Mrs. AIMEE M PASTORE

Mailing Address 2408 Smith Dr. Sw

City State Zip Code
Loganville GA 30052-4208

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation Dir Reg Bus Offic

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 712.50

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76877558581

Amount of Each Receipt this Period
75.00

P/R Deduction (\$37.50 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Ms. FRANCES ABDOU

Mailing Address 644 Filbert Ct

City State Zip Code
Walnut Creek CA 94598-3817

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation Dir Reg Professional

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76877568581

Amount of Each Receipt this Period
100.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	275.00
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: (check only one)	PAGE 48 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. JOHN F BEGLEY

Mailing Address 33 Woodville Ave

City Milton State MA Zip Code 02186-4617

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation Dir Managing Hr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 712.50

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76877608581

Amount of Each Receipt this Period
75.00

P/R Deduction (\$37.50 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Ms. ANDREA J LUDINGTON

Mailing Address 320 St. John's Golf

City St Augustine State FL Zip Code 32092-1054

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation VP Sr Professional S

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76877638581

Amount of Each Receipt this Period
200.00

P/R Deduction (\$100.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Mr. JEFFREY S AIKEN

Mailing Address P O Box 141

City Mars State PA Zip Code 16046-0141

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation Dir Reg Financial Op

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 712.50

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76877658581

Amount of Each Receipt this Period
75.00

P/R Deduction (\$37.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	350.00
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: (check only one)	PAGE 49 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Ms. CINDY V KREIDER		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2999 State Route 304		Transaction ID: PR76877668581
City State Zip Code Winfield PA 17889-9330	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Beverly Enterprises, Inc.	Occupation Dir Reg Professional	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 950.00	P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. Mr. RALPH E CANNON		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 5101 Verona Road		Transaction ID: PR76877668581
City State Zip Code Verona PA 15147-3013	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Beverly Enterprises, Inc.	Occupation Dir Managing Hr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 950.00	P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. Ms. PAMELA J HANSEN		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1726 Aurora Street		Transaction ID: PR76877718581
City State Zip Code Middleton WI 53562-3149	Amount of Each Receipt this Period _____ 75.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Beverly Enterprises, Inc.	Occupation Dir Managing Hr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 712.50	P/R Deduction (\$37.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 275.00
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: (check only one)	PAGE 50 / 73
	<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)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Ms. GAIL GEISENHOF		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 2072 Highwood		Transaction ID: PR76877728581	
City State Zip Code Saint Paul MN 55119-5604	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Beverly Enterprises, Inc.	Occupation Dir Reg Professional		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00		P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. Ms. MARY E HAWKINS		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 8804 Brittany Drive		Transaction ID: PR76877738581	
City State Zip Code Louisville KY 40220-5416	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Beverly Enterprises, Inc.	Occupation Dir Reg Bus Office O		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00		P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. Ms. LITA HABUSH		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 1006 Providence Dr.		Transaction ID: PR76877758581	
City State Zip Code Shakopee MN 55379-4461	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Beverly Enterprises, Inc.	Occupation Dir Reg Business		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 712.50		P/R Deduction (\$37.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	275.00
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: (check only one)	PAGE 51 / 73
	<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)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Mrs. DON GRIFFIN		Date of Receipt
Mailing Address N6740 Closs Rd		<input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code Cambria WI 53923-9756	Transaction ID: PR76877768581	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Occupation Beverly Enterprises, Inc. Dir Professional Ser	P/R Deduction (\$50.00 Bi-Weekly)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 737.50	

B. Full Name (Last, First, Middle Initial) Ms. TIMOTHY J DETARY		Date of Receipt
Mailing Address 201 Pebble Beach		<input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code Hot Springs AR 71913-7737	Transaction ID: PR76877818581	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer Occupation Beverly Enterprises, Inc. Dir Reg Bus Office O	P/R Deduction (\$37.50 Bi-Weekly)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 712.50	

C. Full Name (Last, First, Middle Initial) Ms. Melinda N Coley		Date of Receipt
Mailing Address 6109 Fallon Drive		<input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code Virginia Bch VA 23464-2148	Transaction ID: PR76877858581	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Occupation Beverly Enterprises, Inc. Dir Reg Financial Op	P/R Deduction (\$50.00 Bi-Weekly)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00	

SUBTOTAL of Receipts This Page (optional) ▶	<input type="text"/> 275.00
TOTAL This Period (last page this line number only) ▶	<input type="text"/>

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. JAMES A GLENSKY		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1909 Rannoch Trace		Transaction ID: PR76877868581	
City State Zip Code Fort Smith AR 72908-0974	Amount of Each Receipt this Period _____ 100.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer Ceres Strategies Med Services	Occupation Dir Operations - Cer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 950.00		P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. Mr. CHRIS W ROUSSOS		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 8647 Crown Pointe Dr		Transaction ID: PR76877878581	
City State Zip Code Hackett AR 72919	Amount of Each Receipt this Period _____ 300.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer ASERACARE HOSPICE	Occupation President of Aseraca		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 2850.00		P/R Deduction (\$150.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. Ms. AMY M KNAPP		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 450 E. Rawhide Ave.		Transaction ID: PR76878138581	
City State Zip Code Gilbert AZ 85296-2314	Amount of Each Receipt this Period _____ 100.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer Beverly Enterprises, Inc.	Occupation Dir Public Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 950.00		P/R Deduction (\$50.00 Bi-Weekly)

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 73
	<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)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Ms. NICOLE KUMMALA		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 810 Oakwood Drive		Transaction ID: PR76878218581	
City State Zip Code Anoka MN 55303-2814	Amount of Each Receipt this Period _____ 30.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer Excelsior Nursing Home	Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00		P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. Mrs. CAREY HUEBERT		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 2433 60th Street Nw		Transaction ID: PR76878238581	
City State Zip Code Rochester MN 55901-3707	Amount of Each Receipt this Period _____ 30.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer Whitewater Health Care Center	Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00		P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. Mrs. RELENA L MYERS		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address Route 3 Box 123		Transaction ID: PR76878438581	
City State Zip Code Broken Bow NE 68822-9527	Amount of Each Receipt this Period _____ 30.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer Sargent Nursing Home	Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00		P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 90.00
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: (check only one)	PAGE 54 / 73
	<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)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Mrs. JEAN A LOGUE		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 415 S. Mcgee Drive		Transaction ID: PR76878628581	
City State Zip Code Sallisaw OK 74955-5245	Amount of Each Receipt this Period _____ 100.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer Beverly Enterprises, Inc.	Occupation Dir Employee/Labor R		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 950.00		P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. Mrs. JEANNINE H POWELL		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 813 Madison Ave		Transaction ID: PR76878648581	
City State Zip Code Morgantown WV 26501-6723	Amount of Each Receipt this Period _____ 30.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer Beverly Enterprises, Inc.	Occupation Director Regional Ph		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 425.00		P/R Deduction (\$15.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. Mr. MARK P RICHARDS		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 9424 Lakeside Trail		Transaction ID: PR76878908581	
City State Zip Code Champlin MN 55316-2612	Amount of Each Receipt this Period _____ 75.00		
FEC ID number of contributing federal political committee. C _____			
Name of Employer AEGIS THERAPIES	Occupation Dir National Clinica		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 712.50		P/R Deduction (\$37.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 205.00
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: (check only one)	PAGE 55 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Mrs. DAWN WHITCOMB Mailing Address 1390 E Crescent Way City Chandler State AZ Zip Code 85249-3146 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76878988581 Amount of Each Receipt this Period 75.00 P/R Deduction (\$37.50 Bi-Weekly)
Name of Employer Beverly Enterprises, Inc. Occupation Dir Area Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

B. Full Name (Last, First, Middle Initial) Ms. CYNTHIA L KASSON Mailing Address 8162 Jewel Lane N City Maple Grove State MN Zip Code 55311-1776 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76879188581 Amount of Each Receipt this Period 100.00 P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer Beverly Enterprises, Inc. Occupation VP Regional Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00	

C. Full Name (Last, First, Middle Initial) Ms. STEPHANIE J FIDLER Mailing Address 206 Independence Ct. City Blandon State PA Zip Code 19510-9676 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76879258581 Amount of Each Receipt this Period 30.00 P/R Deduction (\$15.00 Bi-Weekly)
Name of Employer Beverly Enterprises, Inc. Occupation Dir Professional Ser Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

SUBTOTAL of Receipts This Page (optional)	205.00
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: (check only one)	PAGE 56 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Mrs. KATHY D PRINCE		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 1435 Riverview Dr		Transaction ID: PR76879268581
City State Zip Code Lewisport KY 42351-2434	Amount of Each Receipt this Period _____ 75.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Beverly Enterprises, Inc.	Occupation Dir Professional Ser	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 712.50	P/R Deduction (\$37.50 Bi-Weekly)

Full Name (Last, First, Middle Initial) B. Mrs. GAY L BATE		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 2300 Sw 13th Street		Transaction ID: PR76879278581
City State Zip Code Lincoln NE 68522-1907	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Beverly Enterprises, Inc.	Occupation Dir Professional Ser	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 950.00	P/R Deduction (\$50.00 Bi-Weekly)

Full Name (Last, First, Middle Initial) C. Ms. KAUSAUNDRA R STEWART		Date of Receipt M M / D D / Y Y Y Y Y _____
Mailing Address 4108 Rainey Road		Transaction ID: PR76879288581
City State Zip Code Jackson MS 39212-5326	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C _____		
Name of Employer Beverly Enterprises, Inc.	Occupation Dir Professional Ser	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 950.00	P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 275.00
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 57 / 73						
	(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

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)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Mr. PENNY D WALKER		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76879368581	
Mailing Address 4309 Old Chismville Road		Amount of Each Receipt this Period 30.00	
City Greenwood	State AR	Zip Code 72936-6929	P/R Deduction (\$15.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 397.50	
Name of Employer Beverly Enterprises, Inc.	Occupation Counsel Sr		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) Mrs. ANGELA B SADER		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76879388581	
Mailing Address 325 S. Grand Mere Ct		Amount of Each Receipt this Period 30.00	
City Wichita	State KS	Zip Code 67230-6404	P/R Deduction (\$15.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 285.00	
Name of Employer Beverly Enterprises, Inc.	Occupation Nurse Staff Rn		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) Mrs. DIANE R LANDRATH-SCHMIDT		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76879398581	
Mailing Address 11012 Rene Street		Amount of Each Receipt this Period 100.00	
City Lenexa	State KS	Zip Code 66215-2040	P/R Deduction (\$50.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 950.00	
Name of Employer Beverly Enterprises, Inc.	Occupation Dir Reg Professional		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	160.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. LEONARD QUIMBY

Mailing Address 319 Brewster Rd

City State Zip Code
New Castle PA 16102-3005

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76879418581

Amount of Each Receipt this Period
30.00

P/R Deduction (\$15.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
Mr. SCOTT KING

Mailing Address 600 N Washington

City State Zip Code
De Soto MO 63020-1152

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Healthcare Occupation Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76879468581

Amount of Each Receipt this Period
30.00

P/R Deduction (\$15.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
Mr. TROY MORRIS

Mailing Address 294 Joe Ln

City State Zip Code
Bismarck AR 71929-6720

FEC ID number of contributing federal political committee. **C**

Name of Employer Vantage Healthcare Corporation Occupation Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR76879478581

Amount of Each Receipt this Period
30.00

P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► **90.00**

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: (check only one)	PAGE 59 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Mr. GREGORY N DAVIS Mailing Address 378 Barnsley Dr City Evans State GA Zip Code 30809-8235 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76879608581 Amount of Each Receipt this Period 30.00
Name of Employer Beverly Manor Occupation Executive Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	P/R Deduction (\$15.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial) Mrs. RENAY A ADKINS Mailing Address 10012 Spruce Grove Drive City Louisville State KY Zip Code 40299-3380 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76879648581 Amount of Each Receipt this Period 30.00
Name of Employer Mount Holly Nursing Center Occupation Executive Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$15.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial) Ms. SUSAN E LUDY Mailing Address 3826 Buckingham Park City Jefferson Cty State MO Zip Code 65109-5338 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76879718581 Amount of Each Receipt this Period 30.00
Name of Employer Beverly Healthcare Occupation Executive Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	90.00
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: (check only one)	PAGE 60 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Ms. ERIN M MCANDREW Mailing Address 117 Lincoln Avenue. City North Versailles State PA Zip Code 15137-1854 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76880058581 Amount of Each Receipt this Period 30.00
Name of Employer Beverly Enterprises, Inc. Occupation Dir Reg Business Dev Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	P/R Deduction (\$15.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial) Ms. DAWN S MOUNT Mailing Address 739 Greenwood Drive City Chesterton State IN Zip Code 46304-2912 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76880068581 Amount of Each Receipt this Period 30.00
Name of Employer Beverly Healthcare Occupation Executive Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$15.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial) JOHN HUGHES Mailing Address 1694 Carey Place City Charleston State WV Zip Code 25314-2511 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76880088581 Amount of Each Receipt this Period 30.00
Name of Employer Beverly Enterprises, Inc. Occupation Dir Reg Environmental Services Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	▶	90.00
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: (check only one)	PAGE 61 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. RICKY L KUDER		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 400 Walker Bay Blvd		Transaction ID: PR76880098581	
City Walker	State MN	Zip Code 56484-2157	Amount of Each Receipt this Period 2.31
FEC ID number of contributing federal political committee. C			
Name of Employer Beverly Enterprises, Inc.	Occupation DNS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 221.55		
		P/R Deduction (\$2.31 Bi-Weekly)	

Full Name (Last, First, Middle Initial) B. Mr. MICHAEL R KARICHER		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 11301 Maple Park Dr		Transaction ID: PR76880148581	
City Fort Smith	State AR	Zip Code 72916-9362	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C			
Name of Employer Beverly Enterprises, Inc.	Occupation Dir Compensation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00		
		P/R Deduction (\$15.00 Bi-Weekly)	

Full Name (Last, First, Middle Initial) C. Ms. REBECCA S GARCIA		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 1002 Summit .		Transaction ID: PR76880458581	
City Collinsville	State IL	Zip Code 62234-3713	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C			
Name of Employer Park Haven Care Center	Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
		P/R Deduction (\$15.00 Bi-Weekly)	

SUBTOTAL of Receipts This Page (optional) ▶	62.31
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: (check only one)	PAGE 62 / 73
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Mrs. KIMBERLY Y DIXON		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76880688581	
Mailing Address 5661 Brendonway Pkwy		Amount of Each Receipt this Period 30.00	
City Indianapolis	State IN	Zip Code 46226-7200	P/R Deduction (\$15.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 300.00	
Name of Employer Southlake Nursing & Rehab Center	Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) Mr. STEPHEN ALBRECHT		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76880888581	
Mailing Address 578 N Audubon Rd		Amount of Each Receipt this Period 100.00	
City Indianapolis	State IN	Zip Code 46219-5835	P/R Deduction (\$50.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 950.00	
Name of Employer Beverly Enterprises, Inc.	Occupation Dir Reg Government R		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) Ms. NANCY L HUBLAR		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR76880908581	
Mailing Address 10511 Buckeye Trace		Amount of Each Receipt this Period 100.00	
City Goshen	State KY	Zip Code 40026-9756	P/R Deduction (\$50.00 Bi-Weekly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 950.00	
Name of Employer Beverly Enterprises, Inc.	Occupation Dir Reg Government R		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	230.00
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 63 / 73	
	(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)
Beverly Enterprises, Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Mr. PAUL D WORTHEN

Mailing Address Po Box 1214

City Hixson State TN Zip Code 37343-5214

FEC ID number of contributing federal political committee. **C**

Name of Employer Beverly Enterprises, Inc. Occupation Chief Privacy Office

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2850.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---

Transaction ID: PR76881128581

Amount of Each Receipt this Period

300.00

P/R Deduction (\$150.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	300.00
TOTAL This Period (last page this line number only)	14672.31

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 64 / 73

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. SunTrust Bank		Transaction ID: 17266860 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 7 / 2 0 0 6
Mailing Address P. O. Box 85024		Amount of Each Disbursement this Period 30.00
City Richmond State VA Zip Code 23285-5024	Bank Service Fees	
Purpose of Disbursement Bank Service Fees Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. SunTrust Bank		Transaction ID: 17267034 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 6
Mailing Address P. O. Box 85024		Amount of Each Disbursement this Period 30.00
City Richmond State VA Zip Code 23285-5024	Bank Service Fees	
Purpose of Disbursement Bank Service Fees Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. SunTrust Bank		Transaction ID: 17267067 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 6
Mailing Address P. O. Box 85024		Amount of Each Disbursement this Period 30.00
City Richmond State VA Zip Code 23285-5024	Bank Service Fees	
Purpose of Disbursement Bank Service Fees Candidate Name		001 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	90.00
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 65 / 73

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. SunTrust Bank		Transaction ID: 17267173 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address P. O. Box 85024		Amount of Each Disbursement this Period 30.00
City Richmond State VA Zip Code 23285-5024	Purpose of Disbursement Bank Service Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Bank Service Fees
Category/Type 001		

Full Name (Last, First, Middle Initial) B. SunTrust Bank		Transaction ID: 17267100 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address P. O. Box 85024		Amount of Each Disbursement this Period 5.00
City Richmond State VA Zip Code 23285-5024	Purpose of Disbursement Bank Service Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Bank Service Fees
Category/Type 001		

SUBTOTAL of Disbursements This Page (optional) ►

35.00

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

125.00

**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)

<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)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Berry for Congress		Transaction ID: 16976926 Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2006
Mailing Address 236 Massachusetts Ave, NE Suite 508		Amount of Each Disbursement this Period 1500.00
City Washington State DC Zip Code 20002	Contribution	
Purpose of Disbursement Contribution		Category/ Type 011
Candidate Name Marion Berry		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 1	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of Roy Blunt		Transaction ID: 16920188 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address PO Box 50100		Amount of Each Disbursement this Period 2500.00
City Springfield State MO Zip Code 65805	Contribution	
Purpose of Disbursement Contribution		Category/ Type 011
Candidate Name Roy Blunt		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Boozman for Congress		Transaction ID: 17073192 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2006
Mailing Address P.O. Box 671		Amount of Each Disbursement this Period 5000.00
City Rogers State AR Zip Code 72757	Contribution	
Purpose of Disbursement Contribution		Category/ Type 011
Candidate Name John Boozman		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 3	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	9000.00
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)

<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)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Campaign for America's Future		Transaction ID: 16920030 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address 175 S. West Temple Suite 650		Amount of Each Disbursement this Period 2000.00
City Salt Lake City State UT Zip Code 84101		
Purpose of Disbursement Contribution	011 Category/ Type	Contribution
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Democratic Party of Wisconsin Federal Account		Transaction ID: 16920194 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address 222 W. Washington Avenue, Suite 15		Amount of Each Disbursement this Period 5000.00
City Madison State WI Zip Code 53703		
Purpose of Disbursement Contribution	011 Category/ Type	Contribution
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Glacier PAC		Transaction ID: 17073190 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 818 Connecticut Ave, NW Suite 1100		Amount of Each Disbursement this Period 3000.00
City Washington State DC Zip Code 20006		
Purpose of Disbursement Contribution	011 Category/ Type	Contribution
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	10000.00
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)

<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)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Nancy Johnson for Congress		Transaction ID: 16935337 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address P.O. Box 1986		Amount of Each Disbursement this Period 1000.00 Contribution
City New Britain State CT Zip Code 06050	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Nancy Johnson		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 5	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. LEE PAC - Leadership Encouraging Excellence PAC		Transaction ID: 16935174 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address Attn: Todd Meredith 2875 Towerview Road, Suite 1000		Amount of Each Disbursement this Period 4000.00 Contribution
City Herndon State VA Zip Code 20171	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. LINC PAC		Transaction ID: 17073174 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address 818 Constitution Ave, NW Suite 1100		Amount of Each Disbursement this Period 2500.00 Contribution
City Washington State DC Zip Code 20006	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	7500.00
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)

<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)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Mccrery For Congress Committee		Transaction ID: 16978099 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6
Mailing Address Post Office Box 52956		Amount of Each Disbursement this Period 2000.00
City Shreveport State LA Zip Code 71135	Contribution	
Purpose of Disbursement Contribution Candidate Name Rep. Jim McCrery Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 4		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Category/Type 011		

Full Name (Last, First, Middle Initial) B. Lot of People for Dave Obey		Transaction ID: 16920350 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address PO Box 1322		Amount of Each Disbursement this Period 500.00
City Wausau State WI Zip Code 54402	Contribution	
Purpose of Disbursement Contribution Candidate Name David Obey Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 7		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Category/Type 011		

Full Name (Last, First, Middle Initial) C. Our Congress PAC		Transaction ID: 16979236 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6
Mailing Address PO Box 344		Amount of Each Disbursement this Period 2500.00
City Prescott State AR Zip Code 71857	Contribution	
Purpose of Disbursement Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Category/Type 011		

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)

<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)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Priority PAC		Transaction ID: 16980097 Date of Disbursement MM / DD / YYYY 09 / 21 / 2006
Mailing Address 420 C Street, NE		Amount of Each Disbursement this Period 3000.00
City Washington State DC Zip Code 20002	Purpose of Disbursement Contribution Candidate Name Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution

Full Name (Last, First, Middle Initial) B. Mike Ross for Congress		Transaction ID: 16979729 Date of Disbursement MM / DD / YYYY 09 / 25 / 2006
Mailing Address PO Box 360		Amount of Each Disbursement this Period 5000.00
City Prescott State AR Zip Code 71857	Purpose of Disbursement Contribution Candidate Name Michael Ross Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 4	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution

Full Name (Last, First, Middle Initial) C. Allyson Schwartz For Congress		Transaction ID: 16978753 Date of Disbursement MM / DD / YYYY 09 / 25 / 2006
Mailing Address P.O. Box 45706		Amount of Each Disbursement this Period 1500.00
City Philadelphia State PA Zip Code 19149	Purpose of Disbursement Contribution Candidate Name Rep. Allyson Schwartz Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 13	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution

SUBTOTAL of Disbursements This Page (optional) ▶	9500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)

<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)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Snowe For Senate		Transaction ID: 16920020 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address P.O. Box 2006		Amount of Each Disbursement this Period 1000.00 Contribution
City Portland State ME Zip Code 04104	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Sen. Olympia Snowe		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 1	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Snyder for Congress Campaign Committee		Transaction ID: 16934705 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 6
Mailing Address PO Box 250998		Amount of Each Disbursement this Period 5000.00 Contribution
City Little Rock State AR Zip Code 72225	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Vic Snyder		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 2	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. VINE PAC - Victory in November Election PAC		Transaction ID: 17073352 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 607 14th Street NW, Suite 800		Amount of Each Disbursement this Period 5000.00 Contribution
City Washington State DC Zip Code 20005	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	11000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Weldon Victory Committee		Transaction ID: 16920001 Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2006	
Mailing Address P. O. Box 1992		Amount of Each Disbursement this Period 2500.00	
City Media	State PA	Zip Code 19063	Contribution
Purpose of Disbursement Contribution		011 Category/ Type	
Candidate Name Rep. Curt Weldon			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: PA District: 7			

SUBTOTAL of Disbursements This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	54500.00

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)
Beverly Enterprises, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Hansen for Senate Committee		Transaction ID: 16954553 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 6
Mailing Address 648 13th St. SW		Amount of Each Disbursement this Period 250.00
City Huron State SD Zip Code 57350	Purpose of Disbursement Tom Hansen, STATE SENATE SD Candidate Name SD Sen. Tom Hansen Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SD District: 22 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		Tom Hansen, STATE SENATE SD Category/Type 011

Full Name (Last, First, Middle Initial) B. Kentucky Democratic House Caucus		Transaction ID: 16919905 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address P.O. Box 688		Amount of Each Disbursement this Period 2500.00
City Sandy Hook State KY Zip Code 41171	Purpose of Disbursement Contribution to State Party Committee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
		Contribution to State Party Committee Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ►

2750.00

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

2750.00