

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
Advocat Inc. Political Action Committee

ADDRESS (number and street) 1621 Galleria Blvd
 Check if different than previously reported. (ACC)
Brentwood TN 37027

2. **FEC IDENTIFICATION NUMBER** C00421735
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 01 01 2007 through 06 30 2007

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 Will Council

Signature of Treasurer Electronically Filed by Will Council Date 01 10 2008

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

Office Use Only								
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FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
 Advocat Inc. Political Action Committee

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		9934.21
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	9934.21									
(c) Total Receipts (from Line 19)	30530.50	30530.50								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	40464.71	40464.71								
7. Total Disbursements (from Line 31)	28307.69	28307.69								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	12157.02	12157.02								
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
Advocat Inc. Political Action Committee

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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	28342.79	28342.79
(i) Itemized (use Schedule A)	2187.71	2187.71
(ii) Unitemized	30530.50	30530.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	30530.50	30530.50
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))	30530.50	30530.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	30530.50	30530.50

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.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	28250.00	28250.00
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	57.69	57.69
(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))	57.69	57.69
29. Other Disbursements.....	0.00	0.00
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))..	28307.69	28307.69
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	28307.69	28307.69

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)	30530.50	30530.50
34. Total Contribution Refunds (from Line 28(d))	57.69	57.69
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	30472.81	30472.81
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 31
	<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)
 Advocat Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Benita Adkins

Mailing Address Rt 557

City State Zip Code
 Sandy Hook KY 41171

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

Name of Employer Occupation
 Diversicare Leasing Corp Administrator - Elliot Nursing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 342.55

Date of Receipt: 01 / 03 / 2007
Transaction ID: 70310.C1083
 Amount of Each Receipt this Period: 342.55
 Receipt
 Payroll Deduction: (26.35- /Pay Period)

B. Full Name (Last, First, Middle Initial)
Angel Alvarez

Mailing Address 1013 Doriel St

City State Zip Code
 Villa Hills KY 41017-3747

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

Name of Employer Occupation
 Diversicare Leasing Corp Administrator - Wurtland

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 346.94

Date of Receipt: 01 / 03 / 2007
Transaction ID: 70310.C1087
 Amount of Each Receipt this Period: 346.94
 Receipt
 Payroll Deduction: (31.54- /Pay Period)

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

Mailing Address 12 Lakeview Ln

City State Zip Code
 Cabot AR 72023-9117

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

Name of Employer Occupation
 Diversicare Management Service Regional VP, AR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 654.94

Date of Receipt: 01 / 12 / 2007
Transaction ID: 70310.C1113
 Amount of Each Receipt this Period: 654.94
 Receipt
 Payroll Deduction: (50.38- /Pay Period)

SUBTOTAL of Receipts This Page (optional) ► 1344.43

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 31
	<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)
Advocat Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial) April Bateman		Date of Receipt MM / DD / YYYY 01 / 17 / 2007
Mailing Address 3948 Highway 358		Transaction ID: 70310.C1074
City Paragould	State AR	Zip Code 72450-9690
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Diversicare Leasing Corp	Occupation Administrator - Walnut Ridge	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	Payroll Deduction: (25.00- /Pay Period)

B.

Full Name (Last, First, Middle Initial) Barry Bell		Date of Receipt MM / DD / YYYY 01 / 12 / 2007
Mailing Address 6107 Co Rd 122		Transaction ID: 70310.C1114
City Pisgah	State AL	Zip Code 35765
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 463.45
Name of Employer Diversicare Management Service	Occupation Executive Director, AL & TN	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 463.45	Payroll Deduction: (35.65- /Pay Period)

C.

Full Name (Last, First, Middle Initial) Bobbie Bice		Date of Receipt MM / DD / YYYY 01 / 10 / 2007
Mailing Address 1310 Dove Ln		Transaction ID: 70310.C1067
City Lockhart	State TX	Zip Code 78644-2459
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 321.88
Name of Employer Diversicare Leasing Corp	Occupation Dir of Nursing - Chisolm	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 321.88	Payroll Deduction: (24.76- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	1035.33
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 31
	<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)
Advocat Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Elizabeth Carroll	Date of Receipt MM / DD / YYYY 01 / 03 / 2007
	Mailing Address 5024 Inglewood Ct	Transaction ID: 70310.C1085
	City State Zip Code Nashville TN 37216-1424	Amount of Each Receipt this Period 366.34
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (28.18- /Pay Period)
Name of Employer Diversicare Leasing Corp	Occupation Administrator - Mayfield Rehab	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 366.34	

B.	Full Name (Last, First, Middle Initial) Tavve Carter	Date of Receipt MM / DD / YYYY 01 / 12 / 2007
	Mailing Address 7509 Old Nashville Hwy	Transaction ID: 70310.C1115
	City State Zip Code Murfressbor TN 37129	Amount of Each Receipt this Period 531.83
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (40.91- /Pay Period)
Name of Employer Advocat	Occupation Senior Financial Analys	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 531.83	

C.	Full Name (Last, First, Middle Initial) Brian Cole	Date of Receipt MM / DD / YYYY 01 / 12 / 2007
	Mailing Address 1056 Windtree Trce	Transaction ID: 70310.C1116
	City State Zip Code Mt Juliet TN 37122-1333	Amount of Each Receipt this Period 338.47
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (30.77- /Pay Period)
Name of Employer Advocat Inc.	Occupation IT Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 338.47	

SUBTOTAL of Receipts This Page (optional)	1236.64
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 31
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Advocat Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Maryann Cook

Mailing Address 155 E Foster Ct

City State Zip Code
Lecanto FL 34461-8107

FEC ID number of contributing federal political committee. C

Name of Employer: Advocat Inc. Occupation: FL Regional VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 627.51

Date of Receipt 01 / 12 / 2007
Transaction ID: 70310.C1117

Amount of Each Receipt this Period 627.51

Receipt

Payroll Deduction: (48.27- /Pay Period)

B. Full Name (Last, First, Middle Initial)
William Council III

Mailing Address 5161 Ravens Glen

City State Zip Code
Nashville TN 37211

FEC ID number of contributing federal political committee. C

Name of Employer: Advocat Inc. Occupation: President & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2307.72

Date of Receipt 01 / 12 / 2007
Transaction ID: 70310.C1118

Amount of Each Receipt this Period 2307.72

Receipt

Payroll Deduction: (192.3- 1/Pay Period)

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

Mailing Address 1122 Oakmeadow

City State Zip Code
Paragould AR 72450

FEC ID number of contributing federal political committee. C

Name of Employer: Diversicare Leasing Corp Occupation: Administrator - Newport

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 334.75

Date of Receipt 01 / 03 / 2007
Transaction ID: 70310.C1070

Amount of Each Receipt this Period 334.75

Receipt

Payroll Deduction: (25.75- /Pay Period)

SUBTOTAL of Receipts This Page (optional) 3269.98

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 31
	<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)
 Advocat Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Peggy Everman	Date of Receipt MM / DD / YYYY 01 / 03 / 2007
	Mailing Address PO Box 820	Transaction ID: 70310.C1088
	City State Zip Code Grayson KY 41143-0820	Amount of Each Receipt this Period 312.00
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (24.00- /Pay Period)
Name of Employer Diversicare Leasing Corp	Occupation Director of Nursing - Wurtland	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 312.00	

B.	Full Name (Last, First, Middle Initial) Marilyn Files	Date of Receipt MM / DD / YYYY 01 / 03 / 2007
	Mailing Address 710 Chester St	Transaction ID: 70310.C1079
	City State Zip Code Des Arc AR 72040-9306	Amount of Each Receipt this Period 348.14
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (26.78- /Pay Period)
Name of Employer Diversicare Leasing Corp	Occupation Administrator - Des Arc	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 348.14	

C.	Full Name (Last, First, Middle Initial) Samantha Gibson	Date of Receipt MM / DD / YYYY 01 / 10 / 2007
	Mailing Address 331 Fire Field Rd	Transaction ID: 70310.C1066
	City State Zip Code New Braunfels TX 78130-8217	Amount of Each Receipt this Period 325.00
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (25.00- /Pay Period)
Name of Employer Diversicare Leasing Corp	Occupation Director of Nursing - Hillcres	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional)	▶	985.14
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 31
	<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)
 Advocat Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
 Vicki Hampton

Mailing Address PO Box 123

City State Zip Code
 Delaplaine AR 72425-0123

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

Name of Employer Occupation
 Diversicare Leasing Corp Director of Nursing - Walnut R

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 292.63

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 0 3 / 2 0 0 7

Transaction ID: 70310.C1075

Amount of Each Receipt this Period
 292.63

Receipt

Payroll Deduction: (22.51- /Pay Period)

B. Full Name (Last, First, Middle Initial)
 Edward Heenan

Mailing Address 2005 Boxwood Dr

City State Zip Code
 Franklin TN 37069-6908

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

Name of Employer Occupation
 Advocat Inc. Training & Educat

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 387.79

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 1 2 / 2 0 0 7

Transaction ID: 70310.C1119

Amount of Each Receipt this Period
 387.79

Receipt

Payroll Deduction: (29.83- /Pay Period)

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

Mailing Address 801 Brownstone Ct

City State Zip Code
 Nolensville TN 37135-9720

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

Name of Employer Occupation
 Advocat Inc. VP, Human Resources

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 798.20

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 1 / 1 2 / 2 0 0 7

Transaction ID: 70310.C1120

Amount of Each Receipt this Period
 798.20

Receipt

Payroll Deduction: (61.40- /Pay Period)

SUBTOTAL of Receipts This Page (optional) ► **1478.62**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 31
	<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)
Advocat Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Danielle Higdon		Date of Receipt MM / DD / YYYY 01 / 03 / 2007
	Mailing Address 377 Hutchens Rd		Transaction ID: 70310.C1086
	City Martin	State TN	Zip Code 38237-5377
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 301.99
	Name of Employer Diversicare Leasing Corp	Occupation Director of Nursing - Martin	Receipt Payroll Deduction: (23.23- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 301.99	

B.	Full Name (Last, First, Middle Initial) Janice Horton		Date of Receipt MM / DD / YYYY 01 / 10 / 2007
	Mailing Address 4527 SE Highway 70		Transaction ID: 70310.C1065
	City Arcadia	State FL	Zip Code 34266-7787
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 358.28
	Name of Employer Diversicare Leasing Corp	Occupation Administrator - Hardee Manor	Receipt Payroll Deduction: (27.56- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 358.28	

C.	Full Name (Last, First, Middle Initial) Robin Windham Jones		Date of Receipt MM / DD / YYYY 01 / 12 / 2007
	Mailing Address 4674 Riverbend Rd		Transaction ID: 70310.C1121
	City Trussville	State AL	Zip Code 35173-3506
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 749.97
	Name of Employer Diversicare Management Service	Occupation Regional VP, AL & TN	Receipt Payroll Deduction: (57.69- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 749.97	

SUBTOTAL of Receipts This Page (optional)	▶	1410.24
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 31
	<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)
Advocat Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Randi Kiphen	Date of Receipt MM / DD / YYYY 01 / 03 / 2007
	Mailing Address 10880 Gallia Pike Rd	Transaction ID: 70310.C1089
	City State Zip Code Wheelersburg OH 45694-8443	Amount of Each Receipt this Period 428.48
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (32.96- /Pay Period)
Name of Employer Diversicare Leasing Corp	Occupation Administrator - Best Care Nurs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 428.48	

B.	Full Name (Last, First, Middle Initial) Steve Levato	Date of Receipt MM / DD / YYYY 01 / 03 / 2007
	Mailing Address 306 Cliffwood Loop	Transaction ID: 70310.C1081
	City State Zip Code Hot Springs Natl P AR 71913-8735	Amount of Each Receipt this Period 393.77
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (30.29- /Pay Period)
Name of Employer Diversicare Leasing Corp	Occupation Administrator - Garland	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 393.77	

C.	Full Name (Last, First, Middle Initial) Lorey Lowe	Date of Receipt MM / DD / YYYY 01 / 12 / 2007
	Mailing Address P O Box 1813	Transaction ID: 70310.C1124
	City State Zip Code Olive Hill KY 41164	Amount of Each Receipt this Period 410.54
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (31.58- /Pay Period)
Name of Employer Advocat	Occupation KY Reg Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 410.54	

SUBTOTAL of Receipts This Page (optional)	1232.79
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 31
	<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)
Advocat Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Jimmie Manning	Date of Receipt MM / DD / YYYY 01 / 12 / 2007
	Mailing Address 149 Riverwood Dr	Transaction ID: 70310.C1126
	City State Zip Code Franklin TN 37069-4181	Amount of Each Receipt this Period 652.21
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (50.17- /Pay Period)
Name of Employer Diversicare Management Service	Occupation VP, Purchasing & Property Mana	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 652.21	

B.	Full Name (Last, First, Middle Initial) Lisa Martens	Date of Receipt MM / DD / YYYY 01 / 12 / 2007
	Mailing Address 1339 Buckingham Cir	Transaction ID: 70310.C1127
	City State Zip Code Franklin TN 37064-5420	Amount of Each Receipt this Period 684.19
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (52.63- /Pay Period)
Name of Employer Advocat Inc.	Occupation VP, Quality Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 684.19	

C.	Full Name (Last, First, Middle Initial) Wanda Meade	Date of Receipt MM / DD / YYYY 01 / 12 / 2007
	Mailing Address 15939 Lone Oak Dr	Transaction ID: 70310.C1128
	City State Zip Code Catlettsburg KY 41129-9290	Amount of Each Receipt this Period 749.97
	FEC ID number of contributing federal political committee. C	Receipt Payroll Deduction: (57.69- /Pay Period)
Name of Employer Diversicare Management Service	Occupation Regional VP, KY-OH-WV	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 749.97	

SUBTOTAL of Receipts This Page (optional)	2086.37
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 31

(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)
Advocat Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Kelli Montelongo

Mailing Address 421 Big Timber Drive

City State Zip Code
Temple TX 76502

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

Name of Employer Occupation
Advocat Business Office Coord - N. TX

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 264.55

Date of Receipt
MM / DD / YYYY
01 / 12 / 2007

Transaction ID: 70310.C1129

Amount of Each Receipt this Period
264.55

Receipt
Payroll Deduction: (20.35- /Pay Period)

B.

Full Name (Last, First, Middle Initial)
Daniel Montgomery

Mailing Address 202 Tyne Dr

City State Zip Code
Franklin TN 37064-0748

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

Name of Employer Occupation
Diversicare Management Se-vice VP and CIO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
04 / 05 / 2007

Transaction ID: 70416.C1462

Amount of Each Receipt this Period
2000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Nita Morris

Mailing Address P O Box 275

City State Zip Code
Norman AR 71960

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

Name of Employer Occupation
Advocat Cont. Quality Improv. Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 384.28

Date of Receipt
MM / DD / YYYY
01 / 12 / 2007

Transaction ID: 70310.C1130

Amount of Each Receipt this Period
384.28

Receipt
Payroll Deduction: (29.56- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

2648.83

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 31
(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
							17

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NAME OF COMMITTEE (In Full)
Advocat Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Brenda Mosbey

Mailing Address P O Box 170

City State Zip Code
Olive Hill KY 41164

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

Name of Employer Occupat
Advocat Minimum DataSets Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.40

Date of Receipt
MM / DD / YYYY
01 / 12 / 2007

Transaction ID: 70310.C1131

Amount of Each Receipt this Period
270.40

Receipt

Payroll Deduction: (20.80- /Pay Period)

B.

Full Name (Last, First, Middle Initial)
Treieva Oakley

Mailing Address 901 Camellia Rd

City State Zip Code
Oneonta AL 35121

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

Name of Employer Occupat
Advocat Inc. Corp Training Coord

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 51.98

Date of Receipt
MM / DD / YYYY
01 / 26 / 2007

Transaction ID: 70310.C1169

Amount of Each Receipt this Period
51.98

Receipt

Payroll Deduction: (51.98- /Pay Period)

C.

Full Name (Last, First, Middle Initial)
Treieva Oakley

Mailing Address 901 Camellia Rd

City State Zip Code
Oneonta AL 35121

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

Name of Employer Occupat
Advocat Inc. Corp Training Coord

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 337.87

Date of Receipt
MM / DD / YYYY
02 / 09 / 2007

Transaction ID: 70310.C1236

Amount of Each Receipt this Period
285.89

Receipt

Payroll Deduction: (25.99- /Pay Period)

SUBTOTAL of Receipts This Page (optional) ▶ **608.27**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 31
(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)
Advocat Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Robert Rice

Mailing Address 7147 Riverfront Dr

City Nashville State TN Zip Code 37221

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

Name of Employer Diversicare Management Service Occupation VP, Corporate Compliance & Ris

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date 541.58

Date of Receipt 01 / 12 / 2007

Transaction ID: 70310.C1132

Amount of Each Receipt this Period 541.58

Receipt

Payroll Deduction: (41.66- /Pay Period)

B.

Full Name (Last, First, Middle Initial)
Glynn Riddle

Mailing Address 1203 Signature Ct

City Franklin State TN Zip Code 37064-9663

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

Name of Employer Advocat Inc. Occupation Executive VP & CFO

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date 307.70

Date of Receipt 01 / 12 / 2007

Transaction ID: 70310.C1134

Amount of Each Receipt this Period 307.70

Receipt

Payroll Deduction: (153.8- 5/Pay Period)

C.

Full Name (Last, First, Middle Initial)
Glynn Riddle

Mailing Address 1203 Signature Ct

City Franklin State TN Zip Code 37064-9663

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

Name of Employer Advocat Inc. Occupation Executive VP & CFO

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date 576.93

Date of Receipt 02 / 09 / 2007

Transaction ID: 70310.C1240

Amount of Each Receipt this Period 269.23

Receipt

Payroll Deduction: (269.2- 3/Pay Period)

SUBTOTAL of Receipts This Page (optional) **1118.51**

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 31
(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)
Advocat Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial) Glynn Riddle		Date of Receipt <table border="1" style="font-size: small;"> <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> <tr><td>0</td><td>2</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		2	3		2	0	0	7													
Mailing Address 1203 Signature Ct		Transaction ID: 70320.C1302																				
City	State	Zip Code																				
Franklin	TN	37064-9663																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>1730.79</td></tr> </table>	1730.79																			
1730.79																						
Name of Employer Advocat Inc.	Occupation Executive VP & CFO	Receipt																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>2307.72</td></tr> </table>	2307.72	Payroll Deduction: (192.3- 1/Pay Period)																			
2307.72																						

B.

Full Name (Last, First, Middle Initial) Larry Roberson		Date of Receipt <table border="1" style="font-size: small;"> <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> <tr><td>0</td><td>1</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	0		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		1	0		2	0	0	7													
Mailing Address 805 Merritt Dr		Transaction ID: 70310.C1068																				
City	State	Zip Code																				
Lockhart	TX	78644-3335																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>323.04</td></tr> </table>	323.04																			
323.04																						
Name of Employer Diversicare Leasing Corp	Occupation Administrator - Chisolm Trail	Receipt																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>323.04</td></tr> </table>	323.04	Payroll Deduction: (26.92- /Pay Period)																			
323.04																						

C.

Full Name (Last, First, Middle Initial) Larry Roberson		Date of Receipt <table border="1" style="font-size: small;"> <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> <tr><td>0</td><td>6</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		2	7		2	0	0	7													
Mailing Address 805 Merritt Dr		Transaction ID: 70725.C1884																				
City	State	Zip Code																				
Lockhart	TX	78644-3335																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>27.73</td></tr> </table>	27.73																			
27.73																						
Name of Employer Diversicare Leasing Corp	Occupation Administrator - Chisolm Trail	Receipt																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>350.77</td></tr> </table>	350.77	Payroll Deduction: (27.73- /Pay Period)																			
350.77																						

SUBTOTAL of Receipts This Page (optional)	<table border="1" style="width: 100%;"> <tr><td>2081.56</td></tr> </table>	2081.56
2081.56		
TOTAL This Period (last page this line number only)	<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td></tr> </table>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 31
	(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)
Advocat Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Donald Smith		Date of Receipt
	Mailing Address 3217 Nolen Ln		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 1 / 1 2 / 2 0 0 7
	City	State	Zip Code
	Franklin	TN	37064-6222
	FEC ID number of contributing federal political committee. C		Transaction ID: 70310.C1137
Name of Employer Advocat Inc.		Occupation Programmer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 340.89	<input type="text"/> 340.89
			Receipt
			Payroll Deduction: (30.99- /Pay Period)

B.	Full Name (Last, First, Middle Initial) Kenneth Smith		Date of Receipt
	Mailing Address 4909 Walnut Hills Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 1 / 1 2 / 2 0 0 7
	City	State	Zip Code
	Louisville	KY	40299-1044
	FEC ID number of contributing federal political committee. C		Transaction ID: 70310.C1138
Name of Employer Advocat Inc.		Occupation Reg Director, HR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 494.00	<input type="text"/> 494.00
			Receipt
			Payroll Deduction: (38.00- /Pay Period)

C.	Full Name (Last, First, Middle Initial) Anna Sorrell		Date of Receipt
	Mailing Address 3519 Wolf Creek Rd		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 1 / 1 2 / 2 0 0 7
	City	State	Zip Code
	Huntington	WV	25704-9175
	FEC ID number of contributing federal political committee. C		Transaction ID: 70310.C1139
Name of Employer Advocat Inc.		Occupation Business Office Coord - KY Reg	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 396.11	<input type="text"/> 396.11
			Receipt
			Payroll Deduction: (30.47- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1231.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 20 / 31
	(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)
Advocat Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Kathie Sullivan		Date of Receipt MM / DD / YYYY 01 / 12 / 2007
	Mailing Address 2469 AR 115		Transaction ID: 70310.C1140
	City Smithville	State AR	Zip Code 72466
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 361.79
	Name of Employer Advocat Inc.	Occupation Cont. Quality Improv. Director	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 361.79	Payroll Deduction: (27.83- /Pay Period)

B.	Full Name (Last, First, Middle Initial) Liese Thornton		Date of Receipt MM / DD / YYYY 01 / 12 / 2007
	Mailing Address 2149 west hwy 84		Transaction ID: 70310.C1141
	City Amity	State AR	Zip Code 71921
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 221.91
	Name of Employer Advocat Inc.	Occupation AR Marketing	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 221.91	Payroll Deduction: (17.07- /Pay Period)

C.	Full Name (Last, First, Middle Initial) E Kim Tirronen		Date of Receipt MM / DD / YYYY 01 / 12 / 2007
	Mailing Address 16701 Richloam Ln		Transaction ID: 70310.C1142
	City Spring Hill	State FL	Zip Code 34610-1657
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 464.10
	Name of Employer Advocat Inc.	Occupation Resident Assesment Instru. Dir	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 464.10	Payroll Deduction: (35.70- /Pay Period)

SUBTOTAL of Receipts This Page (optional)	▶	1047.80
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 21 / 31
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Advocat Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial)
Kimberly Toney
Mailing Address 139 Lock Ln
City Alum Creek State WV Zip Code 25003-9066
FEC ID number of contributing federal political committee. **C**
Name of Employer Advocat Inc. Occupation Administrator - Boone Nursing
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 382.46
Date of Receipt 01 / 03 / 2007
Transaction ID: 70310.C1078
Amount of Each Receipt this Period 382.46
Receipt
Payroll Deduction: (29.42- /Pay Period)

B. Full Name (Last, First, Middle Initial)
Raymond Tyler
Mailing Address 1400 Vintage Cir
City Franklin State TN Zip Code 37064-9697
FEC ID number of contributing federal political committee. **C**
Name of Employer Advocat Inc. Occupation Executive VP & COO
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.03
Date of Receipt 01 / 12 / 2007
Transaction ID: 70310.C1144
Amount of Each Receipt this Period 2500.03
Receipt
Payroll Deduction: (192.3- 1/Pay Period)

C. Full Name (Last, First, Middle Initial)
Roger Walls
Mailing Address P O Box 572
City Falkville State AL Zip Code 35622
FEC ID number of contributing federal political committee. **C**
Name of Employer Advocat Occupation Business Office Coord - AL Reg
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00
Date of Receipt 01 / 12 / 2007
Transaction ID: 70310.C1146
Amount of Each Receipt this Period 325.00
Receipt
Payroll Deduction: (25.00- /Pay Period)

SUBTOTAL of Receipts This Page (optional) ► 3207.49
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 31
	<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)
Advocat Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Terena Walton	Date of Receipt MM / DD / YYYY 01 / 12 / 2007
	Mailing Address 21 Cottonwood Ln	Transaction ID: 70310.C1147
	City State Zip Code Dyersburg TN 38024-6548	Amount of Each Receipt this Period 507.72
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Advocat Inc.	Occupation VP, Marketing	Payroll Deduction: (42.31- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 507.72	

B.	Full Name (Last, First, Middle Initial) Matthew Weishaar	Date of Receipt MM / DD / YYYY 01 / 12 / 2007
	Mailing Address 376 Sandcastle Road	Transaction ID: 70310.C1148
	City State Zip Code Franklin TN 37069	Amount of Each Receipt this Period 655.59
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Advocat	Occupation VP Fin & Controll	Payroll Deduction: (50.43- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 655.59	

C.	Full Name (Last, First, Middle Initial) Charles Wheeler	Date of Receipt MM / DD / YYYY 01 / 03 / 2007
	Mailing Address PO Box 32144	Transaction ID: 70310.C1076
	City State Zip Code Knoxville TN 37930-2144	Amount of Each Receipt this Period 444.47
	FEC ID number of contributing federal political committee. C	Receipt
Name of Employer Diversicare Leasing Corp	Occupation Administrator - Briarcliff Hea	Payroll Deduction: (34.19- /Pay Period)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 444.47	

SUBTOTAL of Receipts This Page (optional)	▶	1607.78
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 31

(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)
Advocat Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Chyra Worthington

Mailing Address 1723 Royal Oaks Dr

City State Zip Code
Malvern AR 72104-5752

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

Name of Employer Occupation
Diversicare Leasing Corp Administrator - Sheridan

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 312.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 3 / 2 0 0 7

Transaction ID: 70310.C1072

Amount of Each Receipt this Period

312.00

Receipt

Payroll Deduction: (24.00- /Pay Period)

B.

Full Name (Last, First, Middle Initial)
Samuel Wright

Mailing Address 7863 Highway 828

City State Zip Code
Louisa KY 41230-5525

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

Name of Employer Occupation
Diversicare Leasing Corp Administrator - Carter Nursing

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.01

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 3 / 2 0 0 7

Transaction ID: 70310.C1082

Amount of Each Receipt this Period

400.01

Receipt

Payroll Deduction: (30.77- /Pay Period)

SUBTOTAL of Receipts This Page (optional)

712.01

TOTAL This Period (last page this line number only)

28342.79

**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 24 / 31

<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)
Advocat Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) AMERIPAC	Transaction ID: 70621.E83 Date of Disbursement 05 / 23 / 2007
	Mailing Address 499 S Capitol St SW	Amount of Each Disbursement this Period 2500.00
	City Washington State DC Zip Code 20003-4047	
	Purpose of Disbursement PAC TO HOYER LDR PAC	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Other	PAC TO HOYER LDR PAC

B.	Full Name (Last, First, Middle Initial) Friends of Max Baucus	Transaction ID: 70621.E78 Date of Disbursement 04 / 25 / 2007
	Mailing Address 818 Connecticut Avenue NW Ste. 110	Amount of Each Disbursement this Period 3000.00
	City Washington State DC Zip Code 20006-	
	Purpose of Disbursement 04/25/07 EVENT; MT-US SENATE	Category/Type
	Candidate Name MAX BAUCUS	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MT District: 00	04/25/07 EVENT; MT-US SEN-ATE

C.	Full Name (Last, First, Middle Initial) Friends of Max Baucus	Transaction ID: 70621.E79 Date of Disbursement 04 / 25 / 2007
	Mailing Address 818 Connecticut Avenue NW Ste. 110	Amount of Each Disbursement this Period 500.00
	City Washington State DC Zip Code 20006-	
	Purpose of Disbursement 04/25/07 EVENT; MT-US SENATE	Category/Type
	Candidate Name MAX BAUCUS	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MT District: 00	04/25/07 EVENT; MT-US SEN-ATE

SUBTOTAL of Disbursements This Page (optional)	6000.00
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 25 / 31

<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)
Advocat Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Friends of Roy Blunt <hr/> Mailing Address 209 Pennsylvania Ave SE <hr/> City Washington State DC Zip Code 20003-1107 <hr/> Purpose of Disbursement 03-20-07 EVENT; MO-07 US HOUSE <hr/> Candidate Name ROY BLUNT <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 07 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 70416.E76 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 7	Amount of Each Disbursement this Period 500.00 <hr/> 03-20-07 EVENT; MO-07 US HOUSE
B.	Full Name (Last, First, Middle Initial) Dave Camp for Congress <hr/> Mailing Address 2501 Wisconsin Ave NW <hr/> City Washington State DC Zip Code 20007-4542 <hr/> Purpose of Disbursement 4-19-07 EVENT; MI-4 US HOUSE <hr/> Candidate Name DAVID LEE CAMP <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 04 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 70416.E72 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 0 7	Amount of Each Disbursement this Period 750.00 <hr/> 4-19-07 EVENT; MI-4 US HO-USE
C.	Full Name (Last, First, Middle Initial) Friends of Jim Clyburn <hr/> Mailing Address 499 S Capitol St SW Ste 412 <hr/> City Washington State DC Zip Code 20003-4009 <hr/> Purpose of Disbursement 03-31-07 EVENT; SC-06 US HOUSE <hr/> Candidate Name JAMES E CLYBURN <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 06 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 70416.E77 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 7	Amount of Each Disbursement this Period 500.00 <hr/> 03-31-07 EVENT; SC-06 US HOUSE

SUBTOTAL of Disbursements This Page (optional) ▶	1750.00
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)

PAGE 26 / 31

<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)
Advocat Inc. Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Coleman for Senate 08</p> <p>Mailing Address 7300 Hudson Blvd. Suite 270A</p> <p>City Saint Paul State MN Zip Code 55128-</p> <p>Purpose of Disbursement 06/12/07 EVENT; MN US SENATE</p> <p>Candidate Name NORM COLEMAN</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 70621.E89 Date of Disbursement 06 / 11 / 2007</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>06/12/07 EVENT; MN US SEN- ATE</p>
<p>B. Full Name (Last, First, Middle Initial) Friends of Dick Durbin</p> <p>Mailing Address 200 E Jefferson St</p> <p>City Falls Church State VA Zip Code 22046-3531</p> <p>Purpose of Disbursement 4-24-07 EVENT; IL-US SENATE</p> <p>Candidate Name RICHARD J DURBIN</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 00</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 70416.E75 Date of Disbursement 04 / 24 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>4-24-07 EVENT; IL-US SENA- TE</p>
<p>C. Full Name (Last, First, Middle Initial) ERIC PAC</p> <p>Mailing Address 209 Pennsylvania Ave SE</p> <p>City Washington State DC Zip Code 20003-1107</p> <p>Purpose of Disbursement PAC TO CANTOR LDR PAC</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 70621.E84 Date of Disbursement 05 / 24 / 2007</p> <p>Amount of Each Disbursement this Period 750.00</p> <p>PAC TO CANTOR LDR PAC</p>

SUBTOTAL of Disbursements This Page (optional) ►

3250.00

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 27 / 31

<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)
Advocat Inc. Political Action Committee

A. Full Name (Last, First, Middle Initial) Anna Eshoo for Congress <hr/> Mailing Address PO Box 636 <hr/> City Annandale State VA Zip Code 22003-0636 <hr/> Purpose of Disbursement 4-30-07 EVENT; CA-14 US HOUSE <hr/> Candidate Name ANNA ESHOO <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 14 <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 70416.E73 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 4-30-07 EVENT; CA-14 US HOUSE
B. Full Name (Last, First, Middle Initial) John Lewis for Congress <hr/> Mailing Address PO Box 2323 <hr/> City Atlanta State GA Zip Code 30301-2323 <hr/> Purpose of Disbursement GA-05 US HOUSE <hr/> Candidate Name JOHN LEWIS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 05 <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 70621.E81 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 0 / 2 0 0 7
	Amount of Each Disbursement this Period 1500.00
	Category/ Type GA-05 US HOUSE
C. Full Name (Last, First, Middle Initial) Jim McCrery <hr/> Mailing Address 1226 31st. Street, NW <hr/> City Washington State DC Zip Code 20007- <hr/> Purpose of Disbursement 06/18/2007 EVENT; LA -04 US HOUSE <hr/> Candidate Name JAMES OTIS MCCRERY, III <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 04 <hr/> Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other	Transaction ID: 70621.E88 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 1 / 2 0 0 7
	Amount of Each Disbursement this Period 1500.00
	Category/ Type 06/18/2007 EVENT; LA -04 US HOUSE

SUBTOTAL of Disbursements This Page (optional) ►

4000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 28 / 31

<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)
Advocat Inc. Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Earl Pomeroy for Congress</p> <p>Mailing Address PO Box 75214</p> <p>City Washington State DC Zip Code 20013-0214</p> <p>Purpose of Disbursement ND-US HOUSE</p> <p>Candidate Name EARL RALPH POMEROY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 70621.E82</p> <p>Date of Disbursement 05 / 21 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/Type ND-US HOUSE</p>
<p>B. Full Name (Last, First, Middle Initial) Porter for Congress</p> <p>Mailing Address PO Box 26087</p> <p>City Las Vegas State NV Zip Code 89126-</p> <p>Purpose of Disbursement 4-24-07 EVENT; NV-03 US HOUSE</p> <p>Candidate Name JON PORTER, SR</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 03</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 70416.E74</p> <p>Date of Disbursement 04 / 24 / 2007</p> <p>Amount of Each Disbursement this Period 750.00</p> <p>Category/Type 4-24-07 EVENT; NV-03 US HOUSE</p>
<p>C. Full Name (Last, First, Middle Initial) Rangel for Congress</p> <p>Mailing Address PO Box 5577, Manhattanville Statio</p> <p>City New York State NY Zip Code 10027-</p> <p>Purpose of Disbursement NY-05 US HOUSE</p> <p>Candidate Name CHARLES B RANGEL</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 70621.E85</p> <p>Date of Disbursement 05 / 29 / 2007</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>Category/Type NY-05 US HOUSE</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4250.00

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 30 / 31

<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)
Advocat Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Salazar for Senate Mailing Address 422 C St NE City Washington State DC Zip Code 20002-5818 Purpose of Disbursement 06/12/07 EVENT; CO US SENATE Candidate Name KEN SALAZAR Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 70621.E87 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 7 Amount of Each Disbursement this Period 1500.00 06/12/07 EVENT; CO US SEN- ATE
B.	Full Name (Last, First, Middle Initial) Stabenow for U.S. Senate Mailing Address PO Box 4945 City East Lansing State MI Zip Code 48826-4945 Purpose of Disbursement 2/22/07 EVENT; MI US SENATE Candidate Name DEBBIE STABENOW Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 00 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 70310.E70 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 7 Amount of Each Disbursement this Period 1500.00 2/22/07 EVENT; MI US SENA- TE
C.	Full Name (Last, First, Middle Initial) Team Sununu Mailing Address PO Box 500 City Rye State NH Zip Code 03870- Purpose of Disbursement 06/23/2007 EVENT; NH US SENATE Candidate Name JOHN E SUNUNU Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 00 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 70725.E92 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 7 Amount of Each Disbursement this Period 1000.00 06/23/2007 EVENT; NH US SENATE

SUBTOTAL of Disbursements This Page (optional)	4000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 31 / 31

<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)
Advocat Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Van Hollen for Congress

Transaction ID: 70621.E86
Date of Disbursement

Mailing Address 10605 Concord St Ste 202

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	0	7

City Kensington State MD Zip Code 20895-2526

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
06/13/07 EVENT; MD-08 US HOUSE

Category/ Type

Candidate Name
VAN HOLLEN, CHRIS

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

06/13/07 EVENT; MD-08 US HOUSE

State: MD District: 08

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

28250.00
