

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
GGNSC Holdings LLC/Golden Horizons Care PAC

ADDRESS (number and street) 1099 New York Avenue NW, Suite 500
 Check if different than previously reported. (ACC)
Washington DC 20001

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 (12S)
Election on _____ in the State of _____
(d) 30-Day **Post**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 07 01 2010 through 07 31 2010

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 08 20 2010

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

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
GGNSC Holdings LLC/Golden Horizons Care PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		199247.91
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	209527.91									
(c) Total Receipts (from Line 19)	7925.00	57705.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	217452.91	256952.91								
7. Total Disbursements (from Line 31)	15500.00	55000.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	201952.91	201952.91								
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

GGNSC Holdings LLC/Golden Horizons Care PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	7870.00	42842.50
(ii) Unitemized	55.00	14862.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)	7925.00	57705.00
(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)	7925.00	57705.00
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))	7925.00	57705.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	7925.00	57705.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	15500.00	55000.00
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	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(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))..	15500.00	55000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15500.00	55000.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	7925.00	57705.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7925.00	57705.00
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 / 35
	<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)
GGNSC Holdings LLC/Golden Horizons Care PAC

A.	Full Name (Last, First, Middle Initial) MR. RALPH E. CANNON	Date of Receipt MM / DD / YYYY 07 / 31 / 2010
	Mailing Address 1255 ROSELLAS WAY	Transaction ID: PR1360891320001
	City ALMA State AR Zip Code 72921	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer GGNSC Admin Svcs LLC Occupation VP HR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00	P/R Deduction (\$50.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) MS. MELINDA N. COLEY	Date of Receipt MM / DD / YYYY 07 / 31 / 2010
	Mailing Address 1230 SPRUCE LANE	Transaction ID: PR1442839220001
	City CHESAPEAKE State VA Zip Code 23320	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer GGNSC Holdings LLC Occupation VP FINANCIAL OPERATI Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00	P/R Deduction (\$50.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) MR. JACK A. DIVETA	Date of Receipt MM / DD / YYYY 07 / 31 / 2010
	Mailing Address 361 RADEBAUGH DR	Transaction ID: PR1442914220001
	City LONGWOOD State FL Zip Code 32779	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer GGNSC Holdings LLC Florida Regional Occupation VP REGIONAL Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00	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) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one)	PAGE 7 / 35
	<input checked="" 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)
GGNSC Holdings LLC/Golden Horizons Care PAC

A.	Full Name (Last, First, Middle Initial) MRS. BARBARA E. WARE	Date of Receipt MM / DD / YYYY 07 / 31 / 2010
	Mailing Address 12701 SPRINGTREE DR	Transaction ID: PR1554991320001
	City State Zip Code SILVER SPRING MD 20904	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Golden Horizons Occupation SENIOR DIR. PUBLIC R	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00
		P/R Deduction (\$15.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) MR. NEIL M. KURTZ	Date of Receipt MM / DD / YYYY 07 / 31 / 2010
	Mailing Address 12035 BASIN STREET NORTH	Transaction ID: PR1757433020001
	City State Zip Code WELLINGTON FL 33414	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Golden Living Center Occupation PRESIDENT AND CEO GO	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2100.00
		P/R Deduction (\$150.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) MS. MELISSA S. BENTLEY	Date of Receipt MM / DD / YYYY 07 / 31 / 2010
	Mailing Address P.O. BOX 276	Transaction ID: PR768706820001
	City State Zip Code GARRISON KY 41141	Amount of Each Receipt this Period 112.50
	FEC ID number of contributing federal political committee. C	
	Name of Employer GOLDEN LIVINGCENTER - VAN-CEBURG Occupation ED SR	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 562.50
		P/R Deduction (\$37.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	442.50
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 / 35
	<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)
GGNSC Holdings LLC/Golden Horizons Care PAC

A.	Full Name (Last, First, Middle Initial) MR. SEAN A. FOSTER	Date of Receipt MM / DD / YYYY 07 / 31 / 2010
	Mailing Address 8240 E FLAT BRANCH	Transaction ID: PR768707920001
	City State Zip Code INDIANAPOLIS IN 46259-7714	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 Golden LivingCenters	Occupation DIR SR OPERATIONS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

B.	Full Name (Last, First, Middle Initial) MS. VICI A. LITTRELL	Date of Receipt MM / DD / YYYY 07 / 31 / 2010
	Mailing Address 37722 HWY 5	Transaction ID: PR768709320001
	City State Zip Code GLASGOW MO 65254	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$15.00 Bi-Weekly)
Name of Employer CM - GLASGOW	Occupation EXECUTIVE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

C.	Full Name (Last, First, Middle Initial) MS. LUANN K. PONTIUS	Date of Receipt MM / DD / YYYY 07 / 31 / 2010
	Mailing Address 58657 PALACE LANE	Transaction ID: PR768712720001
	City State Zip Code ELKHART IN 46517	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$15.00 Bi-Weekly)
Name of Employer COUNTRYSIDE PLACE	Occupation EXECUTIVE DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional)	120.00
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 / 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GGNSC Holdings LLC/Golden Horizons Care PAC

<p>A. Full Name (Last, First, Middle Initial) MRS. STACI R. CARDENAS</p> <p>Mailing Address 901 CLUBHOUSE DRIVE</p> <p>City State Zip Code MCPHERSON KS 67460</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer GOLDEN LIVINGCENTER - COL-UMBUS</p> <p>Occupation DIR OPERATIONS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 225.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2010</p> <p>Transaction ID: PR768716920001</p> <p>Amount of Each Receipt this Period 30.00</p> <p>P/R Deduction (\$15.00 Bi-Weekly)</p>
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<p>B. Full Name (Last, First, Middle Initial) MS. JOYCE E. CANTRELL</p> <p>Mailing Address 32 KUESTER LAKE</p> <p>City State Zip Code GRAND ISLAND NE 68801</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer GOLDEN LIVINGCENTER-GRAND ISLAND PK</p> <p>Occupation EXECUTIVE DIRECTOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 225.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2010</p> <p>Transaction ID: PR768717120001</p> <p>Amount of Each Receipt this Period 45.00</p> <p>P/R Deduction (\$15.00 Bi-Weekly)</p>
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<p>C. Full Name (Last, First, Middle Initial) MRS. JANE E. BENGSTON-WESSEL</p> <p>Mailing Address 701 E GRANT</p> <p>City State Zip Code WAUSA NE 68786</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer GOLDEN LIVINGCENTER - NOR-FOLK</p> <p>Occupation DIR OPERATIONS</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 225.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2010</p> <p>Transaction ID: PR768719520001</p> <p>Amount of Each Receipt this Period 30.00</p> <p>P/R Deduction (\$15.00 Bi-Weekly)</p>
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SUBTOTAL of Receipts This Page (optional)	105.00
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 10 / 35
(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)
GGNSC Holdings LLC/Golden Horizons Care PAC

A.

Full Name (Last, First, Middle Initial)
MRS. DIXIE L. WILDE

Mailing Address 405 SAGEHORN DRIVE

City State Zip Code
HARTFORD SD 57033

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

Name of Employer GOLDEN LIVING CTR DISTRICT 14
Occupation DIR OPERATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: PR768719720001

Amount of Each Receipt this Period
100.00

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

B.

Full Name (Last, First, Middle Initial)
MS. DIANE K. FORGEY

Mailing Address 3517 S BANYAN AVENUE

City State Zip Code
SIOUX FALLS SD 57110

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

Name of Employer GOLDEN LIVINGCENTER - RED-FIELD
Occupation EXECUTIVE DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: PR768722420001

Amount of Each Receipt this Period
45.00

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

C.

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

Mailing Address 19712 HANSEN AVENUE

City State Zip Code
OMAHA NE 68130

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

Name of Employer Golden Living
Occupation DIR OPERATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: PR768728920001

Amount of Each Receipt this Period
30.00

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

SUBTOTAL of Receipts This Page (optional) ► 175.00

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 11 / 35
(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)
GGNSC Holdings LLC/Golden Horizons Care PAC

A.

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

Mailing Address 1273 SUNBURST WAY SE

City State Zip Code
HUTCHINSON MN 55350

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

Name of Employer Occupation
WABASSO HEALTHCARE CENTER EXECUTIVE DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: PR768729220001

Amount of Each Receipt this Period
45.00

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

B.

Full Name (Last, First, Middle Initial)
MRS. CYNDIA A. SEIWERT

Mailing Address 13600 COMMERCE BLVD #302

City State Zip Code
ROGERS MN 55374

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

Name of Employer Occupation
GOLDEN LIVINGCENTER - LAKE RIDGE REGIONAL VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: PR768730120001

Amount of Each Receipt this Period
30.00

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

C.

Full Name (Last, First, Middle Initial)
MR. BRIAN P. MUELLER

Mailing Address 6710 BROOK BEND WAY

City State Zip Code
LOUISVILLE KY 40229

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

Name of Employer Occupation
ST MATTHEWS MANOR EXECUTIVE DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: PR768731820001

Amount of Each Receipt this Period
45.00

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

SUBTOTAL of Receipts This Page (optional) ► **120.00**

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 12 / 35
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
GGNSC Holdings LLC/Golden Horizons Care PAC

A.

Full Name (Last, First, Middle Initial)
MRS. PATRICIA A. GRANSTON

Mailing Address 3005 OAKVIEW DRIVE

City State Zip Code
PITTSBURG KS 66762

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

Name of Employer GOLDEN LIVINGCENTER - PITTSBURG
Occupation EXECUTIVE DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 562.50

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: PR768734520001

Amount of Each Receipt this Period
112.50

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

B.

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**

Name of Employer GOLDEN LIVINGCENTER - NEODESHA
Occupation EXECUTIVE DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: PR768734720001

Amount of Each Receipt this Period
45.00

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

C.

Full Name (Last, First, Middle Initial)
MRS. FRANCES A. KEEARNS

Mailing Address 8640 SE ADAMS

City State Zip Code
WAKARUSA KS 66546

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

Name of Employer GOLDEN LIVINGCENTER - ESKRIDGE
Occupation ED SR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: PR768739620001

Amount of Each Receipt this Period
45.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **202.50**

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 13 / 35
(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)
GGNSC Holdings LLC/Golden Horizons Care PAC

A.

Full Name (Last, First, Middle Initial)
MS. JULIE A. PENNINGTON

Mailing Address 675 S SLED RUN

City State Zip Code
SANTA CLAUS IN 47579

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

Name of Employer Occupation
LINCOLN HILLS NURSING HOME EXECUTIVE DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: PR768740320001

Amount of Each Receipt this Period
45.00

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

B.

Full Name (Last, First, Middle Initial)
MR. MICHAEL J. MARCHANT

Mailing Address 356 BOARD RD

City State Zip Code
MAHTOMEDI MN 55115

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

Name of Employer Occupation
Golden Living DIR OPERATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: PR768740720001

Amount of Each Receipt this Period
30.00

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

C.

Full Name (Last, First, Middle Initial)
MRS. CANDACE J. PARKER

Mailing Address 10062 HIGHWAY NN

City State Zip Code
MEXICO MO 65265

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

Name of Employer Occupation
GOLDEN LIVINGCENTER - PIN OAKS EXECUTIVE DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: PR768741720001

Amount of Each Receipt this Period
45.00

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

SUBTOTAL of Receipts This Page (optional) ► **120.00**

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 14 / 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GGNSC Holdings LLC/Golden Horizons Care PAC

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL S. EWING

Mailing Address 2539 CHARDONNAY DR

City State Zip Code
MACUNGIE PA 18062

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

Name of Employer Occupation
DISTRICT 24 OVERHEAD LEDGER - A DIR SR OPERATIONS

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 750.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: PR768743920001

Amount of Each Receipt this Period
100.00

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

B. Full Name (Last, First, Middle Initial)
MR. THOMAS R. MARSH

Mailing Address 8812 COPPER OAKS

City State Zip Code
FORT SMITH AR 72903

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

Name of Employer Occupation
Golden Horizons DIR SR INTERNAL INVE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 750.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: PR768744920001

Amount of Each Receipt this Period
100.00

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

C. Full Name (Last, First, Middle Initial)
MR. KEITH R. JEWELL

Mailing Address 2626PEACHTREEROAD NW RES # 803

City State Zip Code
ATLANTA GA 30305

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

Name of Employer Occupation
Golden Horizons COUNSEL GEN LABOR&EM

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 750.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: PR768745120001

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 35
	<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)
GGNSC Holdings LLC/Golden Horizons Care PAC

A.	Full Name (Last, First, Middle Initial) MS. DEBRA J. PIERCE		Date of Receipt MM / DD / YYYY 07 / 31 / 2010
	Mailing Address 6510 FIELDCREST DR		Transaction ID: PR768745520001
	City FORT SMITH	State AR	Zip Code 72916
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
	Name of Employer Golden Horizons	Occupation VP COMPLIANCE-ASOC G	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 ▼ 562.50		

B.	Full Name (Last, First, Middle Initial) MR. STACEY P. ROGERS		Date of Receipt MM / DD / YYYY 07 / 31 / 2010
	Mailing Address 5205 ROSEWOOD CIR		Transaction ID: PR768747020001
	City FORT SMITH	State AR	Zip Code 72903
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
	Name of Employer Golden Horizons	Occupation VP FINANCIAL PLANNIN	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 ▼ 562.50		

C.	Full Name (Last, First, Middle Initial) MR. HAROLD A. PRICE		Date of Receipt MM / DD / YYYY 07 / 31 / 2010
	Mailing Address 302 HARBOUR PLACE DRIVE #3119		Transaction ID: PR768747220001
	City TAMPA	State FL	Zip Code 33602
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
	Name of Employer Golden Horizons	Occupation SVP SALES AND MARKET	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 ▼ 2100.00		

SUBTOTAL of Receipts This Page (optional)	▶	450.00
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 / 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GGNSC Holdings LLC/Golden Horizons Care PAC

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

Mailing Address 22 CHEVIOT LANE

City State Zip Code
BELLA VISTA AR 72715

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

Name of Employer: GGNSC RECRUITING - CORPORATE OFFICE
Occupation: SVP GOVERNMENT RELAT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2250.00

Date of Receipt: 07 / 31 / 2010
Transaction ID: PR768748620001
 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

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

Name of Employer: GGNSC HOLDINGS LLC
Occupation: SVP PUBLIC AFFAIRS A

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2250.00

Date of Receipt: 07 / 31 / 2010
Transaction ID: PR768748720001
 Amount of Each Receipt this Period: 300.00
 P/R Deduction (\$150.00 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
MR. DAVID M. MILLS

Mailing Address 9939 ALVARADO LN N

City State Zip Code
MAPLE GROVE MN 55311

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

Name of Employer: GGNSC Division Overhead
Occupation: DIVISION PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 07 / 31 / 2010
Transaction ID: PR768750420001
 Amount of Each Receipt this Period: 200.00
 P/R Deduction (\$100.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional) ► 800.00

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 / 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GGNSC Holdings LLC/Golden Horizons Care PAC

A. Full Name (Last, First, Middle Initial)
MR. KEVIN M. ROBERTS

Mailing Address 2304 DUNDEE DRIVE

City State Zip Code
FORT SMITH AR 72908

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

Name of Employer Golden Horizons Occupation SVP LIVING CENTERS F

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2250.00

Date of Receipt

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

Transaction ID: PR768750620001

Amount of Each Receipt this Period
300.00

P/R Deduction (\$150.00 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

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

Name of Employer GGNSC HOLDINGS LLC Occupation VP OPERATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt

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

Transaction ID: PR768751220001

Amount of Each Receipt this Period
100.00

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

C. Full Name (Last, First, Middle Initial)
MS. KIMBERLY A. OLIVER

Mailing Address 3610 SOUTHVIEW DRIVE

City State Zip Code
FORT SMITH AR 72903

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

Name of Employer BEVERLY ENTERPRISES Occupation VP CLINICAL REIMBURS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt

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

Transaction ID: PR768751320001

Amount of Each Receipt this Period
30.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **430.00**

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 / 35
(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)
GGNSC Holdings LLC/Golden Horizons Care PAC

A.

Full Name (Last, First, Middle Initial)
MS. MICHELE L. SELF

Mailing Address 5945 EVANSTON AVE

City INDIANAPOLIS State IN Zip Code 46220

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

Name of Employer Golden Horizons Occupation VP CLINICAL REIMBURS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 07 / 31 / 2010

Transaction ID: PR768751520001

Amount of Each Receipt this Period 100.00

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

B.

Full Name (Last, First, Middle Initial)
MS. MARY BETH C. NEWELL

Mailing Address 998 SUMMER PLACE

City PITTSBURGH State PA Zip Code 15243

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

Name of Employer Golden Horizons Occupation VP CLINICAL REIMBURS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 562.50

Date of Receipt 07 / 31 / 2010

Transaction ID: PR768751820001

Amount of Each Receipt this Period 75.00

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

C.

Full Name (Last, First, Middle Initial)
MRS. LORNA J. ELLIS

Mailing Address 332 MAHAN

City MEADOWLAKES State TX Zip Code 78654

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

Name of Employer BEVERLY ENTERPRISES Occupation DIR BUSINESS OFFICE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 31 / 2010

Transaction ID: PR768752120001

Amount of Each Receipt this Period 30.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 35
(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)
GGNSC Holdings LLC/Golden Horizons Care PAC

A.

Full Name (Last, First, Middle Initial)
MRS. VERONA F. DRENCCKPOHL

Mailing Address 1101 SUNNY HILL PL

City State Zip Code
HACKETT AR 72937

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

Name of Employer GOLDEN LIVING CTR IT BUS SOLUTIONS
Occupation DIR APPLICATION SERV

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: PR768752820001

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 P. O. BOX 10704

City State Zip Code
FORT SMITH AR 72903

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

Name of Employer GGNSC - IT TECH SERVICES
Occupation DIR IT DATA SECURITY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 562.50

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: PR768753220001

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

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

Name of Employer GOLDEN LIVING CTR CORPORATE MIS
Occupation DIR IT CONTROLS & CO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: PR768753320001

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 35
(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)
GGNSC Holdings LLC/Golden Horizons Care PAC

A.

Full Name (Last, First, Middle Initial)
MR. JEFFREY P. BOLING

Mailing Address 8412 DANBRIDGE WAY

City WESTERVILLE State OH Zip Code 43082

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

Name of Employer GOLDEN LIVING CTR ASERACA-RE OPERATIONS Occupation VP OF BUSINESS DEVEL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 07 / 31 / 2010

Transaction ID: PR768761120001

Amount of Each Receipt this Period 100.00

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

B.

Full Name (Last, First, Middle Initial)
MRS. CINDY H. SUSIENKA

Mailing Address 1201 S.WATERVILLE RD

City OCONOMOWOC State WI Zip Code 53066

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

Name of Employer GGNSC AEGIS/HOMECARE SVCS REG OFFICE Occupation CEO SERVICE BUSINESS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2250.00

Date of Receipt 07 / 31 / 2010

Transaction ID: PR768761320001

Amount of Each Receipt this Period 300.00

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

C.

Full Name (Last, First, Middle Initial)
MS. ELIZABETH A. GRIMA

Mailing Address 6807 HIGHLAND PARK DR

City FORT SMITH State AR Zip Code 72916

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

Name of Employer GGNSC AEGIS/ASERA HR/SALES SVCS Occupation SVP HR SERVICES COS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 07 / 31 / 2010

Transaction ID: PR768761520001

Amount of Each Receipt this Period 100.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GGNSC Holdings LLC/Golden Horizons Care PAC

A. Full Name (Last, First, Middle Initial)
MR. JASON D. HARMS

Mailing Address 1107 WINTER PARK DR

City State Zip Code
VAN BUREN AR 72956

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

Name of Employer: GGNSC AC H (ADMIN SERVICE-S)
Occupation: VP OF FINANCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 07 / 31 / 2010
Transaction ID: PR768761620001
 Amount of Each Receipt this Period: 100.00
 P/R Deduction (\$50.00 Bi-Weekly)

B. Full Name (Last, First, Middle Initial)
MRS. SUSAN E. ALMON MATANGOS

Mailing Address 100 WINDSOR DR

City State Zip Code
EPHRATA PA 17522

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

Name of Employer: GGNSC - AEGIS ANCILLARY SERVICES
Occupation: DIRECTOR OF CLINICAL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 562.50

Date of Receipt: 07 / 31 / 2010
Transaction ID: PR768762020001
 Amount of Each Receipt this Period: 75.00
 P/R Deduction (\$37.50 Bi-Weekly)

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM P. GOULDING

Mailing Address 5901 SOUTH 76TH ST

City State Zip Code
GREENDALE WI 53129

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

Name of Employer: GOLDEN LIVING CTR AEGIS ANCILLARY SERV
Occupation: DIR NATIONAL OUTCOME

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 562.50

Date of Receipt: 07 / 31 / 2010
Transaction ID: PR768762220001
 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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 35
(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)
GGNSC Holdings LLC/Golden Horizons Care PAC

A.

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

Mailing Address 414 CASTLESTONE LANE

City State Zip Code
MATTHEWS NC 28104

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

Name of Employer
GGNSC SPECTRA - RMC NORTH-EAST

Occupation
VP OPERATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: PR768763020001

Amount of Each Receipt this Period
100.00

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

B.

Full Name (Last, First, Middle Initial)
MRS. MARTHA J. SCHRAM

Mailing Address 613 MORNINGSTAR LANE

City State Zip Code
MADISON WI 53704

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

Name of Employer
GGNSC REHAB CONSULTING ST-AFFING

Occupation
PRESIDENT AEGIS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2250.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: PR768763120001

Amount of Each Receipt this Period
300.00

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

C.

Full Name (Last, First, Middle Initial)
MS. JUDI C. PRITCHARD

Mailing Address 236 KENSINGTON LANE

City State Zip Code
ALABASTER AL 35007

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

Name of Employer
GOLDEN LIVING CTR AEGIS 8200

Occupation
DIR OPERATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: PR768763520001

Amount of Each Receipt this Period
100.00

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 35
	<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)
GGNSC Holdings LLC/Golden Horizons Care PAC

A.	Full Name (Last, First, Middle Initial) MR. DONALD B. BIGGS	Date of Receipt MM / DD / YYYY 07 / 31 / 2010
	Mailing Address 102 MAPLE ST	Transaction ID: PR768763620001
	City State Zip Code SEWARD NE 68434	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$25.00 Bi-Weekly)
Name of Employer Golden Horizons	Occupation REGIONAL VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

B.	Full Name (Last, First, Middle Initial) MRS. ALICIA A. TAYLOR	Date of Receipt MM / DD / YYYY 07 / 31 / 2010
	Mailing Address 6746 NORTHFIELD DR	Transaction ID: PR768764420001
	City State Zip Code EVANSVILLE IN 47711	Amount of Each Receipt this Period 112.50
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$37.50 Bi-Weekly)
Name of Employer GOLDEN LIVING CTR AEGIS 8328	Occupation DISTRICT MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 562.50	

C.	Full Name (Last, First, Middle Initial) MR. DON G. GRIFFIN	Date of Receipt MM / DD / YYYY 07 / 31 / 2010
	Mailing Address 4 HAVEN HILL CIRCLE	Transaction ID: PR768766920001
	City State Zip Code FORT SMITH AR 72901	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Bi-Weekly)
Name of Employer GOLDEN LIVING CTR IT TECH SERVICES	Occupation DIR IT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional)	262.50
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 24 / 35
(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)
GGNSC Holdings LLC/Golden Horizons Care PAC

A.

Full Name (Last, First, Middle Initial)
MS. VERA J. GILES

Mailing Address 5705 SHROPSHIRE CT

City State Zip Code
ALEXANDRIA VA 22315

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

Name of Employer Occupation
GOLDEN LIVING CTR AEGIS DISTRICT MANAGER
8410

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 562.50

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: PR76876720001

Amount of Each Receipt this Period
75.00

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

B.

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

Mailing Address 107 KENWAY LOOP

City State Zip Code
MOORESVILLE NC 28117

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

Name of Employer Occupation
GOLDEN LIVING CTR AEGIS DIR AREA
8208

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 562.50

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: PR768768720001

Amount of Each Receipt this Period
112.50

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

C.

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

Mailing Address 7905 E. OAKMONT PL.

City State Zip Code
SIOUX FALLS SD 57110

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

Name of Employer Occupation
Golden Horizons DISTRICT MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: PR768770620001

Amount of Each Receipt this Period
40.00

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

SUBTOTAL of Receipts This Page (optional) ► **227.50**

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 25 / 35

(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)
GGNSC Holdings LLC/Golden Horizons Care PAC

A.

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

Mailing Address 503 VILSACK RD

City State Zip Code
GLENSHAW PA 15116

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

Name of Employer
DISTRICT 23 OVERHEAD LEDGER - A

Occupation
VP OPERATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: PR768772920001

Amount of Each Receipt this Period

100.00

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

B.

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

Mailing Address 10755 QUAAL ROAD

City State Zip Code
BLACK HAWK SD 57718

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

Name of Employer
GOLDEN LIVING CTR DISTRICT 13

Occupation
DIR SR OPERATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
562.50

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: PR768773220001

Amount of Each Receipt this Period

75.00

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

C.

Full Name (Last, First, Middle Initial)
MRS. LESLIE C. CAMPBELL

Mailing Address 358 QUAIL CREEK ROAD

City State Zip Code
HOT SPRING AR 71901

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

Name of Employer
GOLDEN LIVING CTR DISTRICT 21

Occupation
DIVISION PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: PR768773620001

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 35

(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)
GGNSC Holdings LLC/Golden Horizons Care PAC

A.

Full Name (Last, First, Middle Initial)
MR. PAXTON L. WIFFLER

Mailing Address 4130 WINDSONG CIRCLE

City State Zip Code
PRIOR LAKE MN 55372

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

Name of Employer
GOLDEN LIVING CTR DISTRICT 18

Occupation
VP OPERATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: PR768773720001

Amount of Each Receipt this Period

100.00

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

B.

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

Mailing Address 5044 BIG CANYON LANE

City State Zip Code
FAIR OAKS CA 95628

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

Name of Employer
GOLDEN LIVING CTR REGION 1 COASTAL

Occupation
VP FINANCIAL OPERATI

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: PR768775320001

Amount of Each Receipt this Period

100.00

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

C.

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

Mailing Address P O BOX 141

City State Zip Code
MARS PA 16046

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

Name of Employer
Golden Living Center

Occupation
VP FINANCIAL OPERATI

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
562.50

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: PR768776520001

Amount of Each Receipt this Period

75.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 35
(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)
GGNSC Holdings LLC/Golden Horizons Care PAC

A.

Full Name (Last, First, Middle Initial)
MS. CINDY V. KREIDER

Mailing Address 2999 STATE ROUTE 304

City State Zip Code
WINFIELD PA 17889

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

Name of Employer
GGNSC CLINICAL SERVICES-D-IV 03

Occupation
VP CLINICAL SERV

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: PR768776620001

Amount of Each Receipt this Period
100.00

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

B.

Full Name (Last, First, Middle Initial)
MS. PAMELA J. HANSEN

Mailing Address 2690 WOODHILL CT.

City State Zip Code
BROOKFIELD WI 53005

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

Name of Employer
Golden Living Center Region 04

Occupation
VP HR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
562.50

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: PR768777120001

Amount of Each Receipt this Period
75.00

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

C.

Full Name (Last, First, Middle Initial)
MS. GAIL GEISENHOFF

Mailing Address 2072 HIGHWOOD

City State Zip Code
ST. PAUL MN 55119

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

Name of Employer
GGNSC CLINICAL SERVICES-D-IV 04

Occupation
VP CLINICAL SERV

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: PR768777220001

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GGNSC Holdings LLC/Golden Horizons Care PAC

A. Full Name (Last, First, Middle Initial)
MS. MARY E. HAWKINS

Mailing Address 18240 ASTOR DRIVE
APT 102

City State Zip Code
BROOKFIELD WI 53045-5635

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

Name of Employer Occupation
GGNSC CBO - MILWAUKEE DIR REG BUS OFFICE O

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 295.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: PR768777320001

Amount of Each Receipt this Period
30.00

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

B. Full Name (Last, First, Middle Initial)
MRS. JOANN EVANS

Mailing Address N6740 CLOSS RD

City State Zip Code
CAMBRIA WI 53923

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

Name of Employer Occupation
GGNSC CLINICAL SERVICES-D-IV 01 DIR CLINICAL SERVICE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 562.50

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: PR768777620001

Amount of Each Receipt this Period
75.00

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

C. Full Name (Last, First, Middle Initial)
MS. ANDREA J. CLARK

Mailing Address 320 ST. JOHN'S GOLF

City State Zip Code
ST. AUGUSTINE FL 32092

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

Name of Employer Occupation
GGNSC Clinical Services SVP PROFESSIONAL SER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: PR768778520001

Amount of Each Receipt this Period
200.00

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

SUBTOTAL of Receipts This Page (optional) ► 305.00

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 29 / 35
(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)
GGNSC Holdings LLC/Golden Horizons Care PAC

A.	Full Name (Last, First, Middle Initial) MR. JAMES A. GLENSKY		Date of Receipt MM / DD / YYYY 07 / 31 / 2010		
	Mailing Address 1909 RANNOCH TRACE		Transaction ID: PR768778620001		
	City FORT SMTIH	State AR	Zip Code 72908	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$50.00 Bi-Weekly)		
	Name of Employer GOLDEN LIVING CTR CERES STRATEGIES	Occupation VP CLINICAL SPEND MG	Aggregate Year-to-Date 750.00		

B.	Full Name (Last, First, Middle Initial) MS. CAREY HUEBERT		Date of Receipt MM / DD / YYYY 07 / 31 / 2010		
	Mailing Address 635 CORTLAND LANE SW		Transaction ID: PR768782320001		
	City ROCHESTER	State MN	Zip Code 55902	Amount of Each Receipt this Period 45.00	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$15.00 Bi-Weekly)		
	Name of Employer GOLDEN LIVINGCENTER - ROCHESTER	Occupation EXECUTIVE DIRECTOR	Aggregate Year-to-Date 225.00		

C.	Full Name (Last, First, Middle Initial) MR. LAWRENCE DEANS		Date of Receipt MM / DD / YYYY 07 / 31 / 2010		
	Mailing Address 11 CHAMBERLAIN CT		Transaction ID: PR768785820001		
	City THE WOODLANDS	State TX	Zip Code 77382	Amount of Each Receipt this Period 300.00	
	FEC ID number of contributing federal political committee. C		P/R Deduction (\$150.00 Bi-Weekly)		
	Name of Employer Golden Horizons	Occupation PRESIDENT GOLDEN LIV	Aggregate Year-to-Date 2250.00		

SUBTOTAL of Receipts This Page (optional)	445.00
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 30 / 35
(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)
GGNSC Holdings LLC/Golden Horizons Care PAC

A.

Full Name (Last, First, Middle Initial)
MRS. JEAN A. LOGUE

Mailing Address 36650 SOUTH DOGWOOD LANE

City State Zip Code
COOKSON OK 74427

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

Name of Employer GOLDEN LIVING CTR REGION 00
Occupation VP HR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: PR768786220001

Amount of Each Receipt this Period
100.00

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

B.

Full Name (Last, First, Middle Initial)
MS. CYNTHIA L. KASSON

Mailing Address 8162 JEWEL LANE N

City State Zip Code
MAPLE GROVE MN 55311

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

Name of Employer GOLDEN LIVING CTR AEGIS-W-ISCONSIN
Occupation VP OF SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: PR768791820001

Amount of Each Receipt this Period
100.00

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

C.

Full Name (Last, First, Middle Initial)
MS. STEPHANIE J. FIDLER

Mailing Address 1012 LILY LANE

City State Zip Code
TEMPLE PA 19560

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

Name of Employer DIV 03 GGNSC CLINICAL SERVICES-A
Occupation DIR CLINICAL SERVICE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2010

Transaction ID: PR768792520001

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
GGNSC Holdings LLC/Golden Horizons Care PAC

A. Full Name (Last, First, Middle Initial)
MS. ANGELA B. SADER

Mailing Address 325 S. GRAND MERE CT

City State Zip Code
WICHITA KS 67230

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

Name of Employer Occupation
GGNSC CLINICAL SERVICES DIRECTOR SR OF NUTRI

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: PR768793820001

Amount of Each Receipt this Period
30.00

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

B. Full Name (Last, First, Middle Initial)
MR. LEONARD J. QUIMBY

Mailing Address 319 BREWSTER RD

City State Zip Code
NEW CASTLE PA 16102

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

Name of Employer Occupation
BHC-MONROEVILLE DIR OPERATIONS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: PR768794120001

Amount of Each Receipt this Period
30.00

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

C. Full Name (Last, First, Middle Initial)
MR. GREGORY N. DAVIS

Mailing Address 2233 MISTY CREEK TRL

City State Zip Code
STOCKBRIDGE GA 30281

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

Name of Employer Occupation
BEVERLY HEALTHCARE - GLENWOOD EXECUTIVE DIRECTOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: PR768796020001

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 35
(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)
GGNSC Holdings LLC/Golden Horizons Care PAC

A.

Full Name (Last, First, Middle Initial)
MS. ERIN M. MCANDREW

Mailing Address 117 LINCOLN AVENUE.

City State Zip Code
N. VERSAILLES PA 15137

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

Name of Employer Golden Living Occupation VP SALES & BUS DEV

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: PR768800520001

Amount of Each Receipt this Period 30.00

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

B.

Full Name (Last, First, Middle Initial)
JOHN HUGHES

Mailing Address 1694 Carey Place

City State Zip Code
Charleston WV 25314-2511

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

Name of Employer Golden Living Center - Riverside Occupation Dir Reg Environmental Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: PR768800820001

Amount of Each Receipt this Period 30.00

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

C.

Full Name (Last, First, Middle Initial)
MR. MICHAEL R. KARICHER

Mailing Address 11301 MAPLE PARK DR

City State Zip Code
FORT SMITH AR 72916

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

Name of Employer BEVERLY ENTERPRISES Occupation SVP HR AND ADMINISTR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 31 / 2010

Transaction ID: PR768801420001

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 35
(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)
GGNSC Holdings LLC/Golden Horizons Care PAC

A. Full Name (Last, First, Middle Initial)
MS. NANCY L. HUBLAR

Mailing Address 10511 BUCKEYE TRACE

City State Zip Code
GOSHEN KY 40026

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

Name of Employer Occupation
CORPORATE RECRUITING - A DIR REG GOVERNMENT R

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2010

Transaction ID: PR768809020001

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional)	▶	100.00
TOTAL This Period (last page this line number only)	▶	7870.00

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)
GGNSC Holdings LLC/Golden Horizons Care PAC

<p>A. Full Name (Last, First, Middle Initial) California Republican Party - Federal Account</p> <p>Mailing Address 1903 West Magnolia Blvd</p> <p>City Burbank State CA Zip Code 91506</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name California Republican Party - Federal Account</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 35668551 Date of Disbursement 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>Contribution</p>
<p>B. Full Name (Last, First, Middle Initial) Democratic State Central Committee of CA - Federal Account</p> <p>Mailing Address 1401 21st Street Suite 200</p> <p>City Sacramento State CA Zip Code 95811</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Democratic State Central Committee of CA - Federal Account</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 35668552 Date of Disbursement 07 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>Contribution</p>
<p>C. Full Name (Last, First, Middle Initial) Friends of Blanche Lincoln</p> <p>Mailing Address P.O. Box 3197</p> <p>City Little Rock State AR Zip Code 72203</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Sen. Blanche Lincoln</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: AR District:</p>	<p>Transaction ID: 35831788 Date of Disbursement 07 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>Contribution</p>

SUBTOTAL of Disbursements This Page (optional) ▶

12500.00

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 35 / 35

<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)
GGNSC Holdings LLC/Golden Horizons Care PAC

A. Full Name (Last, First, Middle Initial) Ryan for Congress Mailing Address P.O. Box 1919 City Janesville State WI Zip Code 53547 Purpose of Disbursement Contribution Candidate Name Rep. Paul Ryan Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 01 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 35878304 Date of Disbursement 07 / 19 / 2010
	Amount of Each Disbursement this Period 2000.00 Contribution
B. Full Name (Last, First, Middle Initial) Chad Causey For Congress Mailing Address PO Box 16966 City Jonesboro State AR Zip Code 72403 Purpose of Disbursement Contribution Candidate Name Mr. Chad Causey Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 01 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 36337445 Date of Disbursement 07 / 20 / 2010
	Amount of Each Disbursement this Period 1000.00 Contribution

SUBTOTAL of Disbursements This Page (optional) ►

3000.00

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

15500.00