

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

AIRPORTS COUNCIL INTERNATIONAL-NORTH AMERICA POLITICAL ACTION COMMITTEE (Airport PAC)

ADDRESS (number and street) 1775 K STREET NW SUITE 500

Check if different than previously reported. (ACC) WASHINGTON DC 20006

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00341800

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:
- | | | | |
|--------------------------------------|---|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input checked="" type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) | |

Election on _____ in the State of _____

- (d) 30-Day Post -Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on _____ in the State of _____

5. Covering Period 04 01 2009 through 04 30 2009

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 Greg Principato

Signature of Treasurer Electronically Filed by Greg Principato Date 05 19 2009

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

AIRPORTS COUNCIL INTERNATIONAL-NORTH AMERICA POLITICAL ACTION COMMITTEE (Airport PAC)

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	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>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		42776.78
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	38991.46									
(c) Total Receipts (from Line 19)	3173.24	12007.42								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	42164.70	54784.20								
7. Total Disbursements (from Line 31)	3270.95	15890.45								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	38893.75	38893.75								
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

AIRPORTS COUNCIL INTERNATIONAL-NORTH AMERICA POLITICAL ACTION COMMITTEE (Airport PAC)

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	9

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	2923.24	11072.42
(i) Itemized (use Schedule A)		
(ii) Unitemized	250.00	935.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	3173.24	12007.42
(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)	3173.24	12007.42
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))	3173.24	12007.42
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	3173.24	12007.42

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.....	1270.95	8390.45
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	1270.95	8390.45
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	7500.00
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))..	3270.95	15890.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3270.95	15890.45

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)	3173.24	12007.42
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3173.24	12007.42
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1270.95	8390.45
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1270.95	8390.45

**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 / 10
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
AIRPORTS COUNCIL INTERNATIONAL-NORTH AMERICA POLITICAL ACTION COMMITTEE (Airport PAC)

A.	Full Name (Last, First, Middle Initial) Ms Jane Q. Calderwood	Date of Receipt MM / DD / YYYY 04 / 20 / 2009
	Mailing Address 222 3rd Street NE	Transaction ID: SA11AI.5487
	City Washington State DC Zip Code 20002	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	contribution
Name of Employer ACI-NA Occupation VP Government Affairs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

B.	Full Name (Last, First, Middle Initial) Deborah McElroy	Date of Receipt MM / DD / YYYY 04 / 15 / 2009
	Mailing Address 5511 Pt. Longstreet Way	Transaction ID: SA11AI.5479
	City Burke State VA Zip Code 22015	Amount of Each Receipt this Period 207.93
	FEC ID number of contributing federal political committee. C	payroll deduction contrib- ution
Name of Employer ACI-NA Occupation Executive Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1464.97	

C.	Full Name (Last, First, Middle Initial) Deborah McElroy	Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 5511 Pt. Longstreet Way	Transaction ID: SA11AI.5485
	City Burke State VA Zip Code 22015	Amount of Each Receipt this Period 207.93
	FEC ID number of contributing federal political committee. C	payroll deduction contrib- ution
Name of Employer ACI-NA Occupation Executive Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1672.90	

SUBTOTAL of Receipts This Page (optional)	1415.86
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 / 10
	<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)
AIRPORTS COUNCIL INTERNATIONAL-NORTH AMERICA POLITICAL ACTION COMMITTEE (Airport PAC)

A.	Full Name (Last, First, Middle Initial) Mr. Stephen J Mitchell	Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 4201 Bayshore Blvd. Unit 1801	Transaction ID: SA11AI.5507
	City Tampa State FL Zip Code 33611	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Squires Sanders & Dempsy Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 500.00	

B.	Full Name (Last, First, Middle Initial) Mr. Christopher Jon Oswald	Date of Receipt MM / DD / YYYY 04 / 15 / 2009
	Mailing Address 9562 Ament Street	Transaction ID: SA11AI.5478
	City Silver Spring State MD Zip Code 20910	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	payroll deduction contrib- ution
	Name of Employer ACI-NA Occupation VP Safety and Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 315.00	

C.	Full Name (Last, First, Middle Initial) Mr. Christopher Jon Oswald	Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 9562 Ament Street	Transaction ID: SA11AI.5484
	City Silver Spring State MD Zip Code 20910	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	payroll deduction contrib- ution
	Name of Employer ACI-NA Occupation VP Safety and Operations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 360.00	

SUBTOTAL of Receipts This Page (optional)	590.00
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 8 / 10
	<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)
AIRPORTS COUNCIL INTERNATIONAL-NORTH AMERICA POLITICAL ACTION COMMITTEE (Airport PAC)

A.	Full Name (Last, First, Middle Initial) Greg Principato		Date of Receipt
	Mailing Address 4717 Newcomb Place		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Alexandria	VA	22304
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer ACI-NA		Occupation President	Transaction ID: SA11AI.5480 Amount of Each Receipt this Period <input type="text"/> 208.69 payroll deduction contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 1460.83	

B.	Full Name (Last, First, Middle Initial) Greg Principato		Date of Receipt
	Mailing Address 4717 Newcomb Place		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Alexandria	VA	22304
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer ACI-NA		Occupation President	Transaction ID: SA11AI.5486 Amount of Each Receipt this Period <input type="text"/> 208.69 payroll deduction contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 1669.52	

C.	Full Name (Last, First, Middle Initial) Mrs. Elsie Rast Stuart		Date of Receipt
	Mailing Address 1231 Cedar Pond Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Pelion	SC	29123
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Richland-Lexington Airport Com		Occupation Commissioner	Transaction ID: SA11AI.5515 Amount of Each Receipt this Period <input type="text"/> 500.00 contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 500.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 917.38
TOTAL This Period (last page this line number only)	<input type="text"/> 2923.24

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

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NAME OF COMMITTEE (In Full)

AIRPORTS COUNCIL INTERNATIONAL-NORTH AMERICA POLITICAL ACTION COMMITTEE (Airport PAC)

A.

Full Name (Last, First, Middle Initial)
Chicago Dine Around Inc.

Mailing Address P.O. Box 723

City Chicago State IL Zip Code 60076

Purpose of Disbursement
Chicago PAC Event

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5500

Date of Disbursement

04 / 22 / 2009

Amount of Each Disbursement this Period

735.00

B.

Full Name (Last, First, Middle Initial)
The Second City

Mailing Address 1616 N Wells Street

City Chicago State IL Zip Code 60614

Purpose of Disbursement
Chicago PAC event

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5525

Date of Disbursement

04 / 01 / 2009

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1235.00

TOTAL This Period (last page this line number only)

1235.00

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)

AIRPORTS COUNCIL INTERNATIONAL-NORTH AMERICA POLITICAL ACTION COMMITTEE (Airport PAC)

A.	Full Name (Last, First, Middle Initial) CITIZENS FOR TOM PETRI Mailing Address P.O. Box 270 City Fond du Lac State WI Zip Code 54936 Purpose of Disbursement contribution Candidate Name CITIZENS FOR TOM PETRI Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5529 Date of Disbursement 04 / 15 / 2009 Amount of Each Disbursement this Period 500.00 011 Category/Type
B.	Full Name (Last, First, Middle Initial) LAUTENBERG FOR SENATE Mailing Address RIVERFRONT PLAZA STATION PO BOX 200596 City NEWARK State NJ Zip Code 07102 Purpose of Disbursement contribution Candidate Name LAUTENBERG FOR SENATE Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 00 Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5528 Date of Disbursement 04 / 15 / 2009 Amount of Each Disbursement this Period 1000.00 011 Category/Type
C.	Full Name (Last, First, Middle Initial) WYDEN FOR SENATE Mailing Address PO BOX 3498 City PORTLAND State OR Zip Code 97208 Purpose of Disbursement Contribution Candidate Name WYDEN FOR SENATE Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5530 Date of Disbursement 04 / 24 / 2009 Amount of Each Disbursement this Period 500.00 011 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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

2000.00