

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

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2004 FEB -5 A 11:07

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

<b>1. NAME OF COMMITTEE (in full)</b> American Association for Marriage & Family Therapy Committee for the Advancement of Marital & Family Therapy		<b>2. FEC IDENTIFICATION NUMBER</b> C00198259
<b>ADDRESS (number and street)</b> <input type="checkbox"/> Check if different than previously reported 112 South Alfred Street		
<b>CITY, STATE and ZIP CODE</b> Alexandria, VA 22314		
<b>3.</b> <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

### 4. TYPE OF REPORT

- (a)  April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid Year Report (Non-election Year Only)
- Termination Report
- Monthly Report Due On:
- |                                      |                                       |                                      |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20      | <input type="checkbox"/> October 20  |
| <input type="checkbox"/> March 20    | <input type="checkbox"/> July 20      | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20    | <input type="checkbox"/> August 20    | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20      | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 21  |
- 12-Day Pre-Election Report for the \_\_\_\_\_ (Type of Election)  
election on \_\_\_\_\_ in the State of \_\_\_\_\_
- 30-Day Post-Election Report following the General Election  
on \_\_\_\_\_ in the State of \_\_\_\_\_

(b) Is this Report an Amendment?  YES  NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	7/1/2003 through 12/31/2003		
6. (a)	Cash on Hand January 1, 19 2003		\$ 7,764.00
(b)	Cash on Hand at Beginning of Reporting Period	\$ 16,832.45	
(c)	Total Receipts (from Line 19)	\$ 26,810.05	\$ 40,032.27
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 43,642.50	\$ 47,796.27
7.	Total Disbursements (from Line 30)	\$ 24,500.00	\$ 28,653.72
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 19,142.50	\$ 19,142.50
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	

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  
David M Bergman

Signature of Treasurer

*David M Bergman*

Date

1/28/04

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 8437g.

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FEC FORM 3X

(postcard 8950)

**DETAILED SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**  
**PAGE 2, FEC FORM 28X**

Revised 1/10/13

POLITICAL COMMITTEE AMFT Committee for the Advancement of Marital & Family Therapy		REPORT COVERING PERIOD	
		FROM 7/1/2003	TO 12/31/2003
Description		COLUMN A Transaction Period	COLUMN B Calendar
<b>Receipts</b>			
11. Contributions (other than loans) From:			
a. Individuals/Persons Other Than Political Committees			
I. Itemized (use Schedule A)		3613.00	4313.00
II. Unitemized		23,197.05	35,709.27
III. Total (add I and II) >		26,810.05	40,032.27
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contributions (add a II, b and c) >		26,810.05	40,032.27
12. Transfers From Affiliated/Other Party Committees			
13. All Loans Received			
14. Loan Repayments Received			
15. Offsets To Operating Expenditures (Reimburse, Rebates, etc.)			
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			
17. Other Federal Receipts (Dividends, Interest, etc.)		0.00	0.00
18. Transfers from Nonfederal Account for Joint Activity			
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		26,810.05	40,032.27
20. Total Federal Receipts (subtract line 18 from line 19) >		26,810.05	40,032.27
<b>Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
I. Federal Share			
II. Non-Federal Share			
b. Other Federal Operating Expenditures			
c. Total Operating Expenditures (add a I, a II, and b) >			
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees		24,500.00	24,500.00
24. Independent Expenditures (use Schedule E)			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(e)) (see Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contribution Refunds (add a, b and c) >		0.00	153.72
29. Other Disbursements		24,500.00	28,653.72
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		24,500.00	28,653.72
31. Total Federal Disbursements (subtract line 21 a i from line 30) >			
<b>Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans) (from line 11d)		26,810.05	40,032.27
33. Total Contribution Refunds (from line 28d)		0.00	0.00
34. Net Contributions (other than loans) (subtract line 33 from line 32)		26,810.05	40,032.27
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >		0.00	0.00
36. Offsets to Operating Expenditures (from line 15)		0.00	0.00
37. Net Operating Expenditures (insert line 35 from 35) >		0.00	0.00

## SCHEDULE A

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Disabled Spouse's ProfitPAGE 1 OF 1  
FOR LINE NUMBER  
11a1

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)

American Association for Marriage & Family Therapy  
Committee for the Advancement of Marital and Family Therapy

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dr. Thomas H. McGlothen 5178 Blazer Parkway, Suite A Dublin, OH 43017-1399	Individual Contribution Occupation Marriage & Family Therapist	09/29/03	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ms. Dawn M. Lacy 114 Yorktown Drive Mount Laurel, NJ 08054	Individual Contribution Occupation Marriage & Family Therapist	12/23/03	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. James R. Bourne 411 Whispering Pines Drive Douglas, GA 31533	Individual Contribution Occupation Marriage & Family Therapist	07/22/03	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Gretchen C. Trison 88 Watertree Dr. East Syracuse, NY 13057	Individual Contribution Occupation Marriage & Family Therapist	07/18/03	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ms. Elaine A. Hornell Family Serv. Ctr, Fleet Activities Sasebo FSC 476, Box 62 FPO AP 96222 Dst62 Japan	Individual Contribution Occupation Marriage & Family Therapist	09/05/03	1013.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dr. Mary A. Erlanger 598 South Milledge Avenue, Suite S Athens, GA 30605	Individual Contribution Occupation Marriage & Family Therapist	10/06/03	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dr. Michael D. Warner 16049 Marlowe Way Oranges, IN 46539	Individual Contribution Occupation Marriage & Family Therapist	10/29/03	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional) .....

563.00

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

563.00

## SCHEDULE B

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary PagePAGE 3  
OF 3  
FOR LINE NUMBER  
23

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## NAME OF COMMITTEE (in Full)

American Association for Marriage & Family Therapy  
Committee for the Advancement of Marital and Family Therapy

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Blanche Lincoln 122 Maryland Avenue, NE, #3D Washington, DC 20002	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/14/03	1000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Peter Stark for Re-election P.O. Box 75214 Washington, DC 20013-5214	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/12/03	500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Strickland for Congress P.O. Box 580 Lucasville, OH 45648	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/27/03	1000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Blanche Lincoln 122 Maryland Avenue, NE, #3D Washington, DC 20002	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/10/03	1000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A Lot of People Supporting Tom Daschle 24 C Street, NE, 1st Floor Washington, DC 20002	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/29/03	1000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bill Thomas Campaign Committee P.O. Box 395 Bakersfield, CA 93302	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/08/03	1000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Sessions Senate Committee 29 Second St., NE Washington, DC 20002	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/01/03	1000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Grassley Committee 327 Holmes Run Parkway Alexandria, VA 22304	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/04/03	2000.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Rangel for Congress P.O. Box 577 Manhassetville Station NY, NY 11027	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/01/03	1000.00

SUBTOTAL of Disbursements This Page (optional)

9500.00

TOTAL This Period (Just page this line number only)

2500.00

## SCHEDULE B

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary PagePAGE 2  
OF 13  
FOR LINE NUMBER  
23

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Committee for the Advancement of Marital and Family Therapy

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
John Dingell for Congress P.O. Box 75214 Washington, DC 20013-5214	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/15/03	1000.00
Tim Murphy for Congress 128 N. Columbus Street Alexandria, VA 22314	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/15/03	1000.00
C. Full Name, Mailing Address and ZIP Code Mike Downe for U.S. Senate 406 Virginia Avenue Alexandria, VA 22302	Purpose of Disbursement Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 09/30/03	Amount of Each Disbursement This Period 1000.00
D. Full Name, Mailing Address and ZIP Code Berry for Congress 227 Mass. Ave., NE Suite 101 Washington, DC 20002	Purpose of Disbursement Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/07/03	Amount of Each Disbursement This Period 1000.00
E. Full Name, Mailing Address and ZIP Code Western Action PAC Casper, WY 82602	Purpose of Disbursement Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/10/03	Amount of Each Disbursement This Period 1000.00
F. Full Name, Mailing Address and ZIP Code Bazelon Center for Mental Health Law Natalie Shear Assoc., Inc. 750 M St, NW, Suite 201 Washington, DC 20036	Purpose of Disbursement Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/10/03	Amount of Each Disbursement This Period 1000.00
G. Full Name, Mailing Address and ZIP Code The Boyan Leader PAC 04 Hume Avenue Alexandria, VA 22301	Purpose of Disbursement Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 9/04/03	Amount of Each Disbursement This Period 1000.00
H. Full Name, Mailing Address and ZIP Code Friends for Craig Thomas P.O. Box 1580 Casper, WY 82602	Purpose of Disbursement Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/18/03	Amount of Each Disbursement This Period 3000.00
I. Full Name, Mailing Address and ZIP Code Bill Thomas Campaign Committee P.O. Box 395 Bakersfield, CA 93302	Purpose of Disbursement Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/14/03	Amount of Each Disbursement This Period 1000.00

SUBTOTAL of Disbursements This Page (optional) .....

1,000.00

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

34,500.00

## SCHEDULE B

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Disbursed Secretary PagePAGE 3  
OF 9  
FOR LINE NUMBER  
23

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Committee for the Advancement of Marital and Family Therapy

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Volunteer PAC PO Box 158552 Nashville, TN 37215		10/07/03	1000.00
B. Full Name, Mailing Address and ZIP Code ARMFAC 1155 21st St, NW Washington, DC 20036	Purpose of Disbursement Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 9/12/03	Amount of Each Disbursement This Period 1000.00
C. Full Name, Mailing Address and ZIP Code Johnson for Congress P.O. Box 1986 New Britain, CT 06050	Purpose of Disbursement Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 07/23/03	Amount of Each Disbursement This Period 1000.00
D. Full Name, Mailing Address and ZIP Code Upton for All of US 402 State Street St. Joseph, MI 49085	Purpose of Disbursement Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8/11/03	Amount of Each Disbursement This Period 1000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

24500.00

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE  
 FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified/Priority/Express Mail	Postmarked (F/C) 1-30-04
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>JMP</i>	2-5-04
PREPARER	DATE PREPARED