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FEC
FORM 1

STATEMENT OF
ORGANIZATION

Office Use Only

1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

ASSOCIATION OF PROFESSIONAL FLIGHT
ATTENDANTS AAG

ADDRESS (number and street)

1004 WEST EULESS BLVD

(Check if address
is changed)

EULESS

TX

76040

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address
is changed)

ACC12@APFA.ORG

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address
is changed)

WWW.APFA.ORG

2. DATE

04 / 01 / 2010

3. FEC IDENTIFICATION NUMBER

C00246421

4. IS THIS STATEMENT

NEW (N)

OR

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Michael Parker

Signature of Treasurer

Michael Parker

Date

04 / 01 / 2010

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

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2009)

10030292049

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate _____

Candidate Party Affiliation Office Sought: House Senate President State District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
 - Corporation Corporation w/o Capital Stock Labor Organization
 - Membership Organization Trade Association Cooperative

In addition, this committee is a Lobbyist/Registrant PAC.
- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
 - In addition, this committee is a Lobbyist/Registrant PAC.
 - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.	_____	FEC ID number	<input checked="" type="checkbox"/>
2.	_____	FEC ID number	<input checked="" type="checkbox"/>
3.	_____	FEC ID number	<input checked="" type="checkbox"/>
4.	_____	FEC ID number	<input checked="" type="checkbox"/>

10030292050

Write or Type Committee Name

ASSOCIATION OF PROFESSIONAL FLIGHT ATTENDANTS PAC

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

ASSOCIATION OF PROFESSIONAL FLIGHT ATTENDANTS

Mailing Address

11004 WEST EWLESS BLVD
EWLESS TX 76040
CITY STATE ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

MICHAEL PARKER

Mailing Address

11004 WEST EWLESS BLVD
EWLESS TX 76040
CITY STATE ZIP CODE

Title or Position

TREASURER

Telephone number 817-540-0108

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

MICHAEL PARKER

Mailing Address

11004 WEST EWLESS BLVD
EWLESS TX 76040
CITY STATE ZIP CODE

Title or Position

TREASURER

Telephone number 817-540-0108

10030292051

Full Name of Designated Agent

BRETT DURKIN

Mailing Address

1004 WEST EULESS BLVD

EULESS

CITY

TX

STATE

76040-

ZIP CODE

Title or Position

VICE PRESIDENT

Telephone number

817-540-6108

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

CHASE BANK

Mailing Address

1010 WEST EULESS BLVD

EULESS

CITY

TX

STATE

76040-

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

10030292052

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.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked
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USPS Priority Mail Postmarked
 Delivery Confirmation™ or Signature Confirmation™ Label

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Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

John H
 PREPARER 4/15/10
 DATE PREPARED

10030292053