

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER
2008 JUL 21 AM 11:02

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

American Association of Preferred Provider Organizations Political Action Committee

ADDRESS (number and street) 222 South First Street

Check if different than previously reported. (ACC)

LOUISVILLE KY 40202

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C00352922

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 Year-End 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 M M / D D / Y Y Y Y in the State of

(d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)

Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 04 ' 01 ' 2008 through 06 ' 30 ' 2008

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 Karen Greenrose

Signature of Treasurer *Karen L. Greenrose* Date 07 ' 14 ' 2008

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

| | | | | | | | |
|-----------------|--|--|--|--|--|--|--|
| Office Use Only | | | | | | | |
|-----------------|--|--|--|--|--|--|--|

FEC FORM 3X
Rev. 12/2004

28039794056

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name American Association of Preferred Provider
Organizations Political Action Committee

Report Covering the Period: From: 04 ' 01 ' 2008 To: 06 ' 30 ' 2008

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, <u>2008</u> | | , 9,130. ⁷⁹ |
| (b) Cash on Hand at Beginning of Reporting Period..... | , 20,425. ⁰⁷ | |
| (c) Total Receipts (from Line 19)..... | , , . 0 | , 11,605. ⁰⁰ |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | , 20,425. ⁰⁷ | , 20,735. ⁷⁹ |
| 7. Total Disbursements (from Line 31)..... | , 13,020. ⁰⁰ | , 13,330. ⁷² |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | , 7,405. ⁰⁷ | , 7,405. ⁰⁷ |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | , , . 0 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | , , . 0 | |

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

28039794057

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name American Association of Preferred Provider Organizations Political Action Committee

Report Covering the Period: From: 04 ' 01 ' 2008 To: 06 ' 30 ' 2008

28039794058

| 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)..... | 0 | 5,530. ⁰⁰ |
| (ii) Unitemized | 0 | 6,075. ⁰⁰ |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 0 | 11,605. ⁰⁰ |
| (b) Political Party Committees | 0 | 0 |
| (c) Other Political Committees (such as PACs)..... | 0 | 0 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 0 | 11,605. ⁰⁰ |
| 12. Transfers From Affiliated/Other Party Committees | 0 | 0 |
| 13. All Loans Received | 0 | 0 |
| 14. Loan Repayments Received | 0 | 0 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0 | 0 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees | 0 | 0 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 0 | 0 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3) | 0 | 0 |
| (b) Levin Funds (from Schedule H5) | 0 | 0 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0 | 0 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶ | 0 | 11,605. ⁰⁰ |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 0 | 11,605. ⁰⁰ |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

28039794059

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | , , . 0 | , , . 0 |
| (ii) Non-Federal Share..... | , , . 0 | , , . 0 |
| (b) Other Federal Operating Expenditures | , , 120.00 | , , 1,030.72 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | , , 120.00 | , , 1,030.72 |
| 22. Transfers to Affiliated/Other Party Committees..... | , , . 0 | , , . 0 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | , , 12,300.00 | , , 12,300.00 |
| 24. Independent Expenditures (use Schedule E) | , , . 0 | , , . 0 |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)..... | , , . 0 | , , . 0 |
| 26. Loan Repayments Made..... | , , . 0 | , , . 0 |
| 27. Loans Made..... | , , . 0 | , , . 0 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | , , . 0 | , , . 0 |
| (b) Political Party Committees | , , . 0 | , , . 0 |
| (c) Other Political Committees (such as PACs)..... | , , . 0 | , , . 0 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | , , . 0 | , , . 0 |
| 29. Other Disbursements | , , . 0 | , , . 0 |
| 30. Federal Election Activity (2 U.S.C. §431(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | , , . 0 | , , . 0 |
| (ii) "Levin" Share..... | , , . 0 | , , . 0 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | , , . 0 | , , . 0 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))..... | , , . 0 | , , . 0 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).. | , , 13,020.00 | , , 13,330.72 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | , , 13,020.00 | , , 13,330.72 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| 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) | , , . 0 | , 11,605. ⁰⁰ |
| 34. Total Contribution Refunds (from Line 28(d)) | , , . 0 | , , . 0 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | , , . 0 | , 11,605. ⁰⁰ |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | , , 720. ⁰⁰ | , 1,030. ⁷² |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | , , . 0 | , , . 0 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | , , 720. ⁰⁰ | , , 720. ⁰⁰ |

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**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 1 OF 2 |
| | <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 | |

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 of Preferred Powder Organizations Political Action Committee

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) | | Date of Disbursement |
| A. <u>SunTrust Bank</u> | | <u>04 ' 02 ' 2008</u> |
| Mailing Address <u>PO Box 622227</u> | | Amount of Each Disbursement this Period <u>, , 40.00</u> |
| City <u>Orlando</u> | State <u>FL</u> Zip Code <u>328162</u> | |
| Purpose of Disbursement <u>electronic funds debit</u> | Candidate Name | Category/ Type |
| 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) ▼ | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) | | Date of Disbursement |
| B. <u>SunTrust Bank</u> | | <u>05 ' 02 ' 2008</u> |
| Mailing Address <u>PO Box 622227</u> | | Amount of Each Disbursement this Period <u>, , 40.00</u> |
| City <u>Orlando</u> | State <u>FL</u> Zip Code <u>328162</u> | |
| Purpose of Disbursement <u>electronic funds debit</u> | Candidate Name | Category/ Type |
| 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) ▼ | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) | | Date of Disbursement |
| C. <u>SunTrust Bank</u> | | <u>06 ' 03 ' 2008</u> |
| Mailing Address <u>PO Box 622227</u> | | Amount of Each Disbursement this Period <u>, , 40.00</u> |
| City <u>Orlando</u> | State <u>FL</u> Zip Code <u>328162</u> | |
| Purpose of Disbursement <u>electronic funds debit</u> | Candidate Name | Category/ Type |
| 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) ▼ | |
| State: District: | | |

| | |
|---|-------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | , , . |
| TOTAL This Period (last page this line number only).....▶ | , , . |

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**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 2 OF 2

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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) **American Association of Preferred Provider Organizations Political Action Committee**

Full Name (Last, First, Middle Initial)

| | | |
|---|--|--|
| A. Stakem, Karen | | Date of Disbursement |
| Mailing Address 48 Poplar Avenue | | 04 ' 22 ' 2008 |
| City Wheeling | State WV | Zip Code 26003 |
| Purpose of Disbursement fec compliance | Candidate Name | Amount of Each Disbursement this Period , 600⁰⁰ |
| 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) ▼ | |
| State: _____ | District: _____ | Category/Type |

| | | |
|---|--|---|
| B. | | Date of Disbursement |
| Mailing Address | | M M / D D / Y Y Y Y |
| City | State | Zip Code |
| Purpose of Disbursement | Candidate Name | Amount of Each Disbursement this Period |
| 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) ▼ | |
| State: _____ | District: _____ | Category/Type |

| | | |
|---|--|---|
| C. | | Date of Disbursement |
| Mailing Address | | M M / D D / Y Y Y Y |
| City | State | Zip Code |
| Purpose of Disbursement | Candidate Name | Amount of Each Disbursement this Period |
| 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) ▼ | |
| State: _____ | District: _____ | Category/Type |

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

, 720⁰⁰

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

, 720⁰⁰

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**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 | OF |
| | <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) American Association of Preferred Provider Organizations Political Action Committee

A. Full Name (Last, First, Middle Initial) John McCain for 2008 Date of Disbursement 05 ' 29 ' 2008

Mailing Address PO Box 16118

City Arlington State VA Zip Code 22215

Purpose of Disbursement Contribution Amount of Each Disbursement this Period 2,300.⁰⁰

Candidate Name John McCain Category/Type

Office Sought: House Senate President Disbursement For: Primary General Other (specify) ▼

State: District:

B. Full Name (Last, First, Middle Initial) Friends of Max Baucus Date of Disbursement 04 ' 01 ' 2008

Mailing Address PO Box 586

City Helena State MT Zip Code 59624

Purpose of Disbursement Contribution Amount of Each Disbursement this Period 5,000.⁰⁰

Candidate Name Category/Type

Office Sought: House Senate President Disbursement For: Primary General Other (specify) ▼

State: MT District:

C. Full Name (Last, First, Middle Initial) Glacier PAC Date of Disbursement 04 ' 01 ' 2008

Mailing Address 236 Massachusetts Ave. #603

City Washington State DC Zip Code 20002

Purpose of Disbursement Contribution Amount of Each Disbursement this Period 5,000.⁰⁰

Candidate Name Category/Type

Office Sought: House Senate President Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... 12,300.⁰⁰

TOTAL This Period (last page this line number only)..... 12,300.⁰⁰

28039794063

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.

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PREPARER
(3/2005)

7/21/08

DATE PREPARED

28039794064