

# 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 type="checkbox"/> May 20 (M5) | <input checked="" 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 07 01 2011 through 07 31 2011

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 08 12 2011

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:    To:

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <input type="text" value="2011"/>		37513.01
(b) Cash on Hand at Beginning of Reporting Period .....	36531.75	
(c) Total Receipts (from Line 19) .....	1145.32	14386.24
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	37677.07	51899.25
7. Total Disbursements (from Line 31) .....	867.95	15090.13
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	36809.12	36809.12
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> 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	7

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	1	1

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) .....	1125.32	13663.24
(ii) Unitemized .....	20.00	723.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	1145.32	14386.24
(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) .....	1145.32	14386.24
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)) .....	1145.32	14386.24
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	1145.32	14386.24

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.....	367.95	1590.13
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	367.95	1590.13
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	500.00	13500.00
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))..	867.95	15090.13
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	867.95	15090.13

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) .....	1145.32	14386.24
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1145.32	14386.24
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	367.95	1590.13
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	367.95	1590.13

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 11  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)**

<p><b>A.</b> Full Name (Last, First, Middle Initial) Ms Ann Bellavia</p> <p>Mailing Address 619 North Edison Street</p> <p>City State Zip Code Arlington VA 22203</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer ACI-NA      Occupation Director of Govmt Affairs</p> <p>Receipt For:      Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼      <span style="border: 1px solid black; padding: 2px;">267.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">07 / 15 / 2011</span></p> <p><b>Transaction ID:</b> SA11AI.6481</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">21.00</span></p> <p>payroll deduction contribution</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Ms Ann Bellavia</p> <p>Mailing Address 619 North Edison Street</p> <p>City State Zip Code Arlington VA 22203</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer ACI-NA      Occupation Director of Govmt Affairs</p> <p>Receipt For:      Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼      <span style="border: 1px solid black; padding: 2px;">288.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">07 / 29 / 2011</span></p> <p><b>Transaction ID:</b> SA11AI.6482</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">21.00</span></p> <p>payroll deduction contribution</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Ms Monica Hargrove</p> <p>Mailing Address 1330 Kingston Avenue</p> <p>City State Zip Code Alexandria VA 22302</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer ACI-NA      Occupation General Counsel</p> <p>Receipt For:      Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼      <span style="border: 1px solid black; padding: 2px;">950.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">07 / 15 / 2011</span></p> <p><b>Transaction ID:</b> SA11AI.6485</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">75.00</span></p> <p>payroll deduction contribution</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">117.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# 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 / 11
	<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)

<b>A.</b>	Full Name (Last, First, Middle Initial) Ms Monica Hargrove		Date of Receipt MM / DD / YYYY 07 / 29 / 2011
	Mailing Address 1330 Kingston Avenue		Transaction ID: SA11AI.6486
	City Alexandria	State VA	Zip Code 22302
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
	Name of Employer ACI-NA	Occupation General Counsel	payroll deduction contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1025.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Deborah McElroy		Date of Receipt MM / DD / YYYY 07 / 15 / 2011
	Mailing Address 5511 Pt. Longstreet Way		Transaction ID: SA11AI.6489
	City Burke	State VA	Zip Code 22015
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 208.33
	Name of Employer ACI-NA	Occupation Executive Vice President	payroll deduction contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2708.29		

<b>C.</b>	Full Name (Last, First, Middle Initial) Deborah McElroy		Date of Receipt MM / DD / YYYY 07 / 29 / 2011
	Mailing Address 5511 Pt. Longstreet Way		Transaction ID: SA11AI.6490
	City Burke	State VA	Zip Code 22015
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 208.33
	Name of Employer ACI-NA	Occupation Executive Vice President	payroll deduction contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2916.62		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	491.66
<b>TOTAL</b> 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 8 / 11

(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)

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

**A.**

Full Name (Last, First, Middle Initial)

Mr. Christopher Jon Oswald

Mailing Address 9562 Ament Street

City State Zip Code  
Silver Spring MD 20910

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

Name of Employer ACI-NA Occupation VP Safety and Operations

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 15 / 2011

Transaction ID: SA11AI.6487

Amount of Each Receipt this Period  
50.00

payroll deduction contribution

**B.**

Full Name (Last, First, Middle Initial)

Mr. Christopher Jon Oswald

Mailing Address 9562 Ament Street

City State Zip Code  
Silver Spring MD 20910

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

Name of Employer ACI-NA Occupation VP Safety and Operations

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 29 / 2011

Transaction ID: SA11AI.6502

Amount of Each Receipt this Period  
50.00

payroll deduction contribution

**C.**

Full Name (Last, First, Middle Initial)

Greg Principato

Mailing Address 4717 Newcomb Place

City State Zip Code  
Alexandria VA 22304

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

Name of Employer ACI-NA Occupation President

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2708.29

Date of Receipt

M M / D D / Y Y Y Y  
07 / 15 / 2011

Transaction ID: SA11AI.6491

Amount of Each Receipt this Period  
208.33

payroll deduction contribution

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

**308.33**

**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 / 11	
	(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"/> 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)  
AIRPORTS COUNCIL INTERNATIONAL-NORTH AMERICA POLITICAL ACTION COMMITTEE (Airport PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Greg Principato		Date of Receipt		
	Mailing Address 4717 Newcomb Place		M M / D D / Y Y Y Y 07 / 29 / 2011		
	City Alexandria	State VA	Zip Code 22304	<b>Transaction ID:</b> SA11AI.6492	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 208.33		
	Name of Employer ACI-NA	Occupation President	payroll deduction contribution		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2916.62			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	208.33
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1125.32

**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)

<b>A.</b> Full Name (Last, First, Middle Initial) Merchant Services Mailing Address 7300 Chapman HWY City Knoxville State TN Zip Code 37920 Purpose of Disbursement credit card processing fee Candidate Name AIRPORTS COUNCIL INTERNATIONAL-NORTH AMERICA POLITICAL ACTION COMMITTEE (Airport PAC) 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:	<b>Transaction ID:</b> SB21B.6497 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 5 / 2 0 1 1
	Amount of Each Disbursement this Period 35.00
<b>B.</b> Full Name (Last, First, Middle Initial) Westin Savannah Harbor Resort & Spa Mailing Address One Resort Drive City Savannah State GA Zip Code 31421 Purpose of Disbursement Refund for PAC event Expenses (Feb 2011 event) Candidate Name AIRPORTS COUNCIL INTERNATIONAL-NORTH AMERICA POLITICAL ACTION COMMITTEE (Airport PAC) 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:	<b>Transaction ID:</b> SB21B.6500 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 8 / 2 0 1 1
	Amount of Each Disbursement this Period 325.00

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

360.00

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

360.00

**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)

PAGE 11 / 11

<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)  
MICHAUD FOR CONGRESS

Mailing Address 213 Lisbon St

City Lewiston State ME Zip Code 04240

Purpose of Disbursement

Candidate Name  
MICHAUD FOR CONGRESS

Office Sought:  House  
 Senate  
 President  
State: ME District: 02

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB23.6495

Date of Disbursement

07 / 11 / 2011

Amount of Each Disbursement this Period

500.00

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

500.00

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

500.00