FEC FORM 3X	AN	ID DISE	OF RECI SURSEM An Authorize	ENTS	ee		Office Use Only	
1. NAME OF COMMITTEE (in fu		FEC MAILING		ample:If typing er the lines	, type			
The American Occ (AOTPAC)				n Committee				
ADDRESS (number and Check if differ than previously reported. (ACC	ent	720 Montgomery 0 Box 31220 1 1 1 1 1 ethesda 1 1 1 1 1	/ Lane				20824	
2. FEC IDENTIFICAT	ION NUMBER	¥	CITY 🛋		5	STATE	ZIPCOD	E 🔺
C00089086	• • • •		3. IS THIS REPORT		N) OR	AM (A)	ENDED	
July 15 Quarterly October Quarterly January 3 Quarterly July 31 M Report(N Year Only	rts: Report(Q1) Report(Q2) 15 Report(Q3) 31 Report(YE) lid-Year on-election	(b) Monthly Report Due On: (c) 12-Day PRE -El Report (d) 30-Day Post -E Report	ection for the:		12C)	Sep 2	20 (M9) 20 (M10) 12G) 2G) in the State of	Special (30S)
5. Covering Period I certify that I have exam Type or Print Name of T Signature of Treasurer NOTE : Submission of f	Electronicall	t and to the best Christina A. Met y Filed by Chr	zler		D	ate 07		2 0 0 6 .C 437g.
Office Use Only							FEC FORM (Rev. 02/200	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

	FEC Form 3X (Rev. 02/2003)		Page 2
v	Vrite or Type Committee Name The American Occupational Therapy Association, In (AOTPAC)	c. Political Action Commit	tee
R	Report Covering the Period: From:		To: D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 ^Y 2006 ^Y ^Y		54213.25
	(b) Cash on Hand at Begining of Reporting Period	61810.58	
Write or Ty The Ar (AOTP Report Cov 6. (a) Cas (b) Cas Beg (c) Tota (d) Sub 6(c) 6(a) 7. Total Dis 8. Cash on Reporting (subtract 9. Debts an the comr Schedule	(c) Total Receipts (from Line 19)	15976.37	60463.20
	 (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	77786.95	114676.45
7.	Total Disbursements (from Line 31)	15591.26	52480.76
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	62195.69	62195.69
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	

X 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

mage	# 26930268101	DETAILED SUMMARY PAGE OF RECEIPTS	
	FEC Form 3X (Rev. 02/2003)		Page 3
W	/rite or Type Committee Name The American Occupational Therap (AOTPAC)	y Association, Inc. Political Action Committee	
R	eport Covering the Period: From:	M M D D Y	M M D D Y
	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)	1460.00	10421.00
	(ii) Unitemized	14510.50	50010.53
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	15970.50	60431.53
	(b) Political Party Committees	0.00	0.00
	 (c) Other Political Committees (such as PACs) (d) Total Contributions (add Lines 	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry	15970.50	60431.53
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
4.0	(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.)	5.87	31.67
18.	Transfers from Non-Federal and Levin Fur	nds	
	(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))	15976.37	60463.20
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	15976.37	60463.20

DETAILED SUMMARY PAGE

	COLUMN A	COLUMN B
	Total This Period	Calendar Year-to-Date
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
	0.00	0.00
(b) Other Federal Operating		
Expenditures	166.26	1105.76
(add 21(a)(i), (a)(ii) and (b)) 🕨	166.26	1105.76
	0.00	0.00
Contributions to Federal Candidates/Committees		
and Other Political Committees		51200.00
(use Schedule E) Coordinated Expenditures Made by Party	0.00	0.00
Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	75.00	175.00
Ē	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)) >	75.00	175.00
Other Disbursements	0.00	0.00
Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity		
(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
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	15591.26	52480.76
Total Federal Disbursements		
(subtract Line 21(a)(ii) from Line 30(a)(ii)		
	Activity (from Schedule H4) (i) Federal Share	Display of the second secon

DETAILED SUMMARY PAGE

	FEC Form 3X (Rev. 02/2003)	of Disbursements	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)	15970.50	60431.53
34.	Total Contribution Refunds (from Line 28(d))	75.00	175.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	15895.50	60256.53
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	166.26	1105.76
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	166.26	1105.76

SC	HEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 6 / 14
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12
•				
or f	r information copied from such Reports and Stat or commercial purposes, other than using the na	ame and add	rot be sold or used by any persident definition of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\geq	The American Occupational Therapy Ass (AOTPAC)	sociation,	Inc. Political Action Commit	itee
Α.	Full Name (Last, First, Middle Initial) Joy Louise Price			Date of Receipt
	Mailing Address 101 N Long Ave			06 / 06 / Y Y Y Y 06 06 / 2006
	City	State	Zip Code	Transaction ID: 15088121
	Hartville	MO	65667-8306	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer Occupational Therapy Serv-	Occupation OT	n	_
	ices of Misso Receipt For:		e Year-to-Date V	—
	Primary General		005.00	
	Other (specify) v	0 0	365.00	
_	Full Name (Last, First, Middle Initial) Anne Frances Cronin			Date of Receipt
	Mailing Address 970 Stewart St			M · M / D · D / Y · Y · Y · Y Y 0 6 0 6 2 0 0 6 2
	City	State	Zip Code	Transaction ID: 15088987
	Morgantown	WV	26505-3648	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		400.00
	Name of Employer West Virginia University	Occupation OT	n	_
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General		435.00	
	Other (specify) 🔻	0 0	+35.00	
	Full Name (Last, First, Middle Initial) Rebecca E Argabrite Grove			Date of Receipt
	Mailing Address 41718 Browns Farm Lan	e		M · M / D · D / Y · Y · Y · Y Y
	City	State	Zip Code	Transaction ID: 15569473
	Leesburg	VA	20176-6026	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer Loudoun County Public Sch-	Occupation OT	n	
	ools Receipt For:		e Year-to-Date ▼	
	Primary General	33 - 3		1
	Other (specify) v	0 0	240.00	
รเ	JBTOTAL of Receipts This Page (optional)			795.00
	DTAL This Period (last page this line number on			

	CHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 7 / 14 (check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	y not be sold or used by any pers	13 14 15 16 17 on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
\geq	The American Occupational Therapy As (AOTPAC)	ssociation,	Inc. Political Action Commi	ttee
Α.	Full Name (Last, First, Middle Initial) Jill J Glinka			Date of Receipt
	Mailing Address 5316 SW LincoInshire C	Cir		0 6 0 7 Y Y Y Y 0 6 0 7 2 0 0 6
	City	State	Zip Code	Transaction ID: 15570222
	Topeka	KS	66610-9662	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer USD 501	Occupation OT	n	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	250.00	
в.	Full Name (Last, First, Middle Initial) Merlene C Gingher			Date of Receipt
	Mailing Address 9216 S Hill Rd			M · M / D · D / Y · Y · Y · Y Y Y · Y Y
	City	State	Zip Code	Transaction ID: 15574805
	Boston	NY	14025-9788	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		365.00
	Name of Employer D'Youville College	Occupation OT	n	
	Receipt For:	-	e Year-to-Date 🔻	_
	Primary General Other (specify)		365.00	1
		0 0		-
C.	Full Name (Last, First, Middle Initial) Monica Lee Robinson			Date of Receipt
	Mailing Address 368 W 6th Ave			M + M / D + D / Y + Y + Y Y 0 6 2 0 2 0 0 6 20 200 6 20 200 6
	City	State	Zip Code	Transaction ID: 15574889
	Columbus	OH	43201-3135	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer HCR Manor Care	Occupation OT	n	
	Receipt For:	Aggregate	e Year-to-Date 🔻	_
	Primary General Other (specify) ▼	0 0	750.00	
6	UBTOTAL of Receipts This Page (optional)			665.00
				1460.00
1 '	OTAL This Period (last page this line number o	uuy)		

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\mathbb{Z}	The American Occu (AOTPAC)	upational Thera	apy Assoc	iation, In	c. Political Ac	tion (Con	nmitte	ee									
•	Full Name (Last, First,	Middle Initial)								Trans	actio	on ID:	153	39067	79			
Α.	SunTrust Bank									Date of Disbursement								
	Mailing Address P	O Box 622227																
	City Orlando		-	State Zip Code FL 32862-2227					Amount of Each Disbursement this Period							_		
	Purpose of Disbursem bank fees	ent					001	1		L.						166.2	6	
	Candidate Name						ateg Type	•										
	Office Sought:	House	Disburser	nent For:						bank	fees							
		Senate		Primary	General					barny	1000							
	State: Dis	President trict:		Other (spe	ecity) 🔻													

1		
SUBTOTAL of Disbursements This Page (optional)	►	166.26
TOTAL This Period (last page this line number only)	•	166.26
FEC Schedule B (Form 3X) Rev. 02/2003		

S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)	OR LINE NUMBER: PAGE 9 / 14												
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page] 21b	ć	22		23	24		25			
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	or commercial purposes, other than using the name												-		
$\left \right\rangle$	NAME OF COMMITTEE (In Full) The American Occupational Therapy Assoc	ciation, Inc. Political Acti	tion Committee												
Ľ	(AOTPAC)														
Α.	Full Name (Last, First, Middle Initial) Johnson For Congress Committee					Transaction ID: 15657666 Date of Disbursement									
	Mailing Address P. O. Box 1986						$\begin{array}{c c} M & M \\ 0 & 6 \\ \end{array} \begin{array}{c} ' \\ 2 & 2 \\ \end{array} \begin{array}{c} D \\ 2 & 2 \\ \end{array} \begin{array}{c} ' \\ 2 & 2 \\ \end{array} \begin{array}{c} Y \\ 2 & 0 \\ 0 & 6 \\ \end{array} \begin{array}{c} Y \\ Y \\ 2 \\ \end{array} \begin{array}{c} Y \\ Y $								
	,	State Zip Code CT 06050						nt of	Each	Disburs	-		-	1	
	Purpose of Disbursement campaign contribution			0]	L.					1000.0	00		
	Candidate Name Rep. Nancy L. Johnson Office Sought: X House Disburser	ment For: 2006			gory/ pe										
		Primary General Other (specify)					campa	aigr	i cont	ributior	ו				
	Full Name (Last, First, Middle Initial)						-			4 5 6 5 7	070				
В.	Johnson For Congress Committee						Date c		sburse	D /		ÝÝ	Y		
	Mailing Address P. O. Box 1986						06		2	2	2	0 Ó 6			
	New Britain	State Zip Code CT 06050					Amou	nt of	Each	Disburs		it this F		1	
	Purpose of Disbursement campaign contribution		Г	0.	11	1	L.		_			1000.0		1	
	Candidate Name Rep. Nancy L. Johnson				gory/ pe										
	Office Sought: X House Disburse Senate President State: CT District: 5	ment For: 2006 Primary X General Other (specify) ▼				(campa	aigr	ı cont	ributior	ı				
С.	Full Name (Last, First, Middle Initial) Friends Of Congressman George Miller									15657	663				
							Date o				Y Y	Ý . Y .	Y		
	Mailing Address P.O. Box 5864						06			^D 2		2 0 Ó 6			
		State Zip Code CA 94524					Amou	nt of	Each	Disburs	-		-	1	
	Purpose of Disbursement campaign contribution			0	11		L.					1000.0	. 00	1	
	Candidate Name Rep. George Miller				gory/ pe										
	Senate President	ment For: 2006 Primary X General Other (specify) ▼					campa	aigr	i cont	ributior	ו				
Г	State: CA District: 7													1	
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S	CHEDULE B (FEC Form 3X)					LINE NUMBER: PAGE 10 / 14								
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	NAME OF COMMITTEE (In Full)		0011			30110		ibuti		3001	COIIII	muco		
\backslash	The American Occupational Therapy Assoc (AOTPAC)	ciation, Inc. Political Acti	ion	Сс	ommitt	tee								
Α.	Full Name (Last, First, Middle Initial) Reed Committee			Transaction ID: 15657674 Date of Disbursement										
	Mailing Address PO Box 8628							M /	^D 2	2	Ý Ý	0 Å G	j Y	
	Cranston	State Zip Code RI 02920						nt of	Each	Disburs		it this F		
	Purpose of Disbursement campaign contribution Candidate Name			0								1000.0		
	Sen. Jack Reed				gory/ pe									
		ment For: 2006 Primary General Other (specify) ▼					camp	aigr	n cont	ributior	ו			
	Full Name (Last, First, Middle Initial)					-	Trans	anti		15657	850			
В.							Date o		sburse	ement		Y	Y	
	Mailing Address PO Box 16488						06		2	Ž	2	οòε	;	
		State Zip Code VA 22215					Amou	nt of	Each	Disburs	-			
	Purpose of Disbursement campaign contribution			0.	11		L					1500.0	0	
	Candidate Name		Ca	ate	gory/ pe									
	Senate President	ment For: Primary General Other (specify) ▼					camp	aigr	n cont	ributior	ו			
	State: District: Full Name (Last, First, Middle Initial)					_								
C.	Pryce For Congress								sburse	D /		v	Y	
	Mailing Address 145 E. Rich Street						0 6		2	Ž	2	0 Å 6	; ⁻	
		StateZip CodeOH43215					Amou	nt of	Each	Disburs				
	Purpose of Disbursement campaign contribution			0			L.					1000.0	00	
	Candidate Name Rep. Deborah Pryce				gory/ pe									
	Office Sought: X House Disburse Senate President State: OH District: 15	ment For: 2006 Primary X General Other (specify) ▼					camp	aigr	n cont	ributior	ו			
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Ľ	OTAL This Period (last page this line number only)				•	•	<u> </u>					_		

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ITE	MIZED DISBURSEMENTS	for eacl	h category of the d Summary Page	, 	(([check or 7 21b		26						
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k	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , ,											
	The American Occupational Therap AOTPAC)	y Association, I	nc. Political Act	tion	Сс	ommitte	ee							
	Full Name (Last, First, Middle Initial) Paula Hollinger For Congress					Transaction ID: 15657665 Date of Disbursement								
N	Mailing Address P.O. Box 5861				$\begin{array}{c} \begin{array}{c} M & M \\ 0 & 6 \end{array} \end{array} / \begin{array}{c} D & 2 \\ 2 & 2 \end{array} / \begin{array}{c} Y & Y \\ 2 & 0 & 0 \\ 6 \end{array} $									
	City Saltimore	State MD	Zip Code 21282				Amount of Each Disbursement this Period	_						
_	Purpose of Disbursement	WID	21202	_	-		1000.00							
C	ampaign contribution				0	11								
	Candidate Name Paula Hollinger					gory/ pe								
	Senate President	Disbursement For: X Primary Other (sp	2006 General pecify) ▼				campaign contribution							
	State: MD District: 3 Full Name (Last, First, Middle Initial)													
-	Kevin Mccarthy For Congress						Transaction ID: 15657661 Date of Disbursement							
N	Mailing Address 455 Capitol Mall S	uite 801					$\begin{array}{c} \begin{array}{c} M \\ 0 \\ 6 \end{array} \\ \end{array} \\ \left(\begin{array}{c} D \\ 2 \\ 2 \end{array} \right) \\ \left(\begin{array}{c} Y \\ 2 \\ 2 \\ 0 \\ 0 \\ 6 \end{array} \right) \\ \left(\begin{array}{c} Y \\ 2 \\ 0 \\ 0 \\ 6 \end{array} \right) \\ \left(\begin{array}{c} Y \\ 2 \\ 0 \\ 0 \\ 6 \end{array} \right) \\ \left(\begin{array}{c} Y \\ 2 \\ 0 \\ 0 \\ 6 \end{array} \right) \\ \left(\begin{array}{c} Y \\ Y \\ 2 \\ 0 \\ 0 \\ 6 \end{array} \right) \\ \left(\begin{array}{c} Y \\ Y $							
	City Sacramento	State CA	Zip Code 95814				Amount of Each Disbursement this Period	-						
	Purpose of Disbursement				•		1000.00							
Ō	campaign contribution Candidate Name Mr. Kevin McCarthy			C		gory/								
	Office Sought: X House Senate President	Disbursement For: Primary Other (sp	2006 X General pecify) ▼	<u> </u>		<u>.</u>	campaign contribution							
	Full Name (Last, First, Middle Initial)													
	Reynolds For Congress						Transaction ID: 15657675 Date of Disbursement							
N	Mailing Address PO Box 15388 Pittsford						$\begin{array}{c} \begin{array}{c} M \\ 0 \\ 6 \end{array} & \begin{array}{c} \prime \\ \end{array} & \begin{array}{c} D \\ 2 \\ 2 \end{array} & \begin{array}{c} D \\ 2 \\ \end{array} & \begin{array}{c} V \\ 2 \\ \end{array} & \begin{array}{c} V \\ 2 \\ 0 \\ 0 \\ \end{array} & \begin{array}{c} V \\ 0 \\ \end{array} & \begin{array}{c} V \\ V \\ \end{array} & \begin{array}{c} V \\ V \\ V \\ \end{array} & \begin{array}{c} V \\ V \\ V \\ \end{array} & \begin{array}{c} V \\ V \\ V \\ V \\ \end{array} & \begin{array}{c} V \\ V $							
	City Rochester	State NY	Zip Code 14615				Amount of Each Disbursement this Period	_						
	Purpose of Disbursement campaign contribution				0.	11	1000.00							
	Candidate Name Rep. Thomas M. Reynolds					gory/ pe								
	Senate President	Disbursement For: X Primary Other (sp	2006 General pecify) ▼	•			campaign contribution							
	State: NY District: 26							-						
su	BTOTAL of Disbursements This Page (or	otional)				►	3000.00							
то	TAL This Period (last page this line numb	er only)				►								

S	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)				IĘ NUMBE	12 / 1	2/14							
ITEMIZED DISBURSEMENTS		for each category of the Detailed Summary Page			check or 21b 27	niy one) 22 28a	X 23 28b	24 28c		25 29	26 30b				
	y Information copied from such Reports and Statem for commercial purposes, other than using the name										s				
	NAME OF COMMITTEE (In Full)		COII						COIII	muee					
\rangle	The American Occupational Therapy Assoc (AOTPAC)	ciation, Inc. Political Act	ion	C	ommitte	ee									
Α.	Full Name (Last, First, Middle Initial) Klobuchar For Minnesota				Transaction ID: 15657668 Date of Disbursement										
	Mailing Address PO Box 4146	$ \begin{array}{c} $													
	City St Paul		Amount of Each Disbursement this Perio												
	Purpose of Disbursement campaign contribution		_	11					000.0	0.00					
	Candidate Name Amy Klobuchar				egory/ /pe										
	X Senate X President	ment For: 2006 Primary General Other (specify) ▼				camp	aign coi	ntributio	n						
	State: MN District: 2														
В.	Full Name (Last, First, Middle Initial) Friends Of Lois Capps					Transaction ID: 15668209 Date of Disbursement									
	Mailing Address PO Box 23940		$\begin{array}{c} \begin{array}{c} M & M \\ 0 & 6 \end{array} & \begin{array}{c} D \\ 2 & 6 \end{array} & \begin{array}{c} D \\ 2 & 2 \end{array} & \begin{array}{c} D \\ 2 & 0 \end{array} & \begin{array}{c} Y \\ 2 & 0 \\ 0 & 6 \end{array} & \begin{array}{c} Y \\ 2 & 0 \\ 0 & 6 \end{array} \end{array}$												
	City Santa Barbara			Amount of Each Disbursement this Pe											
	Purpose of Disbursement campaign contribution	Г	011		500.00										
	Candidate Name Rep. Lois Capps		С	ate	egory/ /pe										
	Office Sought: X House Disburse Senate President State: CA District: 23	ment For: 2006 Primary X General Other (specify) ▼				camp	aign coi	ntributio	n						
	Full Name (Last, First, Middle Initial)					Trop	nantian II	15660	011						
C.	Nathan Deal For Congress				Date	Transaction ID: 15668211 Date of Disbursement									
	Mailing Address PO Box 902		0 6												
	City S Gainesville		Amou	Amount of Each Disbursement this Period											
	Purpose of Disbursement campaign contribution	Γ	Ô	11					000.0	00					
	Candidate Name Rep. Nathan Deal	egory/ /pe													
	5 X	ment For: 2006 Primary General Other (specify) ▼				camp	aign coi	ntributio	n						
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or for commercial purposes, other than using the name and address of any political committee to s NAME OF COMMITTEE (In Full)								COntin	ibuti		JIII SUCII	COIII						
\rangle	The American Occupational Therapy Assoc (AOTPAC)	iation, Inc. I	Political Act	ion	Co	mmitte	ee											
_	Full Name (Last, First, Middle Initial)						156682	208										
Α.	Friends Of Sherrod Brown								Date of Disbursement									
	Mailing Address 2280 Kresge Drive Suite 800							0 [™] 6		2	6	Ż	οŏε	3 '				
	,	State Zip Code erst OH 44001								Amount of Each Disbursement this Period								
	Amherst O Purpose of Disbursement	JH 4	14001 I		_		- [1	1000.	00				
	campaign contribution				01	1												
	Candidate Name Sherrod Brown					gory/												
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	Office Sought: House Disbursement For: 2006 X Senate Primary X General								campaign contribution									
	President	Other (specify	y) 🔻															
	State: OH District: 2																	
В.	Full Name (Last, First, Middle Initial) National Republican Congressional Commi	ttee (NRCC))					Transaction ID: 15668207 Date of Disbursement										
	Mailing Address 320 1st St., SE							$\begin{array}{c} \begin{array}{c} M \\ 0 \\ 6 \end{array} \begin{array}{c} M \\ \end{array} \begin{array}{c} D \\ 2 \\ 6 \end{array} \begin{array}{c} D \\ 2 \\ 6 \end{array} \begin{array}{c} D \\ \end{array} \begin{array}{c} D \\ 2 \\ 2 \\ 0 \\ 0 \\ 6 \end{array} \begin{array}{c} Y \\ 2 \\ 0 \\ 0 \\ 6 \end{array} \begin{array}{c} Y \\ 2 \\ 0 \\ 0 \\ 6 \end{array} \begin{array}{c} Y \\ Y \\ 2 \\ 0 \\ 0 \\ 6 \end{array} \begin{array}{c} Y \\ Y $										
	City State Zip Code Washington DC 20003							Amount of Each Disbursement this Period										
	Purpose of Disbursement registration fee/contribution				01	1							350.	00				
	Candidate Name				ate Ty	gory/ pe												
	Office Sought: House Disburser Senate	nent For: Primary	General					egistr on	ratio	on fee	e/contrib	ou-						
	State: District:	Other (specify	y) 🔻															
C.	Full Name (Last, First, Middle Initial) Lincoln Diaz-Balart For Congress Committee							Transaction ID: 15668212 Date of Disbursement										
	Mailing Address 2801 Ponce De Leon Blvc	d. Ste 1000						0 ^M 6	M	۵	6 [/]	Ý Ž	οòe	6 Y				
	City State Zip Code Coral Gables FL 33134							Amount of Each Disbursement this Period										
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	Candidate Name Rep. Lincoln G. Diaz-Balart																	
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Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of solicating 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)																		
The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC)																		
	Full Name (Last, First, Middle Initial)									Transaction ID: 15668210								
A. Ben Chandler For Congress									Date of Disbursement									
	Mailing Address P. O. Box 12678																	
				State Zip Code KY 40508						Amount of Each Disbursement this Period								
	Purpose of Disbursement campaign contribution				11		1000.00											
	Candidate Name Rep. Benjamin Chandler				gory/ pe													
	Office Sought: X House Senate President		nent For: Primary Other (spe	2006 X General			campaign contribution											
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