

# 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  
American Institute of Certified Public Accountants Political Action Committee

ADDRESS (number and street) Palladian 1  
220 Leigh Farm Rd  
 Check if different than previously reported. (ACC)  
Durham NC 27707 8110

2. **FEC IDENTIFICATION NUMBER** C00077321  
**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:  
 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 \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 08 01 2010 through 08 31 2010

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 Mr. Anthony Pugliese

Signature of Treasurer Electronically Filed by Mr. Anthony Pugliese Date 09 20 2010

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)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
American Institute of Certified Public Accountants Political Action Committee

Report Covering the Period: From: 

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		231137.36
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	96786.68									
(c) Total Receipts (from Line 19) .....	65456.17	324294.37								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	162242.85	555431.73								
7. Total Disbursements (from Line 31) .....	27440.72	420629.60								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	134802.13	134802.13								
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

American Institute of Certified Public Accountants Political Action Committee

Report Covering the Period: From: 

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	1	0

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) .....	1065.00	132650.00
(ii) Unitemized .....	64391.17	187102.82
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	65456.17	319752.82
(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) .....	65456.17	319752.82
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	4500.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	41.55
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)) .....	65456.17	324294.37
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	65456.17	324294.37

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	260.72	1618.44
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	260.72	1618.44
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	27000.00	416276.16
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 .....	180.00	235.00
(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)) .....	180.00	235.00
29. Other Disbursements.....	0.00	2500.00
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))..	27440.72	420629.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	27440.72	420629.60

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	65456.17	319752.82
34. Total Contribution Refunds (from Line 28(d)) .....	180.00	235.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	65276.17	319517.82
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	260.72	1618.44
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	260.72	1618.44

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 6 / 16  
(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)  
American Institute of Certified Public Accountants Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Barry Kancigor

Mailing Address 1949 Sunset Ln

City State Zip Code  
FULLERTON CA 92833-1736

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

Name of Employer Occupation  
Barry Kancigor, CPA CPA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
MM / DD / YYYY  
08 / 19 / 2010

**Transaction ID:** 32302920

Amount of Each Receipt this Period  
205.00

**B.** Full Name (Last, First, Middle Initial)  
Thomas D. Hazelbaker

Mailing Address 160 N Breiel Blvd

City State Zip Code  
MIDDLETOWN OH 45042-3806

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

Name of Employer Occupation  
Clark, Schaefer, Hackett & Co. CPA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
08 / 09 / 2010

**Transaction ID:** 32303497

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
Kenneth Wolff

Mailing Address 1405 18th Ave NE

City State Zip Code  
ABERDEEN SD 57401-1500

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

Name of Employer Occupation  
Eide Bailly LLP CPA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
08 / 02 / 2010

**Transaction ID:** 32303742

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **755.00**

**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 7 / 16

(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)  
American Institute of Certified Public Accountants Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Joe Havens

Mailing Address 130 NORTHSHORE PT

City State Zip Code  
MADISON MS 39110-7260

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

Name of Employer Occupation  
Horne LLP CPA

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1030.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 19 / 2010

Transaction ID: 32304087

Amount of Each Receipt this Period  
30.00

**B.**

Full Name (Last, First, Middle Initial)  
Charles Weinstein

Mailing Address 32 High Ridge Rd

City State Zip Code  
PLAINVIEW NY 11803-1812

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

Name of Employer Occupation  
Eisner LLP CPA

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 530.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 17 / 2010

Transaction ID: 32305248

Amount of Each Receipt this Period  
30.00

**C.**

Full Name (Last, First, Middle Initial)  
Gregory M. Burke

Mailing Address 3416 American River Drive #A

City State Zip Code  
Sacramento CA 95864-5753

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

Name of Employer Occupation  
John Waddell & Co. CPA

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 02 / 2010

Transaction ID: 32305252

Amount of Each Receipt this Period  
250.00

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

310.00

**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 8 / 16  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Institute of Certified Public Accountants Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Timothy Kronenwetter

Mailing Address 1965 Grove Chapel Rd

City State Zip Code  
INDIANA PA 15701-7129

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Indiana First Bank

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt 08 / 04 / 2010

Transaction ID: 32310524

Amount of Each Receipt this Period 0.00

**[MEMO ITEM]**  
Refund(s) on Schedule B  
Totaling \$30.00 This changes the YTD Total to \$0.00

**B.** Full Name (Last, First, Middle Initial)  
Gad Fox

Mailing Address 55 Netherwood Dr

City State Zip Code  
Albertson NY 11507-1310

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Hogan Lovells

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt 08 / 04 / 2010

Transaction ID: 32310525

Amount of Each Receipt this Period 0.00

**[MEMO ITEM]**  
Refund(s) on Schedule B  
Totaling \$25.00 This changes the YTD Total to \$0.00

**C.** Full Name (Last, First, Middle Initial)  
Judith Varnau Lifsey

Mailing Address 1900 Butternut Ave

City State Zip Code  
METAIRIE LA 70001-2343

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Arrow-Sysco Food Service

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt 08 / 05 / 2010

Transaction ID: 32310526

Amount of Each Receipt this Period 0.00

**[MEMO ITEM]**  
Refund(s) on Schedule B  
Totaling \$25.00 This changes the YTD Total to \$0.00

**SUBTOTAL** of Receipts This Page (optional) ..... 0.00

**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 / 16  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
American Institute of Certified Public Accountants Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Savithry Mahalingam  
Mailing Address 6260 S Teak Ave  
City State Zip Code  
BOISE ID 83716-7076  
FEC ID number of contributing federal political committee. **C**  
Name of Employer LeMaster & Daniels PLLC Occupation CPA  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00  
**[MEMO ITEM]**  
Refund(s) on Schedule B  
Totaling \$25.00 This changes the YTD Total to \$0.00

**B.** Full Name (Last, First, Middle Initial)  
Timothy Clackett  
Mailing Address 1888 Century Park East, 4th Floor  
City State Zip Code  
Los Angeles CA 90067  
FEC ID number of contributing federal political committee. **C**  
Name of Employer BDO Seidman LLP Occupation  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00  
**[MEMO ITEM]**  
Refund(s) on Schedule B  
Totaling \$25.00 This changes the YTD Total to \$0.00

**C.** Full Name (Last, First, Middle Initial)  
Daniel Zeppetello  
Mailing Address 116 Blackstone Way  
City State Zip Code  
SYRACUSE NY 13219-1332  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Niagara Mohawk Power Corp Occupation  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00  
**[MEMO ITEM]**  
Refund(s) on Schedule B  
Totaling \$25.00 This changes the YTD Total to \$0.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00  
**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 10 / 16	
	(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)  
American Institute of Certified Public Accountants Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Lyndsy Schultz		Date of Receipt	
	Mailing Address 7979 E Tufts Ave Ste 400		M M / D D / Y Y Y Y 08 / 11 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> 32310530
	DENVER	CO	80237	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		0.00	
Name of Employer Ehrhardt Keefe Steiner & Hottman P.C.		Occupation CPA		<b>[MEMO ITEM]</b> Refund(s) on Schedule B Totaling \$25.00 This changes the YTD Total to \$0.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	1065.00

**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)

<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 Institute of Certified Public Accountants Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Dave Camp For Congress Mailing Address 5915 Eastman Avenue Suite 100 City Midland State MI Zip Code 48640 Purpose of Disbursement Candidate Name Dave Camp Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 04 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 32118063 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00 Category/Type 011
<b>B.</b> Full Name (Last, First, Middle Initial) Campbell For Congress Mailing Address 8105 Irvine Center Dr Suite 1170 City Irvine State CA Zip Code 92618 Purpose of Disbursement Candidate Name Rep. John Campbell Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 48 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 32167411 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 1 0
	Amount of Each Disbursement this Period 1500.00 Category/Type 011
<b>C.</b> Full Name (Last, First, Middle Initial) Hoosiers For Rokita Mailing Address 7643 East U.S. 36 City Avon State IN Zip Code 46123 Purpose of Disbursement Candidate Name Mr. Theodore Rokita Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 04 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 32167508 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 1 0
	Amount of Each Disbursement this Period 5000.00 Category/Type 011

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

7500.00

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

**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 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 Institute of Certified Public Accountants Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) JOE PAC <hr/> Mailing Address 422 C Street, SE Lower Level <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement <hr/> Candidate Name JOE PAC <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 32174076 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 2500.00
	<input type="text" value="011"/> Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Perlmutter For Congress <hr/> Mailing Address 3440 Youngfield St #264 <hr/> City Wheat Ridge State CO Zip Code 80033 <hr/> Purpose of Disbursement <hr/> Candidate Name Rep. Edwin Perlmutter <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 07 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 32174077 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 2500.00
	<input type="text" value="011"/> Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Pennsylvanians For Kanjorski <hr/> Mailing Address 103 South Hanover Street <hr/> City Nanticoke State PA Zip Code 18634 <hr/> Purpose of Disbursement <hr/> Candidate Name Paul Kanjorski <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 11 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 32174078 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 2500.00
	<input type="text" value="011"/> Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

**7500.00**

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

# 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 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 Institute of Certified Public Accountants Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Friends Of Max Baucus <hr/> Mailing Address PO Box 586 <hr/> City Helena State MT Zip Code 59624 <hr/> Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name Sen. Max Baucus Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MT District:	<b>Transaction ID:</b> 32174079 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 1 0	Amount of Each Disbursement this Period <hr/> 1000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Lisa Murkowski For Us Senate <hr/> Mailing Address PO Box 100847 <hr/> City Anchorage State AK Zip Code 99510 <hr/> Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name Sen. Lisa Murkowski Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AK District:	<b>Transaction ID:</b> 32174082 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 1 0	Amount of Each Disbursement this Period <hr/> 1000.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Bucshon For Congress <hr/> Mailing Address PO Box 250 <hr/> City Newburgh State IN Zip Code 47629 <hr/> Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name Mr. Larry Bucshon Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IN District: 08	<b>Transaction ID:</b> 32174083 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 1 0	Amount of Each Disbursement this Period <hr/> 2000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



**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)

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<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 Institute of Certified Public Accountants Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Bob Etheridge For Congress Committee	Transaction ID: 32194789 Date of Disbursement MM / DD / YYYY 08 / 24 / 2010
	Mailing Address Post Office Box 28001 PO Box 28001
City Raleigh State NC Zip Code 27611	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Candidate Name Rep. Bob Etheridge Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 02 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Lummis For Congress	Transaction ID: 32211513 Date of Disbursement MM / DD / YYYY 08 / 31 / 2010
	Mailing Address 2015 Central Ave Suite 200
City Cheyenne State WY Zip Code 82001	Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement Candidate Name Cynthia Lummis Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WY District: 00 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

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

3000.00

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

27000.00

**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)

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<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 Institute of Certified Public Accountants Political Action Committee

A.	Full Name (Last, First, Middle Initial) Wachovia PAC Account			Transaction ID: 32310093 Date of Disbursement																				
	Mailing Address Palladian Corporate Center 220 Leigh Farm Road			<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y															
0	8		3	1		2	0	1	0															
	City Durham	State NC	Zip Code 27707-8110	Amount of Each Disbursement this Period																				
	Purpose of Disbursement			<table border="1"> <tr> <td colspan="10">260.72</td> </tr> </table>		260.72																		
260.72																								
	Candidate Name																							
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			<input type="checkbox"/> 001 Category/ Type																				
	State:	District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	<b>260.72</b>
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<b>260.72</b>