

FEC FORM 3X

Use

Only

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED

Rev. 12/2004

Office Use Only TYPE OR PRINT ▼ NAME OF Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. ADDRESS (number and street) Check if different than previously reported. (ACC) CITY A ZIP CODE A STATE A FEC IDENTIFICATION NUMBER ▼ 3. IS THIS NEW **AMENDED** REPORT (N) OR (A) TYPE OF REPORT Nov 20 (M11) (Non-Election Year Only) (b) Monthly Feb 20 (M2) May 20 (M5) Aug 20 (M8) Report (Choose One) Due On: Dec 20 (M12) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (Non-Election Year Only) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report (Q1) (c) 12-Day Runoff (12R) Primary (12P) General (12G) July 15 **PRE-Election** Quarterly Report (Q2) Report for the: Convention (12C) Special (12S) October 15 Quarterly Report (Q3) in the January 31 Election on State of Year-End Report (YE) July 31 Mid-Year 30-Day Report (Non-election **POST-Election** General (30G) Runoff (30R) Special (30S) Year Only) (MY) Report for the: Termination Report (TER) in the Election on State of [CX] [QX] 309 Covering Period through 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 Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109. Office **FEC FORM 3X**

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)	OF RECEIPTS AND DISBURSEMENTS	Page 2
Write or Type Committee Name Ame	enca Association of	Yieteried Proude
Report Covering the Period: From:	OY / OY / 2020 TO	53'31'5030
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1,	· ·	2391
(b) Cash on Hand at Beginning of Reporting Period	2399	
(c) Total Receipts (from Line 19)		5,400
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	5,422,9-1	5499°
7. Total Disbursements (from Line 31)		
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	4,8993	4.899.31
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	6	·
Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		
This committee has qualified as a mu	ulticandidate committee. (see FEC FORM 1M)	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	For further information contact:	
	Federal Election Commission 1050 First Street, N.E. Washington, DC 20463	
	Toll Free 800-424-9530	

DETAILED SUMMARY PAGE				
FEC Form 3X (Rev. 05/2016)	of Receipts	Page 3		
Write or Type Committee Name Amen	on Association of	Pleferiel		
Provider Oranization				
	M' 630 To	03'31'8080		
Report Covering the Period: From:		The part of the pa		
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)	2600	290000		
, (,,				
(ii) Uniternized	Land de (OU)			
(iii) TOTAL (add	SUM 60	<1/7000		
Lines 11(a)(i) and (ii)▶				
(b) Political Party Committees				
(c) Other Political Committees	00	7,00		
(such as PACs)				
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry				
Totals to Line 33, page 5)▶	SYM	SU(1) 09		
12. Transfers From Affiliated/Other	NOO	(200)		
Party Committees				
13. All Loans Received	VOD	V9.0		
13. All Loans neceived				
14. Loan Repayments Received	000	700		
15. Offsets To Operating Expenditures				
(Refunds, Rebates, etc.)	500	~ ?O		
(Carry Totals to Line 37, page 5)				
Refunds of Contributions Made to Federal Candidates and Other				
Political Committees	$\bigcap_{\mathcal{O}} \mathcal{O}$	700		
17. Other Federal Receipts	200	700		
(Dividends, Interest, etc.)				
 Transfers from Non-Federal and Levin Funds Non-Federal Account 				
(from Schedule H3)	70.0	000		
(b) Levin Funds (from Schedule H5)				
	500	700		
(c) Total Transfers (add 18(a) and 18(b))				
		_		
19. Total Receipts (add Lines 11(d),	CIMODI	6,0 MIS		
12, 13, 14, 15, 16, 17, and 18(c))▶				
20. Total Federal Receipts				
(subtract Line 18(c) from Line 19)▶	540	<u></u>		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

rsements Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	Total Tris Period	Calendar Year-to-Date
	(i) Federal Share	()	0.00
	(,, , costa chac		
	(ii) Non-Federal Share		
	(b) Other Federal Operating		
	Expenditures		535
	(c) Total Operating Expenditures	C-02-00	-52.60
	(add 21(a)(i), (a)(ii), and (b))▶		535
22.	Transfers to Affiliated/Other Party Committees	200	V60
23.	Contributions to		
	Federal Candidates/Committees and Other Political Committees		
24.	Independent Expenditures	[3.0	7.00
25.	(use Schedule E) Coordinated Party Expenditures		
	(52 U.S.C. § 30116(d)) (use Schedule F)	00	~0.0
	(255 55:1555:5)		
26.	Loan Repayments Made	700	000
27.	Loans Made		0
28.	Refunds of Contributions To: (a) Individuals/Persons Other		
	Than Political Committees		
		700	00
	(b) Political Party Committees		
	(c) Other Political Committees (such as PACs)	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	000
	·		
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	700	72.00
	•		
29.	Other Disbursements (Including	G00	~~~~
	Non-Federal Donations)		
30.	Federal Election Activity (52 U.S.C. § 30101(20))	
	(a) Allocated Federal Election Activity		
	(from Schedule H6)		
	(i) Federal Share		
	(II) III - I - I - I - I - I - I - I - I	000	
	(ii) "Levin" Share		
	(b) Federal Election Activity Paid Entirely With Federal Funds	000	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	(c) Total Federal Election Activity (add		
	Lines 30(a)(i), 30(a)(ii) and 30(b))	NOO	000
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	<23	CAXDO
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	203	5015

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016) Page 5 **COLUMN A COLUMN B** III. Net Contributions/ **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) (from Line 11(d), page 3) 34. Total Contribution Refunds (from Line 28(d))..... 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures (from Line 15, page 3)..... 38. Net Operating Expenditures (subtract Line 37 from Line 36)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE OF Use separate schedule(s) (check only one) for each category of the 11a 11b 11c 12 **Detailed Summary Page** 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) or Full Organization Name Full Name of Individual (Last, First, Middle Initial) Date of Receipt Mailing Address City Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer (for Individual) Occupation (for Individual) Memo Item Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name В. Date of Receipt Mailing Addres City Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ♥ Primary General Other (specify) \(\psi\) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Date of Receipt Mailing Addres City Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt Fo Aggregate Year-to-Date ▼ Primary General Other (specify) SUBTOTAL of Receipts This Page (optional).....

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

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IT	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check on 11a 13	ly one) 11b 14	11c 12	
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\setminus	NAME OF COMMITTEE (In Full) AME (CCC Afic	hs PAC	10+	Pref	erred	
Α.	Full Name of Individual (Last, First Middle Initial Mailing Address City	State	Zip Code	Date o	of Receipt		3 8
	FEC ID number of contributing federal political committee. Name of Employer (for Individual)	C	supation (for Individual)		t of Each F	Receipt this Per	od O
_	Primary General Other (specify) ▼		Year-to-Date ▼				
В.	Full Name of Individual (Last, First, Middle Initial Mailing Address City	State	Zip Code	6	of Receipt	Pecceipt this Per)Ö
	FEC ID number of contributing federal political committee. Name of Employer (for Individual)	C	oupation (for Individual)		1emo Item	.,30).º0
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼				
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		Category/ Type	Amount of Each Disbursement this Period
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Arry information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliding contributions or for commercial purposes, other than using the name and address of any political committee to soliding contributions from such committee. NAME OF COMMITTEE (in Full Amme (Last, First, Middle Initial) A. A. Walling Address City Sanate President Primary General Candidate Name Disbursement Primary General City Sanate President Disbursement Primary General Condidate Name Category Type City Sought House Disbursement For Candidate Name Category Type City State: Disbursement Disbursement Primary General Condidate Name Category Type City Sought House Disbursement For Candidate Name Category Type City Sought House Disbursement For Candidate Name Category Type City Sought House Disbursement For Candidate Name Category Type City Category Type Type Type Type City Category Type Type	SCHEDULE B (FEC FORM 3X)	Use separate schedule(s)	FOR LINE N				
or for commercial purposes, other than using the name and address of any political committies to solicit committee to solicit committee. NAME OF COMMITTEE (in Full) A. A. Mailing Address City	ITEMIZED DISBURSEMENTS	for each category of the	21b	22 23 26 27			
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SCHEDULE B (FEC Form 3X)		FOR LINE N	NUMBER: PAGE SOF S
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	for each category of the Detailed Summary Page	21b 28a	22 23 26 27 28b 28c 29 30b
Any information copied from such Reports and Staten	nents may not be sold or used		
or for commercial purposes, other than using the name	e and address of any political	committee to	solicit contributions from such committee.
NAME OF COMMITTEE (IN FUI) AME	ich Associa	AC AC	of hetalism
Full Name (Last, First, Middle Initial)			Date of Dishumanast
A. SenTrust Ba	UK .		Date of Disbursement
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6/26/20

DATE PREPARED

(3/2015)

PREPARER