



International Chiropractors Association Political Action Committee

November 14, 2006

John D. Gibson
Assistant Staff Director
Reports Analysis Division
Federal Election Commission
999 E Street, NW
Washington, DC 20463

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2006 NOV 14 A 11: 26

Dear Mr. Gibson:

This is in response to your letter of November 2, 2006, regarding the quarterly filing by this committee for the period July 1, 2006 through September 30, 2006. Please be advised that the report filed by the International Chiropractors Association Political Action Committee on October 2, 2006, contains all relevant data for this period, but contained a typographical error on the cover page, incorrectly identifying the period covered as July 1, 2006 through September 1, 2006. The entry on line 5 of page one of that filing should have read July 1, 2006 through September 30, 2006. Also please note that the period identified on pages 2 And 3 of the October 2nd filing contained the correct period covered, July 1 through September 30, 2006.

Attached is an amended report, correcting this error. Please contact me if any additional actions are required on our part to correct this problem.

Thank you for your attention and consideration.

Sincerely,

Ronald M. Hendrickson
Assistant Treasurer

RMH/nip
Attachment

26039272153

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEC MAIL OPERATIONS CENTER

2006 NOV 14 A 11:26

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 INTERNATIONAL CHIROPRACTORS ASSOCIATION POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 1110 NORTH GLEBE ROAD SUITE 650 ARLINGTON VA 22201

2. FEC IDENTIFICATION NUMBER C 00329920 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, Convention, General, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 07 01 2006 through 09 30 2006

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 Ronald M. Hendrickson, Assistant Treasurer Signature of Treasurer [Signature] Date 11 14 2006

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

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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
INTERNATIONAL CHIROPRACTORS ASSOCIATION POLITICAL ACTION COMMITTEE

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="2006"/>		<input type="text" value="32,290.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="33,946.00"/>	
(c) Total Receipts (from Line 19).....	<input type="text" value="3,862.00"/>	<input type="text" value="10,018.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="37,808.00"/>	<input type="text" value="43,308.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1,050.00"/>	<input type="text" value="5,550.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="36,758.00"/>	<input type="text" value="36,758.00"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="-----"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="-----"/>	

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

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DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

INTERNATIONAL CHIROPRACTORS ASSOCIATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From: MM / DD / YYYY 07 / 01 / 2006 To: MM / DD / YYYY 09 / 30 / 2006

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).....	-----	----- 2,000.00
(ii) Unitemized.....	----- 3,862.00	----- 8,018.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	----- 3,862.00	----- 10,018.00
(b) Political Party Committees.....	-----	-----
(c) Other Political Committees (such as PACs).....	-----	-----
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	----- 3,862.00	----- 10,018.00
12. Transfers From Affiliated/Other Party Committees.....	-----	-----
13. All Loans Received.....	-----	-----
14. Loan Repayments Received.....	-----	-----
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	-----	-----
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	-----	-----
17. Other Federal Receipts (Dividends, Interest, etc.).....	-----	-----
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	-----	-----
(b) Levin Funds (from Schedule H5).....	-----	-----
(c) Total Transfers (add 18(a) and 18(b))..	-----	-----
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	----- 3,862.00	----- 10,018.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	----- 3,862.00	----- 10,018.00

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DETAILED SUMMARY PAGE
of Disbursements

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		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures	50.00	50.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	50.00	50.00
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	1,000.00	5,000.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1,050.00	5,550.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	1,050.00	5,550.00

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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)	3,862.00	10,018.00
34. Total Contribution Refunds (from Line 28(d))	-----	-----
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3,862.00	10,018.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	50.00	50.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	-----	-----
38. Net Operating Expenditures (subtract Line 37 from Line 36)	50.00	50.00

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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 OF

<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)

INTERNATIONAL CHIROPRACTORS ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle initial)

A. James Monroe Bank

Date of Disbursement

08 / 15 / 2006

Mailing Address

3033 Wilson Boulevard

City

Arlington

State

VA

Zip Code

22201

Purpose of Disbursement

Candidate Name

Category/Type

50.00

Amount of Each Disbursement this Period

50.00

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

administrative cost

State:

District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

MM / DD / YYYY

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

Category/Type

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

MM / DD / YYYY

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

Category/Type

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SUBTOTAL of Disbursements This Page (optional)

50.00

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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 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

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)

INTERNATIONAL CHIROPRACTORS ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Friends of George Allen

Mailing Address PO Box 6859

City Arlington State VA Zip Code 22206

Purpose of Disbursement
campaign contribution

Candidate Name
Sen. George Allen

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

Date of Disbursement

07 / 15 / 2006

Amount of Each Disbursement this Period

1,000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

1,000.00

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Federal Election Commission
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<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

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11-14-06
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