

# 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  
AC PAC ACA International Political Action Committee

ADDRESS (number and street) 4040 W. 70th St  
Check if different than previously reported. (ACC) Minneapolis MN 55435

2. **FEC IDENTIFICATION NUMBER** C00034785  
**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 (12G)  
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 06 01 2006 through 06 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 Rozanne M. Andersen  
Signature of Treasurer Electronically Filed by Rozanne M. Andersen Date 07 05 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.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
ACPAC ACA International Political Action Committee

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		163911.02
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	242169.66									
(c) Total Receipts (from Line 19) .....	16387.07	134688.95								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	258556.73	298599.97								
7. Total Disbursements (from Line 31) .....	7221.76	47265.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	251334.97	251334.97								
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  
ACPAC ACA International Political Action Committee

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	14050.00	118890.00
(i) Itemized (use Schedule A) .....	2200.00	13145.00
(ii) Unitemized .....	16250.00	132035.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	16250.00	132035.00
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.) .....	137.07	2653.95
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)) .....	16387.07	134688.95
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	16387.07	134688.95

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A</b> Total This Period	<b>COLUMN B</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.....	221.76	1765.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	221.76	1765.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7000.00	45500.00
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))..	7221.76	47265.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	7221.76	47265.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	16250.00	132035.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	16250.00	132035.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	221.76	1765.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	221.76	1765.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 16
	<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	

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)  
**ACPAC ACA International Political Action Committee**

**A.** Full Name (Last, First, Middle Initial)  
 Mr. Thomas M. Angelo

Mailing Address **PO Box 182190**

City **Shelby Township** State **MI** Zip Code **48318-2190**

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

Name of Employer **J. J. Marshall & Associates, Inc.** Occupation **President**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 08 / 2006**

**Transaction ID: R4559**

Amount of Each Receipt this Period  
**300.00**

Check

**B.** Full Name (Last, First, Middle Initial)  
 Ms. Lori Bennett

Mailing Address **PO Box 5268**

City **Gainesville** State **GA** Zip Code **30504-0268**

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

Name of Employer **North Georgia Credit Services, Inc.** Occupation **President**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **610.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 09 / 2006**

**Transaction ID: R4561**

Amount of Each Receipt this Period  
**200.00**

Credit Card

**C.** Full Name (Last, First, Middle Initial)  
 Mr. Frank M. Bruno, Jr.

Mailing Address **7627 Lake St Ste 210**

City **River Forest** State **IL** Zip Code **60305-1878**

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

Name of Employer **Dependon Collection Service, Inc.** Occupation **President**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 12 / 2006**

**Transaction ID: R4562**

Amount of Each Receipt this Period  
**200.00**

Credit Card

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>700.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 16
	<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)  
AC PAC ACA International Political Action Committee

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Jennifer Dietrich		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 2 / 2 0 0 6	
Mailing Address PO Box 133		<b>Transaction ID:</b> R4563	
City State Zip Code Hartland MI 48353-0133	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Credit Card		
Name of Employer Occupation Universal Credit Services C.E.O.	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Richard A. Doane		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 6	
Mailing Address PO Box 9100		<b>Transaction ID:</b> R4539	
City State Zip Code Farmingdale NY 11735-9100	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C	Check		
Name of Employer Occupation Sunrise Credit Services Inc. Chairman of the Board	Aggregate Year-to-Date ▼ 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Jay E. Gonsalves		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 6	
Mailing Address PO Box 902		<b>Transaction ID:</b> R4581	
City State Zip Code Middleboro MA 02346-0902	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C	Check		
Name of Employer Occupation Action Collection Agency of Boston President	Aggregate Year-to-Date ▼ 650.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 16
	<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)  
**ACPAC ACA International Political Action Committee**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Ronald Greene Mailing Address PO Box 3097 City Bloomington State IL Zip Code 61702-3097 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6 <b>Transaction ID: R4590</b> Amount of Each Receipt this Period 400.00 Credit Card
Name of Employer Afni, Inc. Occupation President-COO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Thomas Haag Mailing Address PO Box 6250 City Madison State WI Zip Code 53716-0250 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 6 <b>Transaction ID: R4586</b> Amount of Each Receipt this Period 500.00 Credit Card
Name of Employer State Collection Service, Inc. Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mary Hall Mailing Address PO Box 1686 City Greeley State CO Zip Code 80632-1686 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 6 <b>Transaction ID: R4589</b> Amount of Each Receipt this Period 200.00 Credit Card
Name of Employer Professional Finance Company, Inc. Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1100.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 16
	<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)  
**ACPAC ACA International Political Action Committee**

**A.** Full Name (Last, First, Middle Initial)  
 Mr. Timothy J. Harris

Mailing Address **PO Box 31131**

City **Rochester** State **NY** Zip Code **14603-1131**

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

Name of Employer **PaidHarbor Formerly Known As the Credi** Occupation **President & C.E.O.**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 14 / 2006**

**Transaction ID: R4574**

Amount of Each Receipt this Period  
**200.00**

Credit Card

**B.** Full Name (Last, First, Middle Initial)  
 Ms. Sandy Harvey

Mailing Address **145 N 46th St Ste 6**

City **Lincoln** State **NE** Zip Code **68503-3708**

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

Name of Employer **Professional Choice Recovery, Inc.** Occupation **President**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 12 / 2006**

**Transaction ID: R4568**

Amount of Each Receipt this Period  
**300.00**

Check

**C.** Full Name (Last, First, Middle Initial)  
 Mr. James P. Hill, Jr.

Mailing Address **P.O. Box 3860**

City **Chesterfield** State **MO** Zip Code **63006-3860**

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

Name of Employer **Account Resolution Corporation** Occupation **President**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 13 / 2006**

**Transaction ID: R4570**

Amount of Each Receipt this Period  
**100.00**

Credit Card

**SUBTOTAL** of Receipts This Page (optional) ..... ► **600.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 16
	<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)  
AC PAC ACA International Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Ms. Pauline R. Kussart

Mailing Address PO Box 45710

City State Zip Code  
Madison WI 53744-5710

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

Name of Employer Occupation  
H. E. Stark Agency, Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
06 / 26 / 2006

**Transaction ID: R4588**

Amount of Each Receipt this Period  
300.00

Credit Card

**B.** Full Name (Last, First, Middle Initial)  
Gary Rippentrop

Mailing Address 4040 W. 70th Street

City State Zip Code  
Edina MN 55435

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

Name of Employer Occupation  
ACA International CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
06 / 19 / 2006

**Transaction ID: R4580**

Amount of Each Receipt this Period  
250.00

Check

**C.** Full Name (Last, First, Middle Initial)  
Mr. John E. Ruzic, Jr.

Mailing Address PO Box 1671

City State Zip Code  
Marysville CA 95901-1671

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

Name of Employer Occupation  
Rash, Curtis & Associates President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
06 / 26 / 2006

**Transaction ID: R4591**

Amount of Each Receipt this Period  
100.00

Credit Card

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>650.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 16
	<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)  
AC PAC ACA International Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Brian Watkins</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 6
Mailing Address PO Box 4070		<b>Transaction ID: R4584</b>
City State Zip Code Medford OR 97501-0148	Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C	Credit Card	
Name of Employer Southern Oregon Credit Service, Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>B. Mr. Gary L. Williams</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 6
Mailing Address PO Box 11590		<b>Transaction ID: R4554</b>
City State Zip Code Rock Hill SC 29731-1590	Amount of Each Receipt this Period 700.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Williams & Fudge, Inc.	Occupation Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. Mr. Gary L. Williams</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 6
Mailing Address PO Box 11590		<b>Transaction ID: R4555</b>
City State Zip Code Rock Hill SC 29731-1590	Amount of Each Receipt this Period 4300.00	
FEC ID number of contributing federal political committee. C	Check	
Name of Employer Williams & Fudge, Inc.	Occupation Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 12 / 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"/> 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)  
**ACPAC ACA International Political Action Committee**

**A.** Full Name (Last, First, Middle Initial)  
 Mr. Terrance A. Wunsch

Mailing Address **PO Box 940728**

City **Houston** State **TX** Zip Code **77094-7728**

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

Name of Employer **Collections Unlimited of Texas Inc.** Occupation **President**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **700.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 01 / 2006**

**Transaction ID: R4541**

Amount of Each Receipt this Period  
**250.00**

Credit Card

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>250.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>14050.00</b>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 13 / 16	
	(check only one)			
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
AC PAC ACA International Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
US Bank

Mailing Address 7001 France Ave. S.

City	State	Zip Code
Edina	MN	55435

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

Name of Employer	Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
760.41

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	6

Transaction ID: R4597

Amount of Each Receipt this Period  
137.07

Bank Interest

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	137.07
<b>TOTAL</b> This Period (last page this line number only) .....	▶	137.07

**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 14 / 16

<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)

ACPAC ACA International Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** US BANK

Mailing Address 7001 France Ave. S.

City Edina State MN Zip Code 55435

Purpose of Disbursement  
Bank Charges

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D724

Date of Disbursement

06 / 30 / 2006

Amount of Each Disbursement this Period

221.76

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

221.76

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

221.76

# 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 15 / 16

<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)  
ACPAC ACA International Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. BACHUS FOR CONGRESS</b>		Transaction ID: D720 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 6
Mailing Address P O Box 59444		Amount of Each Disbursement this Period 4000.00
City Birmingham	State AL Zip Code 35259	
Purpose of Disbursement Contr.		
Candidate Name Spencer Thomas Bachus, III		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AL District: 06		

Full Name (Last, First, Middle Initial) <b>B. Crowley for Congress</b>		Transaction ID: D721 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 6
Mailing Address 84-56 Grand Avenue		Amount of Each Disbursement this Period 1000.00
City Elmhurst	State NY Zip Code 11373	
Purpose of Disbursement Contr.		
Candidate Name Joseph Crowley		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY District: 07		

Full Name (Last, First, Middle Initial) <b>C. Friends of Jeb Hensarling</b>		Transaction ID: D722 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 6
Mailing Address PO Box 820504		Amount of Each Disbursement this Period 1000.00
City Dallas	State TX Zip Code 75382	
Purpose of Disbursement Contr.		
Candidate Name Jeb Hensarling		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX District: 05		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6000.00
<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)

PAGE 16 / 16

<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)  
ACPAC ACA International Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Tiberi for Congress</b>		<b>Transaction ID: D723</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address 2021 East Dublin Granville Road Suite 2000		Amount of Each Disbursement this Period 1000.00	
City Columbus State OH Zip Code 43229	Purpose of Disbursement Contr.	Category/ Type	
Candidate Name Patrick J. Tiberi	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 12		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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

1000.00

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

7000.00