10/11/2010 16:23

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office U	se Only	
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4	4672	
A	ZIPCOE	DE 🛕
AMENDED (A)		
Aug 20 (M8)		Nov 20 (M11) (Non-Election Year Only)
Sep 20 (M9)		Dec 20 (M12) (Non-Election Year Only)
Oct 20 (M10)		Jan 31 (YE)
eneral (12G)		Runoff (12R)
pecial (12S)		
	in the State of	
unoff (30R)		Special (30S)
	in the State of	f
0 2010		
nplete.		
10 1	1	2010

1.	NAME OF COMMITTEE (in full)	USE FEC MAILING LABEL OR TYPE OR PRINT ♥	Example:If typin over the lines	g, type		
L	North Central Academy of Ch		1 1 1 1 1			
L			1 1 1 1 1			
AD	DRESS (number and street)	115 EAST OHIO AVENUE				
	Check if different than previously reported. (ACC)	SEBRING		OH	44672	
2.	FEC IDENTIFICATION NUM	IBER ♥ CITY	/ A	STATE	ZIPCODE A	L
	C00451450		THIS X	NEW (N) OR	AMENDED (A)	
4.	TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report(Quarterly Report(Quarterly Report(Quarterly Report(Quarterly Report(Quarterly Report(Quarterly Report(Quarterly Report(Non-electio Year Only) (MY) Termination Report(TER)	(c) 12-Day PRE-Election Report for the: (d) 30-Day Post -Election Report for the:	General (30	(12C) Sp	Sep 20 (M9) Oct 20 (M10) Dec (Nor Year Jan Peneral (12G) Run pecial (12S) in the State of	20 (M11) n-Election r Only) 20 (M12) n-Election r Only) 31 (YE) noff (12R)
5.	Covering Period 0.7	7 01 2010	through	09	2010	
Typ Sig	nature of Treasurer Electro	Report and to the best of my know DWAINE EVERETT nically Filed by DWAINE EVE	RETT	Date	10 11 201	
	Office Use Only	neous, or incomplete information	may subject the per	son signing this Repol	FEC FORM 3 (Rev. 12/2004)	

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

	FEC Form 3X (Rev. 02/2003)		2/6
W	rite or Type Committee Name North Central Academy of Chiroprac	tic C-PAC	
R	eport Covering the Period: From:	M M O T O 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	To: 0 9 3 0 2 0 1 0
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 2010 Y Y		2030.00
	(b) Cash on Hand at Begining of Reporting Period	4530.00	
	(c) Total Receipts (from Line 19)	0.00	2500.00
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	4530.00	4530.00
7.	Total Disbursements (from Line 31)	2000.00	2000.00
	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2530.00	2530.00
	Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
	Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

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Write or Type Committee Name

North Central Academy of Chiropractic C-PAC

Report Covering the Period:

From:

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2010

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	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	0.00	225.00
	(ii) Unitemized	0.00	2275.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	2500.00
	(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 Totals to Line 33, page 5)	0.00	2500.00
	Transfers From Affiliated/Other Party Committees	0.00	0.00
3.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
	to Federal candidates and Other Political Committees	0.00	0.00
	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
	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
	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	0.00	2500.00
	Total Federal Receipts (subtract Line 18(c) from Line 19)	0.00	2500.00

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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	0.00	0.00
Expenditures(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii) and (b))	0.00	0.00
Committees	0.00	0.00
Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00
Independent Expenditure (use Schedule E)	0.00	0.00
5. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6. Loan Repayments Made	0.00	0.00
7. Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other	0.00	0.00
Than Political Committees		
(b) Political Party Committees(c) Other Political Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
O. Other Disbursements	2000.00	2000.00
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
I. Total Disbursements (add Lines 21(c), 22,	****	2225
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	2000.00	2000.00
2. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	2000.00	2000.00
from Line 31)	2000.00	2000.00

DETAILED SUMMARY PAGE

of Disbursements

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	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)	0.00	2500.00
84.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	2500.00
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS Any Information copied from such Reports and Statemen	for each category of the Detailed Summary Page (check only 21b 27 ents may not be sold or used by any person f	22 23 24 25 26 28a 28b 28c X 29 30b or the purpose of soliciting contributions
or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) North Central Academy of Chiropractic C-P		licit contributions from such committee
Full Name (Last, First, Middle Initial) Strickland for Governor Mailing Address 65 E. State St., Suite 180	0	Transaction ID: SB29.4285 Date of Disbursement O 7
Columbus Purpose of Disbursement Contribution Candidate Name	State Zip Code OH 43215 Category/	Amount of Each Disbursement this Period 2000.00
	Type ment For: Primary General Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)		2000.00
TOTAL This Period (last page this line number only)	•	2000.00