ſ	- FE FORN		ND DIS	OF RE BURSE	MENT	S		ECEIVED 1AIL CENTI G-4 AMII: Office Use Only	
1.	NAME C	)F T ITEE (in full)	YPE OR PRINT		ample: If typi er the lines.	ng, type	12FE4M5		
A	American Association of RiceReicGed Provider								
b		<u>ainatio</u>	ns Re	shiking	CI ACI	rion	Comm	it ter	
AD	DRESS (n	umber and street)	22121 150	outh F	inst	Stice	et .		
	thar	ock if different ) previously orted. (ACC)	SUNKE	<u>30</u> 3 				4.0.202	- <u>L</u>
2.	FEC ID	ENTIFICATION NUM	NBER V	CITY			STATE 🔺	ZIP CC	
229	CD	035297	3	3. IS THIS REPOR	-	NEW (N) <b>OR</b>	AN (A)	IENDED	
	(Choose	OF REPORT One) Interly Reports:	(b) Monthly Report Due On:	Feb 20 (M2	<b>))</b>	May 20 (M5) Jun 20 (M6)	Sep	20 (M8) 20 (M9)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only)
0 6 7		April 15 Quarterly Report (Q1)	(C) 12-Da	•	) Primary (12F	Jul 20 (M7) 	General	20 (M10) 	Jan 31 (YE) Runoff (12R)
		July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3)	Repor	Election t for the:	Convention (		Special (		
		January 31 Year-End Report (YE)	)	Election on	M M /		Y Y Y Y	in the State	of
	$\times$	July 31 Mid-Year Report (Non-election Year Only) (MY)		y -Election t for the:	General (300	 3) ·	Runoff (3	90R)	Special (30S)
		Termination Report (TER)	перог	Election on			<b>y y liny y</b> Lint - h <u>i</u> le min	in the State	of
5.	Covering	Period 0	΄ ϐૌ ΄	à bờg	through	Ö	' 30'	ðöð9	
	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 Karen Greenrose								
Sig	nature of <sup>-</sup>	Treasurer	Knen J. S	humose		C	Date 01	` \$î '	Pčoč
NO		ssion of false, erroneo	us, or incomplete	information may s	ubject the pers	son signing th	nis Report to th	ne penalties of 2	U.S.C. §437g.
L	Off Us Or							FEC FOF Rev. 12/2	

Г	- FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE RECEIPTS AND DISBURSEMENTS	Page 2				
ľ	Vite or Type Committee Name American )(Gnizations Palitical	Action of Diele	næl Provider 2				
R	Report Covering the Period: From: $ONOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOO$						
		COLUMN A This Period	COLUMN B Calendar Year-to-Date				
6.	(a) Cash on Hand January 1, 2009		, 7,404 <u>8</u> 7				
	(b) Cash on Hand at Beginning of Reporting Period	, 7,404.87					
<b>1</b> 11.	(c) Total Receipts (from Line 19)	, 1,490.∞	, 7,490.° °				
41230	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	, 14,894.87	, 14,894 07				
r-  ⊙7. M	Total Disbursements (from Line 31)	, 19,588.65	, 19,508.65				
08. 09 (N	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	, -4,693.78	, -4,693.78				
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	, , . O					
10.	Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D)	, , D					

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         FEC Form 3X (Rev. 06/2004)       Page 3					
- W	Inte or Type Committee Name America	In Association of Plefe	erled Provider			
(	Diocnizations Political	Action Committee				
R	eport Covering the Period: From: Ö	" ం ీ ఈ ఉం గాం:	06' 20' 2009			
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date			
<b>ΓΣ 2 ΓΦ Γ Ο ΣΟ Ο 2</b> 16. 17.	<ul> <li>Contributions (other than loans) From:</li> <li>(a) Individuals/Persons Other Than Political Committees <ul> <li>(i) Iternized (use Schedule A)</li></ul></li></ul>	, 2410.00 5,080.00 , 1,490.00 , 0 , 0	, 2,410.00 5,080.00 1,490.00 , 0 , 0 , 0 , 0 , 0 , 0 , 0 , 0 , 0			
	(c) Total Transfers (add 18(a) and 18(b))	, , <i>O</i>	·, , . Ò			
	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	, 1,490.°°	, 1,490.°°			
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	, 1,490.0°	, 1,490.00			

## DETAILED SUMMARY PAGE

I

of Disbursements

-	FEC Form 3X (Rev. 02/2003)	of Disbursements	Page 4		
	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	, , - O	, , . O		
	(ii) Non-Federal Share		D I		
	(b) Other Federal Operating	, ,	, ,		
	Expenditures	50065	500.65		
	(c) Total Operating Expenditures	, ,0015	, ,000.		
	(add 21(a)(i), (a)(ii), and (b))►	50003	, ,500.		
22.	Transfers to Affiliated/Other Party		$\sim$		
23.	Committees Contributions to Federal Candidates/Committees	, , . U	, , . U		
	and Other Political Committees	, 19,000.00	, [9,000.		
24.	Independent Expenditures	A	$\sim$		
25.	(use Schedule E) Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	, , <u>.</u> 0	, , . U		
		· · · · · · · · · · · · · · · · · · ·	, ,		
∩ <sup>26.</sup> M <sup>26.</sup>	Loan Repayments Made	, , . O	, , . 0		
다 <sup>27.</sup> 5 <sup>28.</sup> 다	Loans Made Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	, , . O , , . O	, , . O		
0 M	(b) Political Party Committees	$\sim$	$\sim$		
O	<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li></ul>	··· , ·· , ··· ·· ·· ·· ·· ·· ·· ·· ·· ·	, , U		
()	(such as PACs)	$\mathbf{O}$	, D		
2		, , , · · · · ·	, ,		
	(d) Total Contribution Refunds				
	(add Lines 28(a), (b), and (c))▶	, , . O	, , .0		
29.	Other Disbursements	, , . O	, , O		
30.	Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity (from Schedule H6)				
	(i) Federal Share		$\mathbf{D}$		
		, , <del>,</del> , <del>,</del> ,	, ,		
	(ii) "Levin" Share	, , . O	, , . )		
	(b) Federal Election Activity Paid Entirely	5			
	With Federal Funds	, , - 0	, , . O		
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))►	, , Ô	, , . D		
21	Total Disbursements (add Lines 21(c), 22,				
01.	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	, 19,588.65	, 19,588 65		
32.	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	, 19,588.65	, 19,588 65		

Γ	FEC Form 3X (Rev. 02/2003)	DETAILED SUMMARY PAGE of Disbursements	Page 5
111.	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)	, 7,490.00	, 1,490.00
34.	Total Contribution Refunds (from Line 28(d))	, , . D	·
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	, 1,490.°°	, 1,490.°° , ,588.65
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	, ,588.65	, ,588.65
37.	Offsets to Operating Expenditures (from Line 15, page 3)	5	$\sim$
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	, ,588 <sup>65</sup>	, ,588.°S

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	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only 21b 27	
or	y information copied from such Reports and Statem for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full)	e and address of any politic	ed by any perso al committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
V	Organizations Politica	1 Action Co	mmit	rel
Α.	Full Name (Last, First, Middle Initial) <u>Support (Last, First, Middle Initial)</u> Mailing Address  Do Dook (Laborator)			Date of Disbursement
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301412	Full Name (Last, First, Middle Initial) <u>Suntaut Peark</u> Mailing Address <u>PD Pex 62222</u>	1		Date of Disbursement
230	City City S Purpose of Disbursement Candidate Name	State FL 320 3017	Category/ Type	Amount of Each Disbursement this Period
		nent For: Primary General Other (specify) ▼		
C.	Full Name (Last, First, Middle Initial) <u>Show Back</u> Mailing Address Mailing Address Pox 10221			Date of Disbursement
	City Ologo Purpose of Disbursement Candidate Name	FL Zip Code FL 32	Category/ Type	Amount of Each Disbursement this Period $\mu \Lambda 30$
		nent For: Primary General Other (specify) ▼	тура	, , 40
	UBTOTAL of Disbursements This Page (optional) OTAL This Period (last page this line number only).			j j, j

# SCHEDULE B (EEC Form 3X)

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		Detailed Summary Page	27	28a 28b	28c 29 30b
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2	Full Name (Last, First, Middle Initial)				
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s	UBTOTAL of Disbursements This Page (optional)		••••••	3	· ·
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ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER (check only one) 21b 27 28a	23 24 25 26
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$\mathbf{V}$	Organizations Politic	iel Action (	<u>com</u>	HER
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# SCHEDULE B (EEC Form 3X)

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Π	NAME OF COMMITTEE (In Full) Amenco	not P	referred Provider	
	Organizations Pointi	cal Action	(mm	"HER
Α.	Full Name (Last, First, Middle Initial)			Date of Disbursement
~	Colorn for Serche	2010		06'30' 2009
	Mailing Address PO BOX 977			<u>906 30 2009</u>
	City 5 MOSK-Cype Purpose of Disbursement	State Zip Code	402	
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င တ	midland	mi zip code 49	OFOR	
è.	Purpose of Disbursement			Amount of Each Disbursement this Period
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ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only 21b	one) 22 23 24 25 26				
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or for commercial purposes, other than using the nar	me and address of any political	committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full) America	NAME OF COMMITTEE (In Full) American Association of Pleterled Provider Olophizations Political Action Committee						
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S	CHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 3 OF 3
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		for each category of the Detailed Summary Page	21b	
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A	ny information copied from such Reports and Staterr for commercial purposes, other than using the name	nents may not be sold or use the and address of any political	d by any perso I committee to	on for the purpose of soliciting contributions solicit contributions from such committee
K	NAME OF COMMITTEE (In Full) American			
Ľ	Ofgenizations Politic	al Action (	<u>mm</u>	TTER
A.	Full Name (Last, First, Middle Initial)			Date of Disbursement
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SCHEDULE A (FEC Form 3X) OF 5 FOR LINE NUMBER: PAGE Use separate schedule(s) (check only one) **ITEMIZED RECEIPTS** for each category of the X 11a 11b 11c 12 **Detailed Summary Page** 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. According of Dieforial NAME OF COMMITTEE (In Full)  $\infty$ 7 CO (ummitted Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address 63 ' à 4 ' à ò ô 9 ' U 110 Vr 0 City State Zip Code C Amount of Each Receipt this Period 90 FEC ID number of contributing С federal political committee. Name of Employer Occupation 107 Receipt For: Aggregate Year-to-Date ▼ Primary General 00 ,300. Other (specify) (arise) ST. Full Name (Last, First, Middle Initial) N ••••**†B**. P Date of Receipt থ Mailing Address 1009 ۶ -0 M City State Zip Code Amount of Each Receipt this Period C) O 80 FEC ID number of contributing ,210 С federal political committee.  $\sim$ Name of Employer Occupation n c ዮ nu **Receipt For:** Aggregate Year-to-Date V Primary General ,210.00 Other (specify) 3 Full\_Name (Last, First, Middle Initial) C. Date of Receipt Mailing ບໍ່ລ້ ' ລໍ່ 4 ' ລ້ວວ່າ City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing . 00 ,300 С federal political committee. Occupation , Name of Employer (M 0 **Receipt** For: Aggregate Year-to-Date V General Primary 00 300. Other (specify) 5 . SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 5 Э

SCHEDULE A (FEC Form 3X) FOR LINE NUMBER: PAGE A OF 3 Use separate schedule(s) (check only one) **ITEMIZED RECEIPTS** for each category of the X11a 11b 11c 12 **Detailed Summary Page** 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) referred rana According of yyer (c mmFull (Last, First, Middle, Initial) Name Date of Receipt A. Mailing Address 04'02'à009 Zip Code City State 53 Amount of Each Receipt this Period 00 FEC ID number of contributing ,200 С federal political committee. Name of Employer Occupation 10-51 Receipt For: Aggregate Year-to-Date ▼ Primarv General 00 Other (specify) ,  $\sim$ 5 Full Name (Last, First, Middle Initial)  $\sim$ , dB Date of Receipt ሻ Mailing Addres **~~~**{ P enre City Ø State Zip Code M Amount of Each Receipt this Period Ξ 00 FEC ID number of contributing Ö С federal political committee.  $\sim$ Name of Employer Occupation P Receipt For: Aggregate Year-to-Date Primary General ,210,00 Other (specify) 4 Full-Name (Last, First, Middle, Initial) C. 255 Date of Receipt Mailing Address 24 ' 2609 DG City State Zip Code Amount of Each Receipt this Period 10000 FEC ID number of contributing С federal political committee. Name of Employer Occupation **Receipt For:** Aggregate Year-to-Date ▼ Primary General 00 M 00. Other (specify) **J**. • .• . 1 . SUBTOTAL of Receipts This Page (optional)..... ·9 · .7 . TOTAL This Period (last page this line number only)..... ... 🕨 7 ,

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:         PAGE 3 OF 3           (check only one)         11a           11a         11b         11c         12           13         14         15         16         17
Ar	ny information copied from such Reports and Statements may not be sold or used by any person for commercial purposes, other than using the name and address of any political committee to			rson for the purpose of soliciting contributions to solicit contributions from such committee.
Ň	NAME OF COMMITTEE (In Full) American Association of PIG			
$\mathcal{V}$	Organizations Dartical Action Comm			
Α.				Date of Receipt
	Mailing Address 535 E. Diehl Ru City	State	Site 100 Zip Code	_ öɔ̈́ ´ Ϡů´ ǎǒ́́́́́ à́
	1 aperuille	T	L 60563	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		, <u>,</u> 500.00
	Name of Employer		ve. Vie President	
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	Name of Employer	Occupation	, <u>, , , , , , , , , , , , , , , , </u>	-
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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOM The FEC added this page to the end of this filing to indic			
Hand Delivered	Date of Receipt		
USPS First Class Mail	Postmarked		
USPS Registered/Certified	Postmarked (R/C) $7/31/09$		
USPS Priority Mail	Postmarked		
Delivery Confirmation <sup>™</sup> or Signature Confirmation <sup>™</sup> Label			
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Overnight Delivery Service (Specify):	Shipping Date		
Next Busi	iness Day Delivery		
Received from House Records & Registration Office	Date of Receipt		
Received from Senate Public Records Office	Date of Receipt		
Received from Electronic Filing Office	Date of Receipt		
Date Date	of Receipt or Postmarked		
EN	8/4/09		
PREPARER (3/2005)	DATE PREPARED		