

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Association of Fundraising Professionals Political Action Committee

ADDRESS (number and street)

4300 Wilson Boulevard

#300

Check if different  
than previously  
reported. (ACC)

Arlington

VA

22203-4168

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00382143

3. IS THIS  
REPORTNEW  
(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  
Year-End 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 (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

[ ]

(d) 30-Day  
POST-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

[ ]

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Lee, Jason, R., Mr., Esq.

Type or Print Name of Treasurer

Signature of Treasurer

Lee, Jason, R., Mr., Esq.

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

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  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Association of Fundraising Professionals Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
07 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y  
09 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2016</span>		46697.88
(b) Cash on Hand at Beginning of Reporting Period.....	67665.76	
(c) Total Receipts (from Line 19) .....	8776.00	31586.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	76441.76	78283.88
7. Total Disbursements (from Line 31).....	997.27	2839.39
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	75444.49	75444.49
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

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Page 3

Write or Type Committee Name

Association of Fundraising Professionals Political Action Committee

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	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		
(i) Itemized (use Schedule A).....	7841.00	24122.00
(ii) Unitemized .....	935.00	7464.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	8776.00	31586.00
(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) .....	8776.00	31586.00
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.).....	0.00	0.00
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 Transfers (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)) .....	8776.00	31586.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	8776.00	31586.00

# **DETAILED SUMMARY PAGE** of Disbursements

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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 .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	997.27	2839.39
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated 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)) ..	997.27	2839.39
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	997.27	2839.39

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	8776.00	31586.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	8776.00	31586.00
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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 15  
(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"/> 14	<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)

Association of Fundraising Professionals Political Action Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Bloch, Dane, , ,**

Mailing Address 1903 S. Dakota Ave.

City  
Sioux FallsState  
SDZip Code  
57105FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
The Community OutreachOccupation (for Individual)  
Exec Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
08	22	2016

Transaction ID : SA11AI.6212

Amount of Each Receipt this Period

50.00

☐ Memo Item  
 contribution to AFP PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Boroff, Gregory, , ,**Mailing Address 305 Seventh Avenue  
12th FloorCity  
New YorkState  
NYZip Code  
10001FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Friends of Hudson River ParkOccupation (for Individual)  
Exec Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
07	26	2016

Transaction ID : SA11AI.6206

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 contribution to AFP PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Broome, Jennifer, , ,**Mailing Address 2755 Ordway St NW  
Apt 210City  
WashingtonState  
DCZip Code  
20008FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
George Washington UniversityOccupation (for Individual)  
Dir. of Development, GW Library

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
09	30	2016

Transaction ID : SA11AI.6239

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 contribution to AFP PAC

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

400.00

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

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Association of Fundraising Professionals Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Connolly, Catherine, , ,**

Mailing Address 3239 Port Pacific Lane

City  
Eld Grove

State  
CA

Zip Code  
95758

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

CM Connolly

Occupation (for Individual)

fundraiser

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

08 / 30 / 2016

Transaction ID : SA11AI.6228

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
contribution to AFP PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Ehrenfried, Sally, , ,**

Mailing Address 2000 Daniel Island Dr.

City  
Charleston

State  
SC

Zip Code  
29492

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Blackbaud Inc.

Occupation (for Individual)

Community Rel. Mgr.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / 22 / 2016

Transaction ID : SA11AI.6217

Amount of Each Receipt this Period

50.00

☐ Memo Item  
contribution to AFP PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Ehrenfried, Sally, , ,**

Mailing Address 2000 Daniel Island Dr.

City  
Charleston

State  
SC

Zip Code  
29492

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Blackbaud Inc.

Occupation (for Individual)

Community Rel. Mgr.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

09 / 21 / 2016

Transaction ID : SA11AI.6235

Amount of Each Receipt this Period

50.00

☐ Memo Item  
contribution to AFP PAC

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

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

2600.00

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 15  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Association of Fundraising Professionals Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Feeley, Patrick, J., ,**

Mailing Address 2536 Webster St.

City  
Philadelphia

State  
PA

Zip Code  
19146

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
The Children's Hospital Found.

Occupation (for Individual)  
Dir. of Devel.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2016

Transaction ID : SA11AI.6223

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 contribution to AFP PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Gordon, Gretchen, , ,**

Mailing Address P.O. Box 755620

City  
Fairbanks

State  
AK

Zip Code  
99775

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KVAC TV9/FM 89.9

Occupation (for Individual)  
Dir. of Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

868.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 26 / 2016

Transaction ID : SA11AI.6208

Amount of Each Receipt this Period

67.00

☐ Memo Item  
 contribution to AFP PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Gordon, Gretchen, , ,**

Mailing Address P.O. Box 755620

City  
Fairbanks

State  
AK

Zip Code  
99775

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KVAC TV9/FM 89.9

Occupation (for Individual)  
Dir. of Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

935.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 08 / 22 / 2016

Transaction ID : SA11AI.6215

Amount of Each Receipt this Period

67.00

☐ Memo Item  
 contribution to AFP PAC

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

1134.00

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

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 9 OF 15  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Association of Fundraising Professionals Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Gordon, Gretchen, , ,**

Mailing Address P.O. Box 755620

City  
Fairbanks

State  
AK

Zip Code  
99775

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KVAC TV9/FM 89.9

Occupation (for Individual)  
Dir. of Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1002.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 09 / 21 / 2016

Transaction ID : SA11AI.6234

Amount of Each Receipt this Period

67.00

☐ Memo Item  
contribution to AFP PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Hale, Ann, M., ,**

Mailing Address 13301 Vern Drive

City  
Anchorage

State  
AK

Zip Code  
99508

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Alaska Pacific University

Occupation (for Individual)  
Dir. of Univ. Advancement

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 08 / 23 / 2016

Transaction ID : SA11AI.6219

Amount of Each Receipt this Period

250.00

☐ Memo Item  
contribution to AFP PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Healey, Roberta, A., ,**

Mailing Address 182 Apple Drive

City  
Exton

State  
PA

Zip Code  
19341

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Farr Healey Consulting LLC

Occupation (for Individual)  
Senior Member

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 08 / 23 / 2016

Transaction ID : SA11AI.6218

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
contribution to AFP PAC

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

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

1317.00

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

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FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Association of Fundraising Professionals Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Hefter, Mark, , ,**

Mailing Address 255 Palisade Avenue

City

Dobbs Ferry

State

NY

Zip Code

10522

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

American Technion Society

Occupation (for Individual)

Director, Planned Giving

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

08 / 15 / 2016

Transaction ID : SA11AI.6210

Amount of Each Receipt this Period

250.00

☐ Memo Item  
contribution to AFP PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Hefter, Mark, , ,**

Mailing Address 255 Palisade Avenue

City

Dobbs Ferry

State

NY

Zip Code

10522

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

American Technion Society

Occupation (for Individual)

Director, Planned Giving

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

09 / 21 / 2016

Transaction ID : SA11AI.6231

Amount of Each Receipt this Period

125.00

☐ Memo Item  
contribution to AFP PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Penland, Missy, Ryan, ,**

Mailing Address 700 C. Bennett St.

City

Greenville

State

SC

Zip Code

29609

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Clemson University

Occupation (for Individual)

Sr. Dir. of Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

07 / 26 / 2016

Transaction ID : SA11AI.6207

Amount of Each Receipt this Period

55.00

☐ Memo Item  
contribution to AFP PAC

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

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

430.00

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 11 OF 15  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Association of Fundraising Professionals Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Penland, Missy, Ryan, ,**

Mailing Address 700 C. Bennett St.

City  
Greenville

State  
SC

Zip Code  
29609

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Clemson University

Occupation (for Individual)  
Sr. Dir. of Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

MM / DD / YYYY  
08 / 22 / 2016

Transaction ID : SA11AI.6214

Amount of Each Receipt this Period

55.00

☐ Memo Item  
contribution to AFP PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Penland, Missy, Ryan, ,**

Mailing Address 700 C. Bennett St.

City  
Greenville

State  
SC

Zip Code  
29609

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Clemson University

Occupation (for Individual)  
Sr. Dir. of Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

MM / DD / YYYY  
09 / 21 / 2016

Transaction ID : SA11AI.6233

Amount of Each Receipt this Period

55.00

☐ Memo Item  
contribution to AFP PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Racette, Nancy, , ,**

Mailing Address 3337 Holloman Road

City  
Falls Church

State  
VA

Zip Code  
22042

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Development Resources, Inc.

Occupation (for Individual)  
COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY  
08 / 22 / 2016

Transaction ID : SA11AI.6216

Amount of Each Receipt this Period

50.00

☐ Memo Item  
contribution to AFP PAC

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

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

160.00

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 OF 15

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Association of Fundraising Professionals Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Saacke, Robert, , ,**

Mailing Address 103 Sorrento Drive

City  
Greenville

State  
SC

Zip Code  
29609

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Bob Saacke Associates

Occupation (for Individual)

Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 15 / 2016

**Transaction ID : SA11AI.6229**

Amount of Each Receipt this Period

300.00

☐ Memo Item  
contribution to AFP PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Schumacher, Martha, , ,**

Mailing Address 906 Pennsylvania Ave. SE

City  
Washington

State  
DC

Zip Code  
20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Hazen Inc.

Occupation (for Individual)

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 26 / 2016

**Transaction ID : SA11AI.6201**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
contribution to AFP PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Schumacher, Martha, , ,**

Mailing Address 906 Pennsylvania Ave. SE

City  
Washington

State  
DC

Zip Code  
20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Hazen Inc.

Occupation (for Individual)

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 22 / 2016

**Transaction ID : SA11AI.6211**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
contribution to AFP PAC

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

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

1300.00

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 15  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Association of Fundraising Professionals Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Schumacher, Martha, , ,**

Mailing Address 906 Pennsylvania Ave. SE

City  
Washington

State  
DC

Zip Code  
20003

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Hazen Inc.

Occupation (for Individual)  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

**09 / 21 / 2016**

**Transaction ID : SA11AI.6230**

Amount of Each Receipt this Period

500.00

☐ Memo Item  
contribution to AFP PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

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

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

500.00

7841.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of Fundraising Professionals Political Action Committee

Full Name (Last, First, Middle Initial)

**A. SunTrust Bank**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Mailing Address One Park Place

City  
AtlantaState  
GAZip Code  
30303Purpose of Disbursement  
credit card fees

Candidate Name

Category/  
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C

Transaction ID : SB29.6241

Amount of Each Disbursement this Period

61.82

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SunTrust Bank**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2016

Mailing Address One Park Place

City  
AtlantaState  
GAZip Code  
30303Purpose of Disbursement  
bank fee

Candidate Name

Category/  
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C

Transaction ID : SB29.6245

Amount of Each Disbursement this Period

226.81

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SunTrust Bank**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Mailing Address One Park Place

City  
AtlantaState  
GAZip Code  
30303Purpose of Disbursement  
credit card fees

Candidate Name

Category/  
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

C

Transaction ID : SB29.6243

Amount of Each Disbursement this Period

63.86

☐ Memo Item

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

352.49

TOTAL 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 PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 15

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Association of Fundraising Professionals Political Action Committee

Full Name (Last, First, Middle Initial)

**A. SunTrust Bank**

Mailing Address One Park Place

City  
AtlantaState  
GAZip Code  
30303Purpose of Disbursement  
bank fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2016

FEC Identification Number

C

Transaction ID : SB29.6246

Amount of Each Disbursement this Period

228.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SunTrust Bank**

Mailing Address One Park Place

City  
AtlantaState  
GAZip Code  
30303Purpose of Disbursement  
credit card fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2016

FEC Identification Number

C

Transaction ID : SB29.6244

Amount of Each Disbursement this Period

124.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SunTrust Bank**

Mailing Address One Park Place

City  
AtlantaState  
GAZip Code  
30303Purpose of Disbursement  
bank fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2016

FEC Identification Number

C

Transaction ID : SB29.6247

Amount of Each Disbursement this Period

291.45

☐ Memo Item

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

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

644.78

997.27