

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 MANAGEMENT ASSOCIATION FOR PRIVATE PHOTOGRAMMETRIC SURVEYORS PAC (MAPPS PAC)

ADDRESS (number and street) 1856 Old Reston Ave Suite 205 RESTON VA 20190 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00233247 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, 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, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 04 01 2014 through 06 30 2014

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 John Palatiello

Signature of Treasurer John Palatiello [Electronically Filed] Date 07 15 2014

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

MANAGEMENT ASSOCIATION FOR PRIVATE PHOTOGRAMMETRIC SURVEYORS PAC (MAPPS PAC)

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="2014"/>		20542.43
(b) Cash on Hand at Beginning of Reporting Period.....	24742.43	
(c) Total Receipts (from Line 19)	4300.00	10000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	29042.43	30542.43
7. Total Disbursements (from Line 31).....	4000.00	5500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	25042.43	25042.43
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY 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

MANAGEMENT ASSOCIATION FOR PRIVATE PHOTOGRAMMETRIC SURVEYORS PAC (MAPPS PAC)

Report Covering the Period: From: / / To: / /

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).....	3300.00	7800.00
(ii) Unitemized	0.00	200.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	3300.00	8000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	1000.00	2000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	4300.00	10000.00
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))..... ▶	4300.00	10000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	4300.00	10000.00

DETAILED SUMMARY PAGE

of Disbursements

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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.....	4000.00	5500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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) 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)) ..	4000.00	5500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4000.00	5500.00

DETAILED SUMMARY PAGE
of Disbursements

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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)	4300.00	10000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4300.00	10000.00
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 Page

FOR LINE NUMBER: PAGE 6 OF 10
(check only one)
 11a 11b 11c 12
 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)
MANAGEMENT ASSOCIATION FOR PRIVATE PHOTOGRAMMETRIC SURVEYORS PAC (MAPPS PAC)

Full Name (Last, First, Middle Initial)
A. Eric Andelin

Mailing Address 2921 E. 92nd Place
 Apt. 605

City State Zip Code
 Tulsa OK 74137

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

Name of Employer Occupation
 Bohannon Huston

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 08 / 2014

Transaction ID : SA11AI.4949

Amount of Each Receipt this Period
 300.00

Full Name (Last, First, Middle Initial)
B. Pamela Nobles

Mailing Address 2799 AJ Henry Park Drive

City State Zip Code
 Tallahassee FL 32309

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

Name of Employer Occupation
 3DS Photogrammetrist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 08 / 2014

Transaction ID : SA11AI.4933

Amount of Each Receipt this Period
 1000.00

Contribution

Full Name (Last, First, Middle Initial)
C. Patrick Olson

Mailing Address N 9798 Highland Park Road

City State Zip Code
 Malone WI 53049

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

Name of Employer Occupation
 Aero-Metric CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 08 / 2014

Transaction ID : SA11AI.4950

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2300.00

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)	PAGE 7 OF 10
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MANAGEMENT ASSOCIATION FOR PRIVATE PHOTOGRAMMETRIC SURVEYORS PAC (MAPPS PAC)

Full Name (Last, First, Middle Initial) A. Mark Schubert		Date of Receipt
Mailing Address 2629 Medinah Drive		M M / D D / Y Y Y Y Y Y 04 / 08 / 2014
City	State	Zip Code
Evergreen	CO	80439
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.4934
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		1000.00
Name of Employer	Occupation	
Aerial Surveys International	Aerial Photographer	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	1000.00	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B.		Date of Receipt
Mailing Address		M M / D D / Y Y Y Y Y Y
City	State	Zip Code
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C.		Date of Receipt
Mailing Address		M M / D D / Y Y Y Y Y Y
City	State	Zip Code
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	3300.00

**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 10
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MANAGEMENT ASSOCIATION FOR PRIVATE PHOTOGRAMMETRIC SURVEYORS PAC (MAPPS PAC)

A. WOOLPERT INC PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 4454 IDEA CENTER BLVD
 City DAYTON State OH Zip Code 45430
 FEC ID number of contributing federal political committee. **C** C00479899
 Name of Employer Occupation
 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
 04 / 08 / 2014
Transaction ID : SA11C.4932
 Amount of Each Receipt this Period
 1000.00
 Contribution

B.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	1000.00

**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)

<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)
MANAGEMENT ASSOCIATION FOR PRIVATE PHOTOGRAMMETRIC SURVEYORS PAC (MAPPS PAC)

Full Name (Last, First, Middle Initial)

A. CARL DEMAIO FOR CONGRESS

Mailing Address PO BOX 27227

City SAN DIEGO State CA Zip Code 92198

Purpose of Disbursement

Candidate Name
CARL DEMAIO FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: CA District: 52

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 23 / 2014

Transaction ID : **SB23.4952**

Amount of Each Disbursement this Period

1000.00

B. DUNCAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 2646

City KNOXVILLE State TN Zip Code 37901

Purpose of Disbursement

Candidate Name
DUNCAN FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: TN District: 02

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 25 / 2014

Transaction ID : **SB23.4953**

Amount of Each Disbursement this Period

1000.00

C. FRIENDS OF JACK KINGSTON

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 2133
PO Box 2133

City Savannah State GA Zip Code 31402

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: GA District: 01

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 15 / 2014

Transaction ID : **SB23.4944**

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

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)

<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)
MANAGEMENT ASSOCIATION FOR PRIVATE PHOTOGRAMMETRIC SURVEYORS PAC (MAPPS PAC)

Full Name (Last, First, Middle Initial)

A. KEEP NICK RAHALL IN CONGRESS COMMITTEE

Date of Disbursement

Mailing Address P O Box 64

M M M	/	D D D	/	Y Y Y Y Y Y
05		19		2014

City Beckley State WV Zip Code 25802

Transaction ID : SB23.4951

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name
KEEP NICK RAHALL IN CONGRESS COMMITTEE

Category/
Type

1000.00

Office Sought: House Senate President
 Disbursement For: 2014 Primary General Other (specify) ▼
 State: WV District: 03

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

Mailing Address

M M M	/	D D D	/	Y Y Y Y Y Y

City State Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

--

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

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

Mailing Address

M M M	/	D D D	/	Y Y Y Y Y Y

City State Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

--

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)..... ▶

1000.00

4000.00
