

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED

2012 OCT 19 AM 11:59

Office Use Only

FEC MAIL CENTER

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Athena PAC

ADDRESS (number and street)

301 W Platt St #385



Check if different
than previously
reported. (ACC)

Tampa

FL

33606

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00526301

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
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)

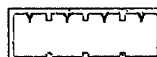


Convention (12C)



Special (12S)

Election on



in the
State of



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



General (30G)

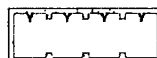


Runoff (30R)



Special (30S)

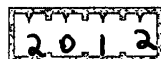
Election on



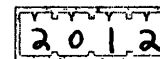
in the
State of



5. Covering Period



through



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

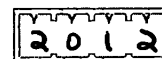
Type or Print Name of Treasurer

Amy Martin

Signature of Treasurer

Amy Martin

Date



NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3X

Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Athena PAC

Report Covering the Period:

From:

MM	DD	YYYY
08	02	2012

To:

MM	DD	YYYY
09	30	2012

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand
January 1,

YYYY
2012

000

(b) Cash on Hand at
Beginning of Reporting Period.....

000

(c) Total Receipts (from Line 19)

1500000

1500000

(d) Subtotal (add Lines 6(b) and
6(c) for Column A and Lines
6(a) and 6(c) for Column B)

1500000

1500000

7. Total Disbursements (from Line 31)

4000000

4000000

8. Cash on Hand at Close of
Reporting Period
(subtract Line 7 from Line 6(d))

1100000

1100000

9. Debts and Obligations Owed TO
the Committee (Itemize all on
Schedule C and/or Schedule D)

--

10. Debts and Obligations Owed BY
the Committee (Itemize all on
Schedule C and/or Schedule 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

Write or Type Committee Name

Athena PAC

Report Covering the Period:

From:

MM / DD / YYYY
08 / 02 / 2012

To:

MM / DD / YYYY
09 / 30 / 2012

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).....

(ii) Unitemized

(iii) TOTAL (add
Lines 11(a)(i) and (ii)).....▶

(b) Political Party Committees

(c) Other Political Committees
(such as PACs).....

(d) Total Contributions (add Lines
11(a)(iii), (b), and (c)) (Carry
Totals to Line 33, page 5)

12. Transfers From Affiliated/Other
Party Committees

13. All Loans Received

14. Loan Repayments Received

15. Offsets To Operating Expenditures
(Refunds, Rebates, etc.)
(Carry Totals to Line 37, page 5)

16. Refunds of Contributions Made
to Federal Candidates and Other
Political Committees

17. Other Federal Receipts
(Dividends, Interest, etc.)

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account
(from Schedule H3)

(b) Levin Funds (from Schedule H5)

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))

20. Total Federal Receipts
(subtract Line 18(c) from Line 19)

5,000.00

5,000.00

1,000.00

15,000.00

15,000.00

15,000.00

5,000.00

5,000.00

1,000.00

15,000.00

15,000.00

15,000.00

DETAILED SUMMARY PAGE

Page 4

COLUMN B
Calendar Year-to-Date

- [illegible]

FE6AN026

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Ex- **penditures**

COLUMN A **Total This Period**

COLUMN B **Calendar Year-to-Date**

- 33. Total Contributions (other than loans)
(from Line 11(d), page 3)
- 34. Total Contribution Refunds
(from Line 28(d))
- 35. Net Contributions (other than loans)
(subtract Line 34 from Line 33)
- 36. Total Federal Operating Expenditures
(add Line 21(a)(i) and Line 21(b))
- 37. Offsets to Operating Expenditures
(from Line 15, page 3)
- 38. Net Operating Expenditures
(subtract Line 37 from Line 36)

15,000.00
15,000.00

15,000.00
15,000.00

12030921302

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 **9**
(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)

Athena PAC

Full Name (Last, First, Middle Initial)

A. **Taylor, Lorna**

Mailing Address

3009 W Villa Rosa Park

City

Tampa

State

FL

Zip Code

33611

FEC ID number of contributing
federal political committee.

C

Name of Employer

Premier Eye Care

Occupation

President & CEO

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5,000.00

Date of Receipt

09

14

2012

Amount of Each Receipt this Period

5,000.00

Full Name (Last, First, Middle Initial)

B.

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

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

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

Amount of Each Receipt this Period

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

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

5,000.00

5,000.00

12030921303

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 9

(check only one)

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

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NAME OF COMMITTEE (In Full)

Athena PAC

Full Name (Last, First, Middle Initial)

A. Intl Brotherhood of Electrical Workers PAC

Mailing Address

900 Seventh St NW

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

C00027342

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500000

Date of Receipt

MM / DD / YYYY
09 / 25 / 2012

Amount of Each Receipt this Period

500000

Full Name (Last, First, Middle Initial)

B. Amer Academy of Dermatology Assoc PAC

Mailing Address

1445 New York Ave NW Suite 800

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C00359539

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500000

Date of Receipt

MM / DD / YYYY
09 / 30 / 2012

Amount of Each Receipt this Period

500000

Full Name (Last, First, Middle Initial)

C.

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

MM / DD / YYYY

Amount of Each Receipt this Period

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

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

1000000

1000000

**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 **8** OF **9**

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Athena PAC

Full Name (Last, First, Middle Initial)

A. **Val Demings for Congress**

Mailing Address

P. O. Box 536926

City

Orlando

State

FL

Zip Code

32853

Purpose of Disbursement

Contribution

Candidate Name

Valdez Val Demings

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For: **2012**

☐ Primary

☒ General

☐ Other (specify) ▼

State: **FL**

District: **10**

Date of Disbursement

09 / 27 / 2012

Amount of Each Disbursement this Period

100000

Full Name (Last, First, Middle Initial)

B. **Joe Garcia for Congress**

Mailing Address

1924 Ferdinand St

City

Coral Gables

State

FL

Zip Code

33134

Purpose of Disbursement

Contribution

Candidate Name

Joe Garcia

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For: **2012**

☐ Primary

☒ General

☐ Other (specify) ▼

State: **FL**

District: **26**

Date of Disbursement

09 / 27 / 2012

Amount of Each Disbursement this Period

100000

Full Name (Last, First, Middle Initial)

C. **Al Lawson for Congress**

Mailing Address

400 N Adams St

City

Tallahassee

State

FL

Zip Code

32301

Purpose of Disbursement

Contribution

Candidate Name

Alfred J Lawson Jr

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For: **2012**

☐ Primary

☒ General

☐ Other (specify) ▼

State: **FL**

District: **02**

Date of Disbursement

09 / 27 / 2012

Amount of Each Disbursement this Period

100000

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

300000

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 Page

FOR LINE NUMBER:
(check only one)

PAGE **9** OF **9**

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Athena PAC

Full Name (Last, First, Middle Initial)

A. **Patrick Murphy for Congress**

Mailing Address

P.O. Box 868

City

Levittown

State

PA

Zip Code

19058

Purpose of Disbursement

Contribution

Candidate Name

Patrick J. Murphy

Category/
Type

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: **2012**

☐

Primary

☒

General

☐

Other (specify) ▼

State: **PA**

District: **08**

Date of Disbursement

09 / 27 / 2012

Amount of Each Disbursement this Period

100000

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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

100000

400000

12030921306

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

☐ Hand Delivered	Date of Receipt
☐ USPS First Class Mail	Postmarked
☐ USPS Registered/Certified	Postmarked (R/C)
☒ USPS Priority Mail	Postmarked 10/15/12
Delivery Confirmation™ or Signature Confirmation™ Label ☐	
☐ USPS Express Mail	Postmarked
☐ Postmark Illegible	
☐ No Postmark	
☐ Overnight Delivery Service (Specify):	Shipping Date
Next Business 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
☐ Other (Specify):	Date of Receipt or Postmarked



PREPARER

(3/2005)

10/15/12

DATE PREPARED

12030921307