

# 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.   
American Institute of Certified Public Accountants Political Action Committee

ADDRESS (number and street) Palladian 1  
220 Leigh Farm Rd  
Durham NC 27707-8110  
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
 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  07 / 01 / 2013 through  07 / 31 / 2013

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 Mr. Anthony Pugliese

Signature of Treasurer Mr. Anthony Pugliese [Electronically Filed] Date  08 / 19 / 2013

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)

Write or Type Committee Name

American Institute of Certified Public Accountants Political Action Committee

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="2013"/>		565716.84
(b) Cash on Hand at Beginning of Reporting Period.....	371511.39	
(c) Total Receipts (from Line 19) .....	73249.11	331472.20
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	444760.50	897189.04
7. Total Disbursements (from Line 31).....	55016.11	507444.65
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	389744.39	389744.39
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**American Institute of Certified Public Accountants Political Action Committee**

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

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	4325.00	157551.00
(ii) Unitemized .....	68913.00	171764.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	73238.00	329315.00
(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) .....	73238.00	329315.00
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	2000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	11.11	157.20
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))..... ▶	73249.11	331472.20
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	73249.11	331472.20

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

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 .....	272.61	1973.65
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	272.61	1973.65
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	54528.50	500081.00
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 .....	215.00	390.00
(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)).....	215.00	390.00
29. Other Disbursements .....	0.00	5000.00
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)) ..	55016.11	507444.65
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	55016.11	507444.65

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	73238.00	329315.00
34. Total Contribution Refunds (from Line 28(d)) .....	215.00	390.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	73023.00	328925.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	272.61	1973.65
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	272.61	1973.65

**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 6 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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)  
**American Institute of Certified Public Accountants Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Gregory Eli**

Mailing Address **9647 MAGNOLIA RIDGE WAY**

City <b>BRENTWOOD</b>	State <b>TN</b>	Zip Code <b>37027-8388</b>
--------------------------	--------------------	-------------------------------

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

Name of Employer <b>LBMC, PC</b>	Occupation <b>CPA</b>
-------------------------------------	--------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		23		2013

**Transaction ID : 36337919**

Amount of Each Receipt this Period  

30.00
-------

Full Name (Last, First, Middle Initial)  
**B. Jeffery Drummonds**

Mailing Address **750 Princeton Hills Dr**

City <b>Brentwood</b>	State <b>TN</b>	Zip Code <b>37027-3008</b>
--------------------------	--------------------	-------------------------------

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

Name of Employer <b>LBMC, PC</b>	Occupation <b>CPA</b>
-------------------------------------	--------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		06		2013

**Transaction ID : 36337940**

Amount of Each Receipt this Period  

30.00
-------

Full Name (Last, First, Middle Initial)  
**C. Steven Dodson**

Mailing Address **5250 Virginia Way Ste 300 Ste 400**

City <b>BRENTWOOD</b>	State <b>TN</b>	Zip Code <b>37027-7576</b>
--------------------------	--------------------	-------------------------------

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

Name of Employer <b>LBMC, PC</b>	Occupation <b>CPA</b>
-------------------------------------	--------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2013

**Transaction ID : 36339650**

Amount of Each Receipt this Period  

30.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>90.00</b>
<b>TOTAL</b> 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 27
	<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)  
**American Institute of Certified Public Accountants Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Steven Kass</b>		Date of Receipt MM / DD / YYYY 07 / 19 / 2013 <b>Transaction ID : 36339835</b>
Mailing Address 85 Livingston Ave 280 Corporate Ctr		Amount of Each Receipt this Period 1000.00
City ROSELAND	State Zip Code NJ 07068-3736	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 1000.00
Name of Employer Rothstein, Kass & Company, P. C.	Occupation CPA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Frank Schettino</b>		Date of Receipt MM / DD / YYYY 07 / 29 / 2013 <b>Transaction ID : 36339946</b>
Mailing Address 1375 Broadway Fl 18		Amount of Each Receipt this Period 250.00
City NEW YORK	State Zip Code NY 10018-7086	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 250.00
Name of Employer Anchin, Block & Anchin LLP	Occupation CPA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Joseph Bailitz</b>		Date of Receipt MM / DD / YYYY 07 / 31 / 2013 <b>Transaction ID : 36340331</b>
Mailing Address 27 Wildflower Dr		Amount of Each Receipt this Period 250.00
City Corte Madera	State Zip Code CA 94925-2076	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 250.00
Name of Employer Rothstein, Kass & Company, P. C.	Occupation CPA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> 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: PAGE 8 OF 27  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**American Institute of Certified Public Accountants Political Action Committee**

**A. Ehud Sadan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1375 Broadway Fl 18  
 City State Zip Code  
 NEW YORK NY 10018-7086  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Anchin, Block & Anchin LLP CPA  
 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  
 07 / 19 / 2013  
**Transaction ID : 36340517**  
 Amount of Each Receipt this Period  
 250.00

**B. Timothy Jinks**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2 Carriage Lane  
 City State Zip Code  
 Ramsey NJ 07446-1739  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Rothstein, Kass & Company, P. C. CPA  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 18 / 2013  
**Transaction ID : 36340538**  
 Amount of Each Receipt this Period  
 500.00

**C. Guy Miller**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 85 Livingston Ave  
 280 Corporate Ctr  
 City State Zip Code  
 ROSELAND NJ 07068-3736  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Rothstein, Kass & Company, P. C. CPA  
 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  
 07 / 29 / 2013  
**Transaction ID : 36340543**  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ► 1050.00  
**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 9 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**American Institute of Certified Public Accountants Political Action Committee**

**A. Brian Kelleher**  
Full Name (Last, First, Middle Initial)

Mailing Address 8 Twin Park Dr

City Randolph State NJ Zip Code 07869-4131

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

Name of Employer Rothstein, Kass & Company, P. C. Occupation CPA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 22 / 2013  
**Transaction ID : 36340678**

Amount of Each Receipt this Period 250.00

**B. Seth Blackman**  
Full Name (Last, First, Middle Initial)

Mailing Address 101 Montgomery St Ste 2200 22nd Fl

City SAN FRANCISCO State CA Zip Code 94104-4137

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

Name of Employer Multiple Occupation CPA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 24 / 2013  
**Transaction ID : 36340701**

Amount of Each Receipt this Period 250.00

**C. Evan Jehle**  
Full Name (Last, First, Middle Initial)

Mailing Address 1350 Avenue Of The Americas Fl 15

City NEW YORK State NY Zip Code 10019-4700

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

Name of Employer Rothstein, Kass & Company, P. C. Occupation CPA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 29 / 2013  
**Transaction ID : 36340731**

Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00

**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 10 OF 27
	<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)  
**American Institute of Certified Public Accountants Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Brian Matlock**

Mailing Address 2507 Kodiak Cir

City Eulesless State TX Zip Code 76039-6081

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

Name of Employer Rothstein, Kass & Company, P. C. Occupation CPA

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  
 07 / 19 / 2013  
**Transaction ID : 36340775**

Amount of Each Receipt this Period  
 250.00

Full Name (Last, First, Middle Initial)  
**B. Ralph Natilli**

Mailing Address 104 Clucas Brook Rd

City Bedminster State NJ Zip Code 07921-2685

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

Name of Employer Rothstein, Kass & Company, P. C. Occupation CPA

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  
 07 / 22 / 2013  
**Transaction ID : 36340864**

Amount of Each Receipt this Period  
 250.00

Full Name (Last, First, Middle Initial)  
**C. Andrew Bentley**

Mailing Address 101 Norfolk Ave

City Swampscott State MA Zip Code 01907-1806

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

Name of Employer Rothstein, Kass & Company, P. C. Occupation CPA

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  
 07 / 23 / 2013  
**Transaction ID : 36340869**

Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> 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 11 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**American Institute of Certified Public Accountants Political Action Committee**

**A. Robert Charles Jazwinski**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1479 N Hermitage Rd  
 City HERMITAGE State PA Zip Code 16148-3106  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer JFS Wealth Advisors, LLC Occupation CPA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 18 / 2013  
**Transaction ID : 36341213**  
 Amount of Each Receipt this Period 100.00

**B. Roy Michael Cain**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 379 JONES PKWY  
 City BRENTWOOD State TN Zip Code 37027-4464  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LBMC, PC Occupation CPA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 07 / 01 / 2013  
**Transaction ID : 36341232**  
 Amount of Each Receipt this Period 30.00

**C. Peggy Ullmann**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4647 N. 32nd Street Ste 220  
 City PHOENIX State AZ Zip Code 85018-3392  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Ullmann & Company PC Occupation CPA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 530.00

Date of Receipt 07 / 30 / 2013  
**Transaction ID : 36341236**  
 Amount of Each Receipt this Period 30.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 160.00  
**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 12 OF 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Institute of Certified Public Accountants Political Action Committee**

**A. Stephen H. Epstein**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4608 Maura Ln  
City WEST BLOOMFIELD State MI Zip Code 48323-3624  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Stephen H. Epstein, CPA Occupation CPA  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 325.00

Date of Receipt 07 / 24 / 2013  
**Transaction ID : 36341261**  
Amount of Each Receipt this Period 25.00

**B. Kevin Corley**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4430 Oak Forest Dr  
City Missouri City State TX Zip Code 77459-4570  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Alliant Group LP Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 0.00

Date of Receipt 07 / 01 / 2013  
**Transaction ID : 36358998**  
Amount of Each Receipt this Period 0.00  
**[MEMO ITEM]**  
Refund(s) on Schedule B Totaling \$30.00 This changes the YTD Total to \$0.00

**C. Shane Edwards**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1195 E 200 N  
City Pleasant Grove State UT Zip Code 84062-2513  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Squire & Company, PC Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 0.00

Date of Receipt 07 / 01 / 2013  
**Transaction ID : 36358999**  
Amount of Each Receipt this Period 0.00  
**[MEMO ITEM]**  
Refund(s) on Schedule B Totaling \$30.00 This changes the YTD Total to \$0.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	25.00
<b>TOTAL</b> 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 13 OF 27
<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

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NAME OF COMMITTEE (In Full)  
**American Institute of Certified Public Accountants Political Action Committee**

**A. Joseph Leventhal**  
Full Name (Last, First, Middle Initial)

Mailing Address 820 Lowell St

City WOODMERE State NY Zip Code 11598-2314

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

Name of Employer Joseph E. Leventhal Occupation CPA

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **30.00**

Date of Receipt **07 / 15 / 2013**

**Transaction ID : 36359000**

Amount of Each Receipt this Period **0.00**

**[MEMO ITEM]**  
Refund(s) on Schedule B Totaling \$30.00 This changes the YTD Total to \$30.00

**B. Tasha Swann**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 273  
112 WES RD

City SECRETARY State MD Zip Code 21664-0273

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

Name of Employer Moore & Company, PA Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0.00**

Date of Receipt **07 / 20 / 2013**

**Transaction ID : 36359001**

Amount of Each Receipt this Period **0.00**

**[MEMO ITEM]**  
Refund(s) on Schedule B Totaling \$25.00 This changes the YTD Total to \$0.00

**C. Robert Pekrul**  
Full Name (Last, First, Middle Initial)

Mailing Address 333 Bridge St NW Ste 600  
Bridgewater Pl

City GRAND RAPIDS State MI Zip Code 49504-5365

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

Name of Employer Plante & Moran, PLLC Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **0.00**

Date of Receipt **07 / 29 / 2013**

**Transaction ID : 36359002**

Amount of Each Receipt this Period **0.00**

**[MEMO ITEM]**  
Refund(s) on Schedule B Totaling \$100.00 This changes the YTD Total to \$0.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>4325.00</b>

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)

**American Institute of Certified Public Accountants Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Wachovia PAC Account**

Mailing Address Palladian Corporate Center  
220 Leigh Farm Road

City Durham State NC Zip Code 27707-8110

Purpose of Disbursement

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2013

Transaction ID : 36341271

Amount of Each Disbursement this Period

272.61

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

272.61

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

272.61

**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)

**American Institute of Certified Public Accountants Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Friends Of Jim Inhofe Committee**

Mailing Address PO Box 13300

City Oklahoma City State OK Zip Code 73113

Purpose of Disbursement

011

Candidate Name

**Jim Inhofe**

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) ▼

State: OK District:

Date of Disbursement

MM / DD / YYYY  
07 / 26 / 2013

**Transaction ID : 36276693**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Lucas For Congress**

Mailing Address PO Box 1726

City Oklahoma City State OK Zip Code 73101

Purpose of Disbursement

011

Candidate Name

**Frank Lucas**

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) ▼

State: OK District: 06

Date of Disbursement

MM / DD / YYYY  
07 / 26 / 2013

**Transaction ID : 36276694**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Cole For Congress**

Mailing Address P.O. Box 722256

City Norman State OK Zip Code 73070

Purpose of Disbursement

011

Candidate Name

**Rep. Thomas Cole**

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) ▼

State: OK District: 04

Date of Disbursement

MM / DD / YYYY  
07 / 26 / 2013

**Transaction ID : 36276695**

Amount of Each Disbursement this Period

1000.00

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

3000.00

**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)

<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)

**American Institute of Certified Public Accountants Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Cleaver For Congress**

Mailing Address 4801 Main Street, Suite 1000

City Kansas City State MO Zip Code 64112

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Rep. Emanuel Cleaver II**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MO District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		30		2013

**Transaction ID : 36280125**

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

**B. Walter Jones For Congress Committee**

Mailing Address PO Box 99667

City Raleigh State NC Zip Code 27624

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Walter B. Jones**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NC District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		30		2013

**Transaction ID : 36280126**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Committee To Re-Elect Nydia M. Velazquez To Congre**

Mailing Address 315 Inspiration Lane

City Gaithersburg State MD Zip Code 20878

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Rep. Nydia M. Velazquez**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NY District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		30		2013

**Transaction ID : 36280174**

Amount of Each Disbursement this Period

1500.00
---------

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

4000.00
---------

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

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**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)

**American Institute of Certified Public Accountants Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Southern California Fund**

Mailing Address 555 South Flower Street #4510

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement

011

Candidate Name

**Southern California Fund**

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 30 / 2013

**Transaction ID : 36280187**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Lamborn For Congress**

Mailing Address P.O. Box 64107

City Colorado Springs State CO Zip Code 80962

Purpose of Disbursement

011

Candidate Name

**Rep. Doug Lamborn**

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) ▼

State: CO District: 05

Date of Disbursement

MM / DD / YYYY  
07 / 30 / 2013

**Transaction ID : 36280217**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Graves For Congress**

Mailing Address 2345 Grand Suite 2400

City Kansas City State MO Zip Code 64108

Purpose of Disbursement

011

Candidate Name

**Rep. Samuel B. Graves Jr.**

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) ▼

State: MO District: 06

Date of Disbursement

MM / DD / YYYY  
07 / 30 / 2013

**Transaction ID : 36280218**

Amount of Each Disbursement this Period

1000.00

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

7000.00

**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)

<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)

**American Institute of Certified Public Accountants Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Price For Congress**

Mailing Address PO Box 425

City Roswell State GA Zip Code 30077

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Rep. Thomas Price M.D.**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: GA District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		30		2013

**Transaction ID : 36280219**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Martha Roby For Congress**

Mailing Address PO Box 195

City Montgomery State AL Zip Code 36101

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Rep. Martha Roby**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: AL District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		30		2013

**Transaction ID : 36280241**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Roskam For Congress Committee**

Mailing Address P. O. Box 713

City Wheaton State IL Zip Code 60187

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Peter Roskam**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IL District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		30		2013

**Transaction ID : 36280242**

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
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**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)

**American Institute of Certified Public Accountants Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Trey Gowdy For Congress**

Mailing Address PO Box 3324

City Spartanburg State SC Zip Code 29304

Purpose of Disbursement

011

Category/Type

Candidate Name

**Rep. Trey Gowdy**

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) ▼

State: SC District: 04

Date of Disbursement

MM / DD / YYYY  
07 / 30 / 2013

**Transaction ID : 36280296**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Bachus For Congress Committee**

Mailing Address P.O. Box 131134

City Birmingham State AL Zip Code 35213

Purpose of Disbursement

011

Category/Type

Candidate Name

**Rep. Spencer Thomas Bachus III**

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) ▼

State: AL District: 06

Date of Disbursement

MM / DD / YYYY  
07 / 30 / 2013

**Transaction ID : 36280297**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. Friends Of Jim Inhofe Committee**

Mailing Address PO Box 13300

City Oklahoma City State OK Zip Code 73113

Purpose of Disbursement

011

Category/Type

Candidate Name

**Jim Inhofe**

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) ▼

State: OK District:

Date of Disbursement

MM / DD / YYYY  
07 / 30 / 2013

**Transaction ID : 36280377**

Amount of Each Disbursement this Period

1000.00

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

4000.00

**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)

<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)

**American Institute of Certified Public Accountants Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Lance For Congress**

Mailing Address PO Box 225

City State Zip Code  
Colonia NJ 07067

Purpose of Disbursement

011

Candidate Name

**Mr. Leonard Lance**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NJ District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	30	/	2013

**Transaction ID : 36280382**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Rothfus For Congress**

Mailing Address PO Box 435

City State Zip Code  
Sewickley PA 15143

Purpose of Disbursement

011

Candidate Name

**Rep. Keith Rothfus**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: PA District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	30	/	2013

**Transaction ID : 36280386**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Next Century Fund**

Mailing Address 116 S. Royal Street

City State Zip Code  
Alexandria VA 22314

Purpose of Disbursement

011

Candidate Name

**Next Century Fund**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	30	/	2013

**Transaction ID : 36280387**

Amount of Each Disbursement this Period

5000.00
---------

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

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

7000.00
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**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)

**American Institute of Certified Public Accountants Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. South Datoka First**

Mailing Address PO Box 155

City State Zip Code  
Sioux Falls SD 57101

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**South Datoka First**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 30 / 2013

**Transaction ID : 36280399**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. Tom Rice For Congress**

Mailing Address 1107 48th Ave., N.  
Suite 210

City State Zip Code  
Myrtle Beach SC 29577

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Mr. Tom Rice**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: SC District: 07

Date of Disbursement

MM / DD / YYYY  
07 / 30 / 2013

**Transaction ID : 36280400**

Amount of Each Disbursement this Period

1588.50

Full Name (Last, First, Middle Initial)

**C. Strategy PAC**

Mailing Address 3048 SHOREWOOD DRIVE

City State Zip Code  
OshKosh WI 54901

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Strategy PAC**

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 30 / 2013

**Transaction ID : 36280401**

Amount of Each Disbursement this Period

2500.00

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

6588.50

**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)

<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)

**American Institute of Certified Public Accountants Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Searchlight Leadership Fund**

Mailing Address 422 C Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 30 / 2013

**Transaction ID : 36280414**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Udall For Colorado**

Mailing Address PO Box 40158

City Denver State CO Zip Code 80204

Purpose of Disbursement

011

Candidate Name

Category/  
Type

**Sen. Mark Udall**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CO District:

Date of Disbursement

MM / DD / YYYY  
07 / 30 / 2013

**Transaction ID : 36280416**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. Alaskans For Begich 2014**

Mailing Address PO Box 410

City Palmer State AK Zip Code 99645

Purpose of Disbursement

011

Candidate Name

Category/  
Type

**Sen. Mark Begich**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: AK District:

Date of Disbursement

MM / DD / YYYY  
07 / 30 / 2013

**Transaction ID : 36280417**

Amount of Each Disbursement this Period

2500.00

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

10000.00

**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)

<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)

**American Institute of Certified Public Accountants Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Jeff Merley for Oregon**

Mailing Address 2236 Se 10th Ave

City State Zip Code  
Portland OR 97214

Purpose of Disbursement

011

Candidate Name

**Jeff Merkley**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: OR District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	30	/	2013

**Transaction ID : 36280419**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Friends Of John Barrow**

Mailing Address PO Box 8166

City State Zip Code  
Savannah GA 31412

Purpose of Disbursement

011

Candidate Name

**Rep. John Barrow**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: GA District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	30	/	2013

**Transaction ID : 36280420**

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

**C. Long Leaf Pine PAC**

Mailing Address 607 14th St., NW  
Suite 800

City State Zip Code  
Washington DC 20005

Purpose of Disbursement

011

Candidate Name

**Long Leaf Pine PAC**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	30	/	2013

**Transaction ID : 36280431**

Amount of Each Disbursement this Period

5000.00
---------

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

7500.00
---------

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

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**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)

**American Institute of Certified Public Accountants Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Charles Boustany Jr Md For Congress Inc**

Mailing Address PO Box 80126

City Lafayette State LA Zip Code 70598

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Rep. Charles W. Boustany Jr.**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: LA District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		30		2013

**Transaction ID : 36280432**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Wyden For Senate**

Mailing Address 123 Ne 3rd Suite 321

City Portland State OR Zip Code 97232

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Ron Wyden**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: OR District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		30		2013

**Transaction ID : 36280433**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Willard Hotel**

Mailing Address 1401 Pennsylvania Ave., NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
inkind for food costs

011

Category/  
Type

Candidate Name

**Rep. David A. Scott**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: GA District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		31		2013

**Transaction ID : 36380838**

Amount of Each Disbursement this Period

301.50
--------

**[MEMO ITEM]**  
inkind for food costs

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

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

2000.00
---------

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**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)

**American Institute of Certified Public Accountants Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Willard Hotel**

Mailing Address 1401 Pennsylvania Ave., NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
inkind for food costs

011

Candidate Name

**Pat Tiberi**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: OH District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		31		2013

**Transaction ID : 36308039**

Amount of Each Disbursement this Period

301.50
--------

**[MEMO ITEM]**  
inkind for food costs

Full Name (Last, First, Middle Initial)

**B. Willard Hotel**

Mailing Address 1401 Pennsylvania Ave., NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
inkind for food costs

011

Candidate Name

**Mr. Blaine Luetkemeyer**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MO District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		31		2013

**Transaction ID : 36308040**

Amount of Each Disbursement this Period

301.50
--------

**[MEMO ITEM]**  
inkind for food costs

Full Name (Last, First, Middle Initial)

**C. Willard Hotel**

Mailing Address 1401 Pennsylvania Ave., NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
inkind for food costs

011

Candidate Name

**Rep. Stephen Fincher**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: TN District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		31		2013

**Transaction ID : 36308041**

Amount of Each Disbursement this Period

301.50
--------

**[MEMO ITEM]**  
inkind for food costs

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

0.00
------

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

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**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)

**American Institute of Certified Public Accountants Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. American Institute of CPAs**

Mailing Address Palladian Corporate Center  
220 Leigh Farm Road

City Durham State NC Zip Code 27707-8110

Purpose of Disbursement  
inkind for room charge

011  
Category/  
Type

Candidate Name

**Rep. David A. Scott**

Office Sought:  House  
 Senate  
 President  
State: GA District: 13

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2013

**Transaction ID : 36308043**

Amount of Each Disbursement this Period

110.00

inkind for room charge

Full Name (Last, First, Middle Initial)

**B. American Institute of CPAs**

Mailing Address Palladian Corporate Center  
220 Leigh Farm Road

City Durham State NC Zip Code 27707-8110

Purpose of Disbursement  
inkind for room charge

011  
Category/  
Type

Candidate Name

**Pat Tiberi**

Office Sought:  House  
 Senate  
 President  
State: OH District: 12

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2013

**Transaction ID : 36308044**

Amount of Each Disbursement this Period

110.00

inkind for room charge

Full Name (Last, First, Middle Initial)

**C. American Institute of CPAs**

Mailing Address Palladian Corporate Center  
220 Leigh Farm Road

City Durham State NC Zip Code 27707-8110

Purpose of Disbursement  
inkind for room charge

011  
Category/  
Type

Candidate Name

**Mr. Blaine Luetkemeyer**

Office Sought:  House  
 Senate  
 President  
State: MO District: 09

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 31 / 2013

**Transaction ID : 36308045**

Amount of Each Disbursement this Period

110.00

inkind for room charge

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

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

330.00

**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)

**American Institute of Certified Public Accountants Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. American Institute of CPAs**

Mailing Address Palladian Corporate Center  
220 Leigh Farm Road

City Durham State NC Zip Code 27707-8110

Purpose of Disbursement  
inkind for room charge

Category/  
Type

Candidate Name

**Rep. Stephen Fincher**

Office Sought:  House  
 Senate  
 President  
State: TN District: 08

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 36308046**

Amount of Each Disbursement this Period

inkind for room charge

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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