03/20/2001 13 : 26

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) — **USE FEC MAILING LABEL OR TYPE OR PRINT** ▼ — Example: If typing, type over the lines

American Institute of Certified Public Accountants Effective Legislation Committee

ADDRESS (number and street) ▼

Check if different than previously reported. (ACC)

Harborside Financial Center

201 Plaza III

Jersey City | NJ | 07311 –

2. **FEC IDENTIFICATION NUMBER** ▼ — CITY ▲ — STATE ▲ — ZIPCODE ▲

C00077321

3. IS THIS REPORT — X 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 Quarterly 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)
X 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 (M13)

(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 02 01 2001 through 02 28 2001

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 Ms Dale Atherton

Signature of Treasurer _____ Date 03 20 2001

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** (Revised 1/2001)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Revised 1/2001)

Write or Type Committee Name

American Institute of Certified Public Accountants Effective Legislation Committee

Report Covering the Period: From: 02 01 2001 To: 02 28 2001

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2001		356476.10
(b) Cash on Hand at Begining of Reporting Period	367835.56	
(c) Total Receipts (from Line 19)	13894.73	38254.19
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	381730.29	394730.29
7. Total Disbursements (from Line 30)	3762.35	16762.35
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	377967.94	377967.94
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)	4112.26	

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 800-420-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
OF RECEIPTS

Write or Type Committee Name

American Institute of Certified Public Accountants Effective Legislation Committee

Report Covering the Period: From: 02 01 2001 To: 02 28 2001

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)	0.00	
(ii) Unitemized	12746.65	
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ▶	12746.65	35735.65
(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 32, page 4) ..... ▶	12746.65	35735.65
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 36, page 4)	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.)	1148.08	2518.54
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) ..... ▶	13894.73	38254.19
20. Total Federal Receipts (subtract Line 16 from Line 19) ..... ▶	13894.73	38254.19

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Revised 1/2001)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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	3762.35	16762.35
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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. Total Disbursements (add Lines 21(c), 22, 23,24,25,26,27,28(d),and 29) ▶	3762.35	16762.35
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) ▶	3762.35	16762.35

III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3)	12746.65	35735.65
33. Total Contribution Refunds (from Line 28(d))	0.00	0.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	12746.65	35735.65
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	0.00	0.00
36. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35) ▶	0.00	0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 5 / 8

☐ 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)
American Institute of Certified Public Accountants Effective Legislation Committee

A. Full Name (Last, First, Middle Initial)
Chase Manhattan Bank

Mailing Address
4 New York Plaza

City: New York | State: NY | Zip Code: 10004

FEC ID number of contributing federal political committee.

Name of Employer | Occupation

Receipt For:
Primary General
Other (specify) ▼

Election Year-to-Date ▼
2518.54

Date of Receipt
02 28 2001

Amount of Each Receipt this Period
1148.08

Transaction ID: SA17.4121

B.

C.

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1148.08**

TOTAL This Period (last page this line number only) ..... ▶ **1148.08**

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

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 Effective Legislation Committee

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name
CANTOR FOR CONGRESS

Category/ Type

Office Sought: X House / Senate / President
State: VA District: 07

Disbursement For: X Primary / General / Other (specify)

Date of Disbursement
02 13 2001

Amount of Each Disbursement this Period
1000.00

Transaction ID: SB23.4126

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name
ENZI FOR US SENATE

Category/ Type

Office Sought: House / X Senate / President
State: WY District: 00

Disbursement For: X Primary / General / Other (specify)

Date of Disbursement
02 13 2001

Amount of Each Disbursement this Period
1500.00

Transaction ID: SB23.4127

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name
FERGUSON FOR CONGRESS

Category/ Type

Office Sought: X House / Senate / President
State: NJ District: 06

Disbursement For: X Primary / General / Other (specify)

Date of Disbursement
02 13 2001

Amount of Each Disbursement this Period
1000.00

Transaction ID: SB23.4128

SUBTOTAL of Receipts This Page (optional) ..... ▶ **3500.00**

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)

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

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 Effective Legislation Committee

A.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement
In-kind made

Candidate Name
ENZI FOR US SENATE

Category/ Type

Office Sought: House / X Senate / President

State: WY District: 00

Disbursement For: X Primary General / Other (specify)

Date of Disbursement
02 15 2001

Amount of Each Disbursement this Period
262.35

Transaction ID: SB23.4129

B.

C.

SUBTOTAL of Receipts This Page (optional) ..... ▶	**262.35**
TOTAL This Period (last page this line number only) ..... ▶	**3762.35**

SCHEDULE D

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 8 / 8

FOR LINE NUMBER: (check only one)

- [ ] 9
- [X] 10

NAME OF COMMITTEE (In Full)

American Institute of Certified Public Accountants Effective Legislation Committee

A Full Name (Last, First, Middle Initial) of Debtor or Creditor

Internal Revenue Service

Mailing Address

City: Holtsville State: NY ZIP Code: 00501

Nature of Debt (Purpose): Income Taxes

Outstanding Balance Beginning This Period: 4112.26

Transaction ID: SD10.4115

Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	4112.26

B

C

1) **SUBTOTALS** This Period This Page (optional)	▶	**4112.26**
2) **TOTALS** This Period (last page this line number only)	▶	**4112.26**
3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only)	▶	
4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only)	▶	