

**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 linesThe American Occupational Therapy Association, Inc. Political Action Committee  
(AOTPAC)

ADDRESS (number and street)

4720 Montgomery Lane

PO Box 31220

Check if different  
than previously  
reported. (ACC)

Bethesda

MD

20824

1220

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00089086

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report (Q1)July 15  
Quarterly Report (Q2)October 15  
Quarterly Report (Q3)January 31  
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)

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 (12G)

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

09

01

2008

through

09

30

2008

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

Christina A. Metzler

Signature of Treasurer

Electronically Filed by Christina A. Metzler

Date

10

14

2008

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

The American Occupational Therapy Association, Inc. Political Action Committee  
(AOT PAC)

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	9	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2008</span>		79391.35
(b) Cash on Hand at Beginning of Reporting Period .....	85822.70	
(c) Total Receipts (from Line 19) .....	13059.01	178139.60
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	98881.71	257530.95
7. Total Disbursements (from Line 31) .....	7295.25	165944.49
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	91586.46	91586.46
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)

Page 3

Write or Type Committee Name

The American Occupational Therapy Association, Inc. Political Action Committee  
(AOTPA)

Report Covering the Period:

From:

M M D D Y Y W Y  
0 9 0 1 2 0 0 8

To:

M M D D Y Y W Y  
0 9 3 0 2 0 0 8

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	1685.80	35673.64
(i) Itemized (use Schedule A) .....	11253.34	141060.56
(ii) Unitemized .....	12939.14	176734.20
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	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 Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤	12939.14	176734.20
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.) .....	119.87	1405.40
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 Transfer (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)) .....	13059.01	178139.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	13059.01	178139.60

**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) 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.....	295.25	10394.49
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	295.25	10394.49
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7000.00	155500.00
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	50.00
(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	50.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	7295.25	165944.49
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7295.25	165944.49

**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) .....	12939.14	176734.20
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	50.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	12939.14	176684.20
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	295.25	10394.49
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	295.25	10394.49

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

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

FOR LINE NUMBER: PAGE 6 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee  
(AOTPAC)

**A.**

Full Name (Last, First, Middle Initial)

Rebecca E Argabrite Grove

Mailing Address 41718 Browns Farm Lane

City

Leesburg

State

VA

Zip Code

20176-6026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Loudoun County Public Sch-  
ools

Occupation  
OT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 5 / 2 0 0 8

Transaction ID: 26407504

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

Chris Pleitner

Mailing Address 8517 Forest Ave

City

Munster

State

IN

Zip Code

46321-2120

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DBA NW Indiana Rehab Svcs  
Inc

Occupation  
OT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 26419038

Amount of Each Receipt this Period

31.00

**C.**

Full Name (Last, First, Middle Initial)

David Dennis Clark

Mailing Address 2226 Discovery Cir W

City

Deerfield Bch

State

FL

Zip Code

33442-1007

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
OT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 26419041

Amount of Each Receipt this Period

61.00

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

122.00

**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: PAGE 7 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee  
(AOTPAC)

**A.**

Full Name (Last, First, Middle Initial)

Denise Marie Miller

Mailing Address 12 Faircliff Ct

City

Glendale

State

CA

Zip Code

91206-1723

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GAMC Therapy and Wellness  
Center

Occupation  
OT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 26419042

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Mary Margaret Arnold

Mailing Address 1119 Maysville Ave

City

Zanesville

State

OH

Zip Code

43701-5557

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Zane State College

Occupation  
OT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 26419043

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Brent Howard Braveman

Mailing Address Unit 3c  
1447 W Victoria St

City

Chicago

State

IL

Zip Code

60660-4220

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Illinois

Occupation  
OT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

414.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 26419052

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)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee  
(AOTPAC)

A.

Full Name (Last, First, Middle Initial)

Penelope A Moyers Cleveland

Mailing Address 516 2nd Ave

City

Pleasant Grove

State

AL

Zip Code

35127-1757

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Univ of Alabama at Birmin-  
ghamOccupation  
OT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

424.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 26419054

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)

Linda Coogle Stephens

Mailing Address 2361 Fair Oaks Rd

City

Decatur

State

GA

Zip Code

30033-1207

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Atlanta Children's TherapyOccupation  
OT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 26419055

Amount of Each Receipt this Period

30.00

C.

Full Name (Last, First, Middle Initial)

Carolyn Baum

Mailing Address 6314 S Rosebury 3 West

City

Clayton

State

MO

Zip Code

63105-2255

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Washington Univ School of  
MedicineOccupation  
OT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 26419057

Amount of Each Receipt this Period

30.00

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

90.00

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: PAGE 9 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee  
(AOTPAC)

**A.**

Full Name (Last, First, Middle Initial)

Harriett Smith Bynum

Mailing Address 100 Cottonwood Dr

City

Oakdale

State

PA

Zip Code

15071-1108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kent State University

Occupation  
OT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 26419058

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Elaine D Defour

Mailing Address 40285 Tonabee Ct.

City

Sterling Heights

State

MI

Zip Code

48313-4177

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Student

Occupation  
STUDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 26419069

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Kathleen Marie Kehm

Mailing Address 6294 W College Ave

City

Greendale

State

WI

Zip Code

53129-2801

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Aurora Healthcare

Occupation  
OT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 26419071

Amount of Each Receipt this Period

30.00

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

90.00

**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: PAGE 10 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee  
(AOTPAC)

**A.**

Full Name (Last, First, Middle Initial)

Peter John Kennelly

Mailing Address 61 Gardner Ave

City

Middletown

State

NY

Zip Code

10940-3211

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ELANT at Fishkill, Inc.

Occupation  
OTA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 26419072

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

Jamie Lea McNally

Mailing Address 1479 E 688th Rd

City

Lawrence

State

KS

Zip Code

66049-9123

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
St. Francis

Occupation  
OT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 26419073

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Sheri Montgomery

Mailing Address 313 Herschler Ave

City

Evanston

State

WY

Zip Code

82930-5005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USCD #4

Occupation  
OT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

409.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 26419076

Amount of Each Receipt this Period

30.00

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

90.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee  
(AOTPAC)

**A.**

Full Name (Last, First, Middle Initial)

Mr. Scott David Nordquist

Mailing Address 11874 Canterbury Dr.

City

Sterling Heights

State

MI

Zip Code

48312-3019

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
St. John's Hospital

Occupation  
OTA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 26419087

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

Michael Jonathan Steinhauer

Mailing Address 2913 Pelham Rd

City

Madison

State

WI

Zip Code

53713-3465

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DBA The Steinhauer Group

Occupation  
OT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 26419089

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Yvonne Michielle Randall

Mailing Address 6576 Appletree Cir

City

Las Vegas

State

NV

Zip Code

89103-4325

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Touro University Nevada

Occupation  
OT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 26419101

Amount of Each Receipt this Period

30.00

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

90.00

**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: PAGE 12 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee  
(AOTPAC)

**A.**

Full Name (Last, First, Middle Initial)

Barbara Thoreson Brockevelt

Mailing Address 46357 309th St

City

Vermillion

State

SD

Zip Code

57069-6412

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The University of South  
Dakota

Occupation

OT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 26419102

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

Carey A Goldenberg

Mailing Address 426 Bellevue Ave. E  
Apt. 6

City

Seattle

State

WA

Zip Code

98102-4731

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DBA Giant Steps Children's  
Therapy

Occupation

OT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 26419114

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Georgette R Ireland

Mailing Address 6696 Hidden Lake Trl

City

Brecksville

State

OH

Zip Code

44141-3178

FEC ID number of contributing  
federal political committee.

C

Name of Employer

St. Vincent Charity Hosp

Occupation

OT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 26419121

Amount of Each Receipt this Period

30.00

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

110.00

**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: PAGE 13 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC)

**A.**

Full Name (Last, First, Middle Initial)

Stephen B Kern

Mailing Address 1023 Kimball St

City

Philadelphia

State

PA

Zip Code

19147-3820

FEC ID number of contributing federal political committee.

C

Name of Employer  
Thomas Jefferson Univ

Occupation  
OT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 26419133

Amount of Each Receipt this Period

73.00

**B.**

Full Name (Last, First, Middle Initial)

Gloria R Lucker

Mailing Address 3568 Hardt Rd

City

Eden

State

NY

Zip Code

14057-9646

FEC ID number of contributing federal political committee.

C

Name of Employer  
DBA Optimal Therapy Associates Service

Occupation  
OT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

728.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 26419135

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Jennifer Lee McLaughlin

Mailing Address 105 Ruth Ellen Court S

City

Newark

State

DE

Zip Code

19711-8511

FEC ID number of contributing federal political committee.

C

Name of Employer  
PUMH, Inc.

Occupation  
OT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 26419138

Amount of Each Receipt this Period

45.00

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

148.00

**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: PAGE 14 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee  
(AOTPAC)

**A.**

Full Name (Last, First, Middle Initial)

Monica Lee Robinson

Mailing Address 368 W 6th Ave

City

Columbus

State

OH

Zip Code

43201-3135

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HCR Manor Care

Occupation  
OT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

965.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 26419153

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

Trina Lea Schulz

Mailing Address 4915 Noble

City

Shawnee

State

KS

Zip Code

66226-9797

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Univ of Kansas Hospital

Occupation  
OT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 26419158

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Stephanie Singleton

Mailing Address 2917 Santa Monica Se

City

Albuquerque

State

NM

Zip Code

87106-2962

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Presbyterian Home Health

Occupation  
OT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 8

Transaction ID: 26419161

Amount of Each Receipt this Period

30.00

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

135.00

**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: PAGE 15 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee  
(AOTPAC)

**A.**

Full Name (Last, First, Middle Initial)

Judy Kay Hopkins

Mailing Address 901 N Fairmont

City

Amarillo

State

TX

Zip Code

79106-7167

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Plum Creek Health Care

Occupation  
OT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 4 / 2 0 0 8

Transaction ID: 26419182

Amount of Each Receipt this Period

365.00

**B.**

Full Name (Last, First, Middle Initial)

Gerri Ann Duran

Mailing Address 4920 Calle De Tierra Ne

City

Albuquerque

State

NM

Zip Code

87111-2927

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
OT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 4 / 2 0 0 8

Transaction ID: 26419184

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Stephanie Singleton

Mailing Address 2917 Santa Monica Se

City

Albuquerque

State

NM

Zip Code

87106-2962

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Presbyterian Home Health

Occupation  
OT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 4 / 2 0 0 8

Transaction ID: 26419187

Amount of Each Receipt this Period

100.00

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

490.00

**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: PAGE 16 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee  
(AOTPAC)

**A.**

Full Name (Last, First, Middle Initial)

Monica Lee Robinson

Mailing Address 368 W 6th Ave

City

Columbus

State

OH

Zip Code

43201-3135

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HCR Manor Care

Occupation  
OT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

890.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 4 / 2 0 0 8

Transaction ID: 26425397

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Susan K Goszewski

Mailing Address 225 Oregon Rd

City

Cheshire

State

CT

Zip Code

06410-1827

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Yale New haven Hosp

Occupation  
OT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.74

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 26565526

Amount of Each Receipt this Period

30.38

**C.**

Full Name (Last, First, Middle Initial)

Janet Elizabeth Stafford

Mailing Address 67 Hackett Hill Rd

City

Manchester

State

NH

Zip Code

03102-8991

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DBA/Kidz Play Pediatric  
Therapy and We

Occupation  
OT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.94

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 26565528

Amount of Each Receipt this Period

30.42

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

85.80

**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: PAGE 17 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee  
(AOTPAAC)

**A.**

Full Name (Last, First, Middle Initial)

Yvonne Michelle Randall

Mailing Address 6576 Appletree Cir

City

Las Vegas

State

NV

Zip Code

89103-4325

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Touro University Nevada

Occupation  
OT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 9 / 2 0 0 8

Transaction ID: 26609423

Amount of Each Receipt this Period

75.00

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

75.00

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

1685.80

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

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

FOR LINE NUMBER: PAGE 18 / 21

(check only one)

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

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NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee  
(AOTPAC)

**A.**

Full Name (Last, First, Middle Initial)

SunTrust Bank

Mailing Address PO Box 4418

City

Atlanta

State

GA

Zip Code

30302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1405.40

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: 26565518

Amount of Each Receipt this Period

119.87

interest earned on account

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

119.87

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

119.87

# **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 19 / 21

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

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NAME OF COMMITTEE (In Full)

The American Occupational Therapy Association, Inc. Political Action Committee  
(AOTPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Hawkeye PAC Mailing Address PO Box 7255	<b>Transaction ID:</b> 26333934 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 6 / 2 0 0 8</div> </div>
City Des Moines State IA Zip Code 50309 Purpose of Disbursement campaign contribution Candidate Name Hawkeye PAC Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>3000.00</div> campaign contribution
<b>B.</b> Full Name (Last, First, Middle Initial) Bob Filner For Congress Mailing Address PO Box 121480 City Chula Vista State CA Zip Code 91912 Purpose of Disbursement campaign contribution Candidate Name Rep. Bob Filner Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 51	<b>Transaction ID:</b> 26333935 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 6 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>500.00</div> campaign contribution
<b>C.</b> Full Name (Last, First, Middle Initial) Hagan Senate Committee Inc Mailing Address PO Box 29103 City Greensboro State NC Zip Code 27429 Purpose of Disbursement campaign contribution Candidate Name Kay Hagan Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NC District:	<b>Transaction ID:</b> 26333936 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 6 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div> campaign contribution

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

**4500.00**

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

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

**A.**

campaign contribution

**B.**

campaign contribution

**C.**

campaign contribution

FEC Schedule B ( Form 3X) (Revised 02/2003)

# **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 21 / 21

<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)

The American Occupational Therapy Association, Inc. Political Action Committee  
(AOT PAC)

A.

Full Name (Last, First, Middle Initial)

SunTrust Bank

Mailing Address PO Box 4418

City  
Atlanta

State  
GA

Zip Code  
30302

Purpose of Disbursement

Bank fees on account

Candidate Name

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Transaction ID: 26389663

Date of Disbursement

09 / 12 / 2008

Amount of Each Disbursement this Period

295.25

Bank fees on account

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

295.25

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

295.25