

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
Association of Fundraising Professionals Political Action Committee

ADDRESS (number and street) 4300 Wilson Boulevard
#300
 Check if different than previously reported. (ACC)
Arlington VA 22203-4168

2. **FEC IDENTIFICATION NUMBER** C00382143
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 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 (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 2010 through 09 30 2010

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. Jason R. Lee, Esq.

Signature of Treasurer Electronically Filed by Mr. Jason R. Lee, Esq. Date 10 15 2010

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							
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Association of Fundraising Professionals Political Action Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		31844.12
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	20031.79									
(c) Total Receipts (from Line 19)	808.96	7386.02								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	20840.75	39230.14								
7. Total Disbursements (from Line 31)	631.49	19020.88								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	20209.26	20209.26								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

Write or Type Committee Name

Association of Fundraising Professionals Political Action Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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)	349.96	4674.88
(ii) Unitemized	459.00	2711.14
(iii) TOTAL (add Lines 11(a)(i) and (ii)	808.96	7386.02
(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)	808.96	7386.02
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total 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))	808.96	7386.02
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	808.96	7386.02

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	0.00	17000.00
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	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.....	631.49	2020.88
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))..	631.49	19020.88
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	631.49	19020.88

DETAILED SUMMARY PAGE
of Disbursements

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)	808.96	7386.02
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	808.96	7386.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 9
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Association of Fundraising Professionals Political Action Committee

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

Mailing Address 2000 Daniel Island Dr.

City Charleston State SC Zip Code 29492

FEC ID number of contributing federal political committee. C

Name of Employer Blackbaud Inc. Occupation Community Rel. Mgr.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt M M / D D / Y Y Y Y
07 / 07 / 2010

Transaction ID: SA11AI.4800

Amount of Each Receipt this Period 50.00

contribution to AFP PAC

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

Mailing Address 2000 Daniel Island Dr.

City Charleston State SC Zip Code 29492

FEC ID number of contributing federal political committee. C

Name of Employer Blackbaud Inc. Occupation Community Rel. Mgr.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt M M / D D / Y Y Y Y
09 / 20 / 2010

Transaction ID: SA11AI.4819

Amount of Each Receipt this Period 50.00

contribution to AFP PAC

C. Full Name (Last, First, Middle Initial)
Ms Paulette Maehara

Mailing Address 6698 Glenbrook Road

City Chevy Chase State MD Zip Code 20815

FEC ID number of contributing federal political committee. C

Name of Employer Ass. of Fundraising Profession Occupation President and CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 708.38

Date of Receipt M M / D D / Y Y Y Y
07 / 14 / 2010

Transaction ID: SA11AI.4803

Amount of Each Receipt this Period 83.32

contribution to AFP PAC

SUBTOTAL of Receipts This Page (optional) 183.32

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 / 9
	(check only one)
<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)
Association of Fundraising Professionals Political Action Committee

A.	Full Name (Last, First, Middle Initial) Ms Paulette Maehara		Date of Receipt
	Mailing Address 6698 Glenbrook Road		<input type="text" value="08"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Chevy Chase	MD	20815
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4811
Name of Employer Ass. of Fundraising Prof- sion		Occupation President and CEO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="83.32"/>
		<input type="text" value="791.70"/>	contribution to AFP PAC

B.	Full Name (Last, First, Middle Initial) Ms Paulette Maehara		Date of Receipt
	Mailing Address 6698 Glenbrook Road		<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Chevy Chase	MD	20815
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4818
Name of Employer Ass. of Fundraising Prof- sion		Occupation President and CEO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="83.32"/>
		<input type="text" value="875.02"/>	contribution to AFP PAC

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="166.64"/>
TOTAL This Period (last page this line number only)	<input type="text" value="349.96"/>

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Association of Fundraising Professionals Political Action Committee

A.	Full Name (Last, First, Middle Initial) SunTrust Bank Mailing Address One Park Place City Atlanta State GA Zip Code 30303 Purpose of Disbursement credit card fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.4799 Date of Disbursement 07 / 12 / 2010 Amount of Each Disbursement this Period 12.74
B.	Full Name (Last, First, Middle Initial) SunTrust Bank Mailing Address One Park Place City Atlanta State GA Zip Code 30303 Purpose of Disbursement bank fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.4798 Date of Disbursement 07 / 21 / 2010 Amount of Each Disbursement this Period 197.83
C.	Full Name (Last, First, Middle Initial) SunTrust Bank Mailing Address One Park Place City Atlanta State GA Zip Code 30303 Purpose of Disbursement credit card fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.4815 Date of Disbursement 08 / 10 / 2010 Amount of Each Disbursement this Period 12.74

SUBTOTAL of Disbursements This Page (optional) ▶	223.31
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Association of Fundraising Professionals Political Action Committee

A.	Full Name (Last, First, Middle Initial) SunTrust Bank Mailing Address One Park Place City Atlanta State GA Zip Code 30303 Purpose of Disbursement bank fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.4814 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 1 0	Amount of Each Disbursement this Period 196.69
B.	Full Name (Last, First, Middle Initial) SunTrust Bank Mailing Address One Park Place City Atlanta State GA Zip Code 30303 Purpose of Disbursement bank fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.4816 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 1 0	Amount of Each Disbursement this Period 196.43
C.	Full Name (Last, First, Middle Initial) SunTrust Bank Mailing Address One Park Place City Atlanta State GA Zip Code 30303 Purpose of Disbursement credit card fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.4817 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 1 0	Amount of Each Disbursement this Period 15.06

SUBTOTAL of Disbursements This Page (optional)	408.18
TOTAL This Period (last page this line number only)	631.49