

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 Jeffrey J. Bates

Signature of Treasurer
 Date


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

$\square$| Office |
| :---: |
| Use |
| Only | L

FEC Form 3X (Rev. 02/2003)

## Write or Type Committee Name

TECHNOLOGY ASSOCIATION OF AMERICA INC. NET POLITICAL ACTION COMMITTEE

6. (a) Cash on Hand January 1 ,

(b) Cash on Hand at

Beginning of Reporting Period............

(c) Total Receipts (from Line 19)

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

7. Total Disbursements (from Line 31).

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

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

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


$\square$
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
Page 3
Write or Type Committee Name

19. Total Receipts (add Lines 11 (d)
$12,13,14,15,16,17$, and $18(\mathrm{c})) \ldots \ldots .$.


FE6ANO26

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Page 4


DETAILED SUMMARY PAGE
of Disbursements
Page 5
FEC Form 3X (Rev. 02/2003)

| III. Net Contributions/Operating Ex- |
| :---: |
| penditures |

COLUMN A
Total This Period

## COLUMN B

 Calendar Year-to-Date33. Total Contributions (other than loans) (from Line 11(d), page 3)

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


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

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

FOR LINE NUMBER: $\quad$ PAGE OF (check only one)
 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 af any political committee to solicit contributions from .such committee. NAME OF COMMITTEE (In Fully

| Full Name (Last, First, Middle Initial) $\qquad$ |  |
| :---: | :---: |
| Mailing Address 10718 Ox Croft Court |  |
| City | State Zip Code |
| Fairfax Station | VA 22039 |
| FEC ID number of contributing federal political committee. | $\mathrm{C}$ |
| Name of Employor Petrizzo Bond, Inc. | Occupation President \& CEO |
|  | Aggregate Year-to-Date |

## Date of Receipt



Amount of Each Receipt this Period


Contributed $\$ 44$ from paycheck every two weeks until Sept. 30, 2011, while employed as the President \& CEO of the Technology Association of America, Inc.

| Full Name (Last, First, Middle Initial) Rak, Adam |  |
| :---: | :---: |
| Mailing Address 1553 Morse Blvd. |  |
| City <br> San Carlos |   <br> State Zip Code <br> CA 94070 |
| FEC ID number of contributing federal political committee. | $\mathrm{C}$ |
| Name of Employer Unknown | Occupation Unknown |
| Receipt For: $\square$ Primary Genera Other (specify) | Aggregate Year-to-Date |

Date of Receipt


Amount of Each Receipt this Period


Contributed $\$ 21$ from paycheck every 2 weeks during the reporting period, while employed as a Regional Vice President for the Technology Association of America, Inc.

Date of Receipt


Amount of Each Receipt this Period
 federal political committee.



## SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS



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.purpasas, other than using the name and address of any political committee to solicit contrihutions from such committee.

NAME OF COMMITTEE (In Full)
XECHNOLOGY ASSOCIATION OF AMERICA INC. NET POLITICAL ACTION COMMITTEE
Full Name (Last, First, Middle Initial)


## SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS



Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or tor. commercial purcosas, other.than usina the name and.address_of any political sommittee to solicit contributians from. such .committee.

NAME OF COMMITTEE (In Full)
خECHNOLOGY ASSOCIATION OF AMERICA INC. NET POLITICAL ACTION COMMITTEE
Full Name (Last, First, Middle Initial)
A.

| Markell for Delaware |  |  |  | Date of Disbursement$\left[\begin{array}{ll} \mathrm{M} & 6 \\ 0 & 6 \end{array}\right]^{\prime}\left[\begin{array}{ll} 0 & 0 \\ 1 & 0 \end{array}\right],\left[\begin{array}{llll} \Gamma & \gamma & 1 & 7 \\ 2 & 0 & 1 & 1 \end{array}\right]$ |
| :---: | :---: | :---: | :---: | :---: |
| $\begin{aligned} & \hline \text { Mailing Address } \\ & \text { P.O. Box } 7208 \end{aligned}$ |  |  |  |  |
| City Wilmington | $\begin{aligned} & \text { State } \\ & D E \end{aligned}$ | $\begin{aligned} & \text { Zip Code } \\ & 19803 \end{aligned}$ |  | Amount of Each Disbursement this Period |
| Purpose of DisbursementPolitical Contribution |  |  | 0 1 1 1 1 |  |
| Candidate Name Governor Jack Markell |  |  | Categoryl Type | -200.00 |


| Office Sought: | House | Disbursement For: |
| :---: | :---: | :---: |
| state: DE | $\square$ Senate President District: |  |
| Full Name (La | st, Middle Ini |  |

Date of Disbursement
MTM ' OTO '

## Mailing Address

State Ziip Code

Purpose of Disbursement

| Purpose of Disbursement |  |  |  |
| :---: | :---: | :---: | :---: |
| Candidate Name |  |  | $\begin{gathered} \text { Category/ } \\ \text { Type } \end{gathered}$ |
| Office Sought: | House |  |  |
|  | Senate |  |  |
|  | President |  |  |
| State: |  |  |  |

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

## Mailing Address

| City | State | Zip Code |
| :---: | :---: | :---: |
| Purpose of Disbursement |  |  |

Date of Disbursement
MTM' DT0 ' MTMTM
Amount of Each Disbursement this Period


Candidate Name



Check returned or voided.

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

