



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Appraisal Institute PAC (AI PAC)**

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"/>	<input type="text" value="23520.39"/>	<input type="text" value="23520.39"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="25768.39"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="19350.00"/>	<input type="text" value="34598.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="45118.39"/>	<input type="text" value="58118.39"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="16560.00"/>	<input type="text" value="29560.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="28558.39"/>	<input type="text" value="28558.39"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

**Appraisal Institute PAC (AI PAC)**

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

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).....	9100.00	17425.00
(ii) Unitemized .....	10250.00	17173.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	19350.00	34598.00
(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) .....	19350.00	34598.00
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	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 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))..... ▶	19350.00	34598.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	19350.00	34598.00

**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 .....	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.....	16500.00	29500.00
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 .....	60.00	60.00
(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)).....	60.00	60.00
29. Other Disbursements .....	0.00	0.00
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)) ..	16560.00	29560.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16560.00	29560.00

**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) .....	19350.00	34598.00
34. Total Contribution Refunds (from Line 28(d)) .....	60.00	60.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	19290.00	34538.00
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 OF 16
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**Appraisal Institute PAC (AI PAC)**

Full Name (Last, First, Middle Initial)  
**A. Richard L Borges II**

Mailing Address P.O. Box 886

City Seymour State IN Zip Code 47274-0886

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

Name of Employer Cross-Continent Mediation & Arbitration Occupation Appraiser

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 30 / 2013**

**Transaction ID : A2013-3741758**

Amount of Each Receipt this Period  
**750.00**

Full Name (Last, First, Middle Initial)  
**B. Roger P Bush**

Mailing Address Civic Center Plaza  
1200 Third Ave. Ste. 1700

City San Diego State CA Zip Code 92102

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

Name of Employer City of San Diego Occupation Appraiser

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 30 / 2013**

**Transaction ID : A2013-3741755**

Amount of Each Receipt this Period  
**750.00**

Full Name (Last, First, Middle Initial)  
**c. John A Kilpatrick Ph.D**

Mailing Address 2101 Fourth Ave. Ste. 240

City Seattle State WA Zip Code 98121

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

Name of Employer Greenfield Advisors Occupation Appraiser

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **780.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**07 / 15 / 2013**

**Transaction ID : A2013-3439624**

Amount of Each Receipt this Period  
**750.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **2250.00**

**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 OF 16  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Appraisal Institute PAC (AI PAC)**

**A. Charles R Mills Jr**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 415 E. Court Ave.  
 City Jeffersonville State IN Zip Code 47130  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Mills, Biggs, Haire & Reisert, Inc. Occupation Appraiser  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2013  
**Transaction ID : A2013-4628634**  
 Amount of Each Receipt this Period  
 750.00

**B. Don R Scheidt**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 626 N. Illinois St. Suite 200  
 City Indianapolis State IN Zip Code 46204-1251  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Don R. Scheidt & Co. Inc. Occupation Appraiser  
 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 / 31 / 2013  
**Transaction ID : A2013-3575631**  
 Amount of Each Receipt this Period  
 500.00

**C. Kern G Slucter**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 363 Creyts Road (Lansing MI Suburb)  
 City Dimondale State MI Zip Code 48821  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Gannon Group PC Occupation Appraiser  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2013  
**Transaction ID : A2013-3575632**  
 Amount of Each Receipt this Period  
 750.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2000.00  
**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 16
	<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)  
**Appraisal Institute PAC (AI PAC)**

**A. Richard A Stephens**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 West Capitol Suite 1222  
 City Little Rock State AR Zip Code 72201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Stephenson & Associates Occupation Appraiser  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **500.00**

Date of Receipt  
 08 / 30 / 2013  
**Transaction ID : A2013-3741757**  
 Amount of Each Receipt this Period  
**500.00**

**B. Joseph E Thompson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 26 Carriage Lane  
 City Troutville State VA Zip Code 24175  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Appraisal Institute Occupation Appraiser  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **750.00**

Date of Receipt  
 07 / 31 / 2013  
**Transaction ID : A2013-3575624**  
 Amount of Each Receipt this Period  
**750.00**

**C. Jeffrey R Vale**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 404 E. 86th Ave.  
 City Merrillville State IN Zip Code 46410  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Vale Appraisal Group Occupation Appraiser  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **500.00**

Date of Receipt  
 08 / 30 / 2013  
**Transaction ID : A2013-3741754**  
 Amount of Each Receipt this Period  
**500.00**

**SUBTOTAL** of Receipts This Page (optional)..... **1750.00**  
**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 11 OF 16
(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)  
**Appraisal Institute PAC (AI PAC)**

**A.** Full Name (Last, First, Middle Initial)  
**Stephen S Wagner**

Mailing Address 3714 Litchfield Place

City State Zip Code  
West Lafayette IN 47906

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

Name of Employer Occupation  
REsource LLC Appraiser

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2013

**Transaction ID : A2013-3741753**

Amount of Each Receipt this Period  
750.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	9100.00

**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)  
**Appraisal Institute PAC (AI PAC)**

Full Name (Last, First, Middle Initial)

**A. Bennet for Colorado**

Mailing Address 236 Massachusetts Ave NE Suite 209

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Contribution

011

Candidate Name

**Michael Bennet**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CO District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 06 / 2013

**Transaction ID : B481172**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Westmoreland for Congress**

Mailing Address PO BOX 458

City Sharpsburg State GA Zip Code 30277

Purpose of Disbursement  
Contribution

011

Candidate Name

**Lynn A. Westmoreland**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: GA District: 03

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 11 / 2013

**Transaction ID : B472190**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Randy Hultgren for Congress**

Mailing Address 104 Hume Avenue

City Alexandria State VA Zip Code 22301

Purpose of Disbursement  
Contribution

011

Candidate Name

**Randy Hultgren**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IL District: 14

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 16 / 2013

**Transaction ID : B483726**

Amount of Each Disbursement this Period

2000.00

**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)  
**Appraisal Institute PAC (AI PAC)**

Full Name (Last, First, Middle Initial)

**A. Stutzman for Congress**

Mailing Address 499 South Capitol Street SW Ste 42

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution

011

Candidate Name

**Marlin Stutzman**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IN District: 03

Date of Disbursement

MM / DD / YYYY  
08 / 26 / 2013

**Transaction ID : B471368**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Stutzman for Congress**

Mailing Address 499 South Capitol Street SW Ste 42

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution

011

Candidate Name

**Marlin Stutzman**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IN District: 03

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2013

**Transaction ID : B475707**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Stutzman for Congress**

Mailing Address 499 South Capitol Street SW Ste 42

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution

011

Candidate Name

**Marlin Stutzman**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: IN District: 03

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2013

**Transaction ID : B475708**

Amount of Each Disbursement this Period

1500.00

**SUBTOTAL** of Disbursements 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)

<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)  
**Appraisal Institute PAC (AI PAC)**

Full Name (Last, First, Middle Initial)

**A. Kurt Schrader for Congress**

Mailing Address P.O. Box 636

City Annandale State VA Zip Code 22041

Purpose of Disbursement  
Contribution

011

Candidate Name

**Kurt Schrader**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: OR District: 05

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 18 / 2013

**Transaction ID : B481863**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. Friends of Jeb Hensarling**

Mailing Address P.O. Box 820504

City Dallas State TX Zip Code 75382

Purpose of Disbursement  
Contribution

011

Candidate Name

**Jeb Hensarling**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: TX District: 05

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 27 / 2013

**Transaction ID : B474637**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**C. Friends of Mark Warner**

Mailing Address 10 G Street NE Suite 470

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Contribution

011

Candidate Name

**Mark Warner**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 24 / 2013

**Transaction ID : B474248**

Amount of Each Disbursement this Period

1000.00

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

5000.00

**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)  
**Appraisal Institute PAC (AI PAC)**

Full Name (Last, First, Middle Initial)

**A. Capito for West Virginia**

Mailing Address 1006 Pendleton Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Contribution

011

Candidate Name

**Shelley Moore Capito**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: WV District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 01 / 2013

**Transaction ID : B474875**

Amount of Each Disbursement this Period

1000.00

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)..... ▶

1000.00

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

16500.00