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**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (to file) TYPE OR PRINT Example: If typing, type over the lines. **1234567890**

National Automatic Merchandising Association PAC

ADDRESS (number and street) **20 North Wacker Drive**

Suite 3500

Chicago IL 60606

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C 00235782

IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)	(a) Monthly Report Due On:	<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
	(a) Quarterly Reports:	<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
		<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)
	(c) 12-Day PPE-Election Report for the	<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)	
		<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)		
		Election on			In the State of
	(d) 30-Day POST-Election Report for the	<input type="checkbox"/> General (30G)	<input checked="" type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)	
		Election on			In the State of

5. Covering Period **07 01 2004** through **09 30 2004**

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 **Brian B. Allen**

Signature of Treasurer **Brian B. Allen** Date **10 04 2004**

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 6437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

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Page 2

Write or Type Committee Name

National Automatic Merchandising Association PAC (C00236762)

Report Covering the Period: From: 07 01 2004 To: 09 30 2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6 (a) Cash on Hand January 1, 2004		9,081.58
(b) Cash on Hand at Beginning of Reporting Period	10,081.58	
(c) Total Receipts (from Line 18)	0	2,000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	10,081.58	11,081.58
7. Total Disbursements (from Line 31)	1,000.00	2,000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	9,081.58	9,081.58
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	0	

This committee has qualified as a multicandidate committee (see FEC FORM 154)

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. 02/2003)

Write or Type Committee Name:

National Automatic Merchandising Association PAC (C00235762)

Report Covering the Period:

From:

07 01 2004

To:

09 30 2004

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	800.00
(ii) Unitemized	0	1,200.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))	0	2,000.00
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) Total Contributions (add Lines 11(a)(i), (ii), and (c)) (Carry Totals to Line 33, page 5)	0	2,000.00
12. Transfers From Affiliated/Other Party Committees	0	0
13. All Loans Received	0	0
14. Loan Repayments Received	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0
17. Other Federal Receipts (Dividends, Interest, etc.)	0	0
18. Transfers from Non-Federal and Levin Funds:		
(a) Non-Federal Account (from Schedule HS)	0	0
(b) Levin Funds (from Schedule HS)	0	0
(c) Total Transfers (add 18(a) and 18(b))	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	0	2,000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	0	2,000.00

DETAILED SUMMARY PAGE
of Disbursements

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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	0
(ii) Non-Federal Share	0	0
(b) Other Federal Operating Expenditures	0	0
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0	0
22. Transfers to Affiliated/Other Party Committees	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees	1,000.00	2,000.00
24. Independent Expenditures (see Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §411a(d)) (see Schedule F)	0	0
26. Loan Repayments Made	0	0
27. Loans Made	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0	0
29. Other Disbursements	0	0
30. Federal Election Activity (2 U.S.C. §451(20))		
(a) Allocated Federal Election Activity (from Schedule H5)		
(i) Federal Share	0	0
(ii) 'Levin' Share	0	0
(b) Federal Election Activity Paid Entirely with Federal Funds	0	0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	1,000.00	2,000.00
32. Total Federal Disbursements (subtract Line 21(e)(i) and Line 30(c)(i) from Line 31)	1,000.00	2,000.00

DETAILED SUMMARY PAGE
of Disbursements

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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)	0	2,000.00
34 Total Contributions Refunds (from Line 28(d))	0	0
35 Net Contributions (other than loans) (subtract Line 34 from Line 33)	0	2,000.00
36 Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0	0
37 Offsets to Operating Expenditures (from Line 15, page 3)	0	0
38 Net Operating Expenditures (subtract Line 37 from Line 36)	0	0

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

List separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER (check only one)				PAGE 1 OF 1			
	<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"/> 28
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 28	<input type="checkbox"/> 29	<input type="checkbox"/> 30	

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)
National Automatic Merchandising Association PAC (C00235762)

Full Name (Last, First, Middle Initial) A. Castle Campaign Fund		Date of Disbursement 08/25/2004
Mailing Address P.O. Box 133		Amount of Each Disbursement This Period 1,000.00
City Wilmington	State DE	
Zip Code 19899-0133		Candidate Name Michael Castle
Purpose of Disbursement Contribution to Committee		
Office Sought <input checked="" 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) <input type="checkbox"/>	Category/Type 011
State: DE	District: 01	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement
Mailing Address		Amount of Each Disbursement This Period
City	State	
Zip Code		Candidate Name
Purpose of Disbursement		
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) <input type="checkbox"/>	Category/Type
State	District	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement
Mailing Address		Amount of Each Disbursement This Period
City	State	
Zip Code		Candidate Name
Purpose of Disbursement		
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) <input type="checkbox"/>	Category/Type
State	District	

SUBTOTAL of Disbursements This Page (optional)	1,000.00
TOTAL This Period (last page this line number prev)	

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 10-14-04
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> Delivery Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
JMP PREPARER (5/2004)	10-19-04 DATE PREPARED