

# 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  
American Institute of Certified Public Accountants Political Action Committee

ADDRESS (number and street) Palladian 1  
220 Leigh Farm Rd  
 Check if different than previously reported. (ACC)  
Durham NC 27707 8110

2. **FEC IDENTIFICATION NUMBER** C00077321  
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 06 01 2010 through 06 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. Anthony Pugliese  
Signature of Treasurer Electronically Filed by Mr. Anthony Pugliese Date 07 20 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 **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
American Institute of Certified Public Accountants Political Action Committee

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	6

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		231137.36
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	81737.34									
(c) Total Receipts (from Line 19) .....	32616.00	152767.55								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	114353.34	383904.91								
7. Total Disbursements (from Line 31) .....	74853.54	344405.11								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	39499.80	39499.80								
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)

Write or Type Committee Name

American Institute of Certified Public Accountants Political Action Committee

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	6

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) .....	10500.00	108450.00
(ii) Unitemized .....	22116.00	41776.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	32616.00	150226.00
(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) .....	32616.00	150226.00
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	2500.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	41.55
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)) .....	32616.00	152767.55
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	32616.00	152767.55

## 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.....	231.10	1116.73
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	231.10	1116.73
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	72092.44	340733.38
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 .....	30.00	55.00
(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)) .....	30.00	55.00
29. Other Disbursements.....	2500.00	2500.00
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))..	74853.54	344405.11
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	74853.54	344405.11

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	32616.00	150226.00
34. Total Contribution Refunds (from Line 28(d)) .....	30.00	55.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	32586.00	150171.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	231.10	1116.73
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	231.10	1116.73

**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 6 / 35
	<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	

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)  
American Institute of Certified Public Accountants Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Lisa C. Germano		Date of Receipt MM / DD / YYYY 06 / 08 / 2010		
	Mailing Address 3020 Harrington Manor		<b>Transaction ID:</b> 32025606		
	City Midlothian	State VA	Zip Code 23113-1187	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Actuarial Benefits & Design Company	Occupation CPA	Aggregate Year-to-Date 500.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Susan Coffey		Date of Receipt MM / DD / YYYY 06 / 03 / 2010		
	Mailing Address 39 Oneida Avenue		<b>Transaction ID:</b> 32025799		
	City OCEANPORT	State NJ	Zip Code 07757-1736	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer American Institute of CPAs	Occupation VP	Aggregate Year-to-Date 500.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) James C. Bourke, Jr.		Date of Receipt MM / DD / YYYY 06 / 04 / 2010		
	Mailing Address 331 Newman Springs Road Suite 125		<b>Transaction ID:</b> 32029270		
	City Red Bank	State NJ	Zip Code 07701-5688	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer WithumSmith+Brown	Occupation CPA	Aggregate Year-to-Date 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> 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 7 / 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Institute of Certified Public Accountants Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Jake L. Netterville		Date of Receipt MM / DD / YYYY 06 / 08 / 2010		
	Mailing Address 8550 United Plz Bl Ste 1001		<b>Transaction ID:</b> 32029286		
	City Baton Rouge	State LA	Zip Code 70809-0200	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Postlethwaite & Netterville.		Occupation CPA		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Paul Regan		Date of Receipt MM / DD / YYYY 06 / 08 / 2010		
	Mailing Address 160 Spear Street, Suite 1900		<b>Transaction ID:</b> 32029294		
	City San Francisco	State CA	Zip Code 94105-1548	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Hemming Morse, Inc., CPAs		Occupation CPA		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) William F. Ezzell, Jr.		Date of Receipt MM / DD / YYYY 06 / 08 / 2010		
	Mailing Address 555 12th St NW Ste 500		<b>Transaction ID:</b> 32029334		
	City Washington	State DC	Zip Code 20004-1231	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Deloitte & Touche LLP		Occupation CPA		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> 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 8 / 35  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Institute of Certified Public Accountants Political Action Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) James G. Castellano</p> <p>Mailing Address 230 S Bemiston Ave 6 Fl Llp</p> <p>City State Zip Code St. Louis MO 63105-3709</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer RubinBrown LLP      Occupation CPA</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">06 / 03 / 2010</span></p> <p><b>Transaction ID:</b> 32029336</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Scott Voynich</p> <p>Mailing Address PO Box 4299 5637 Whitesville Rd (31904)</p> <p>City State Zip Code COLUMBUS GA 31904-9094</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Robinson Grimes &amp; Company PC      Occupation CPA</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">06 / 08 / 2010</span></p> <p><b>Transaction ID:</b> 32029347</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Michael R. Pender, Jr.</p> <p>Mailing Address PO Box 49703</p> <p>City State Zip Code SARASOTA FL 34230-6703</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Cavanaugh &amp; Co. LLP      Occupation CPA</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">06 / 04 / 2010</span></p> <p><b>Transaction ID:</b> 32029359</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">1500.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

**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 9 / 35
	<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)  
American Institute of Certified Public Accountants Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Randy Glenn Fletchall	Date of Receipt MM / DD / YYYY 06 / 08 / 2010
	Mailing Address 5 Times Square	<b>Transaction ID:</b> 32029369
	City State Zip Code New York NY 10036-6523	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Ernst & Young LLP Occupation CPA Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Carleton L. Williams	Date of Receipt MM / DD / YYYY 06 / 04 / 2010
	Mailing Address 700 Bishop St Ste 1040	<b>Transaction ID:</b> 32029372
	City State Zip Code Honolulu HI 96813-4112	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer CW Associates, CPAs Occupation CPA Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Winston K. Howell	Date of Receipt MM / DD / YYYY 06 / 08 / 2010
	Mailing Address 8004 Evening Star Lane	<b>Transaction ID:</b> 32029382
	City State Zip Code Tallahassee FL 32312-3500	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Thomas Howell Ferguson P. A. Occupation CPA Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1150.00
<b>TOTAL</b> 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 / 35  
(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)  
American Institute of Certified Public Accountants Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Richard E. Mills, III

Mailing Address 11440 Tomahawk Creek Pkwy

City Leawood State KS Zip Code 66211-2672

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

Name of Employer Mayer Hoffman McCann P.C. Occupation CPA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 04 / 2010

Transaction ID: 32029396

Amount of Each Receipt this Period 250.00

**B.**

Full Name (Last, First, Middle Initial)  
Kevin E. Currier

Mailing Address 16 Wingate Road

City Wakefield State RI Zip Code 02879-7697

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

Name of Employer Trivia INC Occupation CPA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 08 / 2010

Transaction ID: 32029410

Amount of Each Receipt this Period 250.00

**C.**

Full Name (Last, First, Middle Initial)  
Henry Rinder

Mailing Address 165 Passaic Avenue  
4th Floor

City Fairfield State NJ Zip Code 07004-3592

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

Name of Employer Smolin, Lupin & Co., P. A. Occupation CPA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 04 / 2010

Transaction ID: 32029425

Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 750.00

**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 / 35

(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)

American Institute of Certified Public Accountants Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Stam Stathis

Mailing Address 1301 6TH AVE W STE 600

City State Zip Code  
**BRADENTON FL 34205-7440**

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

Name of Employer Occupation  
CPA Associates CPA

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 4 / 2 0 1 0

Transaction ID: 32029427

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Kenneth A. Macias

Mailing Address 3000 S Street, Suite 300

City State Zip Code  
**Sacramento CA 95816-7014**

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

Name of Employer Occupation  
Macias, Gini & O'Connell LLP CPA

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 4 / 2 0 1 0

Transaction ID: 32029429

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Anita Sherman

Mailing Address 5342 W Vermont St

City State Zip Code  
**Indianapolis IN 46224-8841**

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

Name of Employer Occupation  
Greenwalt Sponsel & Co., Inc. CPA

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 4 / 2 0 1 0

Transaction ID: 32029433

Amount of Each Receipt this Period

250.00

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

750.00

**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 / 35  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Institute of Certified Public Accountants Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Joseph Scheidler

Mailing Address PO Box 40977  
3815 River Crossing Pky # 300

City INDIANAPOLIS State IN Zip Code 46240-0977

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

Name of Employer: Crowe Horwath LLP Occupation: CPA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 06 / 08 / 2010  
Transaction ID: 32029435  
Amount of Each Receipt this Period: 100.00

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

Mailing Address 899 Mountain Avenue, Suite 3B

City Springfield State NJ Zip Code 07081-3455

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

Name of Employer: Fazio, Mannuzza, Roche, Tankel, LaPilu Occupation: CPA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 06 / 04 / 2010  
Transaction ID: 32029440  
Amount of Each Receipt this Period: 250.00

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

Mailing Address P O Box 3031  
111 N Orange Ave Ste 1600

City Orlando State FL Zip Code 32802-3031

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

Name of Employer: KPMG LLP Occupation: CPA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 06 / 03 / 2010  
Transaction ID: 32029449  
Amount of Each Receipt this Period: 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 600.00

**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 13 / 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
American Institute of Certified Public Accountants Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Carl Peterson	Date of Receipt MM / DD / YYYY 06 / 04 / 2010
	Mailing Address 6600 Lyndale Avenue South Suite 110	<b>Transaction ID:</b> 32029450
	City Richfield State MN Zip Code 55423-3380	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Peterson, Peterson & Associates PLC Occupation CPA Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael T Schmitz	Date of Receipt MM / DD / YYYY 06 / 08 / 2010
	Mailing Address 116 N 4th St 2 Fl	<b>Transaction ID:</b> 32029465
	City Bismarck State ND Zip Code 58501-4090	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Widmer Roel PC Occupation CPA Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Andrea Georgene Cope	Date of Receipt MM / DD / YYYY 06 / 08 / 2010
	Mailing Address 600 California Street Suite 1300	<b>Transaction ID:</b> 32029471
	City San Francisco State CA Zip Code 94108-2704	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Burr, Pilger & Mayer LLP Occupation CPA Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1000.00
<b>TOTAL</b> 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 / 35  
(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)  
American Institute of Certified Public Accountants Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Donovan W. Rulien, II

Mailing Address 3301 Denali Street  
Suite 300

City Anchorage State AK Zip Code 99503-4051

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

Name of Employer Rulien, Whitlock & Associates Occupation CPA

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 06 / 04 / 2010  
**Transaction ID: 32029495**  
Amount of Each Receipt this Period: 250.00

**B.**

Full Name (Last, First, Middle Initial)  
Conrad M Davis

Mailing Address 4925 Brownstone Ct

City Elk Grove State CA Zip Code 95758-4111

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

Name of Employer Ueltzen & Company LLP Occupation CPA

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 06 / 03 / 2010  
**Transaction ID: 32029519**  
Amount of Each Receipt this Period: 250.00

**C.**

Full Name (Last, First, Middle Initial)  
Gary David McIntosh

Mailing Address 4714 Timberline Dr

City Austin State TX Zip Code 78746-5671

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

Name of Employer Brown Graham & Co., PC Occupation CPA

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 06 / 04 / 2010  
**Transaction ID: 32029536**  
Amount of Each Receipt this Period: 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1000.00

**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 15 / 35
	<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)  
American Institute of Certified Public Accountants Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Mary E. MEDLEY	Date of Receipt MM / DD / YYYY 06 / 04 / 2010
	Mailing Address 7979 East Tufts Avenue Suite 500	<b>Transaction ID:</b> 32029572
	City State Zip Code Denver CO 80237-2843	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Colorado Society of CPAs Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Sheri Bango Cavaney	Date of Receipt MM / DD / YYYY 06 / 17 / 2010
	Mailing Address 1455 Pennsylvania Avenue	<b>Transaction ID:</b> 32029589
	City State Zip Code WASHINGTON DC 20004	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer AICPA Occupation VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Eric Rosaly	Date of Receipt MM / DD / YYYY 06 / 01 / 2010
	Mailing Address PO Box 7539	<b>Transaction ID:</b> 32058479
	City State Zip Code PONCE PR 00732-7539	Amount of Each Receipt this Period 0.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer ROAC CPA Group, P.S.C. Occupation CPA Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 0.00	<b>[MEMO ITEM]</b> Refund(s) on Schedule B Totaling \$30.00 This changes the YTD Total to \$0.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	10500.00

**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)

PAGE 16 / 35

<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)  
American Institute of Certified Public Accountants Political Action Committee

A.	Full Name (Last, First, Middle Initial) Schultz Debbie Wasserman	Transaction ID: 31825981 Date of Disbursement 06 / 02 / 2010
	Mailing Address 1071 Twin Branch Ln	Amount of Each Disbursement this Period 1000.00
	City Weston State FL Zip Code 33326	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Debbie Wasserman-Schultz	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 20	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Klein For Congress	Transaction ID: 31825982 Date of Disbursement 06 / 02 / 2010
	Mailing Address 21301 Powerline Road Suite 204	Amount of Each Disbursement this Period 1500.00
	City Boca Raton State FL Zip Code 33433	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Ronald Klein	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 22	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Texans For Lamar Smith	Transaction ID: 31873894 Date of Disbursement 06 / 11 / 2010
	Mailing Address 5701 Broadway	Amount of Each Disbursement this Period 1000.00
	City San Antonio State TX Zip Code 78209	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Lamar Smith	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 21	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**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)

American Institute of Certified Public Accountants Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Senate Majority Fund <hr/> Mailing Address P.O. Box 32025 <hr/> City Phoenix State AZ Zip Code 85064 <hr/> Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name Senate Majority Fund 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>Transaction ID:</b> 31873895 <b>Date of Disbursement</b> <div style="border: 1px solid black; padding: 2px;">                     M M / D D / Y Y Y Y                      0 6 / 1 1 / 2 0 1 0                 </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: center;">1000.00</div>
<b>B.</b>	Full Name (Last, First, Middle Initial) Adler For Congress <hr/> Mailing Address 14 Knightswood Drive <hr/> City Marlton State NJ Zip Code 08053 <hr/> Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name John Adler Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NJ District: 03	<b>Transaction ID:</b> 31873896 <b>Date of Disbursement</b> <div style="border: 1px solid black; padding: 2px;">                     M M / D D / Y Y Y Y                      0 6 / 1 1 / 2 0 1 0                 </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: center;">1500.00</div>
<b>C.</b>	Full Name (Last, First, Middle Initial) Cole For Congress <hr/> Mailing Address P.O. Box 722256 <hr/> City Norman State OK Zip Code 73070 <hr/> Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name Rep. Thomas Cole Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OK District: 04	<b>Transaction ID:</b> 31873897 <b>Date of Disbursement</b> <div style="border: 1px solid black; padding: 2px;">                     M M / D D / Y Y Y Y                      0 6 / 1 1 / 2 0 1 0                 </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: center;">1000.00</div>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div style="border: 1px solid black; padding: 2px;">3500.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>

**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)

American Institute of Certified Public Accountants Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Freedom Fund

Mailing Address 128 North Columbus St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Freedom Fund

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 31873936

Date of Disbursement

06 / 11 / 2010

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Willard Hotel

Mailing Address 1401 Pennsylvania Ave., NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
inkind for food costs

011  
Category/  
Type

Candidate Name  
Rep. Earl Pomeroy

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: ND District: 01

Transaction ID: 31901079

Date of Disbursement

06 / 15 / 2010

Amount of Each Disbursement this Period

271.22

inkind for food costs

C.

Full Name (Last, First, Middle Initial)

Willard Hotel

Mailing Address 1401 Pennsylvania Ave., NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
inkind for food costs

011  
Category/  
Type

Candidate Name  
Pat Tiberi

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: OH District: 12

Transaction ID: 31901096

Date of Disbursement

06 / 15 / 2010

Amount of Each Disbursement this Period

271.22

inkind for food costs

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

5542.44

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)

American Institute of Certified Public Accountants Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Nancy Pelosi For Congress

Mailing Address 1 Bush Street 11th Floor

City San Francisco State CA Zip Code 94104

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Nancy Pelosi

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: CA District: 08

Transaction ID: 31921601

Date of Disbursement

06 / 18 / 2010

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Burris For Senate

Mailing Address 35 E Wacker Drive Suite 500

City Chicago State IL Zip Code 60601

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Mr. Roland Burris

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: IL District:

Transaction ID: 31921603

Date of Disbursement

06 / 18 / 2010

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
People For Patty Murray U S Senate Campaign

Mailing Address PO Box 3662

City Seattle State WA Zip Code 98199

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Patty Murray

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: WA District:

Transaction ID: 31921625

Date of Disbursement

06 / 18 / 2010

Amount of Each Disbursement this Period

1000.00

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

3000.00

**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)

American Institute of Certified Public Accountants Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Friends Of John Barrow <hr/> Mailing Address PO Box 8166 <hr/> City Savannah State GA Zip Code 31412 <hr/> Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name Rep. John Barrow Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: GA District: 12	Transaction ID: 31921626 Date of Disbursement 06 / 18 / 2010 <hr/> Amount of Each Disbursement this Period 1000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Bachmann For Congress <hr/> Mailing Address PO Box 25950 <hr/> City Woodbury State MN Zip Code 55125 <hr/> Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name Rep. Michele Bachmann Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MN District: 06	Transaction ID: 31921649 Date of Disbursement 06 / 18 / 2010 <hr/> Amount of Each Disbursement this Period 2500.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Hoyer For Congress <hr/> Mailing Address 7905 Malcolm Road Suite 102 <hr/> City Clinton State MD Zip Code 20735 <hr/> Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name Steny Hoyer Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MD District: 05	Transaction ID: 31926720 Date of Disbursement 06 / 21 / 2010 <hr/> Amount of Each Disbursement this Period 2500.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>6000.00</b>
<b>TOTAL</b> 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)

American Institute of Certified Public Accountants Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Sensenbrenner Committee <hr/> Mailing Address PO Box 575 <hr/> City Brookfield State WI Zip Code 53008 <hr/> Purpose of Disbursement <hr/> Candidate Name Jim Sensenbrenner <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 09 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 31926725 Date of Disbursement 06 / 21 / 2010
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Chris Lee For Congress <hr/> Mailing Address PO Box 15395 <hr/> City Rochester State NY Zip Code 14615 <hr/> Purpose of Disbursement <hr/> Candidate Name Mr. Christopher Lee <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 26 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 31927428 Date of Disbursement 06 / 22 / 2010
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Friends Of John Boehner <hr/> Mailing Address 7908-12 Cincinnati Dayton Road <hr/> City West Chester State OH Zip Code 45069 <hr/> Purpose of Disbursement <hr/> Candidate Name Rep. John A. Boehner <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 08 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 31935362 Date of Disbursement 06 / 23 / 2010
	Amount of Each Disbursement this Period 5000.00
	011 Category/ Type

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

7000.00

**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)  
American Institute of Certified Public Accountants Political Action Committee

A.	Full Name (Last, First, Middle Initial) Schiff For Congress	Transaction ID: 31935364 Date of Disbursement																			
	Mailing Address 777 S. Figueroa St. Suite 4050	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	3		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	3		2	0	1	0												
	City Los Angeles State CA Zip Code 90017	Amount of Each Disbursement this Period																			
	Purpose of Disbursement	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name Rep. Adam B. Schiff	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 29	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) Rand Paul For Us Senate	Transaction ID: 31935365 Date of Disbursement																			
	Mailing Address 1332 Andrea St	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	3		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	3		2	0	1	0												
	City Bowling Green State KY Zip Code 42104	Amount of Each Disbursement this Period																			
	Purpose of Disbursement	<table border="1"><tr><td>2000.00</td></tr></table>	2000.00																		
2000.00																					
	Candidate Name Mr. Rand Paul	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KY District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) Coburn For Senate 2010	Transaction ID: 31935373 Date of Disbursement																			
	Mailing Address Post Office Box 977	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	3		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	3		2	0	1	0												
	City Muskogee State OK Zip Code 74402	Amount of Each Disbursement this Period																			
	Purpose of Disbursement	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name Sen. Thomas Coburn, M.D.	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OK District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

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

4000.00
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**TOTAL** This Period (last page this line number only) ..... ►

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# 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)

American Institute of Certified Public Accountants Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Tallatchee Creek PAC <hr/> Mailing Address PO Box 29576 <hr/> City Washington State DC Zip Code 20017 <hr/> Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name Tallatchee Creek 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>Transaction ID:</b> 31935397 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 1 0	Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">2500.00</div>
<b>B.</b>	Full Name (Last, First, Middle Initial) Kosmas For Congress <hr/> Mailing Address PO Box 1547 <hr/> City New Smyrna Beach State FL Zip Code 32170 <hr/> Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name Rep. Suzanne Kosmas Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: FL District: 24	<b>Transaction ID:</b> 31935398 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 1 0	Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">1500.00</div>
<b>C.</b>	Full Name (Last, First, Middle Initial) America's Leadership PAC <hr/> Mailing Address 426 C Street, NE <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name America's Leadership 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>Transaction ID:</b> 31935399 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 1 0	Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">2500.00</div>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div style="border: 1px solid black; padding: 5px;">6500.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....	<div style="border: 1px solid black; padding: 5px; height: 20px;"></div>

**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)

American Institute of Certified Public Accountants Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Friends Of Erik Paulsen <hr/> Mailing Address PO Box 44369 <hr/> City Eden Prairie State MN Zip Code 55344 <hr/> Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name Mr. Erik Paulsen Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MN District: 03	Transaction ID: 31935401 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">1500.00</div>
<b>B.</b>	Full Name (Last, First, Middle Initial) Alamo PAC <hr/> Mailing Address 919 Congress Ave, Suite 1400 Frost Bank Plaza <hr/> City Austin State TX Zip Code 78701 <hr/> Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name Alamo 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:	Transaction ID: 31935402 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">2500.00</div>
<b>C.</b>	Full Name (Last, First, Middle Initial) First State PAC <hr/> Mailing Address PO Box 3006 <hr/> City Wilmington State DE Zip Code 19804 <hr/> Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name First State 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:	Transaction ID: 31935403 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">2500.00</div>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div style="border: 1px solid black; padding: 5px;">6500.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

# 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)

American Institute of Certified Public Accountants Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Dave Camp For Congress <hr/> Mailing Address 5915 Eastman Avenue Suite 100 <hr/> City Midland State MI Zip Code 48640 <hr/> Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name Dave Camp Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 04	Transaction ID: 31935405 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">1500.00</div>
<b>B.</b>	Full Name (Last, First, Middle Initial) The Bluegrass Committee <hr/> Mailing Address 400 North Capitol Street, NW Suite 585 <hr/> City Washington State DC Zip Code 20001 <hr/> Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name The Bluegrass Committee 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:	Transaction ID: 31935406 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">2500.00</div>
<b>C.</b>	Full Name (Last, First, Middle Initial) Mccaskill For Missouri 2012 <hr/> Mailing Address 607 14th Street Nw Suite 800 <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name Sen. Claire McCaskill Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MO District:	Transaction ID: 31935411 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">2000.00</div>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div style="border: 1px solid black; padding: 5px;">6000.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

**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)

American Institute of Certified Public Accountants Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Crowley For Congress

Mailing Address 84-56 Grand Avenue

City Elmhurst State NY Zip Code 11373

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Rep. Joseph Crowley

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: NY District: 07

Transaction ID: 31935412

Date of Disbursement

06 / 23 / 2010

Amount of Each Disbursement this Period

3000.00

B.

Full Name (Last, First, Middle Initial)

Lynn Jenkins For Congress

Mailing Address PO Box 1441

City Topeka State KS Zip Code 66601

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Lynn Jenkins

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: KS District: 02

Transaction ID: 31935413

Date of Disbursement

06 / 23 / 2010

Amount of Each Disbursement this Period

1500.00

C.

Full Name (Last, First, Middle Initial)

Melissa Bean For Congress

Mailing Address Post Office Box 3068

City Barrington State IL Zip Code 60010

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Rep. Melissa L. Bean

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: IL District: 08

Transaction ID: 31935414

Date of Disbursement

06 / 23 / 2010

Amount of Each Disbursement this Period

1500.00

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

6000.00

**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)  
American Institute of Certified Public Accountants Political Action Committee

A.	Full Name (Last, First, Middle Initial) Lungren For Congress	Transaction ID: 31935415 Date of Disbursement 06 / 23 / 2010
	Mailing Address 9321 Silverbend Lane	Amount of Each Disbursement this Period 1500.00
	City Elk Grove State CA Zip Code 95624	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Daniel Lungren	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 03	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Boren For Congress	Transaction ID: 31935797 Date of Disbursement 06 / 23 / 2010
	Mailing Address PO Box 1924	Amount of Each Disbursement this Period 1000.00
	City Muskogee State OK Zip Code 74402	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Dan Boren	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Lucas For Congress	Transaction ID: 31935798 Date of Disbursement 06 / 23 / 2010
	Mailing Address PO Box 1726	Amount of Each Disbursement this Period 1000.00
	City Oklahoma City State OK Zip Code 73101	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Frank Lucas	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 06	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**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)

American Institute of Certified Public Accountants Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Toomey For Senate Committee

Mailing Address 2720 Jordan Road

City Orefield State PA Zip Code 18069

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Mr. Patrick Toomey

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: PA District:

Transaction ID: 31942081  
Date of Disbursement

06 / 24 / 2010

Amount of Each Disbursement this Period

1000.00

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

Mailing Address 14 Knightswood Drive

City Marlton State NJ Zip Code 08053

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
John Adler

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: NJ District: 03

Transaction ID: 31943148  
Date of Disbursement

06 / 25 / 2010

Amount of Each Disbursement this Period

1000.00

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

Mailing Address 205 Washington St Se

City Warroad State MN Zip Code 56763

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Collin Peterson, CPA

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: MN District: 07

Transaction ID: 31944998  
Date of Disbursement

06 / 29 / 2010

Amount of Each Disbursement this Period

2500.00

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

4500.00

**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)

PAGE 30 / 35

<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)  
American Institute of Certified Public Accountants Political Action Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Willard Hotel</p> <p>Mailing Address 1401 Pennsylvania Ave., NW</p> <p>City Washington State DC Zip Code 20004</p> <p>Purpose of Disbursement Inkind for food costs</p> <p>Candidate Name Rep. Suzanne Kosmas</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 24</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31945046 <b>Date of Disbursement</b> 06 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 271.22</p> <p><b>[MEMO ITEM]</b> Inkind for food costs</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Willard Hotel</p> <p>Mailing Address 1401 Pennsylvania Ave., NW</p> <p>City Washington State DC Zip Code 20004</p> <p>Purpose of Disbursement Inkind for food costs</p> <p>Candidate Name Mr. Erik Paulsen</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 03</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31945047 <b>Date of Disbursement</b> 06 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 271.22</p> <p><b>[MEMO ITEM]</b> Inkind for food costs</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Willard Hotel</p> <p>Mailing Address 1401 Pennsylvania Ave., NW</p> <p>City Washington State DC Zip Code 20004</p> <p>Purpose of Disbursement Inkind for food costs</p> <p>Candidate Name Rep. Melissa L. Bean</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 31945049 <b>Date of Disbursement</b> 06 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 271.22</p> <p><b>[MEMO ITEM]</b> Inkind for food costs</p>

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

0.00

**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)

American Institute of Certified Public Accountants Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) American Institute of CPAs  Mailing Address Palladian Corporate Center 220 Leigh Farm Road  City Durham State NC Zip Code 27707-8110  Purpose of Disbursement Inkind for room charge Candidate Name Pat Tiberi  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 12  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 31945052 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 1 0	Amount of Each Disbursement this Period 110.00  Inkind for room charge
<b>B.</b>	Full Name (Last, First, Middle Initial) American Institute of CPAs  Mailing Address Palladian Corporate Center 220 Leigh Farm Road  City Durham State NC Zip Code 27707-8110  Purpose of Disbursement Inkind for room charge Candidate Name Rep. Earl Pomeroy  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 01  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 31945053 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 1 0	Amount of Each Disbursement this Period 110.00  Inkind for room charge
<b>C.</b>	Full Name (Last, First, Middle Initial) American Institute of CPAs  Mailing Address Palladian Corporate Center 220 Leigh Farm Road  City Durham State NC Zip Code 27707-8110  Purpose of Disbursement Inkind for room charge Candidate Name Rep. Suzanne Kosmas  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 24  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 31945054 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 1 0	Amount of Each Disbursement this Period 110.00  Inkind for room charge

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>330.00</b>
<b>TOTAL</b> 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)  
American Institute of Certified Public Accountants Political Action Committee

A.	Full Name (Last, First, Middle Initial) American Institute of CPAs	Transaction ID: 31945057 Date of Disbursement 06 / 29 / 2010
	Mailing Address Palladian Corporate Center 220 Leigh Farm Road	Amount of Each Disbursement this Period 110.00
	City Durham	State NC
	Zip Code 27707-8110	
	Purpose of Disbursement Inkind for room charge	011 Category/ Type
	Candidate Name Rep. Melissa L. Bean	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: IL District: 08	Inkind for room charge

B.	Full Name (Last, First, Middle Initial) American Institute of CPAs	Transaction ID: 31945059 Date of Disbursement 06 / 29 / 2010
	Mailing Address Palladian Corporate Center 220 Leigh Farm Road	Amount of Each Disbursement this Period 110.00
	City Durham	State NC
	Zip Code 27707-8110	
	Purpose of Disbursement Inkind for room charge	011 Category/ Type
	Candidate Name Mr. Erik Paulsen	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: MN District: 03	Inkind for room charge

C.	Full Name (Last, First, Middle Initial) Colonial Parking - Willard Hotel	Transaction ID: 31945063 Date of Disbursement 06 / 29 / 2010
	Mailing Address 1050 Thomas Jefferson St., NW Suite100	Amount of Each Disbursement this Period 16.00
	City Washington	State DC
	Zip Code 20007	
	Purpose of Disbursement inkind for prepaid parking voucher	011 Category/ Type
	Candidate Name Rep. Melissa L. Bean	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: IL District: 08	[MEMO ITEM] inkind for prepaid parking voucher

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

220.00

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)

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<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)

American Institute of Certified Public Accountants Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Friends Of Sam Johnson

Mailing Address 1611 Avenue K

City State Zip Code  
Plano TX 75074

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Rep. Samuel Robert Johnson

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: TX District: 03

Transaction ID: 31945164

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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)

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<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)

American Institute of Certified Public Accountants Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Willard Hotel

Mailing Address 1401 Pennsylvania Ave., NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
prepayment for catering costs

Candidate Name

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 31901465

Date of Disbursement

06 / 15 / 2010

Amount of Each Disbursement this Period

2500.00

prepayment for catering costs

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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

2500.00

**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)

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<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)

American Institute of Certified Public Accountants Political Action Committee

A.	Full Name (Last, First, Middle Initial) Wachovia PAC Account		Transaction ID: 32037959 Date of Disbursement																				
	Mailing Address Palladian Corporate Center 220 Leigh Farm Road		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		3	0		2	0	1	0														
	City Durham	State NC	Zip Code 27707-8110																				
	Purpose of Disbursement		Amount of Each Disbursement this Period																				
	Candidate Name		<table border="1"> <tr> <td>001</td> </tr> </table>		001																		
001																							
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	<b>231.10</b>
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<b>231.10</b>