

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

ASSOCIATED EQUIPMENT DISTRIBUTORS POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 121 N Henry Street

Check if different than previously reported. (ACC) Alexandria VA 22314

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00010124 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X]

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 Year-End 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 11 / 06 / 2012 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 10 / 01 / 2012 through 10 / 17 / 2012

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 Christian A Klein

Signature of Treasurer Christian A Klein [Electronically Filed] Date 12 / 06 / 2012

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									
-----------------	--	--	--	--	--	--	--	--	--

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

ASSOCIATED EQUIPMENT DISTRIBUTORS POLITICAL ACTION COMMITTEE

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>		33416.23
(b) Cash on Hand at Beginning of Reporting Period.....	33279.23	
(c) Total Receipts (from Line 19)	750.00	88675.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	34029.23	122091.23
7. Total Disbursements (from Line 31).....	4527.28	92589.28
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	29501.95	29501.95
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

ASSOCIATED EQUIPMENT DISTRIBUTORS POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 10 / 01 / 2012 To: 10 / 17 / 2012

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).....	750.00	88675.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	750.00	88675.00
(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)	750.00	88675.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	750.00	88675.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	750.00	88675.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	27.28	1010.54
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	27.28	1010.54
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4500.00	91578.74
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4527.28	92589.28
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4527.28	92589.28

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	750.00	88675.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	750.00	88675.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	27.28	1010.54
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	27.28	1010.54

**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 OF 9
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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)
ASSOCIATED EQUIPMENT DISTRIBUTORS POLITICAL ACTION COMMITTEE

A. Michael T Sheehan
 Full Name (Last, First, Middle Initial)
 Mailing Address 700 E. St. Andrews Ct.
 City State Zip Code
 Sioux Falls SD 57108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Sheehan Mack Sales and Equipme Construction Equipment Distributor
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2012
Transaction ID : SA11AI.4965
 Amount of Each Receipt this Period
 500.00
 Campaign Contribution

B. Jonathan Tarpey
 Full Name (Last, First, Middle Initial)
 Mailing Address 13611 Kluge Corner Lane
 City State Zip Code
 Cyprus TX 77429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Bobcat of Houston Construction Equipment Distributor
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 05 / 2012
Transaction ID : SA11AI.4968
 Amount of Each Receipt this Period
 250.00
 Campaign Contribution

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	750.00

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

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

FOR LINE NUMBER:
(check only one)

<input 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

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)

ASSOCIATED EQUIPMENT DISTRIBUTORS POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2012

Transaction ID : SB21B.4970

Amount of Each Disbursement this Period

7.38

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement
Monthly Credit Card Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2012

Transaction ID : SB21B.4971

Amount of Each Disbursement this Period

7.95

Full Name (Last, First, Middle Initial)

C. Bluestone Payments

Mailing Address 1029 Peachtree Parkway N.
Suite 314

City Peachtree City State GA Zip Code 30269

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2012

Transaction ID : SB21B.5017

Amount of Each Disbursement this Period

11.95

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

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

27.28

27.28

**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

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)

ASSOCIATED EQUIPMENT DISTRIBUTORS POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. CHRIS GIBSON FOR CONGRESS

Mailing Address PO BOX 234

City SARATOGA SPRINGS State NY Zip Code 12866

Purpose of Disbursement
Campaign Contribution

Candidate Name

CHRISTOPHER P GIBSON

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NY District: 20

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			02			2012			

Transaction ID : SB23.4972

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. DAN LIPINSKI FOR CONGRESS

Mailing Address P.O. BOX 520

City WESTERN SPRINGS State IL Zip Code 60558

Purpose of Disbursement
Campaign Contribution

Candidate Name

DANIEL LIPINSKI

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IL District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			09			2012			

Transaction ID : SB23.4975

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. HATCH ELECTION COMMITTEE INC

Mailing Address PO BOX 900427

City SANDY State UT Zip Code 84090

Purpose of Disbursement
Campaign Contribution

Candidate Name

ORRIN G HATCH

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: UT District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			15			2012			

Transaction ID : SB23.4978

Amount of Each Disbursement this Period

2500.00

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

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

4500.00

--

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)

ASSOCIATED EQUIPMENT DISTRIBUTORS POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. SCOTT BROWN FOR US SENATE COMMITTEE INC

Mailing Address 337 SUMMER STREET

City BOSTON State MA Zip Code 02210

Purpose of Disbursement
Campaign Contribution

Candidate Name
SCOTT P BROWN

Office Sought: House
 Senate
 President
State: MA District: 00

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2012

Transaction ID : **SB23.4981**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. SCOTT BROWN FOR US SENATE COMMITTEE INC

Mailing Address 337 SUMMER STREET

City BOSTON State MA Zip Code 02210

Purpose of Disbursement
Stop check payment for 8/14/12 contribution. Reissued check 10/15/12, as noted in this pre-general

Candidate Name
SCOTT BROWN FOR US SENATE COMMITTEE INC

Office Sought: House
 Senate
 President
State: MA District: 00

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2012

Transaction ID : **SB23.5012**

Amount of Each Disbursement this Period

-2500.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

0.00

4500.00