AICPA

Effective Legislation Committee
A copy of our report is filed with the Federal Election Commission and is available for purchase from the Federal Election Commission, Washington, D.C.

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

1999 SEP 23 A 11:45

September 20, 1999

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

Mr. Andrew Dodson
Public Records Office
Federal Election Commission
999 E Street, NW
Washington, DC 20463

Re: American Institute of Certified Public Accountants (AICPA) Effective Legislation Committee C-00077321

Dear Mr. Dodson:

Enclosed is the monthly "Report of Receipts and Expenditures" (FEC Form 3X) for the period August 1 through August 31, 1999. If you have any comments or questions, please telephone me at (201) 938-3210.

Sincerely,

Donna Borowicz

Donna Borowicz, CPA
Treasurer

DB:mmb
Enclosure

cc: D. Atherton
S. Eisenberg
T. Higginbotham
K. Rote

dodson.doc

American Institute of Certified Public Accountants
Harborside Financial Center, 201 Plaza Three, Jersey City, NJ 07311-3881 (201) 938-3000 • (212) 318-0500 • fax (201) 938-3329

The CPA. Never Underestimate the Value.

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

1999 SEP 23 A 11:45

1. NAME OF COMMITTEE (in full)
American Institute of Certified Public Accountants Effective Legislation Committee

ADDRESS (number and street) [ ] Check if different than previously reported
Harborside Financial Center, 201 Plaza 3

CITY, STATE and ZIP CODE
Jersey City, NJ 07311-3881

2. FEC IDENTIFICATION NUMBER
C-00077321

3. [X] This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

(a) [ ] April 15 Quarterly Report
[ ] July 15 Quarterly Report
[ ] October 15 Quarterly Report
[ ] January 31 Year End Report
[ ] July 31 Mid Year Report (Non-election Year Only)
[ ] Termination Report

Monthly Report Due On:
[ ] February 20 [ ] June 20 [ ] October 20
[ ] March 20 [ ] July 20 [ ] November 20
[ ] April 20 [ ] August 20 [ ] December 20
[ ] May 20 [X] September 20 [ ] January 31

[ ] Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

[ ] Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? [ ] YES [X] NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 8/1/99 through 8/31/99		
6. (a) Cash on Hand January 1, 1999		$ 139684.98
(b) Cash on Hand at Beginning of Reporting Period	$ 310751.07	
(c) Total Receipts (from line 19)	$ 175010.25	$ 551515.46
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 485761.32	$ 691200.44
7. Total Disbursements (from Line 30)	$ 11561.16	$ 217000.28
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 474200.16	$ 474200.16
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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
Donna Borowicz

Signature of Treasurer
Donna Borowicz

Date
9/20/99

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of

FEC FORM 3
(revised 9/93)

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/81)

NAME OF COMMITTEE: American Institute of Certified Public Accountants Effective Legislation Committee

REPORT COVERING PERIOD FROM: 8/1/99 TO: 8/31/99

	COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts		
11. Contributions (other than loans) From:		
a. Individuals/Persons Other Than Political Committees		
i. Itemized (use Schedule A)		460.00
ii. Unitemized	174254.00	547765.51
iii. Total (add i and ii)	0 174254.00	548225.51
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contributions (add a iii, b and c)	0 174254.00	548225.51
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		712.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	756.25	2577.95
17. Other Federal Receipts (Dividends, Interest, etc.)		
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18)	175010.25	551515.46
20. Total Federal Receipts (subtract line 18 from line 19)	0 175010.25	551515.46
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share		
ii. Non-Federal Share		3110.86
b. Other Federal Operating Expenditures		3110.86
c. Total Operating Expenditures (Add a i, a ii, and b)	0	
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	11561.16	213889.42
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C 441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees		
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contribution Refunds (Add a, b and c)	0	
29. Other Disbursements		
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)	11561.16	217000.28
31. Total Federal Disbursements (subtract line 21 a ii from line 30)	0 11561.16	217000.28
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	174254.00	548225.51
33. Total Contribution Refunds (from line 28d)		
34. Net Contributions (other than loans)(subtract line 33 from 32)	174254.00	548225.51
35. Total Federal Operating Expenditures (add 21 a i and 21 b)	0	3110.86
36. Offsets to Operating Expenditures (from line 15)		
37. Net Operating Expenditures (subtract line 36 from 35)	0	3110.86

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule for each category of the Detailed Summary Page

PAGE 1 OF 1

FOR LINE NUMBER 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 a 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 Effective Legislation Committee FEC ID No. C-00077321

A. Full Name, Mailing Address and ZIP Code Bankers Trust Company 280 Park Avenue New York, NY	Name of Employer Occupation	Date (month, day, year) 8/31/99	Amount of Each Receipt this Period 756.25
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-To-Date	2577.95	
B. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-To-Date		
C. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-To-Date		
D. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-To-Date		
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-To-Date		
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-To-Date		
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-To-Date		

SUBTOTAL of Receipts This Page (optional)	756.25
TOTAL This Period (last page this line number only).	756.25

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 2

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
American Institute of Certified Public Accountants Effective Legislation Committee FEC ID No. C-00077321

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dan Burton for Congress P.O. Box 50593 Indianapolis, IN 46250	House Candidate, 6thIN Disbursement for: [X] Primary [ ] General [ ] Other (specify)	8/10/99	1000.00
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Friends of Sherrod Brown 607 14th Street, NW Washington, DC 20005	House Candidate,13thOH Disbursement for: [X] Primary [ ] General [ ] Other (specify)	8/10/99	1500.00
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Royce Campaign Committee P.O. Box 6765 Fullerton, CA 92834	House Candidate,39thCA Disbursement for: [X] Primary [ ] General [ ] Other (specify)	8/10/99	2000.00
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Fletcher for Congress P.O. Box 4703 Lexington, KY 40544	House Candidate, 6thKY Disbursement for: [X] Primary [ ] General [ ] Other (specify)	8/27/99	500.00
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Friends of Clay Shaw 2600 NE 14th St., Causeway Pompano Beach, FL 33062	House Candidate,22ndFL Disbursement for: [X] Primary [ ] General [ ] Other (specify)	8/27/99	1000.00
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Lee Terry for Congress P.O. Box 540098 Omaha, NE 68154	House Candidate, 2ndNE Disbursement for: [X] Primary [ ] General [ ] Other (specify)	8/27/99	1000.00
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Pirozzi for Congress P.O. Box 2303 Rancho Cucamonga, CA 91729	House Candidate,42ndCA Disbursement for: [ ] Primary [X] General [ ] Other (specify)	8/27/99	1000.00
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Mike Simpson for Congress 786 Hoff Drive Blackfoot, ID 83221	House Candidate, 2ndID Disbursement for: [X] Primary [ ] General [ ] Other (specify)	8/27/99	500.00
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Myrick for Congress P.O. Box 37091 Charlotte, NC 28237	House Candidate, 9thNC Disbursement for: [X] Primary [ ] General [ ] Other (specify)	8/27/99	1000.00

SUBTOTAL of Disbursements This Page (optional)	9500.00
TOTAL This Period (last page this line number only).	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 2

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
American Institute of Certified Public Accountants Effective Legislation Committee FEC ID No. C-00077321

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for:	Date (month, day, year)	Amount of Each Disbursement This Period
Sue Kelly for Congress 660 White Plains Road Tarrytown, NY 10591	House Candidate, 19thNY Disbursement for: [X] Primary [ ] General [ ] Other (specify)	8/27/99	1000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for:	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of J.C. Watts 4451 Brookfield Corporate Drive Chantilly, VA 20151	House Candidate, 4thOK Disbursement for: [X] Primary [ ] General [ ] Other (specify)	8/27/99	1000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for:	Date (month, day, year)	Amount of Each Disbursement This Period
Willard Hotel 1401 Pennsylvania Ave., NW Washington, DC 20004 (Reception for Jim Nussle)	House Candidate, 2ndIA Disbursement for: [X] Primary [ ] General [ ] Other (specify)	8/3/99	61.16 (IN-KIND)
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for:	Date (month, day, year)	Amount of Each Disbursement This Period
	[ ] Primary [ ] General [ ] Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for:	Date (month, day, year)	Amount of Each Disbursement This Period
	[ ] Primary [ ] General [ ] Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for:	Date (month, day, year)	Amount of Each Disbursement This Period
	[ ] Primary [ ] General [ ] Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for:	Date (month, day, year)	Amount of Each Disbursement This Period
	[ ] Primary [ ] General [ ] Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for:	Date (month, day, year)	Amount of Each Disbursement This Period
	[ ] Primary [ ] General [ ] Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for:	Date (month, day, year)	Amount of Each Disbursement This Period
	[ ] Primary [ ] General [ ] Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	2061.16
TOTAL This Period (last page this line number only).	11561.16

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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

☐	Hand Delivered	Date of Receipt
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 9/20/99
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

PREPARER	9/23/99 DATE PREPARED

(4/98)