

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

FEDERAL  
ELECTION  
OPERATIONS CENTER

2004 OCT 23 P 12:22

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) American Association for Marriage & Family Therapy Committee for the Advancement of Marital & Family Therapy		2. FEC IDENTIFICATION NUMBER C00198259
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 112 South Alfred Street		
CITY, STATE and ZIP CODE Alexandria, VA 22314		
3. <input type="checkbox"/> This committee has qualified as a multi-candidate committee. (see FEC FORM 114)		

### 4. TYPE OF REPORT

- 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:
- |                                      |                                       |                                      |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20      | <input type="checkbox"/> October 20  |
| <input type="checkbox"/> March 20    | <input type="checkbox"/> July 20      | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20    | <input type="checkbox"/> August 20    | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20      | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31  |
- 12-Day Pre-Election Report for the \_\_\_\_\_ (Type of Election) election on \_\_\_\_\_ in the State of \_\_\_\_\_
- 30-Day Post-Election Report following the General Election on \_\_\_\_\_ in the State of \_\_\_\_\_

Is this Report an Amendment?  YES  NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>7/01/2004</u> through <u>09/30/2004</u>		
6. (a) Cash on Hand January 1, 19 <u>2004</u>		\$ 19,142.50
(b) Cash on Hand at Beginning of Reporting Period	\$ 21,222.70	
(c) Total Receipts (from Line 19)	\$ 7,454.97	\$ 20,535.17
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 28,677.67	\$ 39,677.67
7. Total Disbursements (from Line 30)	\$ 8,950.00	\$ 19,950.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 19,727.67	\$ 19,727.67
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0.00	

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 David M. Bergman	Date 10/15/04
Signature of Treasurer 	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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

(revised 1/1/91)

NAME OF COMMITTEE A AMFT Committee for the Advancement of Marital & Family Therapy		REPORT COVERING PERIOD FROM 7/01/04 TO 9/30/04	
Receipts		COLUMN A Total This Period	COLUMN B Calendar Year
<b>11. Contributions (other than loans) From:</b>			
<b>a. Individuals/Persons Other Than Political Committees</b>			
i. Itemized (use Schedule A)			1100
ii. Unitemized	7,454.97	20,535.17	1100
iii. Total (add i and ii) >	7,454.97	20,535.17	1100
<b>b. Political Party Committees</b>			
<b>c. Other Political Committees (such as PACs)</b>			
<b>d. Total Contributions (add a (i), b and c) &gt;</b>	7,454.97	20,535.17	1100
<b>12. Transfers from Affiliated/Other Party Committee</b>			
<b>13. All Loans Received</b>			
<b>14. Loan Repayments Received</b>			
<b>15. Offsets to Operating Expenditures (Refunds, Rebates, etc.)</b>			
<b>16. Refunds of Contributions Made to Federal Candidates and Other Political Committees</b>			
<b>17. Other Federal Receipts (Dividends, Interest, etc.)</b>	0.00	0.00	1100
<b>18. Transfers from Nonfederal Account for Joint Activity</b>			
<b>19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) &gt;</b>	7,454.97	20,535.17	1100
<b>20. Total Federal Receipts (subtract line 18 from line 19) &gt;</b>	7,454.97	20,535.17	1100
<b>DISBURSEMENTS</b>			
<b>21. Operating Expenditures:</b>			
<b>a. Shared Federal/Non-Federal Activity (from Schedule H4)</b>			
i. Federal Share			
ii. Non-Federal Share			
<b>b. Other Federal Operating Expenditures</b>			
<b>c. Total Operating Expenditures (add a (i), a (ii), and b) &gt;</b>			1100
<b>22. Transfers to Affiliated/Other Party Committee</b>			
<b>23. Contributions to Federal Candidates/Committees and Other Political Committees</b>	8,850.00	19,850.00	1100
<b>24. Independent Expenditures (use Schedule E)</b>			
<b>25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)</b>			
<b>26. Loan Repayments Made</b>			
<b>27. Loans Made</b>			
<b>28. Refunds of Contributions To:</b>			
a. Individuals/Persons Other Than Political Committees			
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
<b>d. Total Contribution Refunds (add a, b and c) &gt;</b>	100.00	100.00	1100
<b>29. Other Disbursements</b>			
<b>30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) &gt;</b>	8,950.00	19,950.00	1100
<b>31. Total Federal Disbursements (subtract line 21 a (i) from line 30) &gt;</b>	8,950.00	19,950.00	1100
<b>NET CONTRIBUTIONS/OPERATING EXPENDITURES</b>			
<b>32. Total Contributions (other than loans) (from line 11d)</b>	7,454.97	20,535.17	1100
<b>33. Total Contribution Refunds (from line 28d)</b>	0.00	0.00	1100
<b>34. Net Contributions (other than loans) (subtract line 33 from line 32)</b>	7,454.97	20,535.17	1100
<b>35. Total Federal Operating Expenditures (add 21 a (i) and 21 b) &gt;</b>	0.00	0.00	1100
<b>36. Offsets to Operating Expenditures (from line 15)</b>			
<b>37. Net Operating Expenditures (subtract line 35 from line 36) &gt;</b>	0.00	0.00	1100

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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 contributors.

**NAME OF COMMITTEE (or Full):**  
 American Association for Marriage & Family Therapy  
 Committee for the Advancement of Marital and Family Therapy

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Known Employer MFT Program Texas Tech University Lubbock, TX 79409 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Individual Contribution Occupation: Marriage & Family Therapist Aggregate Year-to-Date: 2	9/14/04	200.00
B. Full Name, Mailing Address and ZIP Code Mary E. Jebara 2 Military Hill Drive Morristown, NJ 07960 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Individual Contribution Occupation: Marriage & Family Therapist Aggregate Year-to-Date: 1	8/26/04	500.00
C. Full Name, Mailing Address and ZIP Code Adrienne O'Neal 8708 Castle View Avenue Las Vegas, NV 89129 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Individual Contribution Occupation: Marriage & Family Therapist Aggregate Year-to-Date: 4	9/01/04	200.00
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation: Aggregate Year-to-Date: 0	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation: Aggregate Year-to-Date: 0	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation: Aggregate Year-to-Date: 0	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation: Aggregate Year-to-Date: 0	Date (month, day, year)	Amount of Each Receipt this Period

<b>SUBTOTAL of Receipts This Page (optional)</b>	900.00
<b>TOTAL This Period (last page this line number only)</b>	900.00

## SCHEDULE B

## ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary PagePAGE 1 OF 2  
FOR LINE NUMBER  
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## NAME OF COMMITTEE (in Full)

American Association for Marriage & Family Therapy  
Committee for the Advancement of Marital and Family Therapy

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Joe Wilson For Congress 929 Second St. NE Washington, DC 20002	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/16/04	\$500.00
B. Full Name, Mailing Address and ZIP Code Pete Stark RA-Electoral Committee P.O. Box 75214 Washington, DC 20013	Purpose of Disbursement Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/20/04	1,000.00
C. Full Name, Mailing Address and ZIP Code Congressman Joe Barton Committee P.O. Box 1444 Arling, TX 75120	Purpose of Disbursement Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/20/04	1,500.00
D. Full Name, Mailing Address and ZIP Code A Lot of People Supporting Tom Daschle 424 C St., N.E. 1st Floor Washington, DC 20002	Purpose of Disbursement Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/20/04	1,000.00
E. Full Name, Mailing Address and ZIP Code Pat Miller for Senator 47 South Meridian Street 2nd Floor Indianapolis, IN 46204	Purpose of Disbursement Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/20/04	250.00
F. Full Name, Mailing Address and ZIP Code Deal for Congress P.O. Box 902 Gainesville, GA 30503	Purpose of Disbursement Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/08/04	1,000.00
G. Full Name, Mailing Address and ZIP Code Master for Congress Committee P.O. Box 625 Batavia, IL 60510	Purpose of Disbursement Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/20/04	600.00
H. Full Name, Mailing Address and ZIP Code Lot of People who support Jeff Bingaman 10-B East Broad Street Ralis Church, VA 22046	Purpose of Disbursement Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/21/04	1,000.00
I. Full Name, Mailing Address and ZIP Code Walden for Congress 100 Box 1091 Hood River, OR 97031	Purpose of Disbursement Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/26/04	1,000.00

SUBTOTAL of Disbursements This Page (optional)

7,850.00

TOTAL This Period (last page this five number only)

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of line Detailed Schedule Page

PAGE 2 OF 2  
FOR LINE NUMBER 23

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**NAME OF COMMITTEE (in Full)**

American Association for Marriage & Family Therapy  
Committee for the Advancement of Marital and Family Therapy

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Blanche Lincoln 177 Maryland Ave., NE #30 Washington, DC 20002	Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/22/04	1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period

<b>SUBTOTAL</b> of Disbursements This Page (optional)	\$1,000.00
<b>TOTAL</b> This Period (last page this line number only)	\$8,350.00

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

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 10-15-04
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Express Mail	Delivery Confirmation™ Label <input type="checkbox"/>
<input type="checkbox"/> Postmark Illegible	Postmarked
<input type="checkbox"/> No Postmark	Shipping Date
<input type="checkbox"/> Overnight Delivery Service (Specify):	Date of Receipt
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>Jef</i> PREPARER	10-24-04 DATE PREPARED