PAGE 1 / 8

Image# 13960642672

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

			Offic	ce Use Only
NAME OF TYPE COMMITTEE (in full)	PE OR PRINT ▼	Example: If typing, typover the lines.	e 12FE4M5	
American Psychological As	ssociation Practice (Organization Political	Action Committee (APAPO-PAC)
<u> </u>				
ADDRESS (number and street)	PO Box 65353			
Check if different than previously reported. (ACC)	Washington	<u> </u>	DC 20	0035
2. FEC IDENTIFICATION NUME	BER ▼ CIT	- Y▲	STATE ▲	ZIP CODE ▲
C C00522094		S THIS X NEW (N)	OR AMEND	ED
4. TYPE OF REPORT (Choose One)	Report	20 (M2) May 20	O (M5) Aug 20 (M	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:		20 (M3) Jun 20		Year Only)
April 15 Quarterly Report (Q1)		20 (M4) Jul 20		
July 15 Quarterly Report (Q2)	(c) 12-Day PRE-Election Report for the:	Primary (12P) Convention (12C)	General (12G) Special (12S)	Runoff (12R)
October 15 Quarterly Report (Q3)		(120)	Openia: (120)	
January 31 Year-End Report (YE)	Election	on on	/	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election	General (30G)	Runoff (30R)	Special (30S)
Termination Report (TER)	Report for the:	on on	/	in the State of
5. Covering Period 11	/ D D / Y Y Y Y 2012	through	M = M / D = D / Y 12 31	2012
I certify that I have examined this F	Report and to the best of	my knowledge and belief	t is true, correct and con	nplete.
Type or Print Name of Treasurer	Craig Engle			
Signature of Treasurer Craig Eng	gle	[Electronically Filed]	Date 01 /	31 / 2013
NOTE: Submission of false, erroneous	s, or incomplete informatio	n may subject the person sig	ning this Report to the pe	nalties of 2 U.S.C. §437g.
Office Use Only			F	EC FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

American Psychological Association Practice Organization Political Action Committee (APAPO-PAC)

27 2012 Report Covering the Period: 2012 12 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 0.00 January 1, 2012 (b) Cash on Hand at 48875.02 Beginning of Reporting Period..... 93256.90 2286.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 51161.02 93256.90 6(a) and 6(c) for Column B)..... 1543.13 43639.01 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 49617.89 49617.89 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 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 Psychological Association Practice Organization Political Action Committee (APAPO-PAC)

Report Covering the Period: From: 11	27 2012 To	: 12 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	0.00	7161.00
(i) Itemized (use Schedule A)	7 7	
(ii) Unitemized	1885.00	37749.00
(iii) TOTAL (add	, , , , , , , , , , , , , , , , , , , ,	
Lines 11(a)(i) and (ii)▶	1885.00	44910.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(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)▶	1885.00	44910.00
2. Transfers From Affiliated/Other	7	
Party Committees	401.00	48275.40
,	7	
3. All Loans Received	0.00	0.00
	, , , , , , , , , , , , , , , , , , , ,	
Loan Repayments Received	0.00	0.00
5. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	71.50
6. Refunds of Contributions Made		
to Federal Candidates and Other	0.00	0.00
Political Committees	0.00	0.00
(Dividends, Interest, etc.)	0.00	0.00
B. Transfers from Non-Federal and Levin Funds	0.00	0.00
(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
9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	2286.00	93256.90
) Total Enderal Descripts		
). Total Federal Receipts (cubtract Line 18(c) from Line 19)	2286.00	02256 00
(subtract Line 18(c) from Line 19)▶	2200.00	93256.90

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	erating Expenditures: Allocated Federal/Non-Federal	1000 11100	Valendai Tear-to-Date
(4)	Activity (from Schedule H4)		
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
(b)	Other Federal Operating		
	Expenditures	43.13	739.01
(c)	Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	43.13	739.01
Tra	Insfers to Affiliated/Other Party		
Çoi	mmitteesntributions to	0.00	0.00
Fed and	deral Candidates/Committees d Other Political Committees	1500.00	42900.00
	ependent Expenditures	0.00	0.00
Co	e Schedule E)ordinated Party Expenditures	0.00	0.00
(2 (us	U.S.C. §441a(d)) e Schedule F)	0.00	0.00
Loa	an Repayments Made	0.00	0.00
Loa Ref	ans Madefunds of Contributions To:	0.00	0.00
	Individuals/Persons Other Than Political Committees	0.00	0.00
(b)	Political Party Committees	0.00	0.00
(c)	Other Political Committees		0.00
	(such as PACs)	0.00	0.00
(d)	Total Contribution Refunds		
	(add Lines 28(a), (b), and (c)) ▶	0.00	0.00
Oth	ner Disbursements	0.00	0.00
For	deral Floation Activity (2.11.5.0. \$421/20)		
	deral Election Activity (2 U.S.C. §431(20)) Allocated Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	·	200	0.00
(h)	(ii) "Levin" Share Federal Election Activity Paid Entirely	0.00	0.00
(b)	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
	al Disbursements (add Lines 21(c), 22,	1510.10	
23,	24, 25, 26, 27, 28(d), 29 and 30(c))	1543.13	43639.01
	al Federal Disbursements		
	btract Line 21(a)(ii) and Line 30(a)(ii)		10000 21
tror	m Line 31)	1543.13	43639.01

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
3. Total Contributions (other than loans) (from Line 11(d), page 3)	1885.00	44910.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1885.00	44910.00
i. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	43.13	739.01
. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	71.50
. Net Operating Expenditures (subtract Line 37 from Line 36)	43.13	667.51

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 OF 8 (check only one)
Any information copied from such Reports and S or for commercial purposes, other than using the		ay not be sold or used by any p	
NAME OF COMMITTEE (In Full) American Psychological Associati	on Practio	ce Organization Political	Action Committee (APAPO-PAC)
Full Name (Last, First, Middle Initial) ASSOCIATION FOR THE ADVANCEMENT OF PSYCHOLOGY Mailing Address PO BOX 38129 City COLORADO SPRINGS FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary Other (specify) General Other (specify)	State CO C CO Occupation	Zip Code 80937 0002956	Date of Receipt 11 28 2012 Transaction ID: SA12.5318 Amount of Each Receipt this Period 371.00 Transfer of Affilated PAC Funds
Full Name (Last, First, Middle Initial) ASSOCIATION FOR THE ADVANCEMENT OF PSYCHOLOG Mailing Address PO BOX 38129 City COLORADO SPRINGS FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State CO C COCCUpation	Zip Code 80937 0002956	Date of Receipt 12
Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) Other (specify)	State C Occupation Aggregate	Zip Code Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)			401.00

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

401.00

S ľ

SC	CHEDULE B (FEC Form 3X)			FOR LINE	NUMBER:		PAGE	7 C)F 8
ITI	EMIZED DISBURSEMENTS	Use separate for each cate		(check only	one)				
		Detailed Sum		X 21b	22	23	24	25	26
_				27	28a	28b	28c	29	30b
	y information copied from such Reports and Staten for commercial purposes, other than using the nam								
	NAME OF COMMITTEE (In Full)								
	American Psychological Association I	Practice Org	ganization	Political Ad	ction Com	mittee	(APAPC)-PAC	C)
_	Full Name (Last, First, Middle Initial)								
Α.	PayPal				Date of Disbursement				
	Mailing Address 2211 N. First St.				12	11		2012	Y
	City	State Zip	Code						
	San Jose		131		Transac	tion ID : S	SB21B.531	9	
	Purpose of Disbursement Bank Fees				Amount o	f Each Dis	sbursemer	nt this F	Period
	Candidate Name			Category/					00
				Туре		7	7	30.	.00
	Office Sought: House Disbursen		¬ • •						
		Primary Other (enecify)	General						
	State: District:	Other (specify)	•						
_	Full Name (Last, First, Middle Initial)								
В.	PayPal					isburseme			
	Mailing Address 2211 N. First St.				12	31		2012	Y
	City	State Zip	Code		-		2D04D 504		
	San Jose		131		Iransac	tion ID : S	SB21B.536	18	
	Purpose of Disbursement Credit Card Processing Fees				Amount o	f Each Dis	sbursemer	nt this F	Period
	Candidate Name			Category/				40	10
				Type		7	-	13	.13
	Office Sought: House Disbursen		¬						
		Primary	General						
	State: District:	Other (specify)	•						
_	Full Name (Last, First, Middle Initial)								
C.						isburseme			
	Mailing Address				M = M	/ D D	/ Y	Y	Y
	City S	State Zip	Code						
	Purpose of Disbursement								
	Candidate Name			Category/	Amount o	f Each Dis	sbursemer	nt this P	Period
	Office County			Type		7	7		
	Office Sought: House Disbursen Senate	nent For: Primary	General						
		Other (specify)							
	State: District:	Calci (Specify)	▼						
Г									
۱ ,	UBTOTAL of Disbursements This Page (optional)							43.	13
dash					-	1	7		
Т	OTAL This Period (last page this line number only)							43.	13

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 Psychological Association Practice Organization Political Action Committee (APAPO-PAC) Full Name (Last, First, Middle Initial) A. FRIENDS OF MARY LANDRIEU INC Mailing Address 700 13TH STREET NW SUITE 600 City WASHINGTON Purpose of Disbursement Contribution Candidate Name MARY L LANDRIEU Office Sought: House Senate President State: LA District: 00 Full Name (Last, First, Middle Initial) Frimary General Other (specify) Full Name (Last, First, Middle Initial) Amount of Each Disbursement this Period Tansaction ID: SB23.5315 Amount of Each Disbursement this Period Tother (specify) Type Other (specify) Full Name (Last, First, Middle Initial)	SCHEDULE B (FEC Form 3X)	Harrison I I I I I I	FOR LINE	NUMBER:	PAGE 8 OF 8			
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 Psychological Association Practice Organization Political Action Committee (APAPO-PAC) Full Name (Last, First, Middle Initial) 1. FRIENDS OF MARY LANDRIEU INC Malling Address 700 13TH STREET NW SUITE 600 City State Disbursement Category/ Office Sought: House President State: Disbursement Category/ Type Office Sought: Full Name (Last, First, Middle Initial) Date of Disbursement Category/ Type Office Sought: Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category/ Type Office Sought: House President State: Disbursement Office Sought: Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category/ Type Office Sought: Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category/ Type Office Sought: House President Disbursement For: Senate President Other (specify) ▼ Amount of Each Disbursement this Period Category/ Type Office Sought: House President Disbursement For: Senate Premary General Other (specify) ▼ Amount of Each Disbursement this Period Category/ Type Office Sought: Amount of Each Disbursement this Period Category/ Type Office Sought: Amount of Each Disbursement this Period Category/ Type Office Sought: Amount of Each Disbursement this Period Category/ Type Office Sought: Amount of Each Disbursement this Period Category/ Type Office Sought: Amount of Each Disbursement this Period Category/ Type Office Sought: Amount of Each Disbursement this Period Category/ Type Office Sought: Amount of Each Disbursement this Perio	ITEMIZED DISBURSEMENTS		(check only 21b	one) 22 X 23				
Amount of Each Disbursement Candidate Name Categoryi Pull Name (Last, First, Middle Initial) Amailing Address City Purpose of Disbursement Candidate Name City State: District: District: District: District: Disbursement Candidate Name Categoryi Type Office Sought: House President State: District: District:								
A FRIENDS OF MARY LANDRIEU INC Mailing Address 700 13TH STREET NW SUITE 600 City State Zip Code Disbursement Contribution Candidate Name MARY LANDRIEU Office Sought: House President State: LA District: Other (specify) Full Name (Last, First, Middle Initial) Amount of Each Disbursement Candidate Name Candidate Name Candidate Name City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House President Senate President Senate President Candidate Name Category/ Type Amount of Each Disbursement this Period Category/ Type Amount of Each Disbursement Category/ Type Office Sought: House Senate Primary General President State: Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President State: Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Amount of Each Disbursement this Period Category/ Type Office Sought: House Senate Primary General Contribution Category/ Type Amount of Each Disbursement this Period Category/ Type City State Zip Code	NAME OF COMMITTEE (In Full)							
Mailing Address 700 13TH STREET NW SUITE 600 City WASHINGTON DC 20005 Purpose of Disbursement Contribution Candidate Name MARY LANDRIEU Office Sought: House President State: Zip Code Purpose of Disbursement For: 2014 Full Name (Last, First, Middle Initial) Amount of Each Disbursement this Period Type Office Sought: House President Candidate Name Category/ Type Office Sought: Disbursement For: 2014 Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: 2014 Senate President Other (specify) ▼ Full Name (Last, First, Middle Initial) Category/ Type Office Sought: House Disbursement For: Category/ Type Office Sought: President Other (specify) ▼ Full Name (Last, First, Middle Initial) Candidate Name Category/ Type Office Sought: President Other (specify) ▼ Amount of Each Disbursement Type Category/ Type Office Sought: House Disbursement For: Category/ Category/ Type Office Sought: House Disbursement Type Category/ Category/ Type Office Sought: House Disbursement For: Category/ Category/ Category/ Category/ Type Office Sought: House Disbursement For: Category/ Category/ Category/ Category/ Category/ Type Office Sought: House Disbursement For: Category/ Category/ Category/ Category/ Category/ Category/ Type Office Sought: House Disbursement For: Category/ C	_	10		Data of Dishurasma	ant			
Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Candidate Name Candidate Name City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Candidate Name City State Zip Code Primary General Other (specify) City State Zip Code Purpose of Disbursement Candidate Name Candidate	A. FRIENDS OF MARY LANDRIEU IN	IENDS OF MARY LANDRIEU INC						
WASHINGTON DC 20005 Purpose of Disbursement Contribution Cardidate Name MARY L LANDRIEU Office Sought: House Senate Primary General Clast, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Clast, First, Middle Initial) State: District: District: District: Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Other (specify) ▼ Date of Disbursement this Period Category/ Type District: D	SUITE 600			7 1 1 1 1 1 1				
Purpose of Disbursement Candidate Name MARY L LANDRIEU Office Sought:				Transaction ID:	SB23.5315			
Candidate Name MARY L LANDRIEU Office Sought:	Purpose of Disbursement	2 25555						
MARY L LANDRIEU Office Sought: House Disbursement For: 2014 Primary General President State: LA District: 00 Disbursement For: 2014 Primary General Date of Disbursement Date of Disburs				Amount of Each Di	sbursement this Period			
Office Sought:					1500.00			
Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Other (specify) ▼ Date of Disbursement Amount of Each Disbursement this Period Category/ Type Amount of Each Disbursement Amount of Each Disbursement Category/ Type Office Sought: House Disbursement For: Senate Primary General Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ State: District:	Senate President	Primary General	,,					
Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Candidate Name City State Zip Code Purpose of Disbursement Candidate Name City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ Amount of Each Disbursement Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: District: President State: Disbursement For: General Other (specify) ▼	Full Name (Last, First, Middle Initial)							
Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Senate Primary General President State: District: Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Date of Disbursement Category/ Type Amount of Each Disbursement this Period Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Senate Primary General Office Sought: House Disbursement For: Senate Primary General Office Sought: Other (specify) ▼ State: District:	В.			Date of Disburseme	ent			
Purpose of Disbursement Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Date of Disbursement Category/ Type Amount of Each Disbursement this Period Category/ Type Office Sought: House Primary General Other (specify) ▼ State: District: State: District: Disbursement For: General Other (specify) ▼ State: District: Disbursement For: General Other (specify) ▼	Mailing Address		M M / D D / Y Y Y Y					
Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Amount of Each Disbursement this Period Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Primary General Other (specify) State: District:	City	State Zip Code						
Candidate Name Category/ Type Office Sought:	Purpose of Disbursement	Purpose of Disbursement						
Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: State: District:	Candidate Name			Amount of Each Di	soursement this Period			
Date of Disbursement Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District:	Senate President	Primary General						
Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) ▼ State: District:	Full Name (Last, First, Middle Initial)			Date of Dishurseme	ant			
City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: State Zip Code Amount of Each Disbursement this Period Category/ Type Afron 00								
Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: Amount of Each Disbursement this Period Category/ Type Amount of Each Disbursement this Period Category/ Type	Mailing Address							
Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: Amount of Each Disbursement this Period Category/ Type Amount of Each Disbursement this Period	City	State Zip Code						
Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District:	Purpose of Disbursement							
Office Sought: House Senate Primary General Other (specify) ▼ State: District:	Candidate Name							
SUBTOTAL of Disbursements This Page (optional)	Senate President	Primary General						
SOBTOTAL OF DISDUISERIETES THIS Page (optional)	SURTOTAL of Dishursomente This Dage (entianel)				1500.00			
	SUBTUTAL OF DISDUISEMENTS THIS Page (optional)		······	7				