

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.
Academy of Nutrition and Dietetics Political Action Committee

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

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

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 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 / / 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 / / through / /

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 Paul A Mifsud

Signature of Treasurer Paul A Mifsud [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Academy of Nutrition and Dietetics 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="2014"/>		237994.48
(b) Cash on Hand at Beginning of Reporting Period.....	215732.98	
(c) Total Receipts (from Line 19)	4607.67	94575.42
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	220340.65	332569.90
7. Total Disbursements (from Line 31).....	264.15	112493.40
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	220076.50	220076.50
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

Academy of Nutrition and Dietetics Political Action Committee

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

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).....	2105.00	25637.56
(ii) Unitemized	2502.67	68937.86
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	4607.67	94575.42
(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)	4607.67	94575.42
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))..... ▶	4607.67	94575.42
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	4607.67	94575.42

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	264.15	38343.40
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	264.15	38343.40
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	74150.00
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)) ..	264.15	112493.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	264.15	112493.40

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)	4607.67	94575.42
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4607.67	94575.42
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	264.15	38343.40
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	264.15	38343.40

**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 10
	<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
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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)
Academy of Nutrition and Dietetics Political Action Committee

A. Dr. Nancy M Lewis RDN
 Full Name (Last, First, Middle Initial)
 Mailing Address 342 Leeward Dr
 City Stokesdale State NC Zip Code 27357-8655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University Of Northern Co Occupation Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 07 / 18 / 2014
Transaction ID : A34582BB46BFA4BD28B3
 Amount of Each Receipt this Period 250.00

B. Ms. Karen T Bellesky
 Full Name (Last, First, Middle Initial)
 Mailing Address 1111 N Charles St
 City Baltimore State MD Zip Code 21201-5505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Chase Brexton Occupation Nutrition Coordinator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 07 / 22 / 2014
Transaction ID : ACF6A0D26554B4FEEAB9
 Amount of Each Receipt this Period 765.00

C. Ms. Patricia Q Samour
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 W Parish Ct
 City Haverhill State MA Zip Code 01832-1163
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Beth Israel Deaconess Med Occupation Program Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 29 / 2014
Transaction ID : A2B7E2C10534A4F35A0E
 Amount of Each Receipt this Period 150.00

SUBTOTAL of Receipts This Page (optional).....▶	1165.00
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 7 OF 10
	<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)
Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial) A. Ms. Susan B Foerster MPH		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 31 / 2014 Transaction ID : A59ED0EE0114C45709E1
Mailing Address 5937 Sarah Ct		Amount of Each Receipt this Period 100.00
City Carmichael	State CA	Zip Code 95608-5554
FEC ID number of contributing federal political committee.	C	
Name of Employer California Dept. of Public Health	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) B. Paul A Mifsud		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 31 / 2014 Transaction ID : A883AD91B8AEC44D98D5
Mailing Address 120 S Riverside Plz Ste 2000		Amount of Each Receipt this Period 50.00
City Chicago	State IL	Zip Code 60606-6995
FEC ID number of contributing federal political committee.	C	
Name of Employer Academy Of Nutrition And	Occupation Chief Financial Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 355.00	

Full Name (Last, First, Middle Initial) C. Ms. Jeanne Blankenship RDN		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 31 / 2014 Transaction ID : AE26A706C38274C89BC1
Mailing Address 1120 Connecticut Ave NW Ste 480		Amount of Each Receipt this Period 100.00
City Washington	State DC	Zip Code 20036-3989
FEC ID number of contributing federal political committee.	C	
Name of Employer Academy Of Nutrition And	Occupation Vp, Policy Initiatives &	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 975.00	

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 8 OF 10
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Academy of Nutrition and Dietetics Political Action Committee

A. Ms. Virginia J Dantone-DeBarbieris
 Full Name (Last, First, Middle Initial)
 Mailing Address 112 River Oaks Dr
 City La Place State LA Zip Code 70068-7100
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Nutrition Education Resources Occupation CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **07 / 31 / 2014**
Transaction ID : A1A1332A6143D436E833
 Amount of Each Receipt this Period **225.00**

B. Mrs. Marcia A Kyle
 Full Name (Last, First, Middle Initial)
 Mailing Address 146 Mystic Ave
 City Rockport State ME Zip Code 04856-5730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Penbay Healthcare Occupation Clinical Dietitian Nutritionist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **420.00**

Date of Receipt **07 / 31 / 2014**
Transaction ID : AD1AD4314752B4B329AB
 Amount of Each Receipt this Period **25.00**

C. Mrs. Denise A Andersen
 Full Name (Last, First, Middle Initial)
 Mailing Address 1411 Farmdale Rd
 City Saint Paul State MN Zip Code 55118-2739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Private Consultant Occupation Rd
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1010.00**

Date of Receipt **07 / 31 / 2014**
Transaction ID : A537B5B6C479744CC93B
 Amount of Each Receipt this Period **250.00**

SUBTOTAL of Receipts This Page (optional).....	500.00
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 9 OF 10
(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)
Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)
A. Ms. Trisha Fuhrman

Mailing Address 1932 Prospector Ridge Dr

City Ballwin	State MO	Zip Code 63011-4808
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FEC ID number of contributing federal political committee. **C**

Name of Employer Malnutrition Antagonists	Occupation Rd
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1013.89

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2014

Transaction ID : AE05B033DB2E6464F8FE

Amount of Each Receipt this Period
90.00

Full Name (Last, First, Middle Initial)
B. Mrs. Debra L King

Mailing Address 8045 Key Largo

City Belton	State TX	Zip Code 76513-5770
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FEC ID number of contributing federal political committee. **C**

Name of Employer Crown Consulting	Occupation CEO
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2014

Transaction ID : AC14123D90816469FB98

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C.

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
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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
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Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	190.00
TOTAL This Period (last page this line number only).....▶	2105.00

**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

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NAME OF COMMITTEE (In Full)
Academy of Nutrition and Dietetics Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mrs. Roberta A Cooper-Meyer

Mailing Address 1208 Knollwood Rd

City State Zip Code
Deerfield IL 60015-3338

Purpose of Disbursement
ANDPAC Expense Reimbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 01 / 2014

Transaction ID : B431E6CD9A1E84743BED

Amount of Each Disbursement this Period

264.15

Full Name (Last, First, Middle Initial)

B. Hyatt Regency St. Louis at the Arch

Mailing Address PO Box 204134

City State Zip Code
Dallas TX 75320-4134

Purpose of Disbursement
ANDPAC Booth Electrical Charges

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 28 / 2014

Transaction ID : B2652469672674A6D8AC

Amount of Each Disbursement this Period

-101.49

Full Name (Last, First, Middle Initial)

C. Hyatt Regency St. Louis at the Arch

Mailing Address PO Box 204134

City State Zip Code
Dallas TX 75320-4134

Purpose of Disbursement
ANDPAC Booth Electrical Charges

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 28 / 2014

Transaction ID : B74282402525D4ACEAEA

Amount of Each Disbursement this Period

101.49

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

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

264.15

264.15