

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

Airports Council International-North America PAC

ADDRESS (number and street)

1615 L St NW

Suite 300

☐ Check if different than previously reported. (ACC)

Washington

DC

20036

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00341800

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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☒ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

DC

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

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 Kevin Burke

Signature of Treasurer

Kevin Burke

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

FEC FORM 3X

Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Airports Council International-North America PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
10		01		2014

To:

M M	/	D D	/	Y Y Y Y Y
11		24		2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2014</td></tr></table>	Y	Y	Y	Y	Y	2014						<table><tr><td colspan="5">58068.59</td></tr></table>	58068.59				
Y	Y	Y	Y	Y													
2014																	
58068.59																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">45204.38</td></tr></table>	45204.38															
45204.38																	
(c) Total Receipts (from Line 19)	<table><tr><td colspan="5">2250.06</td></tr></table>	2250.06					<table><tr><td colspan="5">30812.73</td></tr></table>	30812.73									
2250.06																	
30812.73																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">47454.44</td></tr></table>	47454.44					<table><tr><td colspan="5">88881.32</td></tr></table>	88881.32									
47454.44																	
88881.32																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">301.28</td></tr></table>	301.28					<table><tr><td colspan="5">41728.16</td></tr></table>	41728.16									
301.28																	
41728.16																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td colspan="5">47153.16</td></tr></table>	47153.16					<table><tr><td colspan="5">47153.16</td></tr></table>	47153.16									
47153.16																	
47153.16																	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5"></td></tr></table>																
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5"></td></tr></table>																



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)

Page 3

Write or Type Committee Name

Airports Council International-North America PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	4		2	0	1	4

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).....	1995.06	23499.73
(ii) Unitemized	255	6313
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2250.06	29812.73
(b) Political Party Committees		
(c) Other Political Committees (such as PACs).....		1000
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ▶	2250.06	30812.73
12. Transfers From Affiliated/Other Party Committees.....		
13. All Loans Received		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17. Other Federal Receipts (Dividends, Interest, etc.).....		
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)		
(b) Levin Funds (from Schedule H5)		
(c) Total Transfers (add 18(a) and 18(b))..		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ▶	2250.06	30812.73
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ▶	2250.06	30812.73

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
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures	301.28	728.16
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	301.28	728.16
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		41000
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (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 Lines 28(a), (b), and (c)).....		
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	301.28	41728.16
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	301.28	41728.16

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)	2250.06	30812.73
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2250.06	30812.73
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	301.28	728.16
37. Offsets to Operating Expenditures (from Line 15, page 3).....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	301.28	728.16

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 6 OF 10

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

Airports Council International-North America PAC

Full Name (Last, First, Middle Initial)

A. Ms Ann Bellavia

Mailing Address 619 North Edison Street

City State Zip Code
 Arlington VA 22203

FEC ID number of contributing federal political committee.

C

Name of Employer

ACI-NA

Occupation

Senior Director of Govmt Affairs

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

591

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : SA11Ai-CNP1922

Amount of Each Receipt this Period

63

3 Payroll Deduction(s)

Full Name (Last, First, Middle Initial)

B. Kevin BurkeMailing Address 1615 L Street NW
Suite 300

City State Zip Code
 Washington DC 20036

FEC ID number of contributing federal political committee.

C

Name of Employer

ACI-NA

Occupation

CEO

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2423.8

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : SA11Ai-CNP1932

Amount of Each Receipt this Period

326.07

3 Payroll Deduction(s)

Full Name (Last, First, Middle Initial)

C. Matthew Cornelius

Mailing Address 3205 6th Street South

City State Zip Code
 Arlington VA 22204

FEC ID number of contributing federal political committee.

C

Name of Employer

Airports Council International

Occupation

Managing Director Of Air Policy

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 14 / 2014

Transaction ID : SA11Ai-CNP1923

Amount of Each Receipt this Period

45

3 Payroll Deduction(s)

SUBTOTAL of Receipts This Page (optional)..... ►

434.07

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 7 OF 10
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Airports Council International-North America PAC

Full Name (Last, First, Middle Initial)

A. Mr. Greg Cota

Mailing Address 627 Williams Dr

City State Zip Code
 Alexandria VA 22307

FEC ID number of contributing
federal political committee.

C

Name of Employer

ACI-NA

Occupation

Director of Government Affairs

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441

Date of Receipt

11 / 14 / 2014

Transaction ID : SA11Ai-CNP1928

Amount of Each Receipt this Period

63

3 Payroll Deduction(s)

Full Name (Last, First, Middle Initial)

B. Mr. Tom Devine

Mailing Address 1233 Shenandoah Rd.

City State Zip Code
 Alexandria VA 22308

FEC ID number of contributing
federal political committee.

C

Name of Employer

ACI-NA

Occupation

General Counsel

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500

Date of Receipt

11 / 14 / 2014

Transaction ID : SA11Ai-CNP1930

Amount of Each Receipt this Period

300

3 Payroll Deduction(s)

Full Name (Last, First, Middle Initial)

C. George Kelemen

Mailing Address 6896 View Park Drive

City State Zip Code
 Burke VA 22015

FEC ID number of contributing
federal political committee.

C

Name of Employer

ACI-NA

Occupation

Senior VP of Government and Political

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1171

Date of Receipt

11 / 14 / 2014

Transaction ID : SA11Ai-CNP1927

Amount of Each Receipt this Period

135

3 Payroll Deduction(s)

SUBTOTAL of Receipts This Page (optional)..... ►

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

498.00

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

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Airports Council International-North America PAC

Full Name (Last, First, Middle Initial)

A. Deborah McElroy

Mailing Address 5511 Pt. Longstreet Way

City State Zip Code
Burke VA 22015

FEC ID number of contributing
federal political committee.

C

Name of Employer

ACI-NA

Occupation

Executive Vice President

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4374.93

Date of Receipt

11 / 14 / 2014

Transaction ID : SA11Ai-CNP1924

Amount of Each Receipt this Period

624.99

3 Payroll Deduction(s)

Full Name (Last, First, Middle Initial)

B. Mr. Christopher Oswald

Mailing Address 9562 Ament Street

City State Zip Code
Silver Spring MD 20910

FEC ID number of contributing
federal political committee.

C

Name of Employer

ACI-NA

Occupation

VP Safety and Operations

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100

Date of Receipt

11 / 14 / 2014

Transaction ID : SA11Ai-CNP1925

Amount of Each Receipt this Period

300

3 Payroll Deduction(s)

Full Name (Last, First, Middle Initial)

C. Mr. Nathan Pick

Mailing Address 6219 18th Rd. N

City State Zip Code
Arlington VA 22205

FEC ID number of contributing
federal political committee.

C

Name of Employer

ACI-NA

Occupation

Director Of Advocacy

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541

Date of Receipt

11 / 14 / 2014

Transaction ID : SA11Ai-CNP1929

Amount of Each Receipt this Period

63

3 Payroll Deduction(s)

SUBTOTAL of Receipts This Page (optional)..... ►

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

987.99

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 9 OF 10

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Airports Council International-North America PAC

Full Name (Last, First, Middle Initial)

A. Katherine Preston

Mailing Address 1435 Parkwood Place NW

City
Washington

State Zip Code
DC 20010

FEC ID number of contributing
federal political committee.

C

Name of Employer

ACI-NA

Occupation

Senior Director Environmental Affairs

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 14 / 2014

Transaction ID : SA11Ai-CNP1926

Amount of Each Receipt this Period

75

3 Payroll Deduction(s)

Full Name (Last, First, Middle Initial)

B.

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

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

75.00

1995.06

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 10

<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)

Airports Council International-North America PAC

Full Name (Last, First, Middle Initial)

A. Merchant Services

Mailing Address 7300 Chapman Hwy

City	State	Zip Code
Knoxville	TN	37920

Purpose of Disbursement
processing fee

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2014

Transaction ID : SB21b-EX462

Amount of Each Disbursement this Period

137.91

processing fee

Full Name (Last, First, Middle Initial)

B. Merchant Services

Mailing Address 7300 Chapman Hwy

City	State	Zip Code
Knoxville	TN	37920

Purpose of Disbursement
processing fee

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2014

Transaction ID : SB21b-EX464

Amount of Each Disbursement this Period

28.27

processing fee

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P.O. Box 981540

City	State	Zip Code
El Paso	TX	79998

Purpose of Disbursement
credit card processing fee

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2014

Transaction ID : SB21b-EX463

Amount of Each Disbursement this Period

135.10

credit card processing fee

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

301.28

301.28
