

2010 FEB 16 PM 12:23

**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

AMERICAN ASSOCIATION FOR RESPIRATORY CARE
POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 9425 N. MACARTHUR BLVD SUITE 100

Check if different than previously reported. (ACC) Myville TX 75063-4706

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

C00150201

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 MM/DD/YYYY in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on MM/DD/YYYY in the State of

5. Covering Period 07/01/2009 through 02/31/2009

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 Richard A. Prince

ASST Signature of Treasurer [Signature] Date 01/29/2009

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 table with 8 empty columns.

FEC FORM 3X
Rev. 12/2004

10030250734

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name **AARCPAC**
American Association for Respiratory Care

Report Covering the Period: From: **07 01 2009** To: **12 31 2009**

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2009	100,263.54	100,263.54
(b) Cash on Hand at Beginning of Reporting Period.....	97,843.05	
(c) Total Receipts (from Line 19).....	67,229.6	7,192.98
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	104,566.01	107,456.52
7. Total Disbursements (from Line 31).....	52,768.88	8,167.39
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	99,289.13	99,289.13
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).....		

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

10030250735

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

AARC PAC

Report Covering the Period: From:

07 / 01 / 2009

To:

12 / 31 / 2009

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).....
 - (ii) Unitemized.....
 - (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

6,641.50
6,641.50

7,047.48
7,047.48

- (b) Political Party Committees.....
- (c) Other Political Committees (such as PACs).....
- (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

6,641.50

7,047.48

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.).....

81.46

145.50

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)).....▶

6,722.96

7,192.98

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

6,722.96

7,192.98

10030250736

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

10030250737

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	5,276.88	8,167.39	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))			
22. Transfers to Affiliated/Other Party Committees.....			
23. Contributions to Federal Candidates/Committees and Other Political Committees.....			
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))..	5,276.88	8,167.39	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5,276.88	8,167.39	

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)	6,641.50	7,047.48
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6,641.50	7,047.48
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	5,276.88	8,167.39
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5,276.88	8,167.39

10030250738

**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)						PAGE	OF
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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) **AARC PAC**
American Association for Reproductive Care

A.

Full Name (Last, First, Middle Initial) *Co-Merica Bank*

Mailing Address *PO Box 650282*

City *Dallas* State *Tx* Zip Code *75265*

Purpose of Disbursement *Bank Charges*

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement *07/31/2009*

Amount of Each Disbursement this Period *589.8*

Category/Type

B.

Full Name (Last, First, Middle Initial) *Co-Merica Bank*

Mailing Address *Same*

City State Zip Code

Purpose of Disbursement *Bank Charges*

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement *08/31/2009*

Amount of Each Disbursement this Period *6835*

Category/Type

C.

Full Name (Last, First, Middle Initial) *Co-Merica Bank*

Mailing Address *Same*

City State Zip Code

Purpose of Disbursement *Bank Charges*

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement *09/30/2009*

Amount of Each Disbursement this Period *6790*

Category/Type

SUBTOTAL of Disbursements This Page (optional).....▶ *19523*

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

10030250739

**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)

PAGE OF

<input 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) **AARC PAC**
American Association For Respiratory Care

Full Name (Last, First, Middle Initial)

A. Commerce Bank

Mailing Address

City State Zip Code

Purpose of Disbursement
Bank Charges

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

10 / 31 / 2009

Amount of Each Disbursement this Period

52.00

B. Compass Bank

Mailing Address

9090 Skillman
City Dallas State TX Zip Code 75243

Purpose of Disbursement
Bank Charges

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

10 / 31 / 2009

Amount of Each Disbursement this Period

14.00

C. Dollar General Store #03286

Mailing Address

1735 N. Stacy Road Ste 122
City Irving State TX Zip Code 75061-1831

Purpose of Disbursement
AARC PAC Raffle Gift bags

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

10 / 30 / 2009

Amount of Each Disbursement this Period

32.5

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

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

69.25

10030250740

**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)

PAGE OF

<input 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) **AAAC PAC**
American Association for Respiratory Care

Full Name (Last, First, Middle Initial)

A. Freeman Decorating

Mailing Address: **ATTN: AA PO Box 650036**
City: **Dallas** State: **TX** Zip Code: **75265-0036**

Purpose of Disbursement: **2009 PAC Convention Expenses**

Candidate Name: _____

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

Date of Disbursement: **12/31/2009**

Amount of Each Disbursement this Period: **212.40**

B. Friends of Bo Watson

Mailing Address: **1208 East Dallas Road**
City: **Chattanooga** State: **TN** Zip Code: **37425**

Purpose of Disbursement: **Contribution**

Candidate Name: **Bo Watson**

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

Date of Disbursement: **07/29/2009**

Amount of Each Disbursement this Period: **1,000.00**

C. Debra Maggart For State Rep

Mailing Address: **112 Labor Drive**
City: **Hendersonville** State: **TN** Zip Code: **37075**

Purpose of Disbursement: **Contribution**

Candidate Name: **Debra Maggart**

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

Date of Disbursement: **07/29/2009**

Amount of Each Disbursement this Period: **1,000.00**

SUBTOTAL of Disbursements This Page (optional)..... **2,212.40**

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

10030250741

**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)

PAGE OF

<input 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) **AARCPAC**

American Association For Respiratory Care

Full Name (Last, First, Middle Initial)

Date of Disbursement

A. Mike Ross For Congress

08 / 19 / 2009

Mailing Address

PO Box 360
City: Prescott AR Zip Code: 71857

Purpose of Disbursement

Candidate Name

Category/Type

Amount of Each Disbursement this Period

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

1,000.00

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

B. Friends of Sam Johnson

10 / 07 / 2009

Mailing Address

PO Box 860096
City: Plano TX Zip Code: 75086-0096

Purpose of Disbursement

Candidate Name

Category/Type

Amount of Each Disbursement this Period

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

300.00

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

C. Martin Heinrich For Congress

10 / 28 / 2009

Mailing Address

489 South Capitol St, SW Ste 422
City: Washington DC Zip Code: 2003

Purpose of Disbursement

Candidate Name

Category/Type

Amount of Each Disbursement this Period

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

750.00

State:

District:

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

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

2,050.00

10030250742

**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)						PAGE	OF
	<input 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) **AAAC PAC**
American Association for Respiratory Care

A. Full Name (Last, First, Middle Initial) Our Congress PAC			Date of Disbursement 12 / 01 / 2009		
Mailing Address PO Box 360					
City Prescott	State AR	Zip Code 71857			
Purpose of Disbursement Contribution			Amount of Each Disbursement this Period 750.00		
Candidate Name MIKE ROSS			Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:	District:				

B. Full Name (Last, First, Middle Initial)			Date of Disbursement		
Mailing Address					
City	State	Zip Code			
Purpose of Disbursement			Amount of Each Disbursement this Period		
Candidate Name			Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:	District:				

C. Full Name (Last, First, Middle Initial)			Date of Disbursement		
Mailing Address					
City	State	Zip Code			
Purpose of Disbursement			Amount of Each Disbursement this Period		
Candidate Name			Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	5,276.88

10030250743

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.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked
2/1/10

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked



2/16/10

PREPARER

DATE PREPARED

10030250744