

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 Associations Inc. PAC/Associa PAC

ADDRESS (number and street) 5401 N.Central Expressway Suite 300 Dallas TX 75205 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00413856 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 01 / 01 / 2013 through 01 / 31 / 2013

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 Nancy Cushman

Signature of Treasurer Nancy Cushman [Electronically Filed] Date 02 / 20 / 2013

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

Associations Inc. PAC/Associa PAC

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

|  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2013"/>  |                         | 94034.79                          |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | 94034.79                |                                   |
| (c) Total Receipts (from Line 19) .....  | 10112.24                | 10112.24                          |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | 104147.03               | 104147.03                         |
| 7. Total Disbursements (from Line 31).....   | -2170.55                | -2170.55                          |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | 106317.58               | 106317.58                         |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>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

**Associations Inc. PAC/Associa PAC**

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

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 219.98                        | 219.98                            |
| (ii) Unitemized .....   | 9892.26                       | 9892.26                           |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶  | 10112.24                      | 10112.24                          |
| (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) .....  | 10112.24                      | 10112.24                          |
| 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))..... ▶                        | 10112.24                      | 10112.24                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶                                  | 10112.24                      | 10112.24                          |

**DETAILED SUMMARY PAGE**

of Disbursements

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| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>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 .....   | 29.45                         | 29.45                             |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 29.45                         | 29.45                             |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 0.00                          | 0.00                              |
| 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 .....  | -2200.00                      | -2200.00                          |
| 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)) ..      | -2170.55                      | -2170.55                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | -2170.55                      | -2170.55                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

| III. Net Contributions/Operating Expenditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 10112.24                      | 10112.24                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 10112.24                      | 10112.24                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 29.45                         | 29.45                             |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 29.45                         | 29.45                             |

**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 8 |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 <input type="checkbox"/> 11c<br><input type="checkbox"/> 15 <input type="checkbox"/> 12<br><input type="checkbox"/> 16 <input type="checkbox"/> 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)  
**Associations Inc. PAC/Associa PAC**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Andrew Fortin</b>  |  | Date of Receipt<br>MM / DD / YYYY<br>01 / 31 / 2013 |
| Mailing Address 5401 N Central Expressway<br>Suite 300  |  | <b>Transaction ID : PR9430855580</b>                |
| City Dallas   | State TX                                   | Zip Code 75205                                      |
| FEC ID number of contributing federal political committee. <b>C</b>   |  | Amount of Each Receipt this Period<br>219.98        |
| Name of Employer<br>Associations, Inc.  | Occupation<br>VP - Govt & Public Relations | P/R Deduction (\$99.99 Bi-Weekly)                   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>219.98         |   |

|   |                          |                                    |
|---|--------------------------|------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>B.</b>  |                          | Date of Receipt<br>MM / DD / YYYY  |
| Mailing Address   |                          | Amount of Each Receipt this Period |
| City  | State                    | Zip Code                           |
| FEC ID number of contributing federal political committee. <b>C</b>   |                          |                                    |
| Name of Employer  | Occupation               |                                    |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ |                                    |

|   |                          |                                    |
|---|--------------------------|------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>C.</b>  |                          | Date of Receipt<br>MM / DD / YYYY  |
| Mailing Address   |                          | Amount of Each Receipt this Period |
| City  | State                    | Zip Code                           |
| FEC ID number of contributing federal political committee. <b>C</b>   |                          |                                    |
| Name of Employer  | Occupation               |                                    |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ |                                    |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 219.98 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 219.98 |

**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 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 checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**Associations Inc. PAC/Associa PAC**

Full Name (Last, First, Middle Initial)

**A. Abercrombie for Governor**

Mailing Address 1050 Ala Moana Blvd.  
Suite 2150

City Honolulu State HI Zip Code 96814

Purpose of Disbursement  
stop payment - check lost

Candidate Name

**Neil Abercrombie**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 1 | 6 |   | 2 | 0 | 1 | 3 |

**Transaction ID : 7020069**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| - | 6 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|

stop payment - check lost

Full Name (Last, First, Middle Initial)

**B. Michelleurgenti.com**

Mailing Address 9319 East Desert Trail

City Scottsdale State AZ Zip Code 85260

Purpose of Disbursement  
stop payment - check lost

Candidate Name

**AZ Rep. Michelle Ugenti**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: AZ District: 08

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 1 | 6 |   | 2 | 0 | 1 | 3 |

**Transaction ID : 7020070**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| - | 4 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|

stop payment - check lost

Full Name (Last, First, Middle Initial)

**C. Vote Heather Carter**

Mailing Address 28248 N Tatum Blvd.  
Ste B1-299

City Cave Creek State AZ Zip Code 85331

Purpose of Disbursement  
stop payment - check lost

Candidate Name

**Heather Carter**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: AZ District: 07

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 1 |   | 1 | 6 |   | 2 | 0 | 1 | 3 |

**Transaction ID : 7020071**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| - | 4 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|

stop payment - check lost

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

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

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| - | 1 | 4 | 0 | 0 | 0 |
|---|---|---|---|---|---|

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| - | 1 | 4 | 0 | 0 | 0 |
|---|---|---|---|---|---|

**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 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 checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)  
**Associations Inc. PAC/Associa PAC**

Full Name (Last, First, Middle Initial)

**A. Andrew Tobin for State Representative**

Mailing Address P.O. Box 28035

City State Zip Code  
Prescott Valley AZ 86312

Purpose of Disbursement  
stop payment - check lost

011

Category/  
Type

Candidate Name

**AZ Rep. Andrew Tobin Sr.**

Office Sought:  House  
 Senate  
 President  
State: AZ District: 01

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 16 / 2013

**Transaction ID : 7020072**

Amount of Each Disbursement this Period

-400.00

stop payment - check lost

Full Name (Last, First, Middle Initial)

**B. Elect Karen Fann**

Mailing Address 1565 Plaza West Drive

City State Zip Code  
Prescott AZ 86303

Purpose of Disbursement  
stop payment - check lost

011

Category/  
Type

Candidate Name

**AZ Rep. Karen Fann**

Office Sought:  House  
 Senate  
 President  
State: AZ District: 01

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 16 / 2013

**Transaction ID : 7020073**

Amount of Each Disbursement this Period

-400.00

stop payment - check lost

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

-800.00

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

-2200.00