

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
American Institute of Certified Public Accountants Political Action Committee

ADDRESS (number and street) Palladian 1  
220 Leigh Farm Rd  
 Check if different than previously reported. (ACC)  
Durham NC 27707 8110

2. **FEC IDENTIFICATION NUMBER** C00077321  
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 Quarterly 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 (12G)  
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 08 01 2011 through 08 31 2011

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 Mr. Anthony Pugliese

Signature of Treasurer Electronically Filed by Mr. Anthony Pugliese Date 09 19 2011

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**

Write or Type Committee Name  
American Institute of Certified Public Accountants Political Action Committee

Report Covering the Period: From: 

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		307692.45
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period .....	335390.70									
(c) Total Receipts (from Line 19) .....	61022.63	430725.90								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	396413.33	738418.35								
7. Total Disbursements (from Line 31) .....	40235.36	382240.38								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	356177.97	356177.97								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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

American Institute of Certified Public Accountants Political Action Committee

Report Covering the Period: From: 

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	1	1

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) .....	6310.00	219615.00
(ii) Unitemized .....	54712.63	206110.90
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	61022.63	425725.90
(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) .....	61022.63	425725.90
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	5000.00
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 Transfer (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)) .....	61022.63	430725.90
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	61022.63	430725.90

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	73.78	998.22
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	73.78	998.22
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	39893.58	374733.16
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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 .....	268.00	1509.00
(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)) .....	268.00	1509.00
29. Other Disbursements.....	0.00	5000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	40235.36	382240.38
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	40235.36	382240.38

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) .....	61022.63	425725.90
34. Total Contribution Refunds (from Line 28(d)) .....	268.00	1509.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	60754.63	424216.90
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	73.78	998.22
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	73.78	998.22

**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 / 31
	<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	

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 Institute of Certified Public Accountants Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Randolph Paschke	Date of Receipt MM / DD / YYYY 08 / 29 / 2011
	Mailing Address 3000 Glazier Way Apt 230	<b>Transaction ID:</b> 33738734
	City State Zip Code ANN ARBOR MI 48105	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Wayne State University CPA Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Charles Plaveczyk	Date of Receipt MM / DD / YYYY 08 / 24 / 2011
	Mailing Address 1350 Avenue Of The Americas Fl 15	<b>Transaction ID:</b> 33740196
	City State Zip Code NEW YORK NY 10019-4700	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Rothstein, Kass & Company, P. C. CPA Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Carleen Shilling	Date of Receipt MM / DD / YYYY 08 / 02 / 2011
	Mailing Address 1702 E Highland Ste 100	<b>Transaction ID:</b> 33740197
	City State Zip Code PHOENIX AZ 85016-4665	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Eide Bailly LLP CPA Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	525.00
<b>TOTAL</b> 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 / 31  
(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)  
American Institute of Certified Public Accountants Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Jerry Topp

Mailing Address 1543 Sundance Drive S.

City FARGO State ND Zip Code 58104-7297

FEC ID number of contributing federal political committee. **C**

Name of Employer Eide Bailly LLP Occupation CPA

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 08 / 24 / 2011  
Transaction ID: 33740198  
Amount of Each Receipt this Period: 250.00

**B.** Full Name (Last, First, Middle Initial)  
Constantine Kalliaras

Mailing Address 85 Livingston Ave  
280 Corporate Ctr

City ROSELAND State NJ Zip Code 07068-3736

FEC ID number of contributing federal political committee. **C**

Name of Employer Rothstein, Kass & Company, P. C. Occupation CPA

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 08 / 08 / 2011  
Transaction ID: 33740199  
Amount of Each Receipt this Period: 250.00

**C.** Full Name (Last, First, Middle Initial)  
Richard Higgins

Mailing Address 1931 S Xenia Ct

City DENVER State CO Zip Code 80231-3331

FEC ID number of contributing federal political committee. **C**

Name of Employer Eide Bailly LLP Occupation CPA

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 08 / 03 / 2011  
Transaction ID: 33740200  
Amount of Each Receipt this Period: 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 750.00

**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 8 / 31  
(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)  
American Institute of Certified Public Accountants Political Action Committee

**A.**

Full Name (Last, First, Middle Initial) Robert Hartnett		Date of Receipt <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		0	4		2	0	1	1													
Mailing Address 2705 Tamarac St		<b>Transaction ID:</b> 33740201																				
City DENVER	State CO	Zip Code 80238-2557																				
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <table border="1"><tr><td>250.00</td></tr></table>	250.00																			
250.00																						
Name of Employer Rothstein, Kass & Company, P. C.	Occupation CPA																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"><tr><td>250.00</td></tr></table>	250.00																				
250.00																						

**B.**

Full Name (Last, First, Middle Initial) Brian Bluhm		Date of Receipt <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	8		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		0	8		2	0	1	1													
Mailing Address 3096 Wood Duck Drive NW		<b>Transaction ID:</b> 33740202																				
City PRIOR LAKE	State MN	Zip Code 55372																				
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <table border="1"><tr><td>250.00</td></tr></table>	250.00																			
250.00																						
Name of Employer Eide Bailly LLP	Occupation CPA																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"><tr><td>250.00</td></tr></table>	250.00																				
250.00																						

**C.**

Full Name (Last, First, Middle Initial) Scott Woods		Date of Receipt <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	0		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		3	0		2	0	1	1													
Mailing Address 517 Stonebury Dr		<b>Transaction ID:</b> 33740203																				
City SOUTHLAKE	State TX	Zip Code 76092-6917																				
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <table border="1"><tr><td>250.00</td></tr></table>	250.00																			
250.00																						
Name of Employer Rothstein, Kass & Company, P. C.	Occupation CPA																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"><tr><td>250.00</td></tr></table>	250.00																				
250.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<table border="1"><tr><td>750.00</td></tr></table>	750.00
750.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td> </td></tr></table>	

**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 / 31
	<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)  
American Institute of Certified Public Accountants Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Andrea Kalliaras		Date of Receipt MM / DD / YYYY 08 / 08 / 2011		
	Mailing Address 85 Livingston Ave 280 Corporate Ctr		<b>Transaction ID:</b> 33740204		
	City ROSELAND	State NJ	Zip Code 07068-3736	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Rothstein, Kass & Company, P. C.		Occupation CPA		
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Camille Asaro		Date of Receipt MM / DD / YYYY 08 / 02 / 2011		
	Mailing Address 5284 73RD ST		<b>Transaction ID:</b> 33740205		
	City MASPETH	State NY	Zip Code 11378-1520	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Rothstein, Kass & Company, P. C.		Occupation CPA		
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Kimberlee Phelan		Date of Receipt MM / DD / YYYY 08 / 22 / 2011		
	Mailing Address 5 Vaughn Dr Ste 201		<b>Transaction ID:</b> 33740206		
	City PRINCETON	State NJ	Zip Code 08540-6313	Amount of Each Receipt this Period 300.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Withum Smith & Brown		Occupation CPA		
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	800.00
<b>TOTAL</b> 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 10 / 31  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Institute of Certified Public Accountants Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Richard Sumida  
Mailing Address 47 Espy Rd Unit 17B  
City CALDWELL State NJ Zip Code 07006-4868  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Rothstein, Kass & Company, P. C. Occupation CPA  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00  
Date of Receipt MM / DD / YYYY  
08 / 31 / 2011  
Transaction ID: 33740207  
Amount of Each Receipt this Period 300.00

**B.** Full Name (Last, First, Middle Initial)  
LeAnn Rudolph  
Mailing Address 4114 E. Whitney Lane  
City PHOENIX State AZ Zip Code 85032  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Eide Bailly LLP Occupation CPA  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00  
Date of Receipt MM / DD / YYYY  
08 / 03 / 2011  
Transaction ID: 33740208  
Amount of Each Receipt this Period 300.00

**C.** Full Name (Last, First, Middle Initial)  
Linda Koerselman  
Mailing Address 527 4th Street SW  
City MADELIA State MN Zip Code 56062-1248  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Eide Bailly LLP Occupation CPA  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00  
Date of Receipt MM / DD / YYYY  
08 / 03 / 2011  
Transaction ID: 33740209  
Amount of Each Receipt this Period 350.00

**SUBTOTAL** of Receipts This Page (optional) ..... 950.00  
**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 11 / 31  
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
American Institute of Certified Public Accountants Political Action Committee

**A.**

Full Name (Last, First, Middle Initial) Jeffrey Strand		Date of Receipt MM / DD / YYYY 08 / 03 / 2011
Mailing Address 200 E 10th St Ste 500 PO Box 5125		Transaction ID: 33740210
City SIOUX FALLS	State SD	Zip Code 57117-5125
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 350.00
Name of Employer Eide Bailly LLP	Occupation CPA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

**B.**

Full Name (Last, First, Middle Initial) Patrick Richardson		Date of Receipt MM / DD / YYYY 08 / 17 / 2011
Mailing Address 4040 Orchard Drive		Transaction ID: 33740211
City LAKE OSWEGO	State OR	Zip Code 97035-2406
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Moss Adams LLP	Occupation CPA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

**C.**

Full Name (Last, First, Middle Initial) Christopher Mears		Date of Receipt MM / DD / YYYY 08 / 04 / 2011
Mailing Address 85 Livingston Ave 280 Corporate Ctr		Transaction ID: 33740212
City ROSELAND	State NJ	Zip Code 07068-3736
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Rothstein, Kass & Company, P. C.	Occupation Partner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1750.00
<b>TOTAL</b> 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 12 / 31  
(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)  
American Institute of Certified Public Accountants Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
James R. Ladd

Mailing Address 9621 Hilltop Road

City State Zip Code  
Bellevue WA 98004-4007

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Institute for Systems Biology

Occupation  
CPA

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
08 / 18 / 2011

**Transaction ID:** 33740243

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
A. Marvin Strait

Mailing Address 225 Spring Grove Way

City State Zip Code  
Colorado Springs CO 80906-3721

FEC ID number of contributing federal political committee. **C**

Name of Employer  
A. Marvin Strait, CPA

Occupation  
CPA

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
525.00

Date of Receipt  
MM / DD / YYYY  
08 / 17 / 2011

**Transaction ID:** 33740252

Amount of Each Receipt this Period  
25.00

**C.**

Full Name (Last, First, Middle Initial)  
Kenneth Wolff

Mailing Address 1405 18th Ave NE

City State Zip Code  
ABERDEEN SD 57401-1500

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Eide Bailly LLP

Occupation  
CPA

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
08 / 22 / 2011

**Transaction ID:** 33740261

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **575.00**

**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 13 / 31  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Institute of Certified Public Accountants Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Ernest Anthony Almonte

Mailing Address 120 Suddard Ln

City State Zip Code  
North Scituate RI 02857-1538

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
DiSanto, Priest & Co. CPA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
MM / DD / YYYY  
08 / 29 / 2011

**Transaction ID:** 33740264

Amount of Each Receipt this Period  
30.00

**B.** Full Name (Last, First, Middle Initial)  
Conrad M Davis

Mailing Address 4925 Brownstone Ct

City State Zip Code  
Elk Grove CA 95758-4111

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Ueltzen & Company LLP CPA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
MM / DD / YYYY  
08 / 21 / 2011

**Transaction ID:** 33740274

Amount of Each Receipt this Period  
30.00

**C.** Full Name (Last, First, Middle Initial)  
Ronald Yates

Mailing Address 3103 38th St W

City State Zip Code  
BILLINGS MT 59102-0104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Eide Bailly LLP CPA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
08 / 08 / 2011

**Transaction ID:** 33740276

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **210.00**

**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 14 / 31  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Institute of Certified Public Accountants Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Louis Janson

Mailing Address 7931 Althaus Road

City State Zip Code  
CINCINNATI OH 45247-2517

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Louis J. Janson and Associates

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2011

**Transaction ID:** 33772110

Amount of Each Receipt this Period  
0.00

**[MEMO ITEM]**  
Refund(s) on Schedule B  
Totaling \$30.00 This changes the YTD Total to \$0.00

**B.** Full Name (Last, First, Middle Initial)  
Diana Sherman

Mailing Address 3546 Valeview Dr

City State Zip Code  
OAKTON VA 22124-2244

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2011

**Transaction ID:** 33772111

Amount of Each Receipt this Period  
0.00

**[MEMO ITEM]**  
Refund(s) on Schedule B  
Totaling \$25.00 This changes the YTD Total to \$0.00

**C.** Full Name (Last, First, Middle Initial)  
Jay Webb

Mailing Address PO Box 1585

City State Zip Code  
IDAHO FALLS ID 83403-1585

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Coldwell Banker Eagle Rock

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2011

**Transaction ID:** 33772112

Amount of Each Receipt this Period  
0.00

**[MEMO ITEM]**  
Refund(s) on Schedule B  
Totaling \$1.00 This changes the YTD Total to \$0.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.00

**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 15 / 31  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
American Institute of Certified Public Accountants Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Edwin G. Davila-Blaise

Mailing Address 1106 N Evergreen St

City State Zip Code  
Arlington VA 22205-2535

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Law Offices of Edwin G. Davila-Blaise CPA

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 0.00

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2011

Transaction ID: 33772113

Amount of Each Receipt this Period  
0.00

**[MEMO ITEM]**  
Refund(s) on Schedule B  
Totaling \$1.00 This changes the YTD Total to \$0.00

**B.** Full Name (Last, First, Middle Initial)  
Jacob Folks

Mailing Address 13522 w 72nd St

City State Zip Code  
Shawnee KS 66216

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Ernst & Young LLP CPA

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 0.00

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2011

Transaction ID: 33772114

Amount of Each Receipt this Period  
0.00

**[MEMO ITEM]**  
Refund(s) on Schedule B  
Totaling \$25.00 This changes the YTD Total to \$0.00

**C.** Full Name (Last, First, Middle Initial)  
Jerre Johnson

Mailing Address 1912 Autumn Ridge Cir

City State Zip Code  
Silver Spring MD 20906-5826

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Turner, Jones & Associates, PLLC CPA

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 0.00

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2011

Transaction ID: 33772115

Amount of Each Receipt this Period  
0.00

**[MEMO ITEM]**  
Refund(s) on Schedule B  
Totaling \$1.00 This changes the YTD Total to \$0.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.00

**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 16 / 31  
(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)  
American Institute of Certified Public Accountants Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Allison Catton

Mailing Address 388 Allen Way

City Benicia State CA Zip Code 94510-3905

FEC ID number of contributing federal political committee. **C**

Name of Employer Marcum LLP Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt 08 / 01 / 2011

Transaction ID: 33772116

Amount of Each Receipt this Period 0.00

**[MEMO ITEM]**  
Refund(s) on Schedule B  
Totaling \$25.00 This changes the YTD Total to \$0.00

**B.**

Full Name (Last, First, Middle Initial)  
Vickie Ledee

Mailing Address 185 EMMA RD

City VILLE PLATTE State LA Zip Code 70586-6225

FEC ID number of contributing federal political committee. **C**

Name of Employer Postlethwaite & Netterville Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 25.00

Date of Receipt 08 / 01 / 2011

Transaction ID: 33772117

Amount of Each Receipt this Period 0.00

**[MEMO ITEM]**  
Refund(s) on Schedule B  
Totaling \$25.00 This changes the YTD Total to \$25.00

**C.**

Full Name (Last, First, Middle Initial)  
Theresa O'Connor

Mailing Address 755 BAYWOOD DR FL 2

City PETALUMA State CA Zip Code 94954-5510

FEC ID number of contributing federal political committee. **C**

Name of Employer Theresa A. O'Connor Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt 08 / 05 / 2011

Transaction ID: 33772118

Amount of Each Receipt this Period 0.00

**[MEMO ITEM]**  
Refund(s) on Schedule B  
Totaling \$30.00 This changes the YTD Total to \$0.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 0.00

**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 17 / 31  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Institute of Certified Public Accountants Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Julian Sardinas

Mailing Address 17555 Atlantic Blvd  
# Ups1

City Sunny Isles Beach State FL Zip Code 33160-2993

FEC ID number of contributing federal political committee. **C**

Name of Employer Marcum LLP Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt: 08 / 05 / 2011  
**Transaction ID:** 33772119  
 Amount of Each Receipt this Period: 0.00

**[MEMO ITEM]**  
Refund(s) on Schedule B  
Totaling \$25.00 This changes the YTD Total to \$0.00

**B.** Full Name (Last, First, Middle Initial)  
Robert Davis

Mailing Address 1 Deering Ct

City Syosset State NY Zip Code 11791-9630

FEC ID number of contributing federal political committee. **C**

Name of Employer Tatum Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt: 08 / 05 / 2011  
**Transaction ID:** 33772120  
 Amount of Each Receipt this Period: 0.00

**[MEMO ITEM]**  
Refund(s) on Schedule B  
Totaling \$30.00 This changes the YTD Total to \$0.00

**C.** Full Name (Last, First, Middle Initial)  
Molly Rotsart

Mailing Address 709 SE 5th Ct

City Ankeny State IA Zip Code 50021-6407

FEC ID number of contributing federal political committee. **C**

Name of Employer Schneider Management Company Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt: 08 / 11 / 2011  
**Transaction ID:** 33772121  
 Amount of Each Receipt this Period: 0.00

**[MEMO ITEM]**  
Refund(s) on Schedule B  
Totaling \$25.00 This changes the YTD Total to \$0.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 0.00

**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 18 / 31
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
American Institute of Certified Public Accountants Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Bryan Rowson		Date of Receipt
	Mailing Address 11723 16TH AVE NE APT A		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 08 / 11 / 2011
	City	State	Zip Code
	SEATTLE	WA	98125-5171
	FEC ID number of contributing federal political committee.		Transaction ID: 33772122
Name of Employer McGladrey & Pullen LLP		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 0.00
			<b>[MEMO ITEM]</b> Refund(s) on Schedule B Totaling \$25.00 This changes the YTD Total to \$0.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 0.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/> 6310.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)

American Institute of Certified Public Accountants Political Action Committee

A.	Full Name (Last, First, Middle Initial) Willard Hotel	Transaction ID: 33621819 Date of Disbursement 08 / 03 / 2011
	Mailing Address 1401 Pennsylvania Ave., NW	Amount of Each Disbursement this Period 234.42
	City Washington State DC Zip Code 20004	
	Purpose of Disbursement in kind for food charges	011 Category/ Type
	Candidate Name Rep. J. Randy Forbes	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 04	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> in kind for food charges

B.	Full Name (Last, First, Middle Initial) Willard Hotel	Transaction ID: 33621820 Date of Disbursement 08 / 03 / 2011
	Mailing Address 1401 Pennsylvania Ave., NW	Amount of Each Disbursement this Period 234.42
	City Washington State DC Zip Code 20004	
	Purpose of Disbursement in kind for food charges	011 Category/ Type
	Candidate Name Pat Tiberi	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 12	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<b>[MEMO ITEM]</b> in kind for food charges

C.	Full Name (Last, First, Middle Initial) American Institute of CPAs	Transaction ID: 33621822 Date of Disbursement 08 / 03 / 2011
	Mailing Address Palladian Corporate Center 220 Leigh Farm Road	Amount of Each Disbursement this Period 110.00
	City Durham State NC Zip Code 27707-8110	
	Purpose of Disbursement in kind for room charge	011 Category/ Type
	Candidate Name Pat Tiberi	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 12	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		in kind for room charge

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	110.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**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 20 / 31

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)

American Institute of Certified Public Accountants Political Action Committee

A.

Full Name (Last, First, Middle Initial)

American Institute of CPAs

Transaction ID: 33621823

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	1

Mailing Address Palladian Corporate Center  
220 Leigh Farm Road

Amount of Each Disbursement this Period

110.00
--------

City Durham State NC Zip Code 27707-8110

Purpose of Disbursement  
inkind for room charge

011
Category/ Type

Candidate Name  
Rep. J. Randy Forbes

Office Sought:  House  
 Senate  
 President

Disbursement For: 2007  
 Primary  General  
 Other (specify) ▼

State: VA District: 04

inkind for room charge

B.

Full Name (Last, First, Middle Initial)

Matheson For Congress

Transaction ID: 33689752

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	2		2	0	1	1

Mailing Address 677 South 200 West Suite A

Amount of Each Disbursement this Period

1500.00
---------

City Salt Lake City State UT Zip Code 84101

Purpose of Disbursement

011
Category/ Type

Candidate Name  
Jim Matheson

Office Sought:  House  
 Senate  
 President

Disbursement For: 2007  
 Primary  General  
 Other (specify) ▼

State: UT District: 02

C.

Full Name (Last, First, Middle Initial)

Shelley Moore Capito For Congress

Transaction ID: 33689753

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	2		2	0	1	1

Mailing Address PO Box 11519

Amount of Each Disbursement this Period

1500.00
---------

City Charleston State WV Zip Code 25339

Purpose of Disbursement

011
Category/ Type

Candidate Name  
ShellyMoore Capito

Office Sought:  House  
 Senate  
 President

Disbursement For: 2007  
 Primary  General  
 Other (specify) ▼

State: WV District: 02

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

3110.00
---------

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

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# 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 checked="" 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)

American Institute of Certified Public Accountants Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Jim Gerlach For Congress Committee

Mailing Address PO Box 87

City Uwchland State PA Zip Code 19480

Purpose of Disbursement  
dc, poe, Jul 27, AICPA

Candidate Name  
Rep. James W. Gerlach

Office Sought:  House  
 Senate  
 President

State: PA District: 06

Disbursement For: 2007  
 Primary  General  
 Other (specify) ▼

Transaction ID: 33689757

Date of Disbursement

08 / 22 / 2011

Amount of Each Disbursement this Period

1500.00

dc, poe, Jul 27, AICPA

**B.** Full Name (Last, First, Middle Initial)  
Wally Herger For Congress Committee

Mailing Address P.O. Box 1500

City Chico State CA Zip Code 95927

Purpose of Disbursement

Candidate Name  
Rep. Wally Herger

Office Sought:  House  
 Senate  
 President

State: CA District: 02

Disbursement For: 2007  
 Primary  General  
 Other (specify) ▼

Transaction ID: 33689759

Date of Disbursement

08 / 22 / 2011

Amount of Each Disbursement this Period

2000.00

**C.** Full Name (Last, First, Middle Initial)  
Dreier For Congress Committee

Mailing Address PO Box 505

City Upland State CA Zip Code 91785

Purpose of Disbursement

Candidate Name  
David Dreier

Office Sought:  House  
 Senate  
 President

State: CA District: 28

Disbursement For: 2007  
 Primary  General  
 Other (specify) ▼

Transaction ID: 33689760

Date of Disbursement

08 / 22 / 2011

Amount of Each Disbursement this Period

2000.00

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

5500.00

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

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)

American Institute of Certified Public Accountants Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Lofgren For Congress <hr/> Mailing Address 111 W St John Street Suite 400 <hr/> City San Jose State CA Zip Code 95113 <hr/> Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name Zoe Lofgren Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 16	Transaction ID: 33689763 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 2 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 5px;">2000.00</div>
<b>B.</b>	Full Name (Last, First, Middle Initial) Snowe For Senate <hr/> Mailing Address P.O. Box 2000 <hr/> City Portland State ME Zip Code 04104 <hr/> Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name Olympia J. Snowe Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: ME District:	Transaction ID: 33689767 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 2 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 5px;">2000.00</div>
<b>C.</b>	Full Name (Last, First, Middle Initial) Scott Brown For Us Senate Committee <hr/> Mailing Address PO Box 395 <hr/> City Wrentham State MA Zip Code 02903 <hr/> Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name Mr. Scott Brown Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MA District:	Transaction ID: 33689770 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 2 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; width: 100%; text-align: center; padding: 5px;">3000.00</div>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<div style="border: 1px solid black; padding: 5px; width: 100%;">7000.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

**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 23 / 31

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)

American Institute of Certified Public Accountants Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Friends Of Carolyn Mccarthy <hr/> Mailing Address 151 Linden Road <hr/> City Mineola State NY Zip Code 11501 <hr/> Purpose of Disbursement <hr/> Candidate Name Carolyn McCarthy <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 04 Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33689772 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 2 / 2 0 1 1
	Amount of Each Disbursement this Period 1500.00
	011 Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Ryan For Congress <hr/> Mailing Address PO Box 1919 <hr/> City Janesville State WI Zip Code 53547 <hr/> Purpose of Disbursement <hr/> Candidate Name Paul Ryan <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 01 Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33689774 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 2 / 2 0 1 1
	Amount of Each Disbursement this Period 5000.00
	011 Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Geoff Davis For Congress <hr/> Mailing Address 3161 Dixie Highway Suite F <hr/> City Erlanger State KY Zip Code 41018 <hr/> Purpose of Disbursement <hr/> Candidate Name Rep. Geoffrey Davis <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 04 Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33689777 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 2 / 2 0 1 1
	Amount of Each Disbursement this Period 1500.00
	011 Category/ Type

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

8000.00

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

**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 checked="" 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)

American Institute of Certified Public Accountants Political Action Committee

A.

Full Name (Last, First, Middle Initial)  
Schock For Congress

Transaction ID: 33689778  
Date of Disbursement

Mailing Address PO Box 10555

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	2		2	0	1	1

City Peoria State IL Zip Code 61612

Amount of Each Disbursement this Period

Purpose of Disbursement

011
Category/ Type

2000.00
---------

Candidate Name  
Mr. Aaron Schock

Office Sought:  House  Senate  President  
Disbursement For: 2007  Primary  General  Other (specify) ▼  
State: IL District: 18

B.

Full Name (Last, First, Middle Initial)  
Bill Flores For Congress

Transaction ID: 33689781  
Date of Disbursement

Mailing Address PO Box 6207

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	2		2	0	1	1

City Bryan State TX Zip Code 77805

Amount of Each Disbursement this Period

Purpose of Disbursement

011
Category/ Type

1500.00
---------

Candidate Name  
Mr. Bill Flores

Office Sought:  House  Senate  President  
Disbursement For: 2007  Primary  General  Other (specify) ▼  
State: TX District: 17

C.

Full Name (Last, First, Middle Initial)  
Tiberi For Congress

Transaction ID: 33689783  
Date of Disbursement

Mailing Address 2021 E Dublin Granville Rd # 2

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	2		2	0	1	1

City Columbus State OH Zip Code 43229

Amount of Each Disbursement this Period

Purpose of Disbursement

011
Category/ Type

2000.00
---------

Candidate Name  
Pat Tiberi

Office Sought:  House  Senate  President  
Disbursement For: 2007  Primary  General  Other (specify) ▼  
State: OH District: 12

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

5500.00
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TOTAL This Period (last page this line number only) .....

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**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)

American Institute of Certified Public Accountants Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Forbes For Congress <hr/> Mailing Address PO Box 15100 <hr/> City Chesapeake State VA Zip Code 23328 <hr/> Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name Rep. J. Randy Forbes Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: VA District: 04	Transaction ID: 33689784 Date of Disbursement 08 / 22 / 2011 <hr/> Amount of Each Disbursement this Period 1500.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Fund for the Majority <hr/> Mailing Address 1212 S VICTORY BLVD <hr/> City Burbank State CA Zip Code 91502 <hr/> Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name Fund for the Majority 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:	Transaction ID: 33691082 Date of Disbursement 08 / 23 / 2011 <hr/> Amount of Each Disbursement this Period 2500.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Louise Slaughter Re-Election Committee <hr/> Mailing Address PO Box 730 <hr/> City Honeoye State NY Zip Code 14471 <hr/> Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name Louise Slaughter Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NY District: 28	Transaction ID: 33691083 Date of Disbursement 08 / 23 / 2011 <hr/> Amount of Each Disbursement this Period 1000.00

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

**5000.00**

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

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)

American Institute of Certified Public Accountants Political Action Committee

A.

Full Name (Last, First, Middle Initial)  
Diane Black For Congress

Mailing Address PO Box 1437

City State Zip Code  
Gallatin TN 37066

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Rep. Diane Black

Office Sought:  House  Senate  President  
Disbursement For: 2007  Primary  General  Other (specify) ▼  
State: TN District: 06

Transaction ID: 33691099

Date of Disbursement

08 / 23 / 2011

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)  
Longhorn PAC

Mailing Address PO Box 40385

City State Zip Code  
Washington DC 20016

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Longhorn PAC

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: 33691100

Date of Disbursement

08 / 23 / 2011

Amount of Each Disbursement this Period

2500.00

C.

Full Name (Last, First, Middle Initial)  
Conaway For Congress

Mailing Address PO Box 51272

City State Zip Code  
Midland TX 79710

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Rep. Michael K. Conaway

Office Sought:  House  Senate  President  
Disbursement For: 2007  Primary  General  Other (specify) ▼  
State: TX District: 11

Transaction ID: 33691101

Date of Disbursement

08 / 23 / 2011

Amount of Each Disbursement this Period

1623.58

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

5123.58

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

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
American Institute of Certified Public Accountants Political Action Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Willard Hotel</p> <p>Mailing Address 1401 Pennsylvania Ave., NW</p> <p>City Washington State DC Zip Code 20004</p> <p>Purpose of Disbursement in kind for food charges</p> <p>Candidate Name Rep. Geoffrey Davis</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 04</p> <p>Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 33711321 <b>Date of Disbursement</b> 08 / 26 / 2011</p> <p>Amount of Each Disbursement this Period 234.42</p> <p><b>[MEMO ITEM]</b> in kind for food charges</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Willard Hotel</p> <p>Mailing Address 1401 Pennsylvania Ave., NW</p> <p>City Washington State DC Zip Code 20004</p> <p>Purpose of Disbursement in kind for food charges</p> <p>Candidate Name Carolyn McCarthy</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 04</p> <p>Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 33711322 <b>Date of Disbursement</b> 08 / 26 / 2011</p> <p>Amount of Each Disbursement this Period 234.42</p> <p><b>[MEMO ITEM]</b> in kind for food charges</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Willard Hotel</p> <p>Mailing Address 1401 Pennsylvania Ave., NW</p> <p>City Washington State DC Zip Code 20004</p> <p>Purpose of Disbursement in kind for food charges</p> <p>Candidate Name Mr. Scott Brown</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District:</p> <p>Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 33711323 <b>Date of Disbursement</b> 08 / 26 / 2011</p> <p>Amount of Each Disbursement this Period 234.42</p> <p><b>[MEMO ITEM]</b> in kind for food charges</p>

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

0.00

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

**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 checked="" 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)

American Institute of Certified Public Accountants Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Willard Hotel <hr/> Mailing Address 1401 Pennsylvania Ave., NW <hr/> City Washington State DC Zip Code 20004 <hr/> Purpose of Disbursement inkind for food charges Candidate Name Zoe Lofgren <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 16 Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33711325 Date of Disbursement 08 / 26 / 2011	Amount of Each Disbursement this Period 234.42  <b>[MEMO ITEM]</b> inkind for food charges
<b>B.</b>	Full Name (Last, First, Middle Initial) Willard Hotel <hr/> Mailing Address 1401 Pennsylvania Ave., NW <hr/> City Washington State DC Zip Code 20004 <hr/> Purpose of Disbursement inkind for food charges Candidate Name Rep. James W. Gerlach <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06 Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33711326 Date of Disbursement 08 / 26 / 2011	Amount of Each Disbursement this Period 234.42  <b>[MEMO ITEM]</b> inkind for food charges
<b>C.</b>	Full Name (Last, First, Middle Initial) American Institute of CPAs <hr/> Mailing Address Palladian Corporate Center 220 Leigh Farm Road <hr/> City Durham State NC Zip Code 27707-8110 <hr/> Purpose of Disbursement inkind for room charge Candidate Name Rep. Geoffrey Davis <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 04 Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33711338 Date of Disbursement 08 / 26 / 2011	Amount of Each Disbursement this Period 110.00  inkind for room charge

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

110.00

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

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)

American Institute of Certified Public Accountants Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) American Institute of CPAs <hr/> Mailing Address Palladian Corporate Center 220 Leigh Farm Road <hr/> City Durham State NC Zip Code 27707-8110 <hr/> Purpose of Disbursement inkind for room charge Candidate Name Carolyn McCarthy <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 04 Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 33711341 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 6 / 2 0 1 1
	Amount of Each Disbursement this Period 110.00
	inkind for room charge
	Category/ Type 011
<b>B.</b> Full Name (Last, First, Middle Initial) American Institute of CPAs <hr/> Mailing Address Palladian Corporate Center 220 Leigh Farm Road <hr/> City Durham State NC Zip Code 27707-8110 <hr/> Purpose of Disbursement inkind for room charge Candidate Name Mr. Scott Brown <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 33711343 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 6 / 2 0 1 1
	Amount of Each Disbursement this Period 110.00
	inkind for room charge
	Category/ Type 011
<b>C.</b> Full Name (Last, First, Middle Initial) American Institute of CPAs <hr/> Mailing Address Palladian Corporate Center 220 Leigh Farm Road <hr/> City Durham State NC Zip Code 27707-8110 <hr/> Purpose of Disbursement inkind for room charge Candidate Name Zoe Lofgren <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 16 Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 33711344 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 6 / 2 0 1 1
	Amount of Each Disbursement this Period 110.00
	inkind for room charge
	Category/ Type 011

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

**330.00**

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

**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 checked="" 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)

American Institute of Certified Public Accountants Political Action Committee

A.

Full Name (Last, First, Middle Initial)

American Institute of CPAs

Mailing Address Palladian Corporate Center  
220 Leigh Farm Road

City Durham State NC Zip Code 27707-8110

Purpose of Disbursement  
inkind for room charge

Candidate Name  
Rep. James W. Gerlach

Office Sought:  House  
 Senate  
 President  
State: PA District: 06

Disbursement For: 2007  
 Primary  General  
 Other (specify) ▼

Transaction ID: 33711346

Date of Disbursement

08 / 26 / 2011

Amount of Each Disbursement this Period

110.00

inkind for room charge

B.

Full Name (Last, First, Middle Initial)

Colonial Parking - Willard Hotel

Mailing Address 1050 Thomas Jefferson St., NW  
Suite100

City Washington State DC Zip Code 20007

Purpose of Disbursement  
inkind for prepaid parking

Candidate Name  
Carolyn McCarthy

Office Sought:  House  
 Senate  
 President  
State: NY District: 04

Disbursement For: 2007  
 Primary  General  
 Other (specify) ▼

Transaction ID: 33711351

Date of Disbursement

08 / 26 / 2011

Amount of Each Disbursement this Period

16.00

**[MEMO ITEM]**  
inkind for prepaid parking

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

110.00

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

39893.58

**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)

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<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)

American Institute of Certified Public Accountants Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Wachovia PAC Account

Mailing Address Palladian Corporate Center  
220 Leigh Farm Road

City Durham State NC Zip Code 27707-8110

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Transaction ID: 33750424

Date of Disbursement

08 / 31 / 2011

Amount of Each Disbursement this Period

73.78

001  
Category/  
Type

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

73.78

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

73.78