

**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

Association of Fundraising Professionals Political Action Committee

ADDRESS (number and street) ▼

4300 Wilson Boulevard

#300

☐ Check if different than previously reported. (ACC)

Arlington

VA

22203-4168

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00382143

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☒ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

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

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

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

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
07 01 2013

through

M M M / D D D / Y Y Y Y Y Y
09 30 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 Mr. Jason R. Lee Esq.

Signature of Treasurer

Mr. Jason R. Lee Esq.

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 15 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.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Association of Fundraising Professionals Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
07 / 01 / 2013 To: M M / D D / Y Y Y Y Y Y
09 / 30 / 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2013		13798.62
(b) Cash on Hand at Beginning of Reporting Period.....	19681.26	
(c) Total Receipts (from Line 19)	5694.00	12758.95
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	25375.26	26557.57
7. Total Disbursements (from Line 31)	3916.36	5098.67
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	21458.90	21458.90
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Association of Fundraising Professionals Political Action Committee

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	3

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	3

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).....	4760.00	8626.62
(ii) Unitemized	934.00	4132.33
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	5694.00	12758.95
(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) ►	5694.00	12758.95
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)) ►	5694.00	12758.95
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ►	5694.00	12758.95

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	2500.00
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	1416.36	2598.67
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)) ..	3916.36	5098.67
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3916.36	5098.67

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	5694.00	12758.95
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5694.00	12758.95
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0.00	0.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 16
(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)

Association of Fundraising Professionals Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mr. Robert CarterMailing Address Three Gateway Center
Suite 1726

City	State	Zip Code
Pittsburgh	PA	15222

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ketchum, Inc.

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2013

Transaction ID : SA11AI.5420

Amount of Each Receipt this Period

1000.00

contribution to AFP PAC

Full Name (Last, First, Middle Initial)

B. Robert Nelson Croft

Mailing Address P.O. Box 66

City	State	Zip Code
Somerset	IN	46984

FEC ID number of contributing
federal political committee.

C

Name of Employer

self-employed

Occupation

consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2013

Transaction ID : SA11AI.5446

Amount of Each Receipt this Period

50.00

contribution to AFP PAC

Full Name (Last, First, Middle Initial)

C. Gretchen Gordon

Mailing Address P.O. Box 755620

City	State	Zip Code
Fairbanks	AK	99775

FEC ID number of contributing
federal political committee.

C

Name of Employer

KVAC TV9/FM 89.9

Occupation

Dir. of Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2013

Transaction ID : SA11AI.5414

Amount of Each Receipt this Period

100.00

contribution to AFP PAC

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

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

1150.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 16

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

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NAME OF COMMITTEE (In Full)

Association of Fundraising Professionals Political Action Committee

Full Name (Last, First, Middle Initial)

A. Gretchen Gordon

Mailing Address P.O. Box 755620

City

Fairbanks

State

AK

Zip Code

99775

FEC ID number of contributing
federal political committee.

C

Name of Employer

KVAC TV9/FM 89.9

Occupation

Dir. of Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

08 / 31 / 2013

Transaction ID : SA11AI.5435

Amount of Each Receipt this Period

100.00

contribution to AFP PAC

Full Name (Last, First, Middle Initial)

B. Gretchen Gordon

Mailing Address P.O. Box 755620

City

Fairbanks

State

AK

Zip Code

99775

FEC ID number of contributing
federal political committee.

C

Name of Employer

KVAC TV9/FM 89.9

Occupation

Dir. of Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

09 / 30 / 2013

Transaction ID : SA11AI.5449

Amount of Each Receipt this Period

100.00

contribution to AFP PAC

Full Name (Last, First, Middle Initial)

C. Roberta A. Healey

Mailing Address 182 Apple Drive

City

Exton

State

PA

Zip Code

19341

FEC ID number of contributing
federal political committee.

C

Name of Employer

Farr Healey Consulting LLC

Occupation

Senior Member

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 30 / 2013

Transaction ID : SA11AI.5448

Amount of Each Receipt this Period

1000.00

contribution to AFP PAC

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

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

1200.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 16

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

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NAME OF COMMITTEE (In Full)

Association of Fundraising Professionals Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mark Hefter

Mailing Address 255 Palisade Avenue

City State Zip Code
 Dobbs Ferry NY 10522

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Technion Society

Occupation

Director, Planned Giving

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

08 / 31 / 2013

Transaction ID : SA11AI.5436

Amount of Each Receipt this Period

500.00

contribution to AFP PAC

Full Name (Last, First, Middle Initial)

B. Mr. John Kelleher

Mailing Address 15240 Lotusgarden Drive

City State Zip Code
 Canyon Country CA 91387

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kelleher & Associates

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 30 / 2013

Transaction ID : SA11AI.5447

Amount of Each Receipt this Period

50.00

contribution to AFP PAC

Full Name (Last, First, Middle Initial)

C. Evan Morgan

Mailing Address PO Box 1892

City State Zip Code
 Houston TX 77251

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rice University

Occupation

Assoc. Director of Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

09 / 30 / 2013

Transaction ID : SA11AI.5444

Amount of Each Receipt this Period

60.00

contribution to AFP PAC

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

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

610.00

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

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

FOR LINE NUMBER: PAGE 9 OF 16

(check only one)

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

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NAME OF COMMITTEE (In Full)

Association of Fundraising Professionals Political Action Committee

Full Name (Last, First, Middle Initial)

A. Joshua Newton

Mailing Address 675 Greenwood Ave. NE
 Unit 110

City State Zip Code
 Atlanta GA 30306

FEC ID number of contributing
 federal political committee.

C

Name of Employer

Emory University

Occupation

Sr. Assoc. VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 31 2013

Transaction ID : SA11AI.5417

Amount of Each Receipt this Period

250.00

contribution to AFP PAC

Full Name (Last, First, Middle Initial)

B. Janice Gow Pettey

Mailing Address 90 Wawona Street

City State Zip Code
 San Francisco CA 94127

FEC ID number of contributing
 federal political committee.

C

Name of Employer

J.G. Pettey & Assoc.

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 08 31 2013

Transaction ID : SA11AI.5443

Amount of Each Receipt this Period

250.00

contribution to AFP PAC

Full Name (Last, First, Middle Initial)

C. Nancy Racette

Mailing Address 3337 Holloman Road

City State Zip Code
 Falls Church VA 22042

FEC ID number of contributing
 federal political committee.

C

Name of Employer

Development Resources, Inc.

Occupation

COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 07 31 2013

Transaction ID : SA11AI.5413

Amount of Each Receipt this Period

500.00

contribution to AFP PAC

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

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

1000.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 16

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

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NAME OF COMMITTEE (In Full)

Association of Fundraising Professionals Political Action Committee

Full Name (Last, First, Middle Initial)

A. Susan F. Rice

Mailing Address 10126 Empeyan Way
#103

City State Zip Code
Los Angeles CA 90067

FEC ID number of contributing
federal political committee.

C

Name of Employer

SFR Consulting

Occupation

Principal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 31 / 2013

Transaction ID : SA11AI.5412

Amount of Each Receipt this Period

500.00

contribution to AFP PAC

Full Name (Last, First, Middle Initial)

B. Robert Saacke

Mailing Address 103 Sorrento Drive

City State Zip Code
Greenville SC 29609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bob Saacke Associates

Occupation

Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 31 / 2013

Transaction ID : SA11AI.5408

Amount of Each Receipt this Period

300.00

contribution to AFP PAC

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

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

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

800.00

4760.00

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

Association of Fundraising Professionals Political Action Committee

A. LEVIN FOR CONGRESS

Date of Disbursement

09 / 16 / 2013

Transaction ID : SB23.5450

011

Amount of Each Disbursement this Period

Category/
Type

2500.00

☐ Primary ☒ General
☐ Other (specify) ▼

State: MI District: 12

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement	
1	2
3	4
5	6
7	8
9	10
11	12
13	14
15	16
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75	76
77	78
79	80
81	82
83	84
85	86
87	88
89	90
91	92
93	94
95	96
97	98
99	100

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

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

2500.00

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

2500.00

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

PAGE 12 OF 16

<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)

Association of Fundraising Professionals Political Action Committee

Full Name (Last, First, Middle Initial)

A. SunTrust Bank

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2013

Mailing Address One Park Place

City	State	Zip Code
Atlanta	GA	30303

Transaction ID : SB29.5421Purpose of Disbursement
bank fees

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

 253.34

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:

Full Name (Last, First, Middle Initial)

B. SunTrust Bank

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2013

Mailing Address One Park Place

City	State	Zip Code
Atlanta	GA	30303

Transaction ID : SB29.5422Purpose of Disbursement
credit card fee

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

 9.49

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:

Full Name (Last, First, Middle Initial)

C. SunTrust Bank

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2013

Mailing Address One Park Place

City	State	Zip Code
Atlanta	GA	30303

Transaction ID : SB29.5423Purpose of Disbursement
credit card fee

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

 35.50

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

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

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►
 298.33
TOTAL This Period (last page this line number only)..... ►

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

PAGE 13 OF 16

<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)

Association of Fundraising Professionals Political Action Committee

Full Name (Last, First, Middle Initial)

A. SunTrust Bank

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2013

Mailing Address One Park Place

City	State	Zip Code
Atlanta	GA	30303

Purpose of Disbursement
credit card fee

Candidate Name

Category/
Type**Transaction ID : SB29.5424**

Amount of Each Disbursement this Period

47.66

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:

Full Name (Last, First, Middle Initial)

B. SunTrust Bank

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2013

Mailing Address One Park Place

City	State	Zip Code
Atlanta	GA	30303

Purpose of Disbursement
bank fees

Candidate Name

Category/
Type**Transaction ID : SB29.5455**

Amount of Each Disbursement this Period

160.69

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:

Full Name (Last, First, Middle Initial)

C. SunTrust Bank

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2013

Mailing Address One Park Place

City	State	Zip Code
Atlanta	GA	30303

Purpose of Disbursement
bank fees

Candidate Name

Category/
Type**Transaction ID : SB29.5425**

Amount of Each Disbursement this Period

237.50

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

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

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

445.85

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

PAGE 14 OF 16

<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)

Association of Fundraising Professionals Political Action Committee

Full Name (Last, First, Middle Initial)

A. SunTrust Bank

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2013

Mailing Address One Park Place

City	State	Zip Code
Atlanta	GA	30303

Transaction ID : SB29.5426

Purpose of Disbursement
credit card fee

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

9.65

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:

Full Name (Last, First, Middle Initial)

B. SunTrust Bank

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2013

Mailing Address One Park Place

City	State	Zip Code
Atlanta	GA	30303

Transaction ID : SB29.5427

Purpose of Disbursement
credit card fee

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

31.40

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:

Full Name (Last, First, Middle Initial)

C. SunTrust Bank

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2013

Mailing Address One Park Place

City	State	Zip Code
Atlanta	GA	30303

Transaction ID : SB29.5428

Purpose of Disbursement
credit card fee

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

35.76

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

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

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

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

76.81

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

PAGE 15 OF 16

<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)

Association of Fundraising Professionals Political Action Committee

Full Name (Last, First, Middle Initial)

A. SunTrust Bank

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2013

Mailing Address One Park Place

City	State	Zip Code
Atlanta	GA	30303

Transaction ID : SB29.5456Purpose of Disbursement
bank fees

Amount of Each Disbursement this Period

Candidate Name

Category/ Type

160.49

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

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
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Full Name (Last, First, Middle Initial)

B. SunTrust Bank

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2013

Mailing Address One Park Place

City	State	Zip Code
Atlanta	GA	30303

Transaction ID : SB29.5451Purpose of Disbursement
bank fee

Amount of Each Disbursement this Period

Candidate Name

Category/ Type

217.44

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

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
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Full Name (Last, First, Middle Initial)

C. SunTrust Bank

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2013

Mailing Address One Park Place

City	State	Zip Code
Atlanta	GA	30303

Transaction ID : SB29.5452Purpose of Disbursement
credit card fee

Amount of Each Disbursement this Period

Candidate Name

Category/ Type

3.55

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

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
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SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

381.48

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

PAGE 16 OF 16

<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)

Association of Fundraising Professionals Political Action Committee

Full Name (Last, First, Middle Initial)

A. SunTrust Bank

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2013

Mailing Address One Park Place

City	State	Zip Code
Atlanta	GA	30303

Purpose of Disbursement
credit card fee

Candidate Name

Category/
Type

Transaction ID : SB29.5453

Amount of Each Disbursement this Period

25.65

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:

Full Name (Last, First, Middle Initial)

B. SunTrust Bank

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2013

Mailing Address One Park Place

City	State	Zip Code
Atlanta	GA	30303

Purpose of Disbursement
credit card fee

Candidate Name

Category/
Type

Transaction ID : SB29.5454

Amount of Each Disbursement this Period

27.84

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:

Full Name (Last, First, Middle Initial)

C. SunTrust Bank

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2013

Mailing Address One Park Place

City	State	Zip Code
Atlanta	GA	30303

Purpose of Disbursement
bank fees

Candidate Name

Category/
Type

Transaction ID : SB29.5457

Amount of Each Disbursement this Period

160.40

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

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

State: District:

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

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

213.89

1416.36
