

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Airports Council International-North America PAC

ADDRESS (number and street) 1615 L St NW Suite 300 Washington DC 20036 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00341800 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31 Year-End Report (YE) (b) Monthly Report Due On: Feb 20 (M2), May 20 (M5), Aug 20 (M8), Nov 20 (M11), Mar 20 (M3), Jun 20 (M6), Sep 20 (M9), Dec 20 (M12), Apr 20 (M4), Jul 20 (M7), Oct 20 (M10), Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S) (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 11 / 25 / 2014 through 12 / 31 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Kevin Burke

Signature of Treasurer Kevin Burke [Electronically Filed] Date 01 / 30 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only table with 8 columns and 1 row. FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Airports Council International-North America PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		58068.59
(b) Cash on Hand at Beginning of Reporting Period.....		
(c) Total Receipts (from Line 19) .....	2025.06	32837.79
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	2025.06	90906.38
7. Total Disbursements (from Line 31).....	36.49	41764.65
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	1988.57	49141.73
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....		
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....		

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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

## DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Airports Council International-North America PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y 11 / 25 / 2014 To: M M / D D / Y Y Y Y 12 / 31 / 2014

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1995.06	25494.79
(ii) Unitemized .....	30	6343
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2025.06	31837.79
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs).....		1000
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	2025.06	32837.79
12. Transfers From Affiliated/Other Party Committees.....		
13. All Loans Received .....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17. Other Federal Receipts (Dividends, Interest, etc.).....		
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....		
(b) Levin Funds (from Schedule H5) .....		
(c) Total Transfers (add 18(a) and 18(b))..		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	2025.06	32837.79
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	2025.06	32837.79

**DETAILED SUMMARY PAGE**

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures .....	36.49	764.65
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	36.49	764.65
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		41000
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements .....		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	36.49	41764.65
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	36.49	41764.65

**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) .....	2025.06	32837.79
34. Total Contribution Refunds (from Line 28(d)) .....		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2025.06	32837.79
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	36.49	764.65
37. Offsets to Operating Expenditures (from Line 15, page 3).....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	36.49	764.65

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 10
<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Airports Council International-North America PAC**

**A. Ms Ann Bellavia**  
Full Name (Last, First, Middle Initial)  
Mailing Address 619 North Edison Street  
City Arlington State VA Zip Code 22203  
FEC ID number of contributing federal political committee. **C**  
Name of Employer ACI-NA Occupation Senior Director of Govmt Affairs  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **654**

Date of Receipt  
**12 / 31 / 2014**  
**Transaction ID : SA11Ai-CNP1956**  
Amount of Each Receipt this Period  
**63**  
3 Payroll Deduction(s)

**B. Kevin Burke**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1615 L Street NW Suite 300  
City Washington State DC Zip Code 20036  
FEC ID number of contributing federal political committee. **C**  
Name of Employer ACI-NA Occupation CEO  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **2749.87**

Date of Receipt  
**12 / 31 / 2014**  
**Transaction ID : SA11Ai-CNP1966**  
Amount of Each Receipt this Period  
**326.07**  
3 Payroll Deduction(s)

**C. Matthew Cornelius**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3205 6th Street South  
City Arlington State VA Zip Code 22204  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Airports Council International Occupation Managing Director Of Air Policy  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **360**

Date of Receipt  
**12 / 31 / 2014**  
**Transaction ID : SA11Ai-CNP1957**  
Amount of Each Receipt this Period  
**45**  
3 Payroll Deduction(s)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>434.07</b>
<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: (check only one)	PAGE 7 OF 10
<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)  
**Airports Council International-North America PAC**

**A. Mr. Greg Cota**  
Full Name (Last, First, Middle Initial)  
Mailing Address 627 Williams Dr  
City Alexandria State VA Zip Code 22307  
FEC ID number of contributing federal political committee. **C**  
Name of Employer ACI-NA Occupation Director of Government Affairs  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **504**

Date of Receipt **12 / 31 / 2014**  
**Transaction ID : SA11Ai-CNP1962**  
Amount of Each Receipt this Period **63**  
3 Payroll Deduction(s)

**B. Mr. Tom Devine**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1233 Shenandoah Rd.  
City Alexandria State VA Zip Code 22308  
FEC ID number of contributing federal political committee. **C**  
Name of Employer ACI-NA Occupation General Counsel  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **1800**

Date of Receipt **12 / 31 / 2014**  
**Transaction ID : SA11Ai-CNP1964**  
Amount of Each Receipt this Period **300**  
3 Payroll Deduction(s)

**C. George Kelemen**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6896 View Park Drive  
City Burke State VA Zip Code 22015  
FEC ID number of contributing federal political committee. **C**  
Name of Employer ACI-NA Occupation Senior VP of Government and Political  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **1306**

Date of Receipt **12 / 31 / 2014**  
**Transaction ID : SA11Ai-CNP1961**  
Amount of Each Receipt this Period **135**  
3 Payroll Deduction(s)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>498.00</b>
<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: (check only one)	PAGE 8 OF 10
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Airports Council International-North America PAC**

Full Name (Last, First, Middle Initial)  
**A. Deborah McElroy**

Mailing Address 5511 Pt. Longstreet Way

City State Zip Code  
Burke VA 22015

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

Name of Employer Occupation  
ACI-NA Executive Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4999.92

Date of Receipt  
12 / 31 / 2014  
**Transaction ID : SA11Ai-CNP1958**

Amount of Each Receipt this Period  
624.99

3 Payroll Deduction(s)

Full Name (Last, First, Middle Initial)  
**B. Mr. Christopher Oswald**

Mailing Address 9562 Ament Street

City State Zip Code  
Silver Spring MD 20910

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

Name of Employer Occupation  
ACI-NA VP Safety and Operations

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2400

Date of Receipt  
12 / 31 / 2014  
**Transaction ID : SA11Ai-CNP1959**

Amount of Each Receipt this Period  
300

3 Payroll Deduction(s)

Full Name (Last, First, Middle Initial)  
**C. Mr. Nathan Pick**

Mailing Address 6219 18th Rd. N

City State Zip Code  
Arlington VA 22205

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

Name of Employer Occupation  
ACI-NA Director Of Advocacy

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
604

Date of Receipt  
12 / 31 / 2014  
**Transaction ID : SA11Ai-CNP1963**

Amount of Each Receipt this Period  
63

3 Payroll Deduction(s)

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	987.99
<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 9 OF 10  
(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)  
**Airports Council International-North America PAC**

**A. Katherine Preston**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1435 Parkwood Place NW  
City Washington State DC Zip Code 20010  
FEC ID number of contributing federal political committee. **C**  
Name of Employer ACI-NA Occupation Senior Director Environmental Affairs  
Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **600**

Date of Receipt  
**12 / 31 / 2014**  
**Transaction ID : SA11Ai-CNP1960**  
Amount of Each Receipt this Period  
**75**  
3 Payroll Deduction(s)

**B.**  
Full Name (Last, First, Middle Initial)  
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  
Amount of Each Receipt this Period

**C.**  
Full Name (Last, First, Middle Initial)  
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  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>75.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>1995.06</b>

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

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NAME OF COMMITTEE (In Full)  
**Airports Council International-North America PAC**

Full Name (Last, First, Middle Initial)

**A. Merchant Services**

Mailing Address 7300 Chapman Hwy

City Knoxville State TN Zip Code 37920

Purpose of Disbursement  
processing fee

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : SB21b-EX465**

Amount of Each Disbursement this Period

processing fee

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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