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### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	or Other Than An Aut	nonzea Committee		Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
The American Occupat	ional Therapy Assoc	ciation, Inc. Political Act	ion Committe	ee (AOTPAC)
ADDRESS (number and street)	4720 Montgomery Lane, Su	ite 200		
Check if different than previously reported. (ACC)	Bethesda		MD	20814-3449
2. FEC IDENTIFICATION NU	MBER ▼ CIT	TY A	STATE ▲	ZIP CODE ▲
C C00089086		S THIS NEW (N) OR		ENDED
4. TYPE OF REPORT (Choose One)	Report Due On:	20 (M2) May 20 (M5) 20 (M3) Jun 20 (M6)		0 (M8) Nov 20 (M11) (Non-Election Year Only) 0 (M9) Dec 20 (M12)
(a) Quarterly Reports:				(Non-Election Year Only)
April 15 Quarterly Report (Q	1)	20 (M4) Jul 20 (M7)		0 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q:	PRE-Election	Primary (12P)  Convention (12C)	General (1	
October 15 Quarterly Report (Q	·	<u> </u>		
January 31 Year-End Report (YI	E) Electio	on on	Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30	Special (30S)
Termination Report (TER)	Electio	on on	Y Y Y Y Y	in the State of
5. Covering Period 02		through 02	M / D D / 28	2017
I certify that I have examined thi Type or Print Name of Treasurer	Metzler, Christina A., , ,	my knowledge and belief it is	true, correct and	complete.
Signature of Treasurer Metzle	er, Christina A., , ,	[Electronically Filed]	Date 03	16 2017
NOTE: Submission of false, errone	ous, or incomplete information	n may subject the person signing	this Report to the	penalties of 52 U.S.C. § 3010
Office Use				FEC FORM 3X Rev. 05/2016

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

#### The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC)

02 01 2017 02 28 2017 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 65952.56 January 1, 2017 (b) Cash on Hand at 70563.49 Beginning of Reporting Period..... 11533.19 21467.88 Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 87420.44 82096.68 6(a) and 6(c) for Column B)..... 8816.27 14140.03 7. Total Disbursements (from Line 31)..... Cash on Hand at Close of 8. Reporting Period 73280.41 73280.41 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 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. 05/2016)

Write or Type Committee Name

The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC)

Report Covering the Perio	od: From: 02	01 2017	To: 02 28 2017			
I. Recei	ots	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date			
11. Contributions (other that (a) Individuals/Persons Than Political Com	o Other					
	Schedule A)	2945.00	3695.00			
, ,		8575.17	17745.94			
(iii) TOTAL (add Lines 11(a)(i) a	and (ii)▶	11520.17	21440.94			
(b) Political Party Com		0.00	0.00			
(d) Total Contributions	(add Lines	0.00	0.00			
11(a)(iii), (b), and ( Totals to Line 33,   12. Transfers From Affiliate	page 5)	11520.17	21440.94			
Party Committees		0.00	0.00			
13. All Loans Received		0.00	0.00			
<ul><li>14. Loan Repayments Reco</li><li>15. Offsets To Operating Ex</li></ul>	xpenditures	0.00	0.00			
(Refunds, Rebates, etc (Carry Totals to Line 37) 16. Refunds of Contribution to Federal Candidates	7, page 5)	0.00	0.00			
Political Committees  17. Other Federal Receipts		0.00	0.00			
(Dividends, Interest, etc. 18. Transfers from Non-Fed	c.)deral and Levin Funds	13.02	26.94			
(a) Non-Federal Accour (from Schedule H3	3)	0.00	0.00			
(b) Levin Funds (from S	Schedule H5)	0.00	0.00			
(c) Total Transfers (add	18(a) and 18(b))	0.00	0.00			
19. Total Receipts (add Lin 12, 13, 14, 15, 16, 17,	1 1	11533.19	21467.88			
20. Total Federal Receipts (subtract Line 18(c) from	m Line 19)▶	11533.19	21467.88			

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
<ul> <li>Operating Expenditures:         <ul> <li>(a) Allocated Federal/Non-Federal</li> <li>Activity (from Schedule H4)</li> </ul> </li> </ul>		Caronida Toda to Date
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	316.27	640.03
(c) Total Operating Expenditures	010.21	
(add 21(a)(i), (a)(ii), and (b))▶  Transfers to Affiliated/Other Party	316.27	640.03
Committees	0.00	0.00
Federal Candidates/Committees and Other Political Committees	8500.00	13500.00
Independent Expenditures (use Schedule E)	0.00	0.00
Coordinated Party Expenditures (52 U.S.C. § 30116(d))		7 4
(use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans MadeRefunds of Contributions To:	0.00	0.00
(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	0.00	0.00
(add Lines 28(a), (b), and (c))	0.00	0.00
Other Disbursements (Including		
Non-Federal Donations)	0.00	0.00
Federal Election Activity (52 U.S.C. § 30101(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))	7 7 7	
2.1103 00(a)(i), 00(a)(ii) and 00(b))	0.00	0.00
Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	8816.27	14140.03
Total Federal Disbursements		4 4
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	8816.27	14140.03

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Not Contributional	COLUMN A	COLUMNIA
III. Net Contributions/ Operating Expenditures	Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	11520.17	21440.94
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11520.17	21440.94
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	316.27	640.03
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	316.27	640.03

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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Detailed Summary Page 13 14 15 16 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) The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name McCormack, Guy, Louis, , Date of Receipt Mailing Address 1110 Cantu Ct 2017 City Zip Code State Transaction ID: 74940766 CA Seaside 93955-6114 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Occupational Therapist Samuel Merritt Univ. Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Lueck-Mammen, Rosalyn, Lee, Date of Receipt Mailing Address 1516 S Titlow Rd 2017 City State Zip Code Transaction ID: 74984413 WA Tacoma 98465-1022 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Retired Occupational Therapist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 365.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Winthrop, Barbara, , , Date of Receipt Mailing Address 4919 Holly St 16 2017 City Zip Code State Transaction ID: 74987859 TX Bellaire 77401-5714 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) DBA Aaron & Winthrop Hand Therapy Serv Occupational Therapist Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1865.00 SUBTOTAL of Receipts This Page (optional)..... 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

F	FOR LINE NUMBER:				PAGE	7	OF		10	
(check only one)										
	X	11a		11b		11c	12	2		
		13		14		15	16	6		17

Detailed Summary Page 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) The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Hanebrink, Sandra, , , Date of Receipt Mailing Address 707 Sunny Shore Ln 2017 City Zip Code State Transaction ID: 74997408 SC Anderson 29621-3445 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Occupational Therapist Wheeldoas Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Berthelette, Michael, Thomas, Date of Receipt Mailing Address 4311 S Cameron Ave 2017 City State Zip Code Transaction ID: 74997460 FL Tampa 33611-1327 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) BMR Health Services, Inc. Occupational Therapist Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Inda, Kari, Christine, DR, Date of Receipt Mailing Address W144n10444 Heritage Hills Pkwy 2017 City Zip Code State Transaction ID: 75064370 WI Germantown 53022-4374 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Mount Mary College Occupational Therapist Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 715.00 SUBTOTAL of Receipts This Page (optional)..... 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

	F	FOR LINE NUMBER: PAGE 8 OF 10						10		
(check only one)										
		X	11a		11b		11c	12		
			13		14		15	16		17

Detailed Summary Page 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) The American Occupational Therapy Association, Inc. Political Action Committee (AOTPAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Skidmore, Elizabeth, Renee, , Date of Receipt Mailing Address Occupational Therapy 5012 Forbes Tower 13 2017 City Zip Code State Transaction ID: 75064395 Pittsburgh PA 15260-7406 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Occupational Therapist University of Pittsburgh Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 365.00 SUBTOTAL of Receipts This Page (optional)..... 2945.00 TOTAL This Period (last page this line number only).....

#### S 17

SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 9				
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only				
		Summary Page	<b>X</b> 21b 28a	22 23 28b 28c	26 27 29 30b		
Any information copied from such Reports and State	ments mav	not be sold or use					
or for commercial purposes, other than using the na							
NAME OF COMMITTEE (In Full)			D 193		(AOTDAG)		
The American Occupational Thera	apy Asso	ciation, Inc.	Political Ad	ction Committe	e (AOTPAC)		
Full Name (Last, First, Middle Initial)				Date of Disburser	nont		
A. SunTrust Bank				Date of Disburser			
Mailing Address PO Box 4418, Mail Code 1948				02 16			
City	State GA	Zip Code		FEC Identification	Number		
Atlanta Purpose of Disbursement	GA	30302		С			
Bank Fees on Account			001		D - 74055466		
Candidate Name			Category/	Transaction ID: 74955466  Amount of Each Disbursement this Period			
Office Sought: House Disburse	ement For:		Туре		316.27		
Senate Disburse	Primary	General			4 4		
President	Other (spe	ecify) 🔻		Memo Item	ank Fees on Account		
State: District:							
Full Name (Last, First, Middle Initial) <b>B.</b>	Full Name (Last, First, Middle Initial)						
<b>-</b>				Date of Disbursement			
Mailing Address							
City	State	Zip Code		FEC Identification	Number		
Purpose of Disbursement				С			
·				<u> </u>			
Candidate Name			Category/	Amount of Each Disbursement this Period			
Office Sought: House Disburse	ment For:		Туре				
Senate	Primary	General		4 4			
President	Other (spe	ecify)		Memo Item			
State: District:  Full Name (Last, First, Middle Initial)				_			
C.				Date of Disburser	nent		
				M M / D I	) / Y Y Y Y Y		
Mailing Address							
City	State	Zip Code		FEC Identification Number			
Purpose of Disbursement				С			
O. F.L. N							
Candidate Name	Candidate Name Category/ Type						
Office Sought: House Disburse							
Senate	Primary Other (spe	General			,		
State: District:		Memo Item					
1							
SUBTOTAL of Disbursements This Page (optional).			·····•		316.27		
TOTAL This Period (last page this line number only	<i>(</i> )				316.27		

# 17

SCHEDULE B (FEC Form 3X)	Han non-mate a la l	FOR LINE	PAGE 10 OF 10			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only				
	Detailed Summary Page	21b 28a	22 <b>x</b> 23 28c	26 27 29 30b		
Any information copied from such Reports and Statem	I nents may not be sold or us	ed by any perso	on for the purpose of s	oliciting contributions		
or for commercial purposes, other than using the nam						
NAME OF COMMITTEE (In Full)	_		_			
The American Occupational Therap	by Association, Inc.	Political Ac	tion Committee	(AOTPAC)		
Full Name (Last, First, Middle Initial)	B (B) .					
A. Nancy Pelosi For Congress			Date of Disbursement			
Mailing Address 700 13th Street, Nw Suite 600			02 15	2017		
,	State Zip Code DC 20005		FEC Identification N	umber		
Washington Purpose of Disbursement	DC 20005		000040540			
campaign contribution		011	C C00213512	71010710		
Candidate Name		Category/	Transaction ID  Amount of Each Dis	: 74942710 bursement this Period		
Pelosi, Nancy, , Rep.,		Type				
0	nent For: 2018			2500.00		
	Primary General Other (specify) ▼			paign contribution		
State: CA District: 12	onior (apoony) ▼		Memo Item			
Full Name (Last, First, Middle Initial)						
B. Richard E Neal For Congress Com	mittee		Date of Disburseme	nt		
			M = M / D = D   15	2017		
Mailing Address 76 Magnolia Terrace						
,						
Purpose of Disbursement	MA 01108		C C00226522			
campaign contribution		011	Transaction ID	7/0/2711		
Candidate Name		Category/		bursement this Period		
Neal, Richard, E., Rep.,		Type		4000.00		
	nent For: 2018			1000.00		
	Primary General Other (specify)			npaign contribution		
State: MA District: 01	(opconj)		Memo Item			
Full Name (Last, First, Middle Initial)						
C. Democratic Congressional Campai	•					
Mailing Address 100.0 H. O. H. O. H. O.			M M / D D / Y Y Y Y			
Mailing Address 430 South Capitol St., SE			02 15	2017		
City	State Zip Code		FEC Identification N	umber		
Washington	DC 20003		C	uboi		
Purpose of Disbursement campaign contribution	Purpose of Disbursement campaign contribution					
Candidate Name		011 Category/	Transaction ID	-		
	Amount of Each Dis	bursement this Period				
Office Sought: House Disbursen	Type		5000.00			
	Primary General		can	npaign contribution		
	Other (specify) ▼		Memo Item			
State: District:						
SUBTOTAL of Disbursements This Page (optional)				8500.00		
COSTOTAL OF DISDUISEMENTS THIS Page (Optional)		·····		7 7		
TOTAL This Period (last page this line number only).			1	8500.00		