

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
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2016 OCT 31 AM 11:23  
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1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines. **12FE4M5**

American Association of Preferred Provider Organizations Political Action Committee

ADDRESS (number and street) **974 Breckenridge Lane**  
**#162**  
Check if different than previously reported. (ACC) **Louisville KY 40207**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

**C00352922**

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 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)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)

Election on **11 02 2016** in the State of

(d) 30-Day POST-Election Report for the:  General (30G)  Runoff (30R)  Special (30S)

Election on M M / D D / Y Y Y Y in the State of

5. Covering Period **10 01 2016** through **10 19 2016**

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 **KAREN L GREENROSE**

Signature of Treasurer **Karen L Greenrose** Date **10 26 2016**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

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

2016 OCT 31 AM 11:23

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name American Association of Preferred Provider Organizations Political Action Committee

Report Covering the Period: From: 10 ' 10 ' 2016 To: 10 ' 19 ' 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2016</u>		-1893.46
(b) Cash on Hand at Beginning of Reporting Period.....	-573.6	
(c) Total Receipts (from Line 19).....	0	10,760.09
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	-573.6	9866.54
7. Total Disbursements (from Line 31).....	3253	9472.74
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	-606.20	-606.20
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0	

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)

Page 3

Write or Type Committee Name American Association of Preferred Provider Organizations Political Action Committee

Report Covering the Period: From: 10 ' 01 ' 2016 To: 10 ' 19 ' 2016

**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).....

0

5950.00

(ii) Unitemized.....

0

4810.00

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

0

10,760.00

(b) Political Party Committees.....

0

0

(c) Other Political Committees (such as PACs).....

0

0

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

0

10,760.00

12. Transfers From Affiliated/Other Party Committees.....

0

0

13. All Loans Received.....

0

0

14. Loan Repayments Received.....

0

0

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

0

0

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

0

0

17. Other Federal Receipts (Dividends, Interest, etc.).....

0

0

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

0

0

(b) Levin Funds (from Schedule H5).....

0

0

(c) Total Transfers (add 18(a) and 18(b))..

0

0

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

0

10,760.00

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

0

10,760.00

2016-10-19 10:00:00

**DETAILED SUMMARY PAGE**  
of Disbursements

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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	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures .....	32,533	3,472.74
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	32,533	3,472.74
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0	6,000.00
24. Independent Expenditures (use Schedule E).....	0	0
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0	0
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements (Including Non-Federal Donations).....	0	0
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0	0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	32,533	9,472.74
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	32,533	9,472.74

NON-FEDERAL DISBURSEMENTS

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

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) .....	0	10,760.00
34. Total Contribution Refunds (from Line 28(d)) .....	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0	10,760.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	32,533	3,472.74
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	32,533	3,472.74

COLUMN A AND COLUMN 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)

PAGE 1 OF 1

21b  
 22  
 23  
 26  
 27  
 28a  
 28b  
 28c  
 29  
 30b

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 Association of Preferred Powder Organizations Political Action Committee

**A.** Full Name (Last, First, Middle Initial) SunTrust Bank  
 Mailing Address PO Box 37230  
 City Nashville State TN Zip Code 37230  
 Purpose of Disbursement bank fees  
 Candidate Name \_\_\_\_\_  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_  
 State: \_\_\_\_\_ District: \_\_\_\_\_  
 Date of Disbursement 10/09/2016  
 FEC Identification Number C  
 Amount of Each Disbursement this Period 20.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial) SunTrust Bank  
 Mailing Address PO Box 37230  
 City Nashville State TN Zip Code 37230  
 Purpose of Disbursement bank fees  
 Candidate Name \_\_\_\_\_  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_  
 State: \_\_\_\_\_ District: \_\_\_\_\_  
 Date of Disbursement 10/03/2016  
 FEC Identification Number C  
 Amount of Each Disbursement this Period 12.53  
 Memo Item

**C.** Full Name (Last, First, Middle Initial) \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Purpose of Disbursement \_\_\_\_\_  
 Candidate Name \_\_\_\_\_  
 Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) \_\_\_\_\_  
 State: \_\_\_\_\_ District: \_\_\_\_\_  
 Date of Disbursement \_\_\_\_\_  
 FEC Identification Number \_\_\_\_\_  
 Amount of Each Disbursement this Period \_\_\_\_\_  
 Memo Item

**SUBTOTAL** of Disbursements This Page (optional) ..... 32.53  
**TOTAL** This Period (last page this line number only) ..... 32.53

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<input type="checkbox"/> USPS Priority Mail	Postmarked
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<input type="checkbox"/> USPS Priority Mail Express	Postmarked
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<input type="checkbox"/> Postmark Illegible	
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<input type="checkbox"/> No Postmark	
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Next Business Day Delivery	<input type="checkbox"/>

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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
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 PREPARER	10/31/16 DATE PREPARED
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