

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 Professional Association for Customer Engagement PAC

ADDRESS (number and street) 8500 Keystone Crossing Suite 480 Indianapolis IN 46240 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00397083 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, July 31 Mid-Year Report (X), Termination Report (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), 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 01 / 01 / 2015 through 06 / 30 / 2015

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 Christine Haerich

Signature of Treasurer Christine Haerich [Electronically Filed] Date 07 / 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.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**Professional Association for Customer Engagement 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="2015"/>		12377.37
(b) Cash on Hand at Beginning of Reporting Period.....	12377.37	
(c) Total Receipts (from Line 19) .....	3175.30	3175.30
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	15552.67	15552.67
7. Total Disbursements (from Line 31).....	3000.00	3000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	12552.67	12552.67
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Professional Association for Customer Engagement PAC**

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

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).....	730.83	730.83
(ii) Unitemized .....	2444.47	2444.47
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	3175.30	3175.30
(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) .....	3175.30	3175.30
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))..... ▶	3175.30	3175.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	3175.30	3175.30

**DETAILED SUMMARY PAGE**

of Disbursements

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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 .....	3000.00	3000.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3000.00	3000.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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 .....	0.00	0.00
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)) ..	3000.00	3000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3000.00	3000.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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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) .....	3175.30	3175.30
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3175.30	3175.30
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	3000.00	3000.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3000.00	3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 10
	(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"/> 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)  
**Professional Association for Customer Engagement PAC**

Full Name (Last, First, Middle Initial) <b>A. Richard Garon</b>		Date of Receipt MM / DD / YYYY 01 / 02 / 2015 <b>Transaction ID : SA11AI.4790</b>
Mailing Address 23800 W 10 Mile Rd Suite 200		Amount of Each Receipt this Period 346.13
City Southfield	State MI	Zip Code 48033
FEC ID number of contributing federal political committee. C	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 384.60	

Full Name (Last, First, Middle Initial) <b>B. Richard Garon</b>		Date of Receipt MM / DD / YYYY 01 / 09 / 2015 <b>Transaction ID : SA11AI.4483</b>
Mailing Address 23800 W 10 Mile Rd Suite 200		Amount of Each Receipt this Period 38.47
City Southfield	State MI	Zip Code 48033
FEC ID number of contributing federal political committee. C	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 423.07	

Full Name (Last, First, Middle Initial) <b>C. Richard Garon</b>		Date of Receipt MM / DD / YYYY 01 / 16 / 2015 <b>Transaction ID : SA11AI.4512</b>
Mailing Address 23800 W 10 Mile Rd Suite 200		Amount of Each Receipt this Period 38.47
City Southfield	State MI	Zip Code 48033
FEC ID number of contributing federal political committee. C	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.54	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	423.07
<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 OF 10  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Professional Association for Customer Engagement PAC**

**A. Richard Garon**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23800 W 10 Mile Rd  
 Suite 200  
 City Southfield State MI Zip Code 48033  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.01

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 23 / 2015  
**Transaction ID : SA11AI.4548**  
 Amount of Each Receipt this Period  
 38.47

**B. Richard Garon**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23800 W 10 Mile Rd  
 Suite 200  
 City Southfield State MI Zip Code 48033  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 538.48

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 30 / 2015  
**Transaction ID : SA11AI.4549**  
 Amount of Each Receipt this Period  
 38.47

**C. Richard Garon**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23800 W 10 Mile Rd  
 Suite 200  
 City Southfield State MI Zip Code 48033  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 576.95

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 06 / 2015  
**Transaction ID : SA11AI.4550**  
 Amount of Each Receipt this Period  
 38.47

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 115.41  
**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 OF 10  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Professional Association for Customer Engagement PAC**

Full Name (Last, First, Middle Initial)  
**A. Richard Garon**

Mailing Address 23800 W 10 Mile Rd  
Suite 200

City State Zip Code  
Southfield MI 48033

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
615.42

Date of Receipt  
MM / DD / YYYY  
02 / 13 / 2015

**Transaction ID : SA11AI.4551**

Amount of Each Receipt this Period  
38.47

Full Name (Last, First, Middle Initial)  
**B. Richard Garon**

Mailing Address 23800 W 10 Mile Rd  
Suite 200

City State Zip Code  
Southfield MI 48033

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
653.89

Date of Receipt  
MM / DD / YYYY  
02 / 20 / 2015

**Transaction ID : SA11AI.4552**

Amount of Each Receipt this Period  
38.47

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

Mailing Address 23800 W 10 Mile Rd  
Suite 200

City State Zip Code  
Southfield MI 48033

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
692.36

Date of Receipt  
MM / DD / YYYY  
02 / 27 / 2015

**Transaction ID : SA11AI.4553**

Amount of Each Receipt this Period  
38.47

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 115.41

**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 9 OF 10  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Professional Association for Customer Engagement PAC**

**A. Richard Garon**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23800 W 10 Mile Rd  
 Suite 200  
 City Southfield State MI Zip Code 48033  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 730.83

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 06 / 2015  
**Transaction ID : SA11AI.4728**  
 Amount of Each Receipt this Period  
 38.47

**B. Richard Garon**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23800 W 10 Mile Rd  
 Suite 200  
 City Southfield State MI Zip Code 48033  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 769.30

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2015  
**Transaction ID : SA11AI.4761**  
 Amount of Each Receipt this Period  
 38.47

**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  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	76.94
<b>TOTAL</b> This Period (last page this line number only).....▶	730.83

**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)

**Professional Association for Customer Engagement PAC**

Full Name (Last, First, Middle Initial)

**A. CPA Somerset**

Mailing Address 3925 River Crossing Pkwy, Ste 300,

City Indianapolis State Zip Code 46240

Purpose of Disbursement  
accounting work

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 17 / 2015

**Transaction ID : SB21B.4821**

Amount of Each Disbursement this Period

3000.00

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

3000.00

3000.00