05/15/2002 12 : 03

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) — **USE FEC MAILING LABEL OR TYPE OR PRINT** ▼ — Example: If typing, type over the lines

American Institute of Certified Public Accountants Effective Legislation Committee

ADDRESS (number and street) ▼

Check if different than previously reported. (ACC)

Harborside Financial Center

201 Plaza III

Jersey City | NJ | 07311 –

2. **FEC IDENTIFICATION NUMBER** ▼ — CITY ▲ — STATE ▲ — ZIPCODE ▲

C00077321

3. IS THIS REPORT — NEW (N) **OR** X 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 Quarterly 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)	X Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (M13)

(c) 12-Day **PRE**-Election Report for the: Primary (12P) — General (12G) — Runoff (12R) — Convention (12C) — Special (12S)

Election on — in the State of

(d) 30-Day **P**ost -Election Report for the: General (30G) — Runoff (30R) — Special (30S)

Election on — in the State of

5. Covering Period 08 01 2001 through 08 31 2001

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 Ms Dale Atherton

Signature of Treasurer Electronically Filed by Ms Dale Atherton — Date 05 15 2002

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** (Revised 1/2001)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC **Form 3X** (Revised 1/2001)

Write or Type Committee Name

American Institute of Certified Public Accountants Effective Legislation Committee

Report Covering the Period: From: 08 01 2001 To: 08 31 2001

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2001		356476.10
(b) Cash on Hand at Begining of Reporting Period	333381.50	
(c) Total Receipts (from Line 19)	161314.86	413452.23
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	494696.36	769928.33
7. Total Disbursements (from Line 30)	30002.59	305234.56
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	464693.77	464693.77
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	

X 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

Write or Type Committee Name

American Institute of Certified Public Accountants Effective Legislation Committee

Report Covering the Period: From: 08 01 2001 To: 08 31 2001

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)	0.00	
(ii) Unitemized	161091.50	
(iii) TOTAL (add Lines 11(a)(i) and (ii) ▶	161091.50	403540.71
(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 32, page 4) ▶	161091.50	403540.71
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 36, page 4)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	4000.00
17. Other Federal Receipts Dividends, Interest, etc.)	223.36	5911.52
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) ▶	161314.86	413452.23
20. Total Federal Receipts (subtract Line 18 from Line 19) ▶	161314.86	413452.23

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Revised 1/2001)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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	902.59	5014.85
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	902.59	5014.85
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	29100.00	300219.71
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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. Total Disbursements (add Lines 21(c), 22, 23,24,25,26,27,28(d),and 29) ▶	30002.59	305234.56
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30) ▶	30002.59	305234.56

III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3)	161091.50	403540.71
33. Total Contribution Refunds (from Line 28(d))	0.00	0.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	161091.50	403540.71
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	902.59	5014.85
36. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35) ▶	902.59	5014.85

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 5 / 14

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

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NAME OF COMMITTEE (In Full)
American Institute of Certified Public Accountants Effective Legislation Committee

A.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

Name of Employer | Occupation

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
237462.19

Date of Receipt
08 31 2001

Amount of Each Receipt this Period
223.36

Transaction ID: SA17.4537

B.

C.

SUBTOTAL of Receipts This Page (optional) ..... ▶	**223.36**
TOTAL This Period (last page this line number only) ..... ▶	**223.36**

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)

[X] 21b [ ] 22 [ ] 23 [ ] 24 [ ] 25
[ ] 26 [ ] 27 [ ] 28a [ ] 28b [ ] 28c [ ] 29

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NAME OF COMMITTEE (In Full)
American Institute of Certified Public Accountants Effective Legislation Committee

A.

Full Name (Last, First, Middle Initial)
MAJORITY LEADER'S FUND

Mailing Address
4451 BROOKFIELD CORPORATE DR #200

City: CHANTILLY
State: VA
Zip Code: 20151

Purpose of Disbursement
Reimburse for Inkind Contribution for A

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District:

Disbursement For: Primary / General / Other (specify)

Date of Disbursement
08 / 08 / 2001

Amount of Each Disbursement this Period
902.59

Transaction ID: SB21B.4541

B.

C.

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **902.59**

TOTAL This Period (last page this line number only) ..... ▶ **902.59**

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
American Institute of Certified Public Accountants Effective Legislation Committee

A.
Full Name (Last, First, Middle Initial): ARMPAC
Mailing Address: 1300 Pennsylvania Ave., NW
City: Washington State: DC Zip Code: 20004
Purpose of Disbursement: Voided Check-ARMPAC
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary General / Other (specify)
Date of Disbursement: 08 08 2001
Amount of Each Disbursement this Period: -5000.00
Transaction ID: SB23.4566

B.
Full Name (Last, First, Middle Initial): ARMPAC
Mailing Address: 1300 Pennsylvania Ave., NW
City: Washington State: DC Zip Code: 20004
Purpose of Disbursement: In-Kind for ARMPAC
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary General / Other (specify)
Date of Disbursement: 08 08 2001
Amount of Each Disbursement this Period: 902.59
Transaction ID: SB23.4567

C.
Full Name (Last, First, Middle Initial): ARMPAC
Mailing Address: 1300 Pennsylvania Ave., NW
City: Washington State: DC Zip Code: 20004
Purpose of Disbursement:
Candidate Name
Category/Type
Office Sought: House / Senate / President
State: District:
Disbursement For: Primary General / Other (specify)
Date of Disbursement: 08 08 2001
Amount of Each Disbursement this Period: 4097.41
Transaction ID: SB23.4568

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 0.00

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

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
American Institute of Certified Public Accountants Effective Legislation Committee

A.
Full Name (Last, First, Middle Initial)
JOHN A BOEHNER

Mailing Address
7908-I CINCINNATI DAYTON RD

City: WEST CHESTER
State: OH
Zip Code: 45069

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: X House / Senate / President
State: OH District: 06

Disbursement For: X Primary / General / Other (specify)

Date of Disbursement: 08 / 20 / 2001

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.4571

B.
Full Name (Last, First, Middle Initial)
BOUCHER FOR CONGRESS COMMITTEE

Mailing Address
PO BOX 2000
PO BOX 2000

City: ABINGDON
State: VA
Zip Code: 24212

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: X House / Senate / President
State: VA District: 09

Disbursement For: X Primary / General / Other (specify)

Date of Disbursement: 08 / 21 / 2001

Amount of Each Disbursement this Period: 1500.00

Transaction ID: SB23.4575

C.
Full Name (Last, First, Middle Initial)
STEVE BUYER

Mailing Address
2105 AIRPORT RD

City: MONTICELLO
State: IN
Zip Code: 47960

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: X House / Senate / President
State: IN District: 05

Disbursement For: X Primary / General / Other (specify)

Date of Disbursement: 08 / 07 / 2001

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.4565

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **3500.00**

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

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
American Institute of Certified Public Accountants Effective Legislation Committee

A. Full Name (Last, First, Middle Initial)
SHELLEY MOORE CAPITO

Mailing Address
2 COMSTOCK PLACE
City: CHARLESTON State: WV Zip Code: 25314

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: X House / Senate / President
State: WV District: 02

Disbursement For: X Primary / General / Other (specify)

Date of Disbursement: 08 / 24 / 2001

Amount of Each Disbursement this Period: 500.00

Transaction ID: SB23.4578

B. Full Name (Last, First, Middle Initial)
CASTLE CAMPAIGN FUND

Mailing Address
P.O Box 133
City: Wilmington State: DE Zip Code: 19899

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: X House / Senate / President
State: DE District: 00

Disbursement For: X Primary / General / Other (specify)

Date of Disbursement: 08 / 20 / 2001

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.4572

C. Full Name (Last, First, Middle Initial)
COLLINS FOR SENATOR

Mailing Address
PO BOX 1096
City: BANGOR State: ME Zip Code: 04402

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: House / X Senate / President
State: ME District: 00

Disbursement For: X Primary / General / Other (specify)

Date of Disbursement: 08 / 16 / 2001

Amount of Each Disbursement this Period: 5000.00

Transaction ID: SB23.4569

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **6500.00**

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

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
☐ 26 ☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29

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NAME OF COMMITTEE (In Full)
American Institute of Certified Public Accountants Effective Legislation Committee

A. Full Name (Last, First, Middle Initial)
PETE V DOMENICI

Mailing Address
102 FIFTEENTH ST SW

City: ALBUQUERQUE State: NM Zip Code: 87102

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: House / X Senate / President
State: NM District: 00

Disbursement For: X Primary / General / Other (specify)

Date of Disbursement: 08 / 06 / 2001

Amount of Each Disbursement this Period: 4000.00

Transaction ID: SB23.4562

B. Full Name (Last, First, Middle Initial)
PETE V DOMENICI

Mailing Address
102 FIFTEENTH ST SW

City: ALBUQUERQUE State: NM Zip Code: 87102

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: House / X Senate / President
State: NM District: 00

Disbursement For: Primary / X General / Other (specify)

Date of Disbursement: 08 / 06 / 2001

Amount of Each Disbursement this Period: 5000.00

Transaction ID: SB23.4563

C. Full Name (Last, First, Middle Initial)
MELISSA A HART

Mailing Address
PO BOX 435 600 GRANT ST

City: WEXFORD State: PA Zip Code: 15090

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: X House / Senate / President
State: PA District: 04

Disbursement For: X Primary / General / Other (specify)

Date of Disbursement: 08 / 22 / 2001

Amount of Each Disbursement this Period: 500.00

Transaction ID: SB23.4576

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **9500.00**

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

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
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NAME OF COMMITTEE (In Full)
American Institute of Certified Public Accountants Effective Legislation Committee

A. Full Name (Last, First, Middle Initial)
STEVE ISRAEL

Mailing Address
239 SENECA AVE
City: DIX HILLS State: NY Zip Code: 11746

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: X House / Senate / President
State: NY District: 02

Disbursement For: X Primary / General / Other (specify)

Date of Disbursement: 08 / 20 / 2001

Amount of Each Disbursement this Period: 500.00

Transaction ID: SB23.4573

B. Full Name (Last, First, Middle Initial)
GARY G MILLER

Mailing Address
2505 INDIAN CREEK ROAD
City: DIAMOND BAR State: CA Zip Code: 91765

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: X House / Senate / President
State: CA District: 41

Disbursement For: X Primary / General / Other (specify)

Date of Disbursement: 08 / 29 / 2001

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.4579

C. Full Name (Last, First, Middle Initial)
ROBERT W NEY

Mailing Address
112 OVERLOOK CT
City: ST CLAIRSVILLE State: OH Zip Code: 43950

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: X House / Senate / President
State: OH District: 18

Disbursement For: X Primary / General / Other (specify)

Date of Disbursement: 08 / 20 / 2001

Amount of Each Disbursement this Period: 1000.00

Transaction ID: SB23.4570

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **2500.00**

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

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)
☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25
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NAME OF COMMITTEE (In Full)
American Institute of Certified Public Accountants Effective Legislation Committee

A.
Full Name (Last, First, Middle Initial)
JAMES M RAMSTAD

Mailing Address
2618 CROSBY ROAD
City: MINNETONKA State: MN Zip Code: 55391

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: X House / Senate / President
State: MN District: 03

Disbursement For: X Primary / General / Other (specify)

Date of Disbursement: 08 24 2001

Amount of Each Disbursement this Period: 2000.00

Transaction ID: SB23.4577

B.
Full Name (Last, First, Middle Initial)
REED COMMITTEE

Mailing Address
PO BOX 8828
City: CRANSTON State: RI Zip Code: 02920

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: House / X Senate / President
State: RI District: 00

Disbursement For: X Primary / General / Other (specify)

Date of Disbursement: 08 21 2001

Amount of Each Disbursement this Period: 2500.00

Transaction ID: SB23.4574

C.
Full Name (Last, First, Middle Initial)
ROYCE CAMPAIGN COMMITTEE

Mailing Address
PO BOX 6765
City: FULLERTON State: CA Zip Code: 92834

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: X House / Senate / President
State: CA District: 39

Disbursement For: X Primary / General / Other (specify)

Date of Disbursement: 08 29 2001

Amount of Each Disbursement this Period: 2000.00

Transaction ID: SB23.4580

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **6500.00**

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

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)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	
☐ 26	☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29

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NAME OF COMMITTEE (In Full)
American Institute of Certified Public Accountants Effective Legislation Committee

A.

Full Name (Last, First, Middle Initial)
SOUDER FOR CONGRESS INC

Mailing Address
PO BOX 400 BOX 400

City: GRABILL
State: IN
Zip Code: 46741

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: X House / Senate / President
State: IN District: 04

Disbursement For: X Primary / General / Other (specify)

Date of Disbursement
08 07 2001

Amount of Each Disbursement this Period
600.00

Transaction ID: SB23.4564

B.

C.

SUBTOTAL of Disbursements This Page (optional) ..... ▶	**600.00**
TOTAL This Period (last page this line number only) ..... ▶	**29100.00**

Form/Schedule: F3XA

Transaction ID:

Line 11(a)(ii) discloses $161,091.50 in unitemized receipts from individuals/persons other than political committees during 8/1/01 - 8/31/01. This amount does NOT include any receipts from a single source that aggregate greater than $200 in the calendar year.