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FEC

STATEMENT OF

FORM 1	ORGANIZ	ATION		
. •	(See instruct	tions)		Office use only
1. NAME OF COMMITTEE (in	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	1 1
Association of Committee	Private Sector Colleges and U	Iniversities Political Acti-	11111	
ADDRESS (number and s	treet) 1101 Connecticut /	Avenue, NW		
(Check if address	Suite 900	111111111	11111	
is changed)	WASHINGTON		PC	20036 -
		CITY▲	STATE▲	ZIP CODE ▲
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one			
(Check if address is changed)	RobbeDB@career.	org 		
is onunged)				
COMMITTEE'S WEB	PAGE ADDRESS (URL)			
(Check if address is changed)				
2. DATE 0.7	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFICA	TION NUMBER	C C00213066		
4. IS THIS STATEM	ENT NEW (N) OR	X AMENDED (A)		
I certify that I have exami	ned this Statement and to the best of my k	nowledge and belief it is true, correct	t and complete	
	Treasurer Robert Herzog			
Type or Print Name of	reasurer			
Signature of Treasurer	Electronically Filed by Robert F	Herzog	Date 07	05 / 2011
NOTE: Submission of fal	se, erroneous, or incomplete information n	nay subject the person signing this S		es of 2 U.S.C. §437g.
Office		<u> </u>		
Use		For further information Federal Election Communication Toll Free 800-424-953	nission	FEC FORM 1 (Revised 02/2009)

	F	EC F	orm 1 (Revised 02/2009)	Page 2		
5.			DMMITTEE (Check One) Committee:			
	(a)		This committee is a principal campaign committee. (Complete the candidate information	below.)		
	(b)		This committee is an authorized committee, and is NOT a principal campaign committee information below.)	e. (Complete the candidate		
	Name Candi					
	Candi Party	date Affiliatio	Office Sought: House Senate	President State District		
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized commit	tee.		
	Name Candi					
	Party	Comm				
	(d)		This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.		
	Politic	cal Act	ion Committee (PAC):			
	(e)	X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:		
			Corporation Corporation w/o Capital Stock	Labor Organization		
			Membership Organization X Trade Association	Cooperative		
			Membership Organization X Trade Association	Cooperative		
	(f)	(f)	χ In addition, this committee is a Lobbyist/Registrant PAC.	ata a successful for days and a		
			This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)			
			In addition, this committee is a Lobbyist/Registrant PAC.			
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)			
	Joint F	undra	ising Representative:			
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proce committees/organizations, at least one of which is an authorized committee of a federal ca			
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proce committees/organizations, none of which is an authorized committee of a federal candidate			
		Com	mittees Participating in Joint Fundraiser			
			1. FEC ID number	С		
			2. FEC ID number	С		
			3. FEC ID number			
			4 FEC ID number			

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Write or Type Committee	e Name			
Association of	Private Se	ctor Colleges and Universities F	Political Action Committee	
6. Name of Any Conn	ected Orga	nization, Affiliated Committee, Joint I	Fundraising Representative, or	Leadership PAC Sponsor
Association of P	rivate Sec	tor Colleges and Universities		
	1 1 1 1			
Mailing Address	Į	1101 Connecticut Av	enue, NW	
	l	Suite 900		
	l	Washington	pc pc	20036
		CITY	STATE A	ZIP CODE 🛦
Relationship:				
X Connected Org	ganization	Affiliated Committee	Joint Fundraising Representative	Leadership PAC Sponsor
		tify by name, address, (phone num	nber optional), and position	n of the person in
Full Name	Mr. Greg	ory Rovick		
Mailing Address		1101 Connecticut Av	enue, NW	
-		Suite 900		
	-	Washington		20036
Title or Position ♥		CITY A	STATE	ZIP CODE A
•	ovt. Ritns.			02 - 336 - 6746
		nd address (phone number optio lesignated agent (e.g., assistant tro	•	ommittee; and the
of Treasurer _	Robert H	lerzog		
Mailing Address		4411 North Illinois		
		Indianapolis		46208
Title or Position ♥		CITY A	STATE.	ZIP CODE A
C	FO		Telephone number	317 264 _ 5656

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Full Name of Designated Agent	Jonathan Liebman		
Mailing Address	19900 West Nine Mile Road		
	Southfield	MI	48075_ –
Title or Position ▼	CITY A	STATE A	ZIP CODE A
Chairm	an and CEO Tel	ephone number	358 9000
Banks or Other Deposit		committee deposits funds, h	olds accounts, rents
safety deposit boxes or m Name of Bank, Depositor	aintains funds. y, etc. achovia Bank, N.A.	committee deposits funds, h	olds accounts, rents
safety deposit boxes or m Name of Bank, Depositor	naintains funds. y, etc.	committee deposits funds, h	
safety deposit boxes or m Name of Bank, Depositor	aintains funds. y, etc. achovia Bank, N.A.	committee deposits funds, h	
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safety deposit boxes or m Name of Bank, Depositor Wailing Address Name of Bank, Depositor	paintains funds. y, etc. P.O. Box 563966 Charlotte CITY y, etc. untrust Bank 1445 New York Ave. NW	NC STATE △	28262 _ 3966 ZIP CODE