

# 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  
ArchiPAC -The American Institute of Architects

ADDRESS (number and street) 1735 New York Avenue, NW  
 Check if different than previously reported. (ACC)  
Washington DC 20006

2. **FEC IDENTIFICATION NUMBER** C00139071  
**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 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)  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 (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 01 01 2007 through 06 30 2007

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. Hannah Wesolowski

Signature of Treasurer Electronically Filed by Ms. Hannah Wesolowski Date 01 30 2009

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								
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
 ArchiPAC -The American Institute of Architects

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		53431.00
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	53431.00									
(c) Total Receipts (from Line 19) .....	52725.51	52725.51								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	106156.51	106156.51								
7. Total Disbursements (from Line 31) .....	64212.12	64212.12								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	41944.39	41944.39								
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**

Write or Type Committee Name  
 ArchIPAC -The American Institute of Architects

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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	16800.00	16800.00
(i) Itemized (use Schedule A) .....	35925.25	35925.25
(ii) Unitemized .....	52725.25	52725.25
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	52725.25	52725.25
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.) .....	0.26	0.26
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 Transfer (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)) .....	52725.51	52725.51
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	52725.51	52725.51

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	1151.62	1151.62
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1151.62	1151.62
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	61750.00	61750.00
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.....	1310.50	1310.50
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	64212.12	64212.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	64212.12	64212.12

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	52725.25	52725.25
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	52725.25	52725.25
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1151.62	1151.62
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1151.62	1151.62

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 38  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)  
**ArchiPAC -The American Institute of Architects**

<p><b>A.</b> Full Name (Last, First, Middle Initial)                  Ruben R. Escobar</p> <p>Mailing Address 804 S. Richmond St.</p> <p>City State Zip Code                  Pharr TX 78577-5928</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Diseno, Inc. Occupation Architect</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">01 / 05 / 2007</span></p> <p><b>Transaction ID:</b> 18356680</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">250.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial)                  Tom E. Spector</p> <p>Mailing Address School of Architecture                  101 Architecture Building</p> <p>City State Zip Code                  Stillwater OK 74078-0001</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Oklahoma State University Occupation Architect Professor</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">01 / 05 / 2007</span></p> <p><b>Transaction ID:</b> 18356683</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">250.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial)                  Robbie J. Conley</p> <p>Mailing Address 318 Elm Ave</p> <p>City State Zip Code                  Woodbury Heights NJ 08097-1323</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Robbie Conley, Architect Occupation Architect</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">01 / 05 / 2007</span></p> <p><b>Transaction ID:</b> 18356691</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">250.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">750.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 38  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
ArchiPAC -The American Institute of Architects

**A.**

Full Name (Last, First, Middle Initial)  
Richard E. Barrow

Mailing Address 2464 Jannebo Road

City State Zip Code  
Birmingham AL 35216-3849

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

Name of Employer Occupation  
CMH Architects, Inc. Architect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 0 5 / 2 0 0 7

**Transaction ID:** 18356711

Amount of Each Receipt this Period  
300.00

**B.**

Full Name (Last, First, Middle Initial)  
C. Lawrence Whitman

Mailing Address 2 Oakdale Road

City State Zip Code  
Baltimore MD 21210-2534

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

Name of Employer Occupation  
The Rouse Company Architect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 0 5 / 2 0 0 7

**Transaction ID:** 18356718

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
Daniel T. Uesugi

Mailing Address 703 Hancock Way

City State Zip Code  
El Cerrito CA 94530-3005

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

Name of Employer Occupation  
Uesugi & Associates Architect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 1 / 2 0 / 2 0 0 7

**Transaction ID:** 18694400

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **800.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 38  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
ArchiPAC -The American Institute of Architects

**A.**

Full Name (Last, First, Middle Initial) John K. Partridge		Date of Receipt MM / DD / YYYY 02 / 02 / 2007
Mailing Address PARTRIDGE ARCHITECTS 117 Chestnut Ave		<b>Transaction ID:</b> 18805619
City Narberth	State PA	Zip Code 19072-2403
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Partridge Architects	Occupation Principal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

**B.**

Full Name (Last, First, Middle Initial) Architects' Design S (Terrell Crochet)		Date of Receipt MM / DD / YYYY 01 / 18 / 2007
Mailing Address 144-A West Main St.		<b>Transaction ID:</b> 18805620
City New Iberia	State LA	Zip Code 70560-3733
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Architects Design Studio	Occupation Architect	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

**C.**

Full Name (Last, First, Middle Initial) Donald C. Brown		Date of Receipt MM / DD / YYYY 02 / 07 / 2007
Mailing Address 3113 Thomas Avenue		<b>Transaction ID:</b> 18828969
City Montgomery	State AL	Zip Code 36106-2425
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Brown Chambléss Architects	Occupation Architect	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>750.00</b>
<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 9 / 38  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**ArchiPAC -The American Institute of Architects**

<p><b>A.</b> Full Name (Last, First, Middle Initial) Marshall E. Purnell</p> <p>Mailing Address <b>717 D Street NW</b> <b>5th Floor</b></p> <p>City <b>Washington</b> State <b>DC</b> Zip Code <b>20004-2804</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer <b>Devroux &amp; Purnell Architects</b> Occupation <b>Architect</b></p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">02 / 07 / 2007</span></p> <p><b>Transaction ID: 18828972</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">250.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Robert E. Farr, II</p> <p>Mailing Address <b>3100 North State Street</b> <b>Suite 200</b></p> <p>City <b>Jackson</b> State <b>MS</b> Zip Code <b>39216-4003</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer <b>Cooke Douglass Farr Lemons Ltd.</b> Occupation <b>President Architect</b></p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">02 / 07 / 2007</span></p> <p><b>Transaction ID: 18828977</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">250.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Jay W. Jenkins</p> <p>Mailing Address <b>Jenkins Munroe Jenkins Architectur</b> <b>P.O. Box 5310</b></p> <p>City <b>Anniston</b> State <b>AL</b> Zip Code <b>36205-0310</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer <b>Jenkins Munroe Jenkins Architects</b> Occupation <b>Architect</b></p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">02 / 07 / 2007</span></p> <p><b>Transaction ID: 18828979</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">250.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">750.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 38  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
ArchiPAC -The American Institute of Architects

**A.**

Full Name (Last, First, Middle Initial)  
James M. Suehiro, LEED AP

Mailing Address 6528 57th NE

City State Zip Code  
Seattle WA 98115-7831

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

Name of Employer Occupation  
Suehiro Architecture Architect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
02 / 07 / 2007

**Transaction ID:** 18828982

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
Philip J. Bona

Mailing Address 1455 Kettner Boulevard  
Apt. 1205

City State Zip Code  
San Diego CA 92101-2494

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

Name of Employer Occupation  
Centre City Development Corporation Architect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
02 / 07 / 2007

**Transaction ID:** 18828993

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
RK Stewart, Hon. FRAIC

Mailing Address 18 Foss Avenue

City State Zip Code  
San Anselmo CA 94960-2713

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

Name of Employer Occupation  
Perkins + Will Architect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
02 / 07 / 2007

**Transaction ID:** 18829003

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1000.00**

**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 11 / 38

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
ArchiPAC -The American Institute of Architects

<b>A.</b>	Full Name (Last, First, Middle Initial) Stephen C. Wright		Date of Receipt MM / DD / YYYY 02 / 07 / 2007		
	Mailing Address 1567 Blanford Cir		<b>Transaction ID:</b> 18829028		
	City Norfolk	State VA	Zip Code 23505-1705	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer Hanbury Evans Wright Vlat- tas & Company	Occupation Architect	Aggregate Year-to-Date 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>B.</b>	Full Name (Last, First, Middle Initial) Burton L. Roslyn		Date of Receipt MM / DD / YYYY 02 / 07 / 2007		
	Mailing Address 28 Pasture Lane		<b>Transaction ID:</b> 18829079		
	City Roslyn Heights	State NY	Zip Code 11577-2610	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer Roslyn Consultants, LLC	Occupation President	Aggregate Year-to-Date 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>C.</b>	Full Name (Last, First, Middle Initial) John W. Rogers, ACHA		Date of Receipt MM / DD / YYYY 02 / 07 / 2007		
	Mailing Address 1634 Larmon Court		<b>Transaction ID:</b> 18829081		
	City Cincinnati	State OH	Zip Code 45224-3116	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer GBBN Architects, Inc.	Occupation Architect	Aggregate Year-to-Date 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

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

1500.00

**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 12 / 38  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
 ArchiPAC -The American Institute of Architects

**A.** Full Name (Last, First, Middle Initial)  
 Kenneth L. Ross, Jr.  
 Mailing Address 1020 Lone Star Dr  
 City State Zip Code  
 Houston TX 77055-6515  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 2 / 0 8 / 2 0 0 7  
**Transaction ID:** 18838845  
 Amount of Each Receipt this Period  
 250.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 WHR Architects, Inc. Principal  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

**B.** Full Name (Last, First, Middle Initial)  
 Leslie J. Thomas  
 Mailing Address 76 School Street  
 City State Zip Code  
 Concord NH 03301-3812  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 2 / 0 8 / 2 0 0 7  
**Transaction ID:** 18838978  
 Amount of Each Receipt this Period  
 250.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Thomas Bracy Architects, PLLC Architect  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

**C.** Full Name (Last, First, Middle Initial)  
 Miguel A. Rodriguez  
 Mailing Address 2121 Ponce de Leon Boulevard  
 #1010  
 City State Zip Code  
 Coral Gables FL 33134-5224  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 2 / 0 9 / 2 0 0 7  
**Transaction ID:** 18839066  
 Amount of Each Receipt this Period  
 250.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Rodriguez Architects, Inc. Architect  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 750.00  
**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 13 / 38  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
ArchiPAC -The American Institute of Architects

**A.**

Full Name (Last, First, Middle Initial)  
Michael P. Jacob

Mailing Address 213 South Matanzas Avenue

City Tampa State FL Zip Code 33609-3010

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

Name of Employer Urban Studio Architects, Inc. Occupation Architect

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 09 / 2007

**Transaction ID: 18839067**

Amount of Each Receipt this Period 1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Linda McCracken-Hunt

Mailing Address 1017 Ravine Trail

City Golden Valley State MN Zip Code 55416-3366

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

Name of Employer Studio Five Architects, Inc. Occupation Architect

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 09 / 2007

**Transaction ID: 18839079**

Amount of Each Receipt this Period 250.00

**C.**

Full Name (Last, First, Middle Initial)  
Edward A. Shriver, Jr.

Mailing Address 302 Indian Ridge Drive

City Moon Twp State PA Zip Code 15108-1374

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

Name of Employer Strada Architecture, LLC Occupation Architect

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 14 / 2007

**Transaction ID: 19028053**

Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1750.00

**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 14 / 38  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
ArchiPAC -The American Institute of Architects

**A.**

Full Name (Last, First, Middle Initial)  
Norman Strong

Mailing Address 1622 Palm Avenue SW

City State Zip Code  
Seattle WA 98116-1734

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

Name of Employer: The Miller Hull Partnersh-  
ip, LLP Occupation: Architect

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 02 / 14 / 2007  
Transaction ID: 19028072  
Amount of Each Receipt this Period: 1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Joseph Gabriel

Mailing Address 73 Rock Road

City State Zip Code  
Islip Terrace NY 11752-1923

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

Name of Employer: Gabriel & Katsarelis Arch-  
itects, LLC Occupation: Architect

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 04 / 2007  
Transaction ID: 19211417  
Amount of Each Receipt this Period: 250.00

**C.**

Full Name (Last, First, Middle Initial)  
Brit K. Probst

Mailing Address 2301 Blake Street  
Suite 100

City State Zip Code  
Denver CO 80205-2101

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

Name of Employer: Davis Partnership Archite-  
cts, P.C. Occupation: Architect

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 05 / 04 / 2007  
Transaction ID: 20158822  
Amount of Each Receipt this Period: 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1750.00

**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 15 / 38  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
ArchiPAC -The American Institute of Architects

**A.**

Full Name (Last, First, Middle Initial)  
Miguel A. Rodriguez

Mailing Address 2121 Ponce de Leon Boulevard  
#1010

City State Zip Code  
Coral Gables FL 33134-5224

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

Name of Employer Rodriguez Architects, Inc. Occupation Architect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
05 / 07 / 2007

**Transaction ID:** 20158840

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Richard N. Meinert, III

Mailing Address 6717 B Society Hill Road

City State Zip Code  
Auburn AL 36830

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

Name of Employer Nichols Meinert & Associates Occupation Architect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 07 / 2007

**Transaction ID:** 20158854

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
Enrique A. Woodroffe

Mailing Address 5005 West Laurel Street  
Suite 215

City State Zip Code  
Tampa FL 33607-3886

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

Name of Employer Woodroffe Corporation Architects Occupation Architect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
05 / 09 / 2007

**Transaction ID:** 20158875

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **850.00**

**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 16 / 38

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
ArchiPAC -The American Institute of Architects

**A.**

Full Name (Last, First, Middle Initial)  
Chester A. Widom

Mailing Address 2922 Wicklow Road

City State Zip Code  
Los Angeles CA 90064-4512

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

Name of Employer Occupation  
WWCOT Architect

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 9 / 2 0 0 7

Transaction ID: 20158883

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
George H. Miller

Mailing Address 29 E 11th St

City State Zip Code  
New York NY 10003-4401

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

Name of Employer Occupation  
Pei, Cobb, Freed & Partners Architects Architect

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 9 / 2 0 0 7

Transaction ID: 20158891

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)  
Burton L. Roslyn

Mailing Address 28 Pasture Lane

City State Zip Code  
Roslyn Heights NY 11577-2610

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

Name of Employer Occupation  
Roslyn Consultants, LLC President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1050.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 9 / 2 0 0 7

Transaction ID: 20158892

Amount of Each Receipt this Period

50.00

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

800.00

**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: (check only one)	PAGE 17 / 38
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
 ArchiPAC -The American Institute of Architects

<b>A.</b>	Full Name (Last, First, Middle Initial) Paul Mendelsohn	Date of Receipt MM / DD / YYYY 05 / 09 / 2007
	Mailing Address 1735 New York Ave NW	<b>Transaction ID:</b> 20158910
	City State Zip Code Washington DC 20006-5215	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AIA Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) James M. Suehiro, LEED AP	Date of Receipt MM / DD / YYYY 05 / 09 / 2007
	Mailing Address 6528 57th NE	<b>Transaction ID:</b> 20158911
	City State Zip Code Seattle WA 98115-7831	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Suehiro Architecture Architect	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Juan M. Zatarain	Date of Receipt MM / DD / YYYY 04 / 25 / 2007
	Mailing Address 13357 Savanna	<b>Transaction ID:</b> 20158930
	City State Zip Code Tustin CA 92782-9167	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation RKZ, Inc. Principal Architect	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	900.00
<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 18 / 38  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
ArchiPAC -The American Institute of Architects

**A.**

Full Name (Last, First, Middle Initial)  
William D. Beyer

Mailing Address 3906 Inglewood Ave S

City State Zip Code  
Minneapolis MN 55416-5038

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

Name of Employer Occupation  
Opus Architects & Engineers, Inc. Architect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 14 / 2007

**Transaction ID:** 20159159

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
John A. Padilla

Mailing Address 2301 Camino Artista

City State Zip Code  
Santa Fe NM 87505-1701

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

Name of Employer Occupation  
Padilla & Associates Architects Architect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
05 / 10 / 2007

**Transaction ID:** 20159163

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
F. Eric Goshow

Mailing Address 161 West 16 Street

City State Zip Code  
New York NY 10011-6286

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

Name of Employer Occupation  
Goshow Architects architect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 10 / 2007

**Transaction ID:** 20159183

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **750.00**

**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 19 / 38  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
ArchiPAC -The American Institute of Architects

**A.**

Full Name (Last, First, Middle Initial)  
Dina A. Griffin

Mailing Address 1724-L E 54th Street

City State Zip Code  
Chicago IN 60615-5755

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

Name of Employer Occupation  
Interactive Design Architect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 10 / 2007

**Transaction ID:** 20159185

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
Susan Chin

Mailing Address 310 Riverside Drive  
Apartment 704

City State Zip Code  
New York NY 10025-4122

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

Name of Employer Occupation  
NYC Dept. Of Cultural Affairs Architect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 10 / 2007

**Transaction ID:** 20159187

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
Elizabeth M. Webster

Mailing Address 1090 Los Robles Avenue

City State Zip Code  
Palo Alto CA 94306-3132

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

Name of Employer Occupation  
The Office of Elizabeth Webster Architect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 10 / 2007

**Transaction ID:** 20159189

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1000.00**

**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 20 / 38

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
ArchiPAC -The American Institute of Architects

**A.**

Full Name (Last, First, Middle Initial)  
David S. Collins

Mailing Address 632 Race Street

City State Zip Code  
Cincinnati OH 45202-2323

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

Name of Employer Occupation  
Preview Group, Inc. Architect

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 0 / 2 0 0 7

Transaction ID: 20161894

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)  
Michael P. Jacob

Mailing Address 213 South Matanzas Avenue

City State Zip Code  
Tampa FL 33609-3010

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

Name of Employer Occupation  
Urban Studio Architects, Inc. Architect

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 7 / 2 0 0 7

Transaction ID: 20161906

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)  
Donald C. Brown

Mailing Address 3113 Thomas Avenue

City State Zip Code  
Montgomery AL 36106-2425

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

Name of Employer Occupation  
Brown Chambliss Architects Architect

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 650.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 4 / 2 0 0 7

Transaction ID: 20161917

Amount of Each Receipt this Period

400.00

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

900.00

**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 21 / 38  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
ArchiPAC -The American Institute of Architects

**A.**

Full Name (Last, First, Middle Initial)  
Steven R Winkel

Mailing Address 2765 Prince St.

City State Zip Code  
Berkeley CA 94705-2612

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

Name of Employer Occupation  
The Preview Group Architect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2007

**Transaction ID:** 20161929

Amount of Each Receipt this Period  
500.00

**B.**

Full Name (Last, First, Middle Initial)  
Frank F. Douglas

Mailing Address 3822 Olympia Rd

City State Zip Code  
Houston TX 77019-3032

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

Name of Employer Occupation  
The Douglas Group President Architect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 17 / 2007

**Transaction ID:** 20161951

Amount of Each Receipt this Period  
300.00

**C.**

Full Name (Last, First, Middle Initial)  
James A. Gatsch, Jr.

Mailing Address 13 Teak Lane

City State Zip Code  
Princeton NJ 08540-4724

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

Name of Employer Occupation  
The American Institute of Architects Architect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
01 / 18 / 2007

**Transaction ID:** 27485932

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1050.00**

**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 22 / 38  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
ArchiPAC -The American Institute of Architects

**A.**

Full Name (Last, First, Middle Initial) William A. Ware		Date of Receipt MM / DD / YYYY 01 / 18 / 2007
Mailing Address 8150 N. Central Expressway Suite 750		<b>Transaction ID:</b> 27493796
City Dallas	State TX	Zip Code 75206-1815
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Ware Architecture	Occupation Principal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

**B.**

Full Name (Last, First, Middle Initial) William I. Sakaguchi		Date of Receipt MM / DD / YYYY 01 / 18 / 2007
Mailing Address 1720 St. Louis Drive		<b>Transaction ID:</b> 27500378
City Honolulu	State HI	Zip Code 96816-1925
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Avalon Development Co.	Occupation Architect	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

**C.**

Full Name (Last, First, Middle Initial) Gary Edward Handel, (Gary Handel)		Date of Receipt MM / DD / YYYY 01 / 02 / 2007
Mailing Address 1995 Broadway 4th Floor		<b>Transaction ID:</b> 27983494
City New York	State NY	Zip Code 10023-5882
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Gary Edward Handel & Associates Archit	Occupation Architect	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>750.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>16800.00</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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
ArchiPAC -The American Institute of Architects

<p><b>A.</b> Full Name (Last, First, Middle Initial) DNC Services Corporation/Democratic National Committee</p> <p>Mailing Address 430 S Capitol Street SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name DNC Services Corporation/Democratic National Committee</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 19511798</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p> <p>Contribution</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S. Capitol Street</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Democratic Congressional Campaign Committee</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 19511799</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p> <p>Contribution</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Democratic Senatorial Campaign Committee</p> <p>Mailing Address 430 South Capitol Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 19511800</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p> <p>Contribution</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="15000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
ArchiPAC -The American Institute of Architects

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends Of Rahm Emanuel</p> <p>Mailing Address P.O. Box 101124</p> <p>City Chicago State IL Zip Code 60610</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Rahm Emanuel</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 05</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 19512314 <b>Date of Disbursement</b> 03 / 27 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>Contribution</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) People For English</p> <p>Mailing Address PO Box 1940</p> <p>City Erie State PA Zip Code 16507</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Phil English</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 03</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 19512505 <b>Date of Disbursement</b> 03 / 27 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>Contribution</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Earl Pomeroy For Congress</p> <p>Mailing Address P.O. Box 9336</p> <p>City Fargo State ND Zip Code 58106</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Earl Pomeroy</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 01</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 19512690 <b>Date of Disbursement</b> 03 / 27 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>Contribution</p>

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

3000.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
ArchiPAC -The American Institute of Architects

<b>A.</b>	Full Name (Last, First, Middle Initial) Van Hollen For Congress <hr/> Mailing Address 10537 St. Paul Street <hr/> City Kensington State MD Zip Code 20895 <hr/> Purpose of Disbursement Contribution Candidate Name Rep. Chris Van Hollen Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 08 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 19512862 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 2 7 / 2 0 0 7	Amount of Each Disbursement this Period 1000.00
		011 Category/ Type	Contribution
<b>B.</b>	Full Name (Last, First, Middle Initial) Walden For Congress Inc. <hr/> Mailing Address PO Box 1091 <hr/> City Hood River State OR Zip Code 97031 <hr/> Purpose of Disbursement Contribution Candidate Name Rep. Greg Walden Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 02 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 19512989 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 2 7 / 2 0 0 7	Amount of Each Disbursement this Period 1000.00
		011 Category/ Type	Contribution
<b>C.</b>	Full Name (Last, First, Middle Initial) Reed Committee <hr/> Mailing Address PO Box 8628 <hr/> City Cranston State RI Zip Code 02920 <hr/> Purpose of Disbursement Contribution Candidate Name Sen. Jack Reed Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 19513251 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 2 7 / 2 0 0 7	Amount of Each Disbursement this Period 1000.00
		011 Category/ Type	Contribution

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3000.00
<b>TOTAL</b> 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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
ArchiPAC -The American Institute of Architects

<p><b>A.</b> Full Name (Last, First, Middle Initial) Richard E Neal For Congress Committee</p> <p>Mailing Address 76 Magnolia Terrace</p> <p>City Springfield State MA Zip Code 01108</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name Rep. Richard E. Neal</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 02</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 19513480 <b>Date of Disbursement</b> 03 / 27 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contribution</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Perlmutter For Congress</p> <p>Mailing Address 3440 Youngfield St #264</p> <p>City Wheat Ridge State CO Zip Code 80033</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name Edwin Perlmutter</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 07</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 19513602 <b>Date of Disbursement</b> 03 / 27 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contribution</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends Of Rosa DeLauro</p> <p>Mailing Address 12 Trumbull Street</p> <p>City New Haven State CT Zip Code 06511</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name Rep. Rosa L. DeLauro</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 03</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 19627976 <b>Date of Disbursement</b> 03 / 30 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contribution</p>

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

3000.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
ArchiPAC -The American Institute of Architects

<p><b>A.</b> Full Name (Last, First, Middle Initial) Sali For Congress</p> <p>Mailing Address PO Box 71</p> <p>City Kuna State ID Zip Code 83634</p> <p>Purpose of Disbursement Contribution for 2006 General Election Debt Reduction</p> <p>Candidate Name Rep. William Sali</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: ID District: 01</p>	<p><b>Transaction ID:</b> 19627982 <b>Date of Disbursement</b> 03 / 30 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contribution for 2006 General Election Debt Reduction</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Zack Space For Congress Committee</p> <p>Mailing Address 714 N Wooster Avenue</p> <p>City Dover State OH Zip Code 44622</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Zachary Space</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: OH District: 18</p>	<p><b>Transaction ID:</b> 19627992 <b>Date of Disbursement</b> 03 / 29 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contribution</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Charlie Melancon Campaign Committee Inc</p> <p>Mailing Address PO Box 549</p> <p>City Napoleonville State LA Zip Code 70390</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Charles Melancon</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: LA District: 03</p>	<p><b>Transaction ID:</b> 19628313 <b>Date of Disbursement</b> 03 / 30 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contribution</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3000.00
<b>TOTAL</b> 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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
ArchiPAC -The American Institute of Architects

A.	Full Name (Last, First, Middle Initial) McConnell Senate Committee '08 <hr/> Mailing Address PO Box 1496 <hr/> City Louisville State KY Zip Code 40201 <hr/> Purpose of Disbursement Contribution Contribution <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name Sen. Mitch McConnell Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: KY District:	Transaction ID: 19893326 Date of Disbursement <span style="border: 1px solid black; padding: 2px;">04</span> / <span style="border: 1px solid black; padding: 2px;">11</span> / <span style="border: 1px solid black; padding: 2px;">2007</span> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">2500.00</div> <hr/> Contribution
B.	Full Name (Last, First, Middle Initial) Friends Of Zach Wamp <hr/> Mailing Address P.O. Box 24804 651 E. Fourth St. Suite 200 <hr/> City Chattanooga State TN Zip Code 37422 <hr/> Purpose of Disbursement Contribution Contribution <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name Rep. Zach Wamp Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District: 03	Transaction ID: 19903918 Date of Disbursement <span style="border: 1px solid black; padding: 2px;">04</span> / <span style="border: 1px solid black; padding: 2px;">26</span> / <span style="border: 1px solid black; padding: 2px;">2007</span> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">1000.00</div> <hr/> Contribution
C.	Full Name (Last, First, Middle Initial) Inslee For Congress <hr/> Mailing Address PO Box 33027 <hr/> City Seattle State WA Zip Code 98133 <hr/> Purpose of Disbursement Contribution Contribution <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name Rep. Jay Inslee Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: WA District: 01	Transaction ID: 19904597 Date of Disbursement <span style="border: 1px solid black; padding: 2px;">04</span> / <span style="border: 1px solid black; padding: 2px;">26</span> / <span style="border: 1px solid black; padding: 2px;">2007</span> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">1000.00</div> <hr/> Contribution

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<div style="border: 1px solid black; padding: 5px; display: inline-block;">4500.00</div>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<div style="border: 1px solid black; padding: 5px; display: inline-block;"> </div>

# 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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
ArchiPAC -The American Institute of Architects

<b>A.</b>	Full Name (Last, First, Middle Initial) Blumenauer For Congress  Mailing Address 830 Ne Holladay Suite 105  City Portland State OR Zip Code 97232  Purpose of Disbursement Contribution Candidate Name Rep. Earl Blumenauer Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 03 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 19914849 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7	Amount of Each Disbursement this Period 5000.00  Contribution
<b>B.</b>	Full Name (Last, First, Middle Initial) Allyson Schwartz For Congress  Mailing Address P.O. Box 2232  City Jenkintown State PA Zip Code 19046  Purpose of Disbursement Contribution Candidate Name Allyson Schwartz Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 13 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 20167440 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 7	Amount of Each Disbursement this Period 1500.00  Contribution
<b>C.</b>	Full Name (Last, First, Middle Initial) Friends Of Mary Landrieu  Mailing Address 607 14th Street Nw Suite 800 Suite 1434  City Washington State DC Zip Code 20005  Purpose of Disbursement Contribution Candidate Name Sen. Mary L. Landrieu Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 20399137 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 1 / 2 0 0 7	Amount of Each Disbursement this Period 1000.00  Contribution

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<b>7500.00</b>	
<b>TOTAL</b> 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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
ArchiPAC -The American Institute of Architects

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends Of Patrick J. Kennedy Inc.</p> <p>Mailing Address P.O. Box 321</p> <p>City Pawtucket State RI Zip Code 02860</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Patrick Kennedy</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: RI District: 01</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 20555533</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p> <p>Contribution</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Berkley For Congress</p> <p>Mailing Address 3069 Conquista Court</p> <p>City Las Vegas State NV Zip Code 89121</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Shelley Berkley</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NV District: 01</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 20555555</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p> <p>Contribution</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Hoyer For Congress</p> <p>Mailing Address 7905 Malcolm Road Suite 102</p> <p>City Clinton State MD Zip Code 20735</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Steny H. Hoyer</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MD District: 05</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 20555559</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p> <p>Contribution</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="3000.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text" value=""/></p>

# 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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
ArchiPAC -The American Institute of Architects

<p><b>A.</b> Full Name (Last, First, Middle Initial) Sherman For Congress</p> <p>Mailing Address 555 So.Flower St. Suite 4210</p> <p>City Los Angeles State CA Zip Code 90071</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Brad Sherman</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 27</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 20555562 <b>Date of Disbursement</b> 06 / 21 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contribution</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Committee To Re-Elect Nydia M. Velazquez To Congre</p> <p>Mailing Address 315 Inspiration Lane</p> <p>City Gaithersburg State MD Zip Code 20878</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Nydia M. Velazquez</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 12</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 20555565 <b>Date of Disbursement</b> 06 / 21 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contribution</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Mica For Congress</p> <p>Mailing Address P. O. Box 181546</p> <p>City Casselberry State FL Zip Code 32718</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. John L. Mica</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 07</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 20555567 <b>Date of Disbursement</b> 06 / 21 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contribution</p>

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

3000.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
ArchiPAC -The American Institute of Architects

<b>A.</b>	Full Name (Last, First, Middle Initial) Baker For Congress Committee <hr/> Mailing Address Post Office Box 1694 <hr/> City Baton Rouge State LA Zip Code 70821 <hr/> Purpose of Disbursement Contribution Candidate Name Rep. Richard H. Baker Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 06 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20555575 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 7	Amount of Each Disbursement this Period 1000.00 Contribution
<b>B.</b>	Full Name (Last, First, Middle Initial) Van Hollen For Congress <hr/> Mailing Address 10537 St. Paul Street <hr/> City Kensington State MD Zip Code 20895 <hr/> Purpose of Disbursement Contribution Candidate Name Rep. Chris Van Hollen Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 08 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20555577 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 7	Amount of Each Disbursement this Period 1000.00 Contribution
<b>C.</b>	Full Name (Last, First, Middle Initial) Pryce For Congress <hr/> Mailing Address 211 S. 5th St. <hr/> City Columbus State OH Zip Code 43215 <hr/> Purpose of Disbursement Contribution Candidate Name Rep. Deborah Pryce Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20555586 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 7	Amount of Each Disbursement this Period 1000.00 Contribution

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
ArchiPAC -The American Institute of Architects

<p><b>A.</b> Full Name (Last, First, Middle Initial) Castor For Congress</p> <p>Mailing Address 301 W. Platt Street #385</p> <p>City Tampa State FL Zip Code 33606</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Kathy Castor</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: FL District: 11</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 20555587</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td>/</td><td>2</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table> <p>Contribution</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	6	/	2	1	/	2	0	0	7	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	6	/	2	1	/	2	0	0	7													
1000.00																						
<p><b>B.</b> Full Name (Last, First, Middle Initial) Loeb sack For Congress</p> <p>Mailing Address PO Box 1457</p> <p>City Iowa City State IA Zip Code 52244</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Mr. David Loeb sack</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IA District: 02</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 20555589</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td>/</td><td>2</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">1500.00</td> </tr> </table> <p>Contribution</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	6	/	2	1	/	2	0	0	7	1500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	6	/	2	1	/	2	0	0	7													
1500.00																						
<p><b>C.</b> Full Name (Last, First, Middle Initial) Tim Johnson For South Dakota Inc</p> <p>Mailing Address PO Box 1859</p> <p>City Sioux Falls State SD Zip Code 57101</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Sen. Tim Johnson</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: SD District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 20555592</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td>/</td><td>2</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">750.00</td> </tr> </table> <p>Contribution</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	6	/	2	1	/	2	0	0	7	750.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	6	/	2	1	/	2	0	0	7													
750.00																						

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

<b>3250.00</b>
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**TOTAL** This Period (last page this line number only) ..... ►

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**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
ArchiPAC -The American Institute of Architects

<b>A.</b> Full Name (Last, First, Middle Initial) Zack Space For Congress Committee Mailing Address 714 N Wooster Avenue City Dover State OH Zip Code 44622 Purpose of Disbursement Contribution Candidate Name Rep. Zachary Space Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20555595 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 7
	Amount of Each Disbursement this Period 1000.00 Contribution

<b>B.</b> Full Name (Last, First, Middle Initial) Arcuri For Congress Mailing Address P.O. Box 8508 City Utica State NY Zip Code 13505 Purpose of Disbursement Contribution Candidate Name Rep. Michael Arcuri Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20590333 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 7
	Amount of Each Disbursement this Period 1000.00 Contribution

<b>C.</b> Full Name (Last, First, Middle Initial) Friends of Max Baucus Mailing Address Box 586 City Helena State MT Zip Code 59624 Purpose of Disbursement Returned Contribution Candidate Name Max Baucus Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 28012516 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 7
	Amount of Each Disbursement this Period -2000.00 Returned Contribution

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	61750.00

**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 36 / 38

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
ArchiPAC -The American Institute of Architects

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) AIA Pennsylvania PAC</p> <p>Mailing Address 208 North Third Street, Suite 400</p> <p>City Harrisburg State PA Zip Code 17101</p> <p>Purpose of Disbursement Joint solicitation disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 19694657</p> <p>Date of Disbursement 04 / 10 / 2007</p> <p>Amount of Each Disbursement this Period 480.50</p> <p>011 Category/ Type</p> <p>Joint solicitation disbursement</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) AIA Pennsylvania PAC</p> <p>Mailing Address 208 North Third Street, Suite 400</p> <p>City Harrisburg State PA Zip Code 17101</p> <p>Purpose of Disbursement Joint solicitation disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 20436042</p> <p>Date of Disbursement 06 / 11 / 2007</p> <p>Amount of Each Disbursement this Period 830.00</p> <p>008 Category/ Type</p> <p>Joint solicitation disbursement</p>

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

1310.50

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

1310.50

# 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)  
ArchiPAC -The American Institute of Architects

A.	Full Name (Last, First, Middle Initial) PAYPAL INC.	Transaction ID: 20909664 Date of Disbursement
	Mailing Address PO Box 45950	<input type="text" value="06"/> / <input type="text" value="07"/> / <input type="text" value="2007"/>
	City Omaha State NE Zip Code 68145	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card fee	<input type="text" value="20.00"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Credit Card fee

B.	Full Name (Last, First, Middle Initial) PAYPAL INC.	Transaction ID: 20909666 Date of Disbursement
	Mailing Address PO Box 45950	<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>
	City Omaha State NE Zip Code 68145	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card processing fees	<input type="text" value="12.50"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Credit Card processing fees

C.	Full Name (Last, First, Middle Initial) PAYPAL INC.	Transaction ID: 20909668 Date of Disbursement
	Mailing Address PO Box 45950	<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2007"/>
	City Omaha State NE Zip Code 68145	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit card fees	<input type="text" value="628.11"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Credit card fees

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="660.61"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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)  
ArchiPAC -The American Institute of Architects

A.	Full Name (Last, First, Middle Initial) Suntrust	Transaction ID: 27504797 Date of Disbursement 04 / 05 / 2007
	Mailing Address 1750 New York Ave., NW	Amount of Each Disbursement this Period 199.31
	City Washington State DC Zip Code 20006	
	Purpose of Disbursement Credit Card processing fees Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Credit Card processing fees

B.	Full Name (Last, First, Middle Initial) Suntrust	Transaction ID: 27504799 Date of Disbursement 05 / 07 / 2007
	Mailing Address 1750 New York Ave., NW	Amount of Each Disbursement this Period 27.50
	City Washington State DC Zip Code 20006	
	Purpose of Disbursement Bank fee Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Bank fee

C.	Full Name (Last, First, Middle Initial) Suntrust	Transaction ID: 27504801 Date of Disbursement 06 / 05 / 2007
	Mailing Address 1750 New York Ave., NW	Amount of Each Disbursement this Period 27.50
	City Washington State DC Zip Code 20006	
	Purpose of Disbursement Bank fee Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Bank fee

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>254.31</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>914.92</b>