

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
American Society of Association Executives APAC

ADDRESS (number and street) 1575 I Street, NW, 12th Floor  
 Check if different than previously reported. (ACC)  
Washington DC 20005

2. **FEC IDENTIFICATION NUMBER** C00041566  
**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 2010 through 03 31 2010

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 Heidi Ellis Robey

Signature of Treasurer Electronically Filed by Heidi Ellis Robey Date 04 14 2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
American Society of Association Executives APAC

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	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>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		16065.20
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	16065.20									
(c) Total Receipts (from Line 19) .....	32608.39	32608.39								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	48673.59	48673.59								
7. Total Disbursements (from Line 31) .....	27267.03	27267.03								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	21406.56	21406.56								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American Society of Association Executives APAC

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	21950.00	21950.00
(ii) Unitemized .....	4405.00	4405.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	26355.00	26355.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	2250.00	2250.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	28605.00	28605.00
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 .....	4000.00	4000.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	3.39	3.39
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)) .....	32608.39	32608.39
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	32608.39	32608.39

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<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.....	467.03	467.03
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	467.03	467.03
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	26800.00	26800.00
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.....	0.00	0.00
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))..	27267.03	27267.03
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	27267.03	27267.03

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	28605.00	28605.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	28605.00	28605.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	467.03	467.03
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	467.03	467.03

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 43  
(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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
American Society of Association Executives APAC

**A.** Full Name (Last, First, Middle Initial)  
Camille Alexander, CFA

Mailing Address 1050 Connecticut Ave #800

City Washington State DC Zip Code 20036

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

Name of Employer Graystone Consulting Occupation Institutional Consulting Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 22 / 2010

Transaction ID: C873446

Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
Jeffrey P. Altman, JD

Mailing Address 1900 K St NW #100

City Washington State DC Zip Code 20006-1108

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

Name of Employer McKenna Long & Aldridge LLP Occupation Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 01 / 2010

Transaction ID: C887274

Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
Carla K. Balakgie, CAE

Mailing Address 1101 16th St NW Suite 402

City Washington State DC Zip Code 20036

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

Name of Employer Electronic Transactions Association Occupation Chief Executive Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 25 / 2010

Transaction ID: C887287

Amount of Each Receipt this Period 250.00

**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 7 / 43  
(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)  
American Society of Association Executives APAC

**A.**

Full Name (Last, First, Middle Initial)  
Sheri B. Bango Cavaney, CAE

Mailing Address 1455 Pennsylvania Ave NW 10th Fl

City State Zip Code  
Washington DC 20004-1081

FEC ID number of contributing federal political committee. C

Name of Employer  
American Institute of Cer-  
tified Public

Occupation  
Vice President - State Regulation & Le

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
03 / 24 / 2010

**Transaction ID:** C903794

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
Guy D. Beaumont, Jr.

Mailing Address 123 North Henry St

City State Zip Code  
Alexandria VA 22314-2903

FEC ID number of contributing federal political committee. C

Name of Employer  
American College of Osteo-  
pathic Surgeon

Occupation  
Executive Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
01 / 27 / 2010

**Transaction ID:** C873432

Amount of Each Receipt this Period  
1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Eve Becker-Doyle, CAE

Mailing Address 2952 North Stemmons Frwy #200

City State Zip Code  
Dallas TX 75247-6196

FEC ID number of contributing federal political committee. C

Name of Employer  
National Athletic Trainers  
Association

Occupation  
Executive Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
02 / 25 / 2010

**Transaction ID:** C887295

Amount of Each Receipt this Period  
250.00

**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 8 / 43  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Society of Association Executives APAC

**A.** Full Name (Last, First, Middle Initial)  
Barbara J. Benton, CAE

Mailing Address 535 Metro Pl S  
PO Box 1810

City Dublin State OH Zip Code 43017-7810

FEC ID number of contributing federal political committee. C

Name of Employer Ohio Society of CPAs Occupation Vice President Government Relations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 06 / 2010  
Transaction ID: C873422

Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
Peter J. Berry, CAE

Mailing Address 342 N Main St

City West Hartford State CT Zip Code 06117-2507

FEC ID number of contributing federal political committee. C

Name of Employer Association Resources Inc Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 14 / 2010  
Transaction ID: C873443

Amount of Each Receipt this Period 250.00

**C.** Full Name (Last, First, Middle Initial)  
Suzanne C. Berry, MBA, CAE

Mailing Address 342 N Main St

City West Hartford State CT Zip Code 06117-2507

FEC ID number of contributing federal political committee. C

Name of Employer Association Resources Inc Occupation Executive Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 14 / 2010  
Transaction ID: C873438

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 9 / 43  
(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)  
American Society of Association Executives APAC

**A.** Full Name (Last, First, Middle Initial)  
Deborah J. Bowen, CAE

Mailing Address One North Franklin St #1700

City State Zip Code  
Chicago IL 60606-3424

FEC ID number of contributing federal political committee. C

Name of Employer  
American College of Health-care Executi

Occupation  
Executive Vice President and COO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
03 / 31 / 2010

**Transaction ID:** C905868

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Henry Chamberlain, APR, CAE

Mailing Address 1101 15th St NW #800

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. C

Name of Employer  
Building Owners and Manag-ers Associati

Occupation  
President and Chief Operating Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
01 / 20 / 2010

**Transaction ID:** C873436

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
James L. Clarke, CAE

Mailing Address 1575 I St NW #1100

City State Zip Code  
Washington DC 20005-1103

FEC ID number of contributing federal political committee. C

Name of Employer  
ASAE and The Center for Association Le

Occupation  
Senior Vice President, Public Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
02 / 24 / 2010

**Transaction ID:** C887278

Amount of Each Receipt this Period  
300.00

**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 10 / 43
	<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)  
American Society of Association Executives APAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Jeff De Cagna, Ed.M.	Date of Receipt MM / DD / YYYY 01 / 26 / 2010
	Mailing Address 1830 Fountain Dr #402	<b>Transaction ID:</b> C873442
	City State Zip Code Reston VA 20190	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Principled Innovation LLC	Occupation Chief Strategist and Founder	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Curtis C. Deane, CFRE, CAE	Date of Receipt MM / DD / YYYY 01 / 29 / 2010
	Mailing Address 4300 Wilson Blvd #300	<b>Transaction ID:</b> C873420
	City State Zip Code Arlington VA 22203-4168	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Association of Fundraising Professionals	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) William Glenn East, CAE	Date of Receipt MM / DD / YYYY 02 / 18 / 2010
	Mailing Address 7801 Deercreek Club Rd	<b>Transaction ID:</b> C887307
	City State Zip Code Jacksonville FL 32256-3507	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Northeast Florida Association of Realt	Occupation Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<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 11 / 43  
(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)  
American Society of Association Executives APAC

**A.**

Full Name (Last, First, Middle Initial)  
Mark T. Engle, CAE

Mailing Address 4700 West Lake Ave

City State Zip Code  
Glenview IL 60025-1485

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

Name of Employer Association Management Center Occupation Principal

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
03 / 23 / 2010

**Transaction ID:** C903784

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
Paula Cozzi Goedert, Esq.

Mailing Address 1 North Wacker Dr #4400  
2600 Chase Plaza

City State Zip Code  
Chicago IL 60603

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

Name of Employer Barnes & Thornburg LLP Occupation Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2010

**Transaction ID:** C903788

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
John M. Grau

Mailing Address 3 Bethesda Metro Ctr #1100

City State Zip Code  
Bethesda MD 20814-5330

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

Name of Employer National Electrical Contractors Associ Occupation Chief Executive Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
02 / 04 / 2010

**Transaction ID:** C887277

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: (check only one)	PAGE 12 / 43
	<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)  
American Society of Association Executives APAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Velma R. Hart, CAE		Date of Receipt
	Mailing Address 4647 Forbes Blvd		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 0 2 / 2 0 1 0
	City	State	Zip Code
	Lanham	MD	20706
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> C887294
Name of Employer AMVETS National Headquarters		Occupation National Finance Director/Chief Finance	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00

<b>B.</b>	Full Name (Last, First, Middle Initial) James M. Hartley, CAE		Date of Receipt
	Mailing Address 3050 Central Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 3 / 2 4 / 2 0 1 0
	City	State	Zip Code
	Toledo	OH	43606-1700
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> C903809
Name of Employer National Exchange Club		Occupation Executive Vice President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1000.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Anne D. Heller		Date of Receipt
	Mailing Address 4341 Montgomery Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 3 / 2 0 1 0
	City	State	Zip Code
	Bethesda	MD	20814-4401
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> C887286
Name of Employer USAE		Occupation Publisher	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 43  
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
American Society of Association Executives APAC

**A.**

Full Name (Last, First, Middle Initial)  
Reginald J. Henry, CAE

Mailing Address 1575 I St NW #1100  
1300 Pennsylvania Ave

City Washington State DC Zip Code 20005-1103

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

Name of Employer ASAE and The Center for Association Le  
Occupation Chief Technology Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 31 / 2010

Transaction ID: C903802

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
Jerald A. Jacobs, Esq.

Mailing Address 2300 N St NW

City Washington State DC Zip Code 20037-1122

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

Name of Employer Pillsbury Winthrop Shaw Pittman, LLP  
Occupation Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
01 / 11 / 2010

Transaction ID: C873423

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
Sheri L. Jacobs, CAE

Mailing Address 301 Pine St

City Deerfield State IL Zip Code 60015

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

Name of Employer Avenue M Group LLC  
Occupation President and Chief Strategist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 04 / 2010

Transaction ID: C903812

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **600.00**

**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 / 43  
(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)  
American Society of Association Executives APAC

**A.** Full Name (Last, First, Middle Initial)  
Sheri L. Jacobs, CAE

Mailing Address 301 Pine St

City State Zip Code  
Deerfield IL 60015

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

Name of Employer Occupation  
Avenue M Group LLC President and Chief Strategist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
03 / 23 / 2010

**Transaction ID:** C903811

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Gregory Knopp, CAE

Mailing Address 1015 15th St NW 8th Fl

City State Zip Code  
Washington DC 20005-2605

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

Name of Employer Occupation  
American Council of Engineering Compan Executive Director, Political Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
01 / 12 / 2010

**Transaction ID:** C873440

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Thomas R. Kuhn, CAE

Mailing Address 701 Pennsylvania Ave NW

City State Zip Code  
Washington DC 20004-2696

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

Name of Employer Occupation  
Edison Electric Institute President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
02 / 22 / 2010

**Transaction ID:** C887293

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 15 / 43  
(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)  
American Society of Association Executives APAC

**A.**

Full Name (Last, First, Middle Initial)  
David L. Kushner, CMP, CAE

Mailing Address 111 Newlands St

City State Zip Code  
Chevy Chase MD 20815

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

Name of Employer Occupation  
The Kushner Companies, LLC President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
02 / 02 / 2010

**Transaction ID: C887289**

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
Gary A. LaBranche, CAE

Mailing Address 71 South Wacker Dr #2760

City State Zip Code  
Chicago IL 60606

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

Name of Employer Occupation  
Association for Corporate Growth President and CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
03 / 23 / 2010

**Transaction ID: C903775**

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
Janice R. Lachance

Mailing Address 331 South Patrick St

City State Zip Code  
Alexandria VA 22314

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

Name of Employer Occupation  
Special Libraries Association Chief Executive Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
02 / 04 / 2010

**Transaction ID: C887306**

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 16 / 43  
(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
							17

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NAME OF COMMITTEE (In Full)  
American Society of Association Executives APAC

**A.**

Full Name (Last, First, Middle Initial)  
Dawn M. Mancuso, CAE

Mailing Address PO Box 34317

City State Zip Code  
West Bethesda MD 20827-0317

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

Name of Employer Association of Air Medical Services  
Occupation Executive Director and Chief Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
02 / 17 / 2010

Transaction ID: C887282

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
Greg R. Melia, CAE

Mailing Address 1575 I St NW #1100

City State Zip Code  
Washington DC 20005-1103

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

Name of Employer ASAE & The Center for Association Lead  
Occupation Vice President, Member Relations and C

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
01 / 27 / 2010

Transaction ID: C873439

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
Kenneth E. Monroe

Mailing Address 230 East Ohio St #400

City State Zip Code  
Chicago IL 60611-3265

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

Name of Employer Bostrom  
Occupation Chairman and Chief Executive Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 26 / 2010

Transaction ID: C903778

Amount of Each Receipt this Period  
1000.00

**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 17 / 43  
(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)  
American Society of Association Executives APAC

**A.**

Full Name (Last, First, Middle Initial)  
William Moroney

Mailing Address 1901 Pennsylvania Ave NW #500

City Washington State DC Zip Code 20006

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

Name of Employer Utilities Telecom Council Occupation President and Chief Executive Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 03 / 18 / 2010  
**Transaction ID: C903798**  
 Amount of Each Receipt this Period: 1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Susan Neely, CAE

Mailing Address 1101 16th St NW #700

City Washington State DC Zip Code 20036-4803

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

Name of Employer American Beverage Association Occupation President and CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 01 / 29 / 2010  
**Transaction ID: C873444**  
 Amount of Each Receipt this Period: 250.00

**C.**

Full Name (Last, First, Middle Initial)  
Peter J. O'Neil, CAE

Mailing Address 2700 Prosperity Ave #250

City Fairfax State VA Zip Code 22031-4307

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

Name of Employer American Industrial Hygiene Association Occupation Executive Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 02 / 16 / 2010  
**Transaction ID: C887284**  
 Amount of Each Receipt this Period: 250.00

**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 18 / 43  
(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)  
American Society of Association Executives APAC

**A.**

Full Name (Last, First, Middle Initial)  
Peter J. O'Neil, CAE

Mailing Address 2700 Prosperity Ave #250

City State Zip Code  
Fairfax VA 22031-4307

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

Name of Employer American Industrial Hygiene Association  
Occupation Executive Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
03 / 23 / 2010

**Transaction ID:** C903789

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
Peter J. Pantuso

Mailing Address 700 13th St NW #575

City State Zip Code  
Washington DC 20005-5923

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

Name of Employer American Bus Association  
Occupation President and Chief Executive Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
02 / 16 / 2010

**Transaction ID:** C887292

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
David N. Parker, CAE

Mailing Address 400 North Capitol St NW

City State Zip Code  
Washington DC 20001

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

Name of Employer American Gas Association  
Occupation President and Chief Executive Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2010

**Transaction ID:** C903773

Amount of Each Receipt this Period  
1000.00

**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 19 / 43  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Society of Association Executives APAC

**A.** Full Name (Last, First, Middle Initial)  
M. Kirk Pickerel, CAE

Mailing Address 4250 North Fairfax Dr #900

City State Zip Code  
Arlington VA 22203

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

Name of Employer  
Associated Builders and Contractors  
Occupation  
President and Chief Executive Officer

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	3	/	2	0	1	0

**Transaction ID: C887279**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Paul Pomerantz, CAE

Mailing Address 800 Enterprise Rd #200

City State Zip Code  
Horsham PA 19044-3595

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

Name of Employer  
Drug Information Association  
Occupation  
Worldwide Executive Director

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	4	/	2	0	1	0

**Transaction ID: C903785**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Richard A. Poppa, AAI, CAE

Mailing Address 5784 Widewaters Pkwy  
1st Floor

City State Zip Code  
Dewitt NY 13214

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

Name of Employer  
Independent Insurance Agents and Brokers  
Occupation  
President and Chief Executive Officer

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	1	/	2	0	1	0

**Transaction ID: C873424**

Amount of Each Receipt this Period  
100.00

**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 20 / 43  
(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)  
American Society of Association Executives APAC

**A.**

Full Name (Last, First, Middle Initial)  
Richard A. Poppa, AAI, CAE

Mailing Address 5784 Widewaters Pkwy  
1st Floor

City State Zip Code  
Dewitt NY 13214

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

Name of Employer  
Independent Insurance Agents and Broke  
Occupation  
President and Chief Executive Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
01 / 11 / 2010

**Transaction ID:** C873425

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Richard A. Poppa, AAI, CAE

Mailing Address 5784 Widewaters Pkwy  
1st Floor

City State Zip Code  
Dewitt NY 13214

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

Name of Employer  
Independent Insurance Agents and Broke  
Occupation  
President and Chief Executive Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
01 / 11 / 2010

**Transaction ID:** C873426

Amount of Each Receipt this Period  
125.00

**C.**

Full Name (Last, First, Middle Initial)  
Richard A. Poppa, AAI, CAE

Mailing Address 5784 Widewaters Pkwy  
1st Floor

City State Zip Code  
Dewitt NY 13214

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

Name of Employer  
Independent Insurance Agents and Broke  
Occupation  
President and Chief Executive Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
01 / 11 / 2010

**Transaction ID:** C873427

Amount of Each Receipt this Period  
105.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **330.00**

**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 / 43

(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)  
American Society of Association Executives APAC

**A.**

Full Name (Last, First, Middle Initial)  
Richard A. Poppa, AAI, CAE

Mailing Address 5784 Widewaters Pkwy  
1st Floor

City State Zip Code  
Dewitt NY 13214

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

Name of Employer Occupation  
Independent Insurance Agents and Brokers President and Chief Executive Officer

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

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 1 / 2 0 1 0

Transaction ID: C873428

Amount of Each Receipt this Period

70.00

**B.**

Full Name (Last, First, Middle Initial)  
J. Clarke Price, CAE

Mailing Address 535 Metro Place South  
PO Box 1810

City State Zip Code  
Dublin OH 43017-7810

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

Name of Employer Occupation  
Ohio Society of CPAs President and Chief Executive Officer

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 9 / 2 0 1 0

Transaction ID: C873421

Amount of Each Receipt this Period

1500.00

**C.**

Full Name (Last, First, Middle Initial)  
Thomas D. Quattlebaum, RCE, CAE

Mailing Address 1521 Ritchie Hwy  
Suite 300

City State Zip Code  
Arnold MD 21012

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

Name of Employer Occupation  
Anne Arundel County Association of Realtors CEO

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

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 6 / 2 0 1 0

Transaction ID: C887275

Amount of Each Receipt this Period

250.00

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

1820.00

**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 / 43  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Society of Association Executives APAC

**A.** Full Name (Last, First, Middle Initial)  
David K. Rehr, Ph.D.  
 Mailing Address 1025 Connecticut Avenue, NW #401  
 City State Zip Code  
 Washington DC 20036  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 2 / 1 7 / 2 0 1 0  
**Transaction ID: C887276**  
 Amount of Each Receipt this Period  
 250.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer National Association of Broadcasters  
 Occupation Senior Advisor, Leading Authorities  
 Receipt For:  
 Primary    General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
Don L. Riggan, CAE  
 Mailing Address 1 Bent Tree Dr  
 City State Zip Code  
 Little Rock AR 72212  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 3 / 3 1 / 2 0 1 0  
**Transaction ID: C903774**  
 Amount of Each Receipt this Period  
 500.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Arthritis and Rheumatism International  
 Occupation Secretary General  
 Receipt For:  
 Primary    General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
James W. Rock  
 Mailing Address 517 C St NE  
 City State Zip Code  
 Washington DC 20002  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 3 / 1 8 / 2 0 1 0  
**Transaction ID: C903799**  
 Amount of Each Receipt this Period  
 250.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Parry Romani DeConcini and Symms Inc  
 Occupation Vice President  
 Receipt For:  
 Primary    General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

**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 23 / 43  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Society of Association Executives APAC

**A.** Full Name (Last, First, Middle Initial)  
Geraldine Romano, CAE

Mailing Address 2203 North Oak Court

City State Zip Code  
Arlington VA 22209

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

Name of Employer: Club Managers Association of America  
Occupation: Association Communications Executive

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt: 01 / 20 / 2010  
**Transaction ID: C873435**  
 Amount of Each Receipt this Period: 250.00

**B.** Full Name (Last, First, Middle Initial)  
Cheryl Ronk, CMP, CAE

Mailing Address 1350 Haslett Rd

City State Zip Code  
East Lansing MI 48823

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

Name of Employer: Michigan Society of Association Executives  
Occupation: President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt: 03 / 26 / 2010  
**Transaction ID: C903782**  
 Amount of Each Receipt this Period: 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Colin C. Rorrie, Jr., Ph.D.

Mailing Address 5328 Boca Raton Dr

City State Zip Code  
Dallas TX 75229

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

Name of Employer: CCR and Associates  
Occupation: President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt: 03 / 03 / 2010  
**Transaction ID: C903783**  
 Amount of Each Receipt this Period: 300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1550.00**

**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 24 / 43  
(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)  
American Society of Association Executives APAC

**A.**

Full Name (Last, First, Middle Initial)  
Stephen E. Sandherr

Mailing Address 2300 Wilson Blvd #400

City State Zip Code  
Arlington VA 22201-3308

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

Name of Employer  
Associated General Contractors of Amer

Occupation  
Chief Executive Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
03 / 08 / 2010

Transaction ID: C903795

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
Amy R. Showalter

Mailing Address 312 Walnut St  
1600 Scripps Center

City State Zip Code  
Cincinnati OH 45202

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

Name of Employer  
The Showalter Group Inc

Occupation  
President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
02 / 26 / 2010

Transaction ID: C887285

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
Christopher S. Stinebert

Mailing Address 919 18th St NW #300

City State Zip Code  
Washington DC 20006-5503

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

Name of Employer  
American Financial Services Associatio

Occupation  
President & CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
03 / 24 / 2010

Transaction ID: C903786

Amount of Each Receipt this Period  
300.00

**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: PAGE 25 / 43  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Society of Association Executives APAC

**A.** Full Name (Last, First, Middle Initial)  
Christie A. Tarantino, CAE

Mailing Address 10 S Riverside Plaza Ste 800

City State Zip Code  
Chicago IL 60606

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

Name of Employer: Association Forum of Chicagoland  
Occupation: President & CEO

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt: MM / DD / YYYY  
02 / 22 / 2010

Transaction ID: C887309

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Christie A. Tarantino, CAE

Mailing Address 10 S Riverside Plaza Ste 800

City State Zip Code  
Chicago IL 60606

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

Name of Employer: Association Forum of Chicagoland  
Occupation: President & CEO

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt: MM / DD / YYYY  
03 / 30 / 2010

Transaction ID: C903815

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mary Ann Tuft, CAE

Mailing Address 1209 North Astor St

City State Zip Code  
Chicago IL 60610-2655

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

Name of Employer: Tuft & Associates Inc.  
Occupation: President

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt: MM / DD / YYYY  
03 / 24 / 2010

Transaction ID: C903793

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **600.00**

**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 26 / 43  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Society of Association Executives APAC

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

Mailing Address 325 Seventh St NW #700

City Washington State DC Zip Code 20004

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

Name of Employer American Hospital Association Occupation President and CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 31 / 2010  
Transaction ID: C903807  
Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
Dean A. West

Mailing Address 30 South Wacker Dr #2200

City Chicago State IL Zip Code 60606

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

Name of Employer Association Laboratory Incorporated Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 31 / 2010  
Transaction ID: C905869  
Amount of Each Receipt this Period 250.00

**C.** Full Name (Last, First, Middle Initial)  
Todd Wurschmidt, CFRE, Ph.D.

Mailing Address 324 North Chillicothe St

City Plain City State OH Zip Code 43064-1062

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

Name of Employer Transition Management Consulting Occupation Interim Executive Director & Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 21 / 2010  
Transaction ID: C873430  
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 27 / 43
	(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)  
American Society of Association Executives APAC

**A.**

Full Name (Last, First, Middle Initial) James J. Zaniello		Date of Receipt
Mailing Address 888 16th St NW #800		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 03 / 2010
City	State	Zip Code
Washington	DC	20006
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> C903776
C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 100.00
Name of Employer Vetted Solutions	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text"/> 350.00	

**B.**

Full Name (Last, First, Middle Initial) James J. Zaniello		Date of Receipt
Mailing Address 888 16th St NW #800		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 31 / 2010
City	State	Zip Code
Washington	DC	20006
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> C903777
C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 250.00
Name of Employer Vetted Solutions	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text"/> 350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 350.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/> 21950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 28 / 43
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
American Society of Association Executives APAC

**A.**

Full Name (Last, First, Middle Initial)  
American Frozen Food Institute PAC

Mailing Address 2000 CORPORATE RIDGE SUITE 1000

City State Zip Code  
MCLEAN VA 22102

FEC ID number of contributing federal political committee. **C** C00042960

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
02 / 25 / 2010

**Transaction ID: C887312**

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION PAC

Mailing Address 10801 Rockville Pike

City State Zip Code  
Rockville MD 20852

FEC ID number of contributing federal political committee. **C** C00210666

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2010

**Transaction ID: C905876**

Amount of Each Receipt this Period  
2000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	2250.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 43  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
American Society of Association Executives APAC

**A.** Full Name (Last, First, Middle Initial)  
EVAN BAYH COMMITTEE

Mailing Address 850 FT WAYNE AVENUE

City INDIANAPOLIS State IN Zip Code 46204

FEC ID number of contributing federal political committee. **C** C00306860

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 03 / 23 / 2010  
**Transaction ID: C892917**  
Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
FRIENDS OF BYRON DORGAN

Mailing Address PO BOX 871

City BISMARCK State ND Zip Code 58502

FEC ID number of contributing federal political committee. **C** C00143438

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 02 / 16 / 2010  
**Transaction ID: C877872**  
Amount of Each Receipt this Period: 2000.00

**C.** Full Name (Last, First, Middle Initial)  
FRIENDS OF JOHN TANNER

Mailing Address Post Office Box 1994

City Union City State TN Zip Code 38281

FEC ID number of contributing federal political committee. **C** C00223230

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 02 / 16 / 2010  
**Transaction ID: C877875**  
Amount of Each Receipt this Period: 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4000.00

**TOTAL** This Period (last page this line number only) ..... ► 4000.00

**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 30 / 43

<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)  
American Society of Association Executives APAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) American Express Travel Related Service Co., Inc.</p> <p>Mailing Address P.O. Box 53852</p> <p>City Phoenix State AZ Zip Code 85072-3852</p> <p>Purpose of Disbursement Credit Card Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D93508</p> <p>Date of Disbursement 01 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 14.50</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) American Express Travel Related Service Co., Inc.</p> <p>Mailing Address P.O. Box 53852</p> <p>City Phoenix State AZ Zip Code 85072-3852</p> <p>Purpose of Disbursement Credit Card Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D93509</p> <p>Date of Disbursement 01 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 1.45</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) American Express Travel Related Service Co., Inc.</p> <p>Mailing Address P.O. Box 53852</p> <p>City Phoenix State AZ Zip Code 85072-3852</p> <p>Purpose of Disbursement Credit Card Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D93510</p> <p>Date of Disbursement 01 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 2.90</p>

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

18.85

**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 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)  
American Society of Association Executives APAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) American Express Travel Related Service Co., Inc.</p> <p>Mailing Address P.O. Box 53852</p> <p>City Phoenix State AZ Zip Code 85072-3852</p> <p>Purpose of Disbursement Credit Card Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D93511 <b>Date of Disbursement</b> 01 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 7.25</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) American Express Travel Related Service Co., Inc.</p> <p>Mailing Address P.O. Box 53852</p> <p>City Phoenix State AZ Zip Code 85072-3852</p> <p>Purpose of Disbursement Credit Card Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D93512 <b>Date of Disbursement</b> 02 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 10.15</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) American Express Travel Related Service Co., Inc.</p> <p>Mailing Address P.O. Box 53852</p> <p>City Phoenix State AZ Zip Code 85072-3852</p> <p>Purpose of Disbursement Credit Card Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D93513 <b>Date of Disbursement</b> 02 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 1.45</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>18.85</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 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)  
American Society of Association Executives APAC

**A.** Full Name (Last, First, Middle Initial)  
American Express Travel Related Service Co., Inc.

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement  
Credit Card Expense

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D93514

Date of Disbursement

02 / 22 / 2010

Amount of Each Disbursement this Period

2.90

**B.** Full Name (Last, First, Middle Initial)  
American Express Travel Related Service Co., Inc.

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement  
Credit Card Expense

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D93515

Date of Disbursement

02 / 23 / 2010

Amount of Each Disbursement this Period

29.00

**C.** Full Name (Last, First, Middle Initial)  
American Express Travel Related Service Co., Inc.

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement  
Credit Card Expense

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D93516

Date of Disbursement

03 / 05 / 2010

Amount of Each Disbursement this Period

2.90

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

34.80

**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 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)  
American Society of Association Executives APAC

A.	Full Name (Last, First, Middle Initial) American Express Travel Related Service Co., Inc.	Transaction ID: D93517 Date of Disbursement MM / DD / YYYY 03 / 12 / 2010
	Mailing Address P.O. Box 53852	Amount of Each Disbursement this Period 2.90
	City Phoenix State AZ Zip Code 85072-3852	
	Purpose of Disbursement Credit Card Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) American Express Travel Related Service Co., Inc.	Transaction ID: D93518 Date of Disbursement MM / DD / YYYY 03 / 24 / 2010
	Mailing Address P.O. Box 53852	Amount of Each Disbursement this Period 29.00
	City Phoenix State AZ Zip Code 85072-3852	
	Purpose of Disbursement Credit Card Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Paymentech	Transaction ID: D93520 Date of Disbursement MM / DD / YYYY 01 / 05 / 2010
	Mailing Address 1601 Elm Street Suite 700	Amount of Each Disbursement this Period 134.28
	City Dallas State TX Zip Code 75201	
	Purpose of Disbursement Credit Card Expense	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>166.18</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)

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<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)  
American Society of Association Executives APAC

<b>A.</b> Full Name (Last, First, Middle Initial) Paymentech <hr/> Mailing Address 1601 Elm Street Suite 700 <hr/> City Dallas State TX Zip Code 75201 <hr/> Purpose of Disbursement Credit Card Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D93521 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 3 / 2 0 1 0
	Amount of Each Disbursement this Period 112.45
<b>B.</b> Full Name (Last, First, Middle Initial) Paymentech <hr/> Mailing Address 1601 Elm Street Suite 700 <hr/> City Dallas State TX Zip Code 75201 <hr/> Purpose of Disbursement Credit Card Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D93522 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 1 0
	Amount of Each Disbursement this Period 115.90

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	228.35
<b>TOTAL</b> This Period (last page this line number only) .....	467.03

**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)  
American Society of Association Executives APAC

A.	Full Name (Last, First, Middle Initial) Charles A Gonzalez Congressional Campaign	Transaction ID: D92246 Date of Disbursement 01 / 27 / 2010
	Mailing Address PO Box 83142	Amount of Each Disbursement this Period 1000.00
	City Gaithersburg State MD Zip Code 20883-3142	
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name Rep. Charles A. Gonzalez	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: TX District: 20	

B.	Full Name (Last, First, Middle Initial) Dutch Ruppertsberger For Congress	Transaction ID: D92251 Date of Disbursement 01 / 27 / 2010
	Mailing Address PO Box 5675	Amount of Each Disbursement this Period 1000.00
	City Timonium State MD Zip Code 21094	
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name Rep. C.A. Ruppertsberger	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: MD District: 02	

C.	Full Name (Last, First, Middle Initial) Kirk for Senate	Transaction ID: D93454 Date of Disbursement 03 / 29 / 2010
	Mailing Address PO Box 8	Amount of Each Disbursement this Period 1000.00
	City Winnetka State IL Zip Code 60093-0008	
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name Mr. Mark Kirk	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: IL District:	

<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)  
American Society of Association Executives APAC

A.	Full Name (Last, First, Middle Initial) Mike Ross For Congress Committee	Transaction ID: D92253 Date of Disbursement																			
	Mailing Address PO Box 360	<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>1</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	7		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	7		2	0	1	0												
	City Prescott State AR Zip Code 71857	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name Rep. Mike Ross	Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: AR District: 04																				

B.	Full Name (Last, First, Middle Initial) VAN HOLLEN FOR CONGRESS	Transaction ID: D92956 Date of Disbursement																			
	Mailing Address 10537 St. Paul Street	<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>3</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	9		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	9		2	0	1	0												
	City Kensington State MD Zip Code 20895	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name Rep. Chris Van Hollen, Jr.	Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: MD District: 08																				

C.	Full Name (Last, First, Middle Initial) BOREN FOR CONGRESS	Transaction ID: D92952 Date of Disbursement																			
	Mailing Address PO Box 1924	<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>3</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	9		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	9		2	0	1	0												
	City Muskogee State OK Zip Code 74402	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name Rep. Dan Boren	Category/Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: OK District: 02																				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>3000.00</td></tr></table>	3000.00
3000.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

# 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)

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<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)  
American Society of Association Executives APAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>HELLER FOR CONGRESS</b></p> <p>Mailing Address 7840 Red Leaf Drive</p> <p>City Las Vegas State NV Zip Code 89131</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Dean Heller</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 02</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D92954 <b>Date of Disbursement</b> 03 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>DONALD A. MANZULLO FOR CONGRESS</b></p> <p>Mailing Address PO Box 7783</p> <p>City Rockford State IL Zip Code 61126</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Donald A. Manzullo</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 16</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D92254 <b>Date of Disbursement</b> 01 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>CANTOR FOR CONGRESS</b></p> <p>Mailing Address P. O. Box 17813</p> <p>City Richmond State VA Zip Code 23226</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Eric I. Cantor</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 07</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D92953 <b>Date of Disbursement</b> 03 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 300.00</p>

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

2300.00

**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)  
American Society of Association Executives APAC

<b>A.</b> Full Name (Last, First, Middle Initial) UPTON FOR ALL OF US Mailing Address P.O. Box 490 City St. Joseph State MI Zip Code 49085 Purpose of Disbursement Contribution Candidate Name Rep. Fred Upton Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 06 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D92249 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00

<b>B.</b> Full Name (Last, First, Middle Initial) WALDEN FOR CONGRESS INC. Mailing Address PO Box 1091 City Hood River State OR Zip Code 97031 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: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D92256 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00

<b>C.</b> Full Name (Last, First, Middle Initial) HEATH SHULER FOR CONGRESS Mailing Address PO Box 8446 City Asheville State NC Zip Code 28814 Purpose of Disbursement Contribution Candidate Name Rep. Heath Shuler Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D92259 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 7 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00

<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)  
American Society of Association Executives APAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) CITIZENS FOR ALTMIRE</p> <p>Mailing Address P.O. Box 1776</p> <p>City Freedom State PA Zip Code 15042</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Jason Altmire</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 04</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D92250 <b>Date of Disbursement</b> 01 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) FRIENDS OF JOHN BOEHNER</p> <p>Mailing Address 7908-I Cincinnati Dayton Road</p> <p>City West Chester State OH Zip Code 45069</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. John A. Boehner</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 08</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D92957 <b>Date of Disbursement</b> 03 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) VOLUNTEERS FOR SHIMKUS</p> <p>Mailing Address PO Box 5458</p> <p>City Springfield State IL Zip Code 62705</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. John M. Shimkus</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 19</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D92247 <b>Date of Disbursement</b> 01 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</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)

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<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)  
American Society of Association Executives APAC

A.	Full Name (Last, First, Middle Initial) <b>BRADY FOR CONGRESS</b>	<b>Transaction ID:</b> D92959
	Mailing Address P.O. Box 8277	Date of Disbursement 03 / 09 / 2010
	City The Woodlands State TX Zip Code 77387	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name Rep. Kevin P. Brady	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 08	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) <b>TEXANS FOR LAMAR SMITH</b>	<b>Transaction ID:</b> D92248
	Mailing Address PO Box 6155	Date of Disbursement 01 / 27 / 2010
	City San Antonio State TX Zip Code 78209	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name Rep. Lamar S. Smith	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 21	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) <b>DOGGETT FOR US CONGRESS</b>	<b>Transaction ID:</b> D92955
	Mailing Address 1157 San Bernard	Date of Disbursement 03 / 09 / 2010
	City Austin State TX Zip Code 78702	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name Rep. Lloyd Doggett	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 25	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3000.00</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)  
American Society of Association Executives APAC

**A.** Full Name (Last, First, Middle Initial)  
RICHARD E NEAL FOR CONGRESS COMMITTEE

Mailing Address 76 MAGNOLIA TERRACE

City State Zip Code  
SPRINGFIELD MA 01108

Purpose of Disbursement  
Contribution

Candidate Name  
Rep. Richard E. Neal

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MA District: 02

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: D92261  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
FRIENDS OF FARR

Mailing Address 555 Capitol Mall Suite 1425

City State Zip Code  
Sacramento CA 95814

Purpose of Disbursement  
Contribution

Candidate Name  
Rep. Sam Farr

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 17

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: D92951  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
LEVIN FOR CONGRESS

Mailing Address 230 North Avenue

City State Zip Code  
Mt. Clemens MI 48043

Purpose of Disbursement  
Contribution

Candidate Name  
Rep. Sander M. Levin

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MI District: 12

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: D92958  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

**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)  
American Society of Association Executives APAC

A.	Full Name (Last, First, Middle Initial) HOYER FOR CONGRESS	Transaction ID: D92258 Date of Disbursement 01 / 27 / 2010
	Mailing Address 7905 MALCOLM ROAD SUITE 102	Amount of Each Disbursement this Period 1500.00
	City CLINTON State MD Zip Code 20735	
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name Rep. Steny H. Hoyer	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 05	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) LATOURETTE FOR CONGRESS COMMITTEE	Transaction ID: D92260 Date of Disbursement 01 / 27 / 2010
	Mailing Address 320 Kenarden Dr.	Amount of Each Disbursement this Period 1000.00
	City Highland Hts. State OH Zip Code 44143	
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name Rep. Steven C. Latourette	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 14	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FRIENDS OF CONGRESSMAN TIM HOLDEN	Transaction ID: D92255 Date of Disbursement 01 / 27 / 2010
	Mailing Address 18 N. SECOND STREET PO BOX 37	Amount of Each Disbursement this Period 1000.00
	City SAINT CLAIR State PA Zip Code 17970	
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name Rep. Tim Holden	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 17	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3500.00
<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)  
American Society of Association Executives APAC

A.	Full Name (Last, First, Middle Initial) <b>BECERRA FOR CONGRESS</b>	<b>Transaction ID:</b> D92961
	Mailing Address P.O. Box 261060	Date of Disbursement MM / DD / YYYY 03 / 09 / 2010
	City Los Angeles State CA Zip Code 90026	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name Rep. Xavier Becerra Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 31 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) <b>BEN CARDIN FOR SENATE</b>	<b>Transaction ID:</b> D92252
	Mailing Address PO Box 21093	Date of Disbursement MM / DD / YYYY 01 / 27 / 2010
	City Catonsville State MD Zip Code 21228-0593	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name Sen. Benjamin L. Cardin Category/Type	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 00 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) <b>GRASSLEY COMMITTEE INC</b>	<b>Transaction ID:</b> D92960
	Mailing Address PO BOX 1000	Date of Disbursement MM / DD / YYYY 03 / 09 / 2010
	City DES MOINES State IA Zip Code 50304	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name Sen. Charles E. Grassley Category/Type	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 00 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>26800.00</b>